

## CALDERDALE LOCAL MEDICAL COMMITTEE

Minutes of the Meeting of the Calderdale Local Medical Committee  
held on Wednesday 22 February 2017

### **PRESENT**

#### LMC Members

Dr S Nagpaul (in the Chair)(Spring Hall)  
Dr M Azeb (Southowram)  
Dr S J Chambers (Church Lane)  
Dr A Chaudhry (Sowerby Bridge)  
Dr F Chaudhry (King Cross)  
Dr P D Kumar (Plane Trees)  
Dr R Loh (Queen's Road)  
Dr S Vivekananthan (Todmorden)  
Practice Managers  
Mrs E Coulson (Southowram)  
Mrs T Dell (Plane Trees)

#### CCG Representatives

Dr A C Brook  
Dr S Martin  
Dr N Taylor  
Mrs D Robinson  
GP Alliance  
Ms R Cowgill  
Sessional GP  
Dr R Hussain  
Observer  
Dr L Riordan, GP Registrar  
Tracy Worrall  
Kirsty Freeman

### **APOLOGIES**

19/17 Apologies were received from Dr Geetha, Dr Siddiqui, Dr Walker and Dr B Whitaker.

### **MINUTES OF THE LAST MEETING**

20/17 The minutes of the meeting held on 18 January 2017 were received as a correct record, subject to minor amendments.

### **MATTERS ARISING**

#### 04/17:202/16:175/16 - Hepatitis B Heel Prick

21/17 Members asked where this service was described in the PHE contract. Dr Chaudhry would ask the question on the list server. It was noted that training would be offered locally for practice nurses. Mrs Robinson advised that PHE commissioned Part 7 services and would seek further clarification.

**ACTION: Mrs Robinson to seek further clarification from PHE and Dr F Chaudhry to ask on List server**

#### 06/17 – Coil Removal

22/17 It was noted that the flowchart was still awaited.

#### 07/17 – Integrated Sexual Health Service – LARC Contract

23/17 Dr Nagpaul agreed to circulate the draft for comments within next 2 weeks. Main areas of concern were mandatory IUCD training for experienced GPs without certification and the need for increased capacity by CHFT if these GPs no longer wished to provide the service. It was noted that the contract covered Practice Nurses as well as GPs.

**ACTION: Dr Nagpaul to circulate the LARC Contract for comments**

08/17 – EPR Launch

- 24/17 It was noted that updates would be provided to GPs prior to go live. E-referrals would be suspended for one week prior to go live but a dedicated fax number would be available for urgent referrals. It was noted that no SystmOne practices had yet been given the opportunity to view the new system.

**DEPRIVATION OF LIBERTY SAFEGUARDS (DoLS)**

- 25/17 Dr Martin presented the DoLS pathway which his locality had been asked to develop. This may only be relevant for a short period while the bill was going through parliament to change the need to inform the Coroner if a patient died with a DoLS in place. The report for the Coroner needed to be brief and state that if the doctor was to have issued a death certificate, what the cause of death would have been. Guidance would be obtained from the Coroner's office. It was clarified that there was no legal requirement to have seen the patient within 14 days of death if it was expected. The GP would need to speak to the Coroner before issuing the death certificate, usually a doctor would have needed to have seen the patient within the 6 months prior to the death. Dr Nagpaul thanked Dr Martin for attending.

**ACTION: Dr Nagpaul to send a copy to Dr Martin**

**IMPLEMENTING THE GENERAL PRACTICE 5 YEAR FORWARD VIEW**

- 26/17 Mrs Robinson described the CCG's approach to the forward view, setting out the future of general practice in Calderdale. The plan set out a high level plan rather than a detailed plan, which included workforce and financial challenges, reconfiguration of hospital and community services and workforce modelling.

The LMC supported the use of HEE to obtain workforce data from practices to help plan for the future.

It was noted that the CCG was in a financial recovery position and would be working with NHSE to address the issues. Mrs Robinson asked that a number of priorities be agreed by 31 March. This would be discussed further by the LMC/CCG Executive.

It was noted that there had been a significant increase in referral rates in Calderdale, prompting a lengthy discussion. The CCG had developed a localised template for decision making which would form the basis of an incentivised approach in 2017/18. The LMC supported appropriate referrals and use of NHS resources but reminded the CCG that ultimately the GP had the responsibility to refer as they saw most appropriate for the patient. It was noted that the CCG dashboard was not globally used in practices.

Dr Nagpaul was in discussion with Richard Vautrey to speak at an open meeting to enable GPs to understand the national priorities in the Forward View. A date in April (Tuesday) was being considered.

**ACTION: Dr Nagpaul to contact Richard Vautrey  
Practice Managers to meet with CCG to discuss their concerns**

## **SMS CONTRACT – TEXT MESSAGING**

27/17 It was noted that 60% of text messages were allocated to a generic Calderdale account and could not be attributed to individual practices. The CCG funded the shortfall in 2015/16 but was asking for GP practices to fund in 2016/17. The full cost would be funded from April 2017. Members asked that further investigation be undertaken to accurately allocate the cost of the texts as individual practices would be able to provide. It was noted that despite repeated requests practices had not been notified of their usage as the year progressed.

**ACTION: Dr Nagpaul to write to Ian Wightman**

## **DATE OF NEXT MEETING**

28/17 The next meeting of the Calderdale Local Medical Committee would be held on Wednesday 22 March 2017 in the Learning & Development Centre, Calderdale Royal Hospital at 7.45 pm.