

CALDERDALE LOCAL MEDICAL COMMITTEE

Minutes of the Meeting of the Calderdale Local Medical Committee
held on Wednesday 14/11/2018

Present <u>LMC Members</u> Dr Nagpaul Dr R Loh Dr D Kumar Dr G Chandrasekaran Dr M Azeb Dr N Taylor Dr B Wyatt <u>Sessional GP</u> Dr R Hussain	Spring Hall (SH) Queens Road (RL) Plane Trees (DK) Plane Trees (GC) Southowram (MA) Hebden Bridge (NT) Sessional (BW) Sessional (RH)		<u>Practice Managers</u> Heather Simpson Tina Rollins <u>Administrator</u> <u>Observers/Guests</u> Helen Barker Teong Rhen Lau	King Cross Rosegarth CHFT GPST	(HS) (TR) (HB) (TL)
					<u>ACTION</u>
420/18	<u>WELCOME</u> Members welcomed Helen Barker.				
421/18	<u>APOLOGIES</u> Apologies were received from TW, AC, SM and CW				
422/18	<u>MINUTES OF THE LAST MEETING</u> CW sent apologies to be noted signed off as correct				
423/18	<u>Action Log Update</u> <u>366/18 Cervical screening Rejection due to missing PIN code</u> Sarah Whiteman, Screening and Immunisation lead NHSE Leeds, has confirmed as long as 2 identifiers are present they will write to practices to verify PIN and allow 4 weeks to get back with details –CLOSE				Completed
424/18	<u>384/18:370/18 DNs and flu vaccines for September</u> Completed –new action start planning 2019/20 Flu campaign. Look to working collaboratively with all flu vaccine providers to patients e.g pharmacists, CHFT, query On locality or hub level. PGPA to look into taking this forwards				GC

425/18	<u>Rapid access chest pain clinic</u> Completed information disseminated by Dr Loh	Completed
426/18	<u>415/18 Whatts App group for PM's and locums</u> No interest – completed	Completed
427/18	<u>415/18 Jobs tab on website</u> Initially Fourteen Fish said there was a charge, now FOC and should be done soon	Completed
428/18	<u>GP registrar</u> GP registrar – Same as members payment agreed	Completed
	<u>AGENDA</u>	
429/18	<u>CHFT</u> <u>407/18 Transformation of out patients services</u> ONGOING resource and infrastructure need to be thought about More about process than shifting of work – HB Faxes - CHFT make sure there are alternatives as they want all fax machines removed by December 2018 Secure email? Cardiology, (purchasing new ECG machines linked to Cerner to be viewed by primary care) , Arrhythmia clinic, eye clinic, urgent ENT , ECHO reports , MAU ,	HB
430/18	Maj- DN in lower are retiring and he wanted assurance that the care would flow, Being recruited (HB) used to fax referrals - HB will look into it <u>Dermatology</u> Two Week Referrals have increased - Solution suggested by SN –? diagnostic lesion clinic – Use of technology in Leeds awaiting info Bradford should provide surgeons for plastics and OPD in contract for several years -looking into this as delivery hasn't been happening. CHFT have employed 2 surgeons who have SI in dermatology for a FT contract May be able to use their expertise for lesion clinic, locum consultants kept on till May	
431/18	<u>GPs to instructs DN's for Zoladex for housebound patients ,</u> The first dose in the new pathway were supposed to be faxed – HB ensures this will be resolved with another communication method GC asked :ICE do patients always needs paper forms if blood being taken at CHFT	
432/18	<u>Delayed antibiotics for sepsis -</u>	

433/18	<p>busy and have had breaches in A&E and MAU -noted by HB</p> <p>Could we also include positive feedback for CHFT going forward as it would be nice to share this with their staff</p> <p><u>EPR</u> –</p> <p>Almost cleared the back log of delayed discharge letters. Graham Walsh clinical lead for EPR now and monitored on a weekly basis. 98% now (before 70%)</p>	
434/18	<p><u>409/18380/18:315/18 Dermatology withdrawal of services</u></p> <p>Dermatology : TWR have increased</p>	
435/18	<p><u>LMC</u></p> <p><u>LEVY :</u></p> <p>After 3 year forecast from Ibrahim increase to 40p to start in 2019 January</p>	
436/18	<p><u>Liasion officer</u> –</p> <p>Word of mouth RH recommended a lady who has part time hours from Locala , PGPA put SN in touch with someone who is going to work with VAC</p> <p>? shared with Huddersfield LMC</p> <p>Plan :Recruit for what we need at the moment and then look into sharing going forward – flexible working and lots of working may be remote – GDPR, privacy statement etc.</p>	
437/18	<p><u>Lower Valley –meeting RL with council and practices</u></p> <p>There will be 6000 new homes being built in lower valley, 1200 over the whole CCG in a 15 year plan. This would mean a significant work force challenge in these areas. Happy to work with everyone to find mutually agreeable way forward engaging with providers and commissioners</p> <p>CCG – will not all be at once and doesn't mean a new surgery, working together positively</p> <p>Increase in homes not necessarily equate to that much of influx in Calderdale –projection is only 10,000 for the whole of Calderdale</p>	
438/18	<p><u>Walkthrough the core contract</u> – seminar step by step guidance PMS/GMS and other issues 1-2 hours . Free of charge to the LMC - to invite PM's , GP partners and all LMC committee to be there , CCG , PGPA date in January TBC 1pm to 3 pm</p>	
439/18	<p><u>CCG/LMC</u></p> <p>Letter will be coming out to inform and ask practices of arrangements for extended hours and maybe Xmas eve / New year's eve</p>	

440/18	<p><u>Red bag scheme</u> care homes will have Pjs, meds , toiletries to take in with them and come out with everything they go in with to avoid delayed discharge and waiting for meds etc.</p>	
441/18	<p><u>Locala /S1 data sharing agreement</u> Clarity from LMC Law regarding responsibilities for third party entries On a similar note TR raised an issue with S1 entries from podiatry and other third party agencies –who has to redact, who is responsible for this data entered –Judith at CCG says it is the practices If full records requested and SAR what should be released –Again clarity from LMC law Rosegarth have an example of CHFT entering incorrect data but not taking responsibility ICO –GC/SN to take to interface group. TR to give details –safety issues discussed Gender reassignment similar new NHS number and older records are taken away –</p>	<p>SN GC/SN/TR</p>
442/18	<p><u>CCG</u> CQC have the job of reviewing all within the health system - following patient pathways over 65's and create learning CCG may do a desktop exercise ahead of this happening in the new year</p>	
443/18	<p><u>NHS migrating from Windows 7 to Windows 10</u> – checking to make sure things we use are compatible e.g. ECG machines - ? remit of silver service practices to put on their radar</p>	
444/18	<p><u>Healthwatch – Syrian families / refugees</u> They have asked for a response, 3 case histories relevant to general practice, use of interpreters, DK/TD to help fill in</p>	<p>DK/TD</p>
445/18	<p><u>Registrar office –</u> reminder of how to fill in the death certificate – forward onto PM's to circulate</p>	
446/18	<p><u>CCG : funding has come to the CCG from NHSE , 280K</u> (Primary Care Network) as part of FYFV £3 per head, initial half was used for locality working, other £1.50 for PCN? PGPA to hold funding Some of this for Maturity matrix? just PGPA (but have been told other organisations too) to look at where an organisation is now and a future projection</p>	
447/18	<p><u>LMC – 10K non recurrent funding for development of PM's.</u> Mentoring, PM's working together Possibly working in localities. SN meeting with Dale from council who have run coaching and mentoring next week – Speak to HP – ideas on agenda of PM meeting, maybe at practice leads ,</p>	<p>SN</p>

448/18	<p><u>QOF snomed causing problems with EMIS</u>, Will be rolled out to S1 probably next year. Read codes are incorrectly being transferred across to Snowmed , some of which have now become QOF codes incorrectly. This is affecting practice's QOF negatively maybe ask CCG if QOF can be locally agreed as fully delegated to take this into account</p>	RL
449/18	<p><u>Workforce meeting PGPA</u> – 10 K to look at this. RH volunteered</p>	
450/18	<p><u>HCAI Summit</u> – needs LMC involvement 28th November 3-5 pm NT volunteered Acre mill Huddersfield</p>	NT
451/18	<p><u>DATES FOR DIARY</u> Draft dates for LMC meetings Slight movement to avoid BH – Now confirmed October should read 9th not 11th Elections March AGM -separate meeting 2 weeks between sept/oct</p> <p>Draft Schedule of LMC meetings 2019 9th January 13th February 13th March (SN away, elections March) 10th April 8th May 12th June 17th July 4th September Need date for AGM 9th October 13th November 11th December</p>	<p>SN</p> <p>RL. SN</p> <p>SN</p> <p>RL/DK</p> <p>MA?</p>
452/18	<p><u>DATE OF NEXT MEETING</u> Date of Next Meeting Wednesday December 12th 2018 Learning & Development Centre, Calderdale Royal Hospital, 7.45 pm large training room</p>	

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Action Sheet

Item	Agenda Item	Action Required	Lead	Status	Comments/Completion Date
388/18	<u>Safeguarding code</u>	CHFT looking at a resolution SN to look at patients as assess the risk	CHFT/ SN	Ongoing	
397/18	<u>Locums contacting the LMC</u>	SN to ask the CCG to add RH to the mailing list as the LMC sessional Rep	SN	Ongoing	
406/18	<u>384/18:370/18 DN's and flu vaccines for 19/20</u>	Start planning for 2019/20	GC	Ongoing	
441/19	<u>Locala /S1 data sharing agreement</u>	SN to get clarity from LMC law GC/SN to take to interface group. TR to give details – safety issues discussed	SN/GC/TR	Ongoing	
444/18	<u>Healthwatch – Syrian families / refugees</u>	DK/TD to help fill in	DK/TD	Completed	