

CLEVELAND LOCAL MEDICAL COMMITTEE

Dr J T Canning MB, ChB, MRCP

Secretary

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Minutes and report of the meeting of the Cleveland Local Medical Committee commencing at 7.33 p.m. on Tuesday, 3 June 2008 in the Committee Room, Poole House, Nunthorpe, Middlesbrough

Present:

Dr R Roberts (Chairman)	Dr W J Beeby	Dr J-A Birch
Dr S Burrows	Dr J T Canning	Dr G Daynes
Dr K Ellenger	Dr T Gjertsen	Dr R McMahon
Dr J O'Donoghue	Dr A Ramaswamy	Dr O Sangowawa
Dr M Speight	Dr J R Thornham	Dr R J Wheeler
Dr D White	Dr C Wilson	

In attendance: Mrs C A Knifton : LMC Manager

08/06/1 APOLOGIES

Apologies had been **RECEIVED** from Dr A Boggis, Dr G Chawla, Dr D Donovan, Dr P Heywood, Dr A Holmes, Dr T Nadah and Dr D Obih.

08/06/2 MINUTES OF THE MEETING HELD ON 29 April 2008

These had been circulated to members and were **AGREED** as a correct record and duly signed by the Chairman.

08/06/3 MATTERS ARISING FROM THE MINUTES OF PREVIOUS MEETINGS

There were no matters arising.

08/06/4 ANNUAL CONFERENCE OF REPRESENTATIVES OF LMCs

Dr Canning tabled three suggested amendments:

- That Motion 738 be moved to Part 1 of the Agenda and debated
- That two additions be made to Motion 32
- That Motion 235 have inserted into it 238 (iii) as part (v)

Following discussion, it was **AGREED** that all the suggested amendments be taken forward.

Debate also took place on Motion 203 (European Working Time Directive) which applies to salaried GPs and had been ruled to cover our Motion 204. It was **AGREED** that whoever spoke on Motion 203 on behalf of Cleveland, should speak against it, and then ask for it to be taken as a reference as it did not refer to the principles, which may be applied to the self employed, but to the direction which cannot.

08/06/5 SUPPORT YOUR SURGERY CAMPAIGN

The campaign seemed to be going better in some practices than others. Contact will be made with the press at the end of the week and various doctors put their names forward as being media contacts.

It was **AGREED** that practices would be asked how many full sheets of 25 signatures they had collected, together with how many patients had been seen in the 2-week period.

08/06/6 NEW PRACTICES

08/06/6.1 New APMS practices: Improving access and choice in primary care services

A meeting of the LMC Augmented Executive Committee was taking place on Thursday evening (5 June) when the consultation documents would be gone through in detail and responses formulated. At the same time, individual meetings for GPs in the four PCT areas would be decided upon.

08/06/6.2 Meeting with Middlesbrough Council's Health Scrutiny Panel on Wednesday, 18 June 2008

Dr Canning would be attending a meeting with Middlesbrough Scrutiny Panel on 18 June, having already attended a meeting with Redcar & Cleveland Social Wellbeing Committee on 22 April. He felt there was no need for a meeting with Stockton Scrutiny Committee as there was no real problem in North Tees, and would attempt to make contact with Hartlepool Scrutiny Committee. He would try and make contact with Redcar & Cleveland again, in association with the Langbaugh Social Enterprise organisation.

It was **NOTED** that Hartlepool Council was already involved in discussions on the new hospital, with consultation commencing last Monday for 12 weeks, and APMS practices may be overshadowed by patients' concerns over the location of the new hospital as opposed to the threat to existing practices. PCTs were promoting APMS practices as extra investment in primary care but as patients leave their existing practice those practices will be losing resources as the funding follows the patient to their new practice. An argument could be made that it is not a fair consultation but legal advice on challenging that will have to be sought. Were appropriate questions being asked during the consultation, and does it breach code of consultation which analysis responses to the consultation?

**08/06/7 MEDICINES MANAGEMENT ELEMENTS OF QOF 2008/9 (M PCT/
R&C PCT)**

Letter received from Jo Linton, Assistant Director of Medicines Management

A draft letter had been received from Jo Linton at MPCT prior to being sent to practices, and the Secretary had submitted comments which had been incorporated. Dr Canning still felt that the three actions suggested could be misconstrued as mandatory, which they were not. If practices wanted to agree different elements and were refused, there are opportunities to challenge the refusal.

NOTED.

**08/06/8 COMMUNICATION RECEIVED FROM Dr ANNE HOLMES, NORTH
TEES LMC REPRESENTATIVE**

“I would like to send my apologies for the next two meetings. I will then be working within the Durham PCT so think that I should now tender my resignation. I would also like to thank Christine and John for their help over the years.

I would also like to propose that when the papers go out for a new member that the LMC should make some comment about what groups of GPs are under represented by the LMC, such as salaried GPs. Does the LMC know which groups are under represented as I have no idea if you collect this data.”

Dr Holmes had gained a position at the Northern Deanery as Associate Director with responsibility for quality, and Dr Andy Downs was now Scheme Organiser for Tees Valley Vocational Training Scheme in her place.

It was **AGREED** that after the vacancy was filled for the Stockton constituency, membership would be reviewed to ensure all levels of contractual status were represented (principals/salaried/GMS/PMS etc).

**08/06/9 DISTRIBUTING PRACTICE VACANCIES TO ALL GPs AND
PRACTICE MANAGERS**

Dr Canning explained that the office had received a number of requests from practices to circulate vacancies, and it had been thought a worthwhile proposal. There had been a mixed response and members’ opinion was sought.

After discussion, it was **AGREED**:

- Such vacancy adverts would continue to be circulated on a monthly basis
- By using the same heading, anyone not wishing to receive the notifications should be able to set up rules to consign the emails straight into their “junk” folder – without consigning any other emails from the same sender into the same folder
- An external contractor be used to set up a new webpage for the LMC, with the LMC updating it

- Once the webpage was online, vacancies could be posted on there with interested parties having access to them that way.

08/06/10 LACK OF SHARED CARE GUIDELINES RELATING TO MEDICATION SECONDARY CARE ARE REQUESTING PRIMARY CARE TO PRESCRIBE

Dr Canning explained that a letter had been received from a Middlesbrough GP who had been asked by a JCUH neurologist to prescribe Apomorphine for Parkinson's Disease. No shared care protocol was in place (whoever issues the prescription is held responsible for the cost of the drug, care and monitoring of that patient). Was this problem confined to south of the river or did it also extend north of the river? Other members said they were experiencing the same problem with gastroenterology and rheumatology requests for GPs to prescribe "red" drugs.

Dr Wheeler, who sits on the Drug & Therapy Committee at JCUH said they were actively trying to formulate shared care guidelines across the Trust.

There was concern that consultants/nurse specialists have no understanding about prescribing in primary care, the possible legal implications of GPs prescribing "red" drugs, or GPs lack of experience in prescribing/monitoring a "red" drug.. If hospitals are funded for prescribing drugs and subsequently ask GPs to prescribe, then the funding should be transferred to primary care; it was unprofessional for hospital staff to advise patients that GPs will not prescribe because of a lack of funding. Prescribing decisions are a professional/GMC issue not a funding one and there is clear advice from the GMC.

Post meeting note: The GMC guidance "Good Practice in Prescribing Medicines" was published and can be found at: http://www.gmc-uk.org/guidance/current/library/prescriptions_faqs.asp.

The Secretary **AGREED** to:

- Reinforce advice to GPs and Practice Managers
- Pass the advice on to Trust Senior Medical Staff Committee LMC members for onward transmission to the three Trusts.

08/06/11 CHANGES TO BUSINESS ACCOUNT

Dr Canning explained that banks were proposing to cease free banking for business / association customers. Whilst our bank had agreed to continue with free LMC banking for the foreseeable future, it was felt that BACS payments should commence as soon as possible. After discussion, it was **AGREED** that payment by BACS should commence and all members were asked to provide the office with their bank account name, bank account number, and bank sort code. BACS would commence once all members had provided this information.

08/06/12 LMC ANNUAL ACCOUNTS 2007-2008

The annual accounts were tabled and showed a small loss, which was manageable within the LMC reserves. The rent for the new premises will be similar to that presently paid, with the addition of phone/fax, postage and photocopying costs. The annual cost of the GP Defence Fund had also increased, as would the staff wage bill. The levy for next year would have to increase to cover the shortfall, probably commencing in October 2008.

NOTED.

08/06/13 ANNUAL REPORT TO LMC FOR REGULATIONS SUB-COMMITTEE ACTIVITIES : 1 April 2007 – 31 March 2008

Dr Canning explained that the Regulations Sub-Committee convened when a doctor was having difficulties. There had been no formal approach from PCTs this year, although a variety of informal advice had been given to a number of doctors.

NOTED.

08/06/14 REPORTS FROM REPRESENTATIVES

No reports from representatives had been received.

08/06/15 REPORTS FROM MEETINGS

08/06/15.1 Momentum Pathways Partnership Panel held on Monday, 2 June 2008 – attended by LMC Chairman

Dr Roberts is the LMC's representative on this Panel and had attended the meeting on Monday. The Panel was looking at the location of the new North Tees hospital, with the sites being given as Wolviston and Wynyard, but both were on the Wynyard side of the A19. Monday's meeting merely looked at what information was going to the Scrutiny Panel, with a substantial amount of pathways being shown as "moving to community care". There was real concern that the hospital will be downsized to have fewer wards, fewer beds and fewer services than at present with many services being moved into the community. Would this result in a hospital not fit for purpose? The website is: www.momentum-consultation.org.uk.

The consultation process had commenced on 2 June but no formal consultation document had yet been received at the LMC office.

It was **AGREED** the matter would be discussed at the next LMC meeting on 15 July.

08/06/16 ANY OTHER NOTIFIED BUSINESS

08/06/16.1 Local Darzi Report

Dr Canning had tried to download the local Darzi report but each time his computer had crashed. It was **AGREED** that it will be discussed at the next LMC meeting on 15 July.

08/06/16.2 Forms being received by GPs for completion

Dr Canning explained that GPs were receiving the new child protection forms without evidence of consent being attached, which could result in doctors being in breach of confidentiality. He had taken this up with Alex Giles who would investigate and get back to him.

Dr O'Donoghue handed over a variety of lengthy forms being received which requested information on patients covering housing / malnutrition assessment / alcohol support services / Macmillan nurses, etc.

Not having seen them all, Dr Canning could only comment on the re-housing letter on homeless grounds received from the Council which is the responsibility of the PCT to pay at a fee determined by the PCT. The fee was only payable if the request came from the Council, not a patient.

NOTED.

08/06/16.3 PCT wanting to know what GPs carry in their bags

A member commented that their PCT wanted to know what he carried in his bag. Dr Canning said this is not information the PCT can reasonably require under the contract. What a doctor carries depends on that person's own assessment of what work they do.

NOTED.

08/06/16.4 Feedback to the LMC

Dr Canning asked that practices keep the office informed about unusual requests being received from PCTs and other organisations, so that he could assist in their responses.

NOTED.

08/06/17 RECEIVE ITEMS

08/06/17.1 Medical List

Applications:

<u>Effective Date</u>	<u>Name</u>	<u>Partnership</u>	<u>Practice Area</u>
01.06.08	Dr C S Cornford	Fulcrum Medical Practice	M PCT
<i>Change in status from SGP to Partner.</i>			
01.06.08	Dr S M Finnie	Dr Poyner & Partners	NT PCT
<i>Partner.</i>			

Removals:

	<u>Effective Date</u>	<u>Name</u>	<u>Partnership</u>	<u>Practice Area</u>
R	31.05.08	Dr A A G Saad	Drs Awad & Saad	NT PCT
<i>Sadly passed away after a long illness.</i>				

RECEIVED.

08/06/17.2 Proposals for Ambulance contact centres in the North East of England – Update : Extract from letter from Colin Cessford, Director of Strategy & Clinical Standards, NEAS
Ref Minute: 07/11/08

“I would like to take this opportunity to thank you for your interest and involvement in our review of our 999 contact centres for the North East. This letter is to inform you of the decision that our Trust Board made as a result of this review.

After receiving a number of reports into the proposals, our consultation and the best option for the service, the decision was to proceed with the recommendation put before the Trust Board.

This will mean creating a large regional 999 contact centre in Monkton, near Hebburn, which will be the mirror image of our current primary centre at Ambulance headquarters in Newburn Riverside. The move will see the closure of our satellite centre in Ladgate Lane, Middlesbrough.

The new centre will be linked with Ambulance HQ to create a virtual network for the entire North East Region. However, in the event of a failure in one location, the other centre will continue to provide an uninterrupted 999 service for the entire region. This will vastly increase our resilience with a single regional dispatch system and our new digital radio communications.”

RECEIVED.

08/06/17.3 Report from GPC

Summary of GPC meeting held on 15 May 2008 was emailed to all GPs and Practice Managers on 19 May 2008. The GPC next meet on 17 July 2008.

RECEIVED.

08/06/17.4 Documents sent to GPs and/or Practice Managers since the last meeting on 29 April 2008

GPC guidance: Extended access DES/LES and Salaried GPs (6.5.8)
GP/Salaried GP adverts – adverts can be emailed monthly by LMC (8.5.8)
Statement on the Pharmacy White Paper affecting dispensing GPs (8.5.8)
Agreement on practice resource guarantee during a flu pandemic (13.5.8)
Support Your Surgery campaign (13.5.8)
Report from GPC Meeting held on Thursday, 15 May 2008 & Support Your Surgery packs (19.5.8)
"Support your Surgery Campaign" pack (20.5.8)
Hazardous Waste Training (20.5.8)
Clinical Waste - Annual Registration with Environment Agency (20.5.8)
GPC Guidance : New NHS Primary Care Procurements (20.5.8)
Adverts (3) for Salaried GPs (20.5.8)
Support Your Surgery Campaign (28.5.08)
Advert for a Salaried GP – Stockton (28.5.08)
REMINDER: Support Your Surgery Campaign (30.5.08)
Support Your Surgery – online tools and information (3.6.08)

RECEIVED.

08/06/17.5 Report the receipt of:

Sunderland LMC minutes of meeting held on 18 March 2008
GPC News M9 – Friday, 16 May 2008 (*available at www.bma.org.uk*)

RECEIVED.

08/06/17.6 Date and time of next meeting

Tuesday, 15 July 2008, at 7.30 p.m. in the Committee Room, Poole House, Stokesley

RECEIVED.

There being no further business to discuss, the meeting closed at 8.40 p.m.

Date:

Chairman