



**Derby & Derbyshire Local Medical Committee Ltd Meeting  
Higham Farm Hotel, Main Road, Higham, Alfreton, Derbyshire, DE55 6EH  
Thursday 7 September 2017, 13:30 – 17:00**

|                       |   |                                   |
|-----------------------|---|-----------------------------------|
| <b>PRESENT:</b>       | Dr Peter Williams (PW) (Chair)            | Dr Peter Holden (PH)              |
|                       | Dr Kath Markus (KM)                       | Dr John Grenville (JG)            |
|                       | Dr Brian Hands (BH)                       | Dr Yadavakrishnan Pasupathi (YP)  |
|                       | Dr John Ashcroft (JA)                     | Dr James Betteridge-Sorby (JBS)   |
|                       | Dr Simeon Rackham (SR)                    | Dr Mark Wood (MW)                 |
|                       | Dr Denise Glover (DGI)                    | Dr Greg Crowley (GC)              |
|                       | Dr Paddy Kinsella (PK)                    | Dr Andrew Jordan (AJ)             |
|                       | Dr Murali Gembali (MG)                    |                                   |
|                       |   |                                   |
| <b>IN ATTENDANCE:</b> | Dr Andrew Maronge (AM)                    | Anita Farkas (AF)                 |
|                       | Graham Archer (GA) (Chief Officer<br>LPC) | Laura Grainger (LG) (Minutes)     |
|                       | Buk Dhadda (BD) (SDCCG)                   | David Gibbs (DG)                  |
|                       | Tracy Allen (TA) (DCH)                    | Stephen Bateman (SBa)             |
|                       | Hannah Belcher (HB) (NDCCG)               | Dr Gillian Davidson               |
|                       | Dr Micah Lohor                            | Dr Alaa Azhari                    |
|                       |   |                                   |
| <b>APOLOGIES:</b>     | Marie Souse (MS) (NDCCG)                  | Simon Morrirt (CRH)               |
|                       | Dr Vineeta Rajeev (VR)                    | Melanie Foster-Green (MFG) (ECCG) |
|                       | Dr Ruth Dils (RD)                         | Helen Cawthorne (HC) (SDCCG)      |
|                       | Dr Jenny North (JN)                       | Dr Katharine Shelly               |
|                       | Dr Peter Short (PS)                       | Dr Pauline Love (PL)              |
|                       | Dr Peter Enoch (PE)                       | Dr Susan Bayley (SB)              |
|                       | Dr Gail Walton (GW)                       | Lisa Soultana (LS)                |

**17/38 Welcome and Apologies**

Apologies noted for LMC members

**17/39 Closed Session**

**17/40 Welcome and Apologies**

PW welcomed those joining the meeting in the open session.

**17/41 Minutes from previous meeting**

Minutes were approved and all outstanding actions have now been completed or are ongoing.  
PW reminded members to complete action number 7.

**17/42 Matter Arising**

Covered in the agenda

**17/43 For Information**

Members reviewed the information documents

**17/44 For Feedback**

Members reviewed the meeting feedback documents

**17/45 For Discussion**

- **STP/GP involvement**

Members welcomed Tracy Allen interim STP Senior Responsible Officer, Derbyshire Community Health Services. TA summaries the purpose of the STP to members describing a 5 year detailed plan on how Derbyshire could create financial balance within the NHS whilst balancing ongoing issues and concerns within. TA remarked that the response from Derbyshire has been positive with many different organisations wishing to offer support and guidance.

TA recognises the need to upgrade proactive care so less people will be treated in hospital with resources being spent in the community. To date the STP has failed to implement many of its plans. This was in the main due to contract negotiations between CCGs and healthcare providers at the end of last year which stalled the STP process. Locally the STP hopes to provide one strategic voice and has established a Provider Alliance Group meeting to drive through change. TA noted that the LMC have been invited to attend and value their input. There will be a number of work streams lead by senior response officers overseen by the overarching STP Board. Currently there is 1 CCG in Derbyshire in special measures and this could have an impact on the speed of implementation moving forward. TA added that locally the STP envisions there will be 18 places who will feed into the STP board.

Members discussed the importance of the STP but reminded TA that GPs are working at maximum capacity and their resources are limited. There will be many challenges between system and individual organisations. JG noted that historically when there has been a big shift in ways of working that there is a high risk of losing skills and knowledge. Members raised concerns regarding local hospitals closures and they questioned how this could achieve 'better care closer to home.'

- **CCG update**

KM confirmed that the new role of Accountable Officer for Derbyshire CCG had been appointed to Dr Chris Clayton who is from Blackburn with Darwin CCG. KM noted that he was involved with his local LMC and has been involved in STP in his area too. The appointment was noted as being encouraging. KM confirmed that she is due to meet Dr Clayton mid-October. BD confirmed that the CCG structure is yet to be finalised but confirmed that there will be a single organisation approach but keeping the 4 statutory bodies. We would in the future see joint committees or committees in common to keep consistency over Derbyshire.

- **Commissioning gaps**

KM advised that there are increasing commissioning gaps within Derbyshire and she encouraged all members to note these on the DDLMC community so she can raise these at STP and Place discussions. Services such as weight management, smoking cessation and substance misuse in Derby city are to see a decrease in funding having a knock on effect to its population. KM advised that Livewell services in Derby City have had a substantial budget cut from over £1million to £300k. With this reduction there will be an inequality in service provision across Derbyshire.

**Action:** KM to write to Derby City Council expressing the LMCs concern at the reduction in Livewell services in the city.

- **PLCV – Procedures of limited clinical value**

PW advised that the PLCV document has now been published and the supporting documentation is not what was first presented to the LMC and notes a different process for referrals, including referrals for an opinion. This change would increase the GPs paperwork load. KM added that whilst the LMC supported an evidence based approach of referral the LMC was not happy with the proposed cumbersome referral process for opinions and felt the process needed to change. BD advised that the PLCV document is evidenced based and consultants were a part of the discussion process. PH reminded all members if a GP requests a specialist opinion it must be actioned even if it isn't on the correct form. BD noted that at present the document is not mandated nationally which could band together ways of working however, at present it would be difficult to do this with the different CCGs and ways of working. Members discussed the importance of live data and if published the sources of the data should also be available to view.

PW asked members to support his proposal to respond to the CCG and advise that all practices will not engage in the PLCV until the amendments have been made. A majority of LMC members supported this approach.

**Action:** PW to write to the CCGs regarding the PLCV document.

- **Peer review of referrals**

KM raised that GPs have no contractual obligation to take part in a Peer Review which at present is suggested to 30 minutes per week for each practice. However; by 2019 it has been NHSE want an external process. Members discussed that they are already doing something similar within their practices and regularly review locum and newly qualified GPs referrals. Members also expressed concerns that this

referral review also incentivises GPs financially to reduce their number of referrals. One Derbyshire CCG has already pushed back on the need to focus not only on the top 25% of practice referrals but also the bottom 25% of practice referrals for development to be all-round. It was also noted that there is limited evidence that any impact will be made financially from the peer review.

**Action:** PH to raise Peer review of referrals at the next GPC session. And a letter to NHSE/CCGs/practices.

- **GPFV – Extended access**

DG raised that the CCGs have been mandated to provide extended access hubs to Derbyshire and practices have been encouraged to bid to run these. DG noted that there had been questions raised about the number of hubs a practice could run and if it had to have a physical location. DG confirmed that NHSE has not stipulated that a hub cannot be a virtual hub or run from multiple locations to support different populations (urban / rural). It was noted that the LMC would support any rejections received by practices from the CCGs regarding this. JBS questioned what would the CCG do if they didn't receive any bids from a practice to run a hub. Members discussed the current workload of practices, appointment systems and the obligations incurred if they were to be a part of running an extended access hub. DB advised that the CCGs would need to approach other healthcare providers to meet their mandate such as DHU. PH noted that Derbyshire has a strong out of hour's services and GPs should support them to improve the service if they can.

**Action:** PW to write to CCGs and advise the challenges for the workforce for extended access.

- **NHSE exclusion from reimbursement miss interpretation of guidance – Air conditioning**

JA raised that practices increasing the value of their building from installations such as Air conditioning which in turn increased their insurance and affects rent reimbursements. He noted that if documents were not updated correctly or miss interpreted, practices could face unnecessary increased charges, from JA example this was around 5%. PH advised that GPC are aware of this and is being looked into.

## 17/46 Any Other Business

- **NatWest Signatories**

PH explained that currently JG still remained a signatory with Natwest. However, due to JG's retirement from DDLMC, and to follow Natwest guidelines, PH asked the Committee's approval to formally remove JG from the signatory. The Committee approved.

- **Responsibilities for wounds under Basket of Services and LCSF**

It was raised that GPs are increasingly being asked to be involved in wound management and which is beyond what is covered in the GP contract.

DG said that the subtle differences between CCGs' specifications regarding Suture and Wound Care had been looked at and it has been concluded that a clear and single specification across the county is necessary. It was noted that suture and staple removal is currently included in the Basket of Services/LCSF but the requirements for ongoing wound management are more varied and less clear cut.

Committee members expressed concern regarding the lack of clarity and they identified wound care as another commissioning gap in the system as the commissioning arrangements with DCHS are unclear and open to misinterpretation.

HB informed the Committee that Commissioners at NDCCG have been liaising with DCHS to obtain clarity and have proposed to review this service with the aim of finalising a single specification by April 2018.

- **Livewell Services in Derbyshire**

As discussed under Item 7. Commissioning gap.

- **Result of GP Practice list closure survey**

The recently populated result of the GP Practice list closure survey has been discussed. Committee members shared their disappointment in terms of the low level of overall response rate (23.9%) and particularly the lack of support demonstrated by GPC.

## 17/47 Date of next meeting

- **DDLMC Senior Team Meeting**

Thursday 5 October 2017, 13:00 – 16:00, DDLMC Office, Heritage Gate, Celtic House 3<sup>rd</sup> Floor, Derby

- **LMC Executives and Senior Management Meeting**

Thursday 3 August 2017, 16:00 – 17:00, DDLMC Office, Heritage Gate, Celtic House 3<sup>rd</sup> Floor, Derby

- **LMC Meeting**

Thursday 2 November 2017, 13:00 – 17:00, Santos Higham Farm, Main Road, Higham, Alfreton, Derbyshire, DE55 6EH

Meeting closed at 16:45

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LMC Meeting Action Log

|    | Date       | Agreed action  | Resp   | Update    |
|----|------------|--|--------|-----------|
| 5  | 06/07/2017 | LG to speak with John Grenville to discuss how to run the elections and prepare a crib sheet.  | Office | Ongoing   |
| 7  | 06/07/2017 | All members to write a short paragraph about themselves and include a headshot, these needs to be sent to the office.                  | All    | ongoing   |
| 16 | 07/09/2017 | Letter of thanks to be sent to Dr Short  | Office | Completed |
| 17 | 07/09/2017 | Office to place drafted motions on DDLMC community for comment   | Office | Completed |
| 18 | 07/09/2017 | Office to confirm the name of the remaining place at the English LMC conference and pass on all relevant details for travel            | Office | Completed |
| 19 | 07/09/2017 | SB to create a memorandum for newly qualified registrars that should be signed by them if they are based at a non-levy paying practice | SB     |           |
| 21 | 07/09/2017 | PW to write to the CCGs regarding the PLCV document  | PW     | Completed |
| 22 | 07/09/2017 | PH to raise Peer review of referrals at the next GPC session and a letter to NHSE/CCGs/practices                                       | PH     | Completed |
| 23 | 07/09/2017 | PW to write to CCGs and advise the challenges for the workforce for extended access.   | PW     | Completed |