

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 7.00 p.m. on Tuesday, 2 June 2009 in Room D004, Ebsworth Building, Queens Campus, Durham University, Stockton on Tees.

Present:

Dr D Donovan (Chairman)	Dr M Betterton	Dr J-A Birch
Dr A Bonavia	Dr S Burrows	Dr J T Canning
Dr G Daynes	Dr K Ellenger	Dr M Hazarika
Dr K Machender	Dr R McMahon	Dr T Nadah
Dr V Nanda	Dr A Ramaswamy	Dr M Speight
Dr S White		

In attendance:

- Ms J Foster : Development Manager
- Mrs C A Knifton : Office Manager
- Dr I A Lone : Medical Director (South)
- Dr O Sangowawa : Director of Public Health Commissioning
- Dr P Holden : GPC Negotiator
- Mr D Carter : BMA Industrial Relations Officer

It was explained that the meeting would be in a condensed format in order that a PMS meeting could follow immediately afterwards at which Dr Peter Holden, GPC Negotiator, would give a presentation

09/06/1 APOLOGIES

Apologies had been **RECEIVED** from Dr W J Beeby, Dr S Byrne, Dr G Chawla, Dr A Gash, Dr C Harikumar, Dr H Murray, Dr D Obih, Dr M Pritchard, Dr R Roberts, Dr N T Rowell, Dr D White and Dr C Wilson.

09/06/2 MINUTES OF THE MEETING HELD ON 7 April 2009

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

09/06/3 MATTERS ARISING FROM THE MINUTES OF PREVIOUS MEETINGS

There were no matters arising.

09/06/4 LMC CONFERENCE 2009

Copies of the Agenda had been sent electronically to members and a hard copy was available at the meeting. Members were asked to reflect the feelings of the Committee when voting at Conference. Dr Donovan said he would be happy to speak on behalf of CLMC's Motion 93 concerning the cost of revalidation. It was felt that CLMC's Motion 170 on adjusting payments for prevalence would be reached for discussion, although if Motion 155 was passed then Motion 170 would not be discussed.

The Secretary advised that one of CLMC's motions did not appear in the Agenda which related to attending members of conference donating an appropriate amount to The Cameron Fund (CLMC makes an annual donation). It had been felt this motion was not helpful and the Secretary had agreed to its removal.

The Chairman asked that if anyone had any issues they wanted to raise on the Conference Motions they should email the LMC office or himself prior to Conference.

NOTED.

09/06/5 GPC ANNUAL REPORT 2009

The Report had been emailed to members. No-one had any comments to make. Any comments could be emailed to the Secretary at the LMC office.

NOTED.

09/06/6 PHARMACY NAMES ON PRESCRIPTIONS

The Local Pharmaceutical Committee Secretary had drawn attention to the fact that a practice was issuing written repeat prescriptions with the name of a local pharmacy shown on the top. There is nothing in the Regulations to prohibit this with a written prescription, but you are not supposed to direct patients to a particular pharmacist when issuing electronic prescriptions. There was no question of any financial gain for the pharmacist, but it was not considered good practice to suggest taking a prescription to one particular location.

It was **AGREED** that advice be sent to all practices expressing concern on this matter.

09/06/7 REGIONAL LEVY

Letter from GPC Secretary, Northumberland, Tyne & Wear, and Durham General Practitioners Committee

“As I am sure you are aware, the Regional Committee has expanded to include everyone except Cumbria, which is in line with the old Regional Committee. Now that Cleveland is part of the Committee, this letter is to inform you that the Committee is funded on a levy based on £2.15 per GP in the area. This levy usually lasts for 3-4 years and, if you are in agreement, I would be grateful if you could forward the required resources. Clearly, we need to discuss a more central venue and name, now that Durham and Cleveland are attending.”

The Secretary explained that Durham and Cleveland had withdrawn from the group when the area had been divided into two SHA's. Now that one SHA covered all regions, they had been invited to rejoin the group.

After discussion it was **AGREED** to pay this ad hoc levy **conditional upon**:

- The renaming of the group to North East General Practitioners Committee (though no contribution would be made to any charges linked to changing the bank account name);
- A more central venue for meetings be determined.

09/06/8 BMA EMPLOYER ADVISORY SERVICE

Letter from GPC Secretary, Northumberland, Tyne & Wear, and Durham General Practitioners Committee

“At the last Regional Meeting, David Carter (BMA Industrial Relations Officer) informed us that the BMA now had a BMA Employer Advisory Service, which is now available to support and advise GP employers as opposed to GPs, who are now often salaried as well. David also suggested that they could come and give a presentation at one of our LMC meetings. If your LMC wishes to do this, please contact David direct.”

It was determined that there would be no benefit of Mr Carter attending an LMC meeting. His presentation may well be beneficial to practices in relation to protocols for employing staff and as long as one of the GPs was a BMA member, David was willing to visit practices.

It was **AGREED** that this information should be sent out in the LMC's weekly bulletin.

09/06/9 REDCAR & CLEVELAND CARERS STRATEGY 2009-2014 (DRAFT)

Letter and draft Strategy from Paul Frank Head of Communications & Patient Experience, Redcar & Cleveland PCT

“Please find enclosed documents with regards to the development of the Redcar & Cleveland Carers Strategy, which we are forwarding on behalf of Redcar & Cleveland Borough Council as part of joint involvement activity in this regard.”

No comments were forthcoming and the document was **RECEIVED**.

**09/06/10 IMPROVING ACCESS TO DIETETIC AND NUTRITION SERVICES :
MIDDLESBROUGH, REDCAR AND CLEVELAND
Letter from Paul Frank Head of Communications & Patient Experience,
Redcar & Cleveland PCT**

“As you may be aware, the Dietetic and Nutrition Service provides Primary Care Clinics, Nutrition Support, Paediatric, Diabetes and Weight Management Services across Middlesbrough, Redcar and Cleveland.

Recently an internal review has been undertaken to consider how processes could be improved and made more effective, and any related capacity and support requirements. A number of key difficulties were identified as part of the review, as follows:

- Variable and at times lengthy waiting periods
- Inconsistencies and inequalities in service provision
- Lack of administrative support
- An increasing Did Not Attend rate
- Large amount of time spent travelling by staff
- Lack of a co-ordinated strategy for taking the service forward

In order to improve access to the service, provide improved packages of care, reduce the DNA rate and amount of non-productive time (for example travelling), the redesign of the service is proposed as follows:

- Changing to a locality based service across the Middlesbrough, Redcar and Cleveland area increasing equality in terms of access to the dietetic team
- Creating a central booking system including an opt-in appointments service which would provide greater flexibility for patients, reduce wasted time for the dietitians and address the team's large DNA rate
- Support the new appointments and clinical system with the System One IT programme that offers a reduction in administration time and allows the team to collect service statistics more effectively

It is proposed to consolidate the number of locations from which the service is provided from forty to approximately six of the nine suitable venues identified below:

- East Cleveland Hospital, Alford Road, Brotton
- Redcar Health Centre, Coatham Road, Redcar (would relocate to New Stead development early 2010)
- Guisborough Primary Care Hospital, Northgate, Guisborough
- Eston Clinic, Fabian Road, Eston
- South Bank Health Shop, South Bank
- North Ormesby Health Village, Market Place, North Ormesby
- Cleveland Health Centre, Middlesbrough
- West Acklam Clinic, Middlesbrough
- One Life Centre, Linthorpe Road, Middlesbrough

The service perceives a number of benefits in redesigning the service:

- Improving equality and consistency, by providing the same level of service to all patients regardless of their GP

- Improving choice, by being able to offer new services, for example patient education and group sessions
- Increasing convenience, by being able to offer patients and appointment at a venue and at a date and time which suits them
- Improving access through shorter waiting times for appointments and the ability to prioritise referrals according to need
- Increasing efficiency through improving the administration and IT system, reducing the DNA rate and less time spent by dietitians travelling
- Creating opportunities for staff development, by being able to offer training to other services and less time spent by staff working alone.

A formal consultation is taking place from Monday, 20 April to Friday, 17 July 2009. We would welcome your thoughts on the proposed changes, and have enclosed a comment card for the submission of your views. Alternatively, you can comment in writing to: Patients Experience Teesside, Freepost NEA 9906, Middlesbrough TS2 1BR, or by emailing patientexperience@nhs.net.

In addition, you may wish to attend one of the drop-in sessions, which are taking place as follows:

- Tuesday, 2 June, 1.30 – 5.00 p.m., Outpatients, East Cleveland Primary Care Hospital, Alford Road, Brotton
- Monday, 22 June, 9.00 a.m. – 12.30 p.m., Education Room, Redcar Health Centre, Coatham Road, Redcar”

Concern was expressed that a re-organisation could possibly lead to a reduction in the availability of services and practices were **ASKED** to inform the LMC office of any resultant problems they incurred.

09/06/11 REPORTS FROM REPRESENTATIVES

None had been received.

09/06/12 REPORTS FROM MEETINGS

None had been received.

09/06/13 ANY OTHER NOTIFIED BUSINESS

09/06/13.1 Patient Experience Questionnaires & QOF points

Concern was expressed at the fact that large practices with large list sizes were being assessed by just 100 patient questionnaires per practice, and not all of those may return the questionnaire or remember accurately their experiences when dealing with the practice.

The Secretary pointed out that there is a model letter which practices can use to lodge a challenge with the PCT in relation to the survey results, and it was on the LMC website (www.clevelandlmc.org.uk) and had also been sent out with the LMC’s weekly bulletin.

Discussion ensued and the Secretary **AGREED** to draft a motion for the Conference Supplementary Agenda in relation to QOF and PE7/PE8. It would be sent to members for comment prior to submission to Conference.

Post meeting note: Following email iterations the following motions were submitted for inclusion in the Supplementary Agenda:

That this conference

- 1 supports the principles of evidence based practice
- 2 supports validated research in general practice
- 3 believes that the recent patient experience survey was fundamentally flawed
- 4 Does not accept that the QOF domains PE7 and PE8 should be paid on the results of the patient experience survey
- 5 Urges the GPC to support, in every way possible, practices in dispute with their PCO over PE7 and PE8

That this conference requires that a more robust and reliable method than the 2008-9 patient experience survey is used for any measurement of patient access under the QOF, or other contractual arrangements, for this and any future years

09/06/14 RECEIVE ITEMS

09/06/14.1 Medical List

Applications:

<u>Effective Date</u>	<u>Name</u>	<u>Partnership</u>	<u>Practice Area</u>
8.6.09 <i>Partner</i>	Dr Seema Singh	Oakfields Medical Practice	M PCT
2.6.09 <i>Returning to work following 24 hour retirement.</i>	Dr K Sandresegaram	Erimus Practice	M PCT
1.6.09 <i>APMS practice. Salaried GP</i>	Dr D V Roy	The Fens Medical Centre	H PCT
20.4.09 <i>APMS practice. Salaried GP.</i>	Dr D P Sunkavalli	Stockton NHS Health Centre	NT PCT
6.5.09 <i>APMS practice. Salaried GP.</i>	Dr A Lasker	Hartlepool NHS Health Centre	H PCT
1.4.09 <i>Change in status to long term locum.</i>	Dr P de Jongh	West View Millennium Surgery	H PCT
31.3.09 <i>Salaried GP.</i>	Dr A Calabro	Resolution Health Centre	M PCT

20.4.09 Dr S A Ahmed Stockton NHS Health Centre NT PCT
Change in status from locum to Salaried GP.

Resignations:

<u>Effective Date</u>	<u>Name</u>	<u>Partnership</u>	<u>Practice Area</u>
31.5.09 <i>24 hour retirement.</i>	Dr K Sandresegaram	Erimus Practice	M PCT
29.4.09 <i>Resigned. Salaried GP.</i>	Dr A Karn	Park Surgery	M PCT
13.8.9 <i>Resignation. Salaried GP.</i>	Dr S H Khan	Crossfell Health Centre	M PCT

RECEIVED.

**09/06/14.2 Momentum: Pathways to Healthcare – Partnership Panel
Extract from letter from Carole Langrick, Director of Strategic
Development/Deputy Chief Executive**

“It is fair to say that the feedback we have received leads us to conclude that the Partnership Panel has service its purpose at this particular stage of the Momentum Programme and that it is time to move on to other methods of engagement. Therefore, we propose to implement the measures listed below, as we go forward and for the time being cease the Partnership Panel meetings.

- a) Continuation of targeted attendance / presentations on progress at already established routine meetings held by the full range of partner and stakeholder organisations
- b) Regular newsletter and updates
- c) Continuation of website and posting of progress
- d) As the programme of work continues, update events and interactive workshops specifically aimed at the areas partners and stakeholders are interested in, will be arranged

Engagement and involvement has been a key and important part of the Momentum Programme and this will continue. As we have done recently, we will keep the situation under review and will always be pleased to receive any comments and suggestions from you as to how we can improve our engagement at any time.

Therefore, the Partnership Panel meeting scheduled for Thursday, 4 June 2009 at 2.00 p.m. is cancelled. I would be grateful if you would remove the date from your diary.

I would like to take this opportunity to thank you for your involvement with the Partnership Panel and look forward to continuing to work with you to implement the Momentum Programme.”

RECEIVED.

**09/06/14.3 Improving Access and Choice in Primary Care Services –
Equitable Access to Primary Medical Care Programme : Update on
APMS practices
Letters from Paul Frank, Assistant Director of Communication &
Engagement, MPCT**

From 1 June 2009 the following GP practice will commence:

The Fens Medical Centre
434 Catcote Road
Hartlepool TS25 2LS
Tel: 01429 231198 & Fax: 01429 278791

From 20 April 2009, the following practice commenced:

Hartfields Medical Practice (Intrahealth)
Hartfields Extra Care Village
Hartfields Manor
Hartlepool TS26 0US
Tel: 01429 869526 & Fax: 01429 891658

From 1 May 2009, the following health centre will commence:

Hartlepool NHS Healthcare centre (Assura Hartlepool LLP)
Victoria Road
Hartlepool TS26 8DF
Tel: 01429 890947 & Fax: 01429 890906

**09/06/14.4 2008 Levy Rebate
Letter from Brian Keighley, Treasurer & Director, General Practitioners
Defence Fund**

“When I wrote to you recently, I promised to write to tell you of the amount of the 2008 levy rebate credited to your LMC. The amount credited to your LMC is £7,004.05. As your LMC has already remitted all of the 2008 levy, I have offset this credit against the 2009 levy.

Levy due for 2009	£32,000.00
2008 levy rebate	(£ 7,004.05)
Total Due	£24,995.95

I look forward to receiving your remittance.”

RECEIVED.

09/06/14.5 Report the receipt of:

Sunderland LMC's minutes of meeting held on 24 February 2009
Sunderland LMC's minutes of meeting held on 21 April 2009
GPC News 8 – Friday, 24 April 2009 – available on www.bma.org.uk
GPC News 9 – Friday, 22 May 2009 – available on www.bma.org.uk

RECEIVED.

09/06/14.6 Date and time of next meeting

Tuesday, 14 July 2009, at 7.30 p.m. in the Committee Room, Poole House.

RECEIVED.

There being no further business to discuss, the meeting closed at 7.30 p.m.

Date:

Chairman: