

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 7.35 p.m. on Tuesday, 9 September 2008 in the Committee Room, Poole House, Nunthorpe, Middlesbrough.

Present:

Dr R Roberts (Chairman)	Dr J-A Birch	Dr A Boggis
Dr A Bonavia	Dr S Burrows	Dr J T Canning
Dr K Ellenger	Dr I A Lone	Dr K Machender
Dr R McMahon	Dr D Obih	Dr J O'Donoghue
Dr N Rowell	Dr M Speight	Dr R Wheeler
Dr D White	Dr C Wilson	

In attendance: Mrs C A Knifton : LMC Manager

The Chairman welcomed Dr Alison Bonavia, a GP from Yarm, who had filled the North Tees vacancy following the resignation of Dr Anne Holmes.

08/09/1 APOLOGIES

Apologies had been **RECEIVED** from Dr W J Beeby, Mr J Clarke, Dr G Daynes, Dr D Donovan, Dr A Gash, Dr T Gjertsen, Dr C Harikumar, Dr M Hazarika, Dr P Heywood, Dr A Ramaswamy, Dr T Sangowawa, Dr J R Thornham and Dr S White.

08/09/2 MINUTES OF THE MEETING HELD ON 15 July 2008

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

08/09/3 MATTERS ARISING FROM THE MINUTES OF PREVIOUS MEETINGS

No matters arising other than those covered elsewhere in the Minutes.

08/09/4 OOH SERVICE IN HARTLEPOOL

Hartlepool OOH is now a nurse consultant led service in Hartlepool Hospital A&E, with NHS Direct (but not as NHS Direct) fronting telephone triage and Primecare subcontracted if any GP home visits are needed. There has been a huge reduction in reported contacts over the weekend period, and this was being investigated (practices may be only receiving notification about face to face consultations rather than telephone consultations). It is the responsibility of the PCT to commission the service but it is the responsibility of the LMC to draw areas of concern to the PCT's attention. Ali Wilson had offered to meet the LMC Secretary and Chairman to discuss outstanding issues, and a meeting would be arranged.

08/09/5 GPSTR / TAX SITUATION

Dr Boggis commented that he had seen an article in BMA News that GPSTR cannot claim tax relief. It was confirmed that no-one is allowed to gain tax relief on expenses on obtaining qualifications required to do their job.

Dr White (a member of the BMA Junior Doctors Committee) explained that representation had been made to the DDRB last year on the costs of being a trainee, without any success.

It was **AGREED** that a motion be taken to Conference next year seeking proper funding.

08/09/6 DENTAL PATIENTS

Dr Canning informed members that he had attended a meeting with Dr E Summers from Primecare and representatives of the Local Dental Committee about dental patients attending GP surgeries when suffering from dental problems. In-hours, dentists do not believe doctors should be treating people with dental problems and should be referring them to dentists. Patients tell doctors they cannot get appointments when it may be a combination of costs associated with dental treatment, and fear of the procedure itself.

Dentists do not believe doctors are qualified to treat dental problems and there had been concern that interpretation of the Dental Act meant that it was illegal for anyone other than a dentist to treat dental problems, however, doctors have a duty to treat patients in pain where appropriate, but as soon as a doctor starts treating a patient, they take on medical responsibility. It was noted that dentists can prescribe, but not issue NHS prescriptions for stronger types of pain relief, which only a doctor can prescribe under the NHS.

It was **NOTED** that patients should be asked to contact 0800 013 0500 between 9.00 a.m. to 5.00 p.m. Monday to Friday, in order to obtain an emergency appointment with a dentist; this is where dentists from all over the region pool surplus or cancelled appointments and these are given as emergency appointments. OOH patients should contact Primecare on 0845 603 3131.

08/09/7 HPV VACCINATION FOR 17-18 YEAR OLDS – Update following meeting between LMC Secretary/Toks Sangowawa on 30 July 2008

Dr Canning explained that the government had decided to use the bivalent vaccine rather than the quadrivalent vaccine. Pre-pubescent students will be vaccinated through schools with a catch-up programme for 17-18 year olds. The majority view of the LMC had been that immunisation was best undertaken within the school/college system, with GPs providing the catch-up element once a properly funded LES had been agreed with the LMC. Nothing further had been heard from Dr Sangowawa.

There was also the issue of people requesting the quadrivalent vaccine rather than the bivalent vaccine. Technically, there was nothing to stop a doctor prescribing the quadrivalent vaccine if a patient requested that. If a patient had received dose(s) of that vaccine, a change to the other preparation required recommencement of the schedule (and vice versa).

What happened to students who opted out of education and do not attend school/college? These were generally the people who required this kind of medical assistance. It was anticipated that 25% of the population would fall outside of schools/colleges and the LES is designed to immunise these individuals.

08/09/8 LMC/NEGOTIATOR REGIONAL MEETINGS : NEWCASTLE MARRIOTT HOTEL : WEDNESDAY, 1 OCTOBER 2008 : 6.30 – 9.00 p.m.

The Secretary/Chairman/Vice Chairman attend these meetings, but all were committed elsewhere on that evening. The meetings are now open to any member to attend and if anyone wanted to attend, they were asked to let the LMC office know as quickly as possible. **(Post meeting note:** Dr J-A Birch will be attending).

08/09/9 GP HEALTH USAGE OF SERVICES 2007/8

	Number of clients		Number of sessions	
	1/7/6 to 30/6/7	1/7/7 to 30/6/8	1/7/6 to 30/6/7	1/7/7 to 30/6/8
Psychiatry	14	17	64	45
New clients	5	4		
Counselling	5	8	53	127
New clients	2	5		
Psychology Treatment	2	1	12	5
Staff Counselling	8	5	22	17
New clients	8			
Medical Consultations with OCH Dept, North Tees Hosp	3	2		
Medical Consultations with Directors	Approx 10	15		
Mentoring	One new mentor trained + one refresher course No uptake on mentoring 2006/7 & 2007/8			

GP Health had been experiencing problems receiving payment for quarterly invoices issued to PCTs, although all had now paid. Funding had not been reviewed for a number of years and increased usage was putting a strain on resources. Bob Champion had been involved in negotiations, but had now left and Anne Moore had taken his place at Teesdale House.

It was **AGREED** that a reminder would be sent to all GPs and Practice Managers on how to access services provided by GP Health.

08/09/10 REPORTS FROM REPRESENTATIVES

None received.

08/09/11 REPORTS FROM MEETINGS

08/09/11.1 Meeting with Assura Group held on 2 July 2008 : Dr J T Canning : Dr A Summers & Dr T Meggit

A diverse wide-ranging discussion had taken place about the role of Assura, in particular their role in “supporting” GP consortia. They are involved in property, in establishing above-practice consortia to provide services, with limited liability partnership. They already own the building housing two of the larger practices in Stockton. An important question was whether working in partnership with Assura enabled a GP to be eligible for an NHS pension.

08/09/11.2 Meeting of the Stockton Council Health Select Committee held on 21 July 2008 : Dr J T Canning attended : Momentum : Pathways to Healthcare

Dr Canning attended the Health Select Committee for Stockton on Tees Council on Monday, 21 July 2008. The meeting was also attended by some local residents.

Dr Canning explained the position of the LMC was that the provision of high quality secondary care services was supported. Concerns had been expressed at the LMC meeting that it was vital that the community services were properly established before they were no longer available within secondary care, and that the LMC had noted concerns about transport. Transport appeared to be an issue for those residents attending.

The meeting was also attended by representatives from North Yorkshire County Council who were concerned about the impact this might have on Northallerton Hospital and, when asked, Dr Canning said he was unable to indicate whether or not there would be an increased use of the hospital or a decreased use of the hospital and that he believed that modelling of both scenarios was important.

As advised by the LMC, Dr Canning also indicated that it was important that the facility and scheme was flexible enough to be “future proof” and not lead to some “fossilisation” of current needs in the light of medical and other developments.

08/09/11.3 Meeting of the Hartlepool Borough Council Health Scrutiny Forum on 25 July 2008 : Dr J T Canning attended : Momentum: Pathways to Healthcare

Dr Canning attended the Hartlepool Health Scrutiny Forum on Friday, 25 July 2008. The meeting was also attended by local residents of North Tees & Hartlepool Trust, Durham and Hartlepool PCTs. Whilst the meeting was officially to discuss the Momentum Project, a number of members and residents raised the issue of new practices and Dr Canning provided the Committee with some information on the LMC's views on these practices. Dr Canning was subsequently asked for a copy of the LMC's response as the Committee felt that this would be helpful for their deliberations.

There were a number of concerns expressed by members of the public, mostly about transport and siting. When invited, Dr Canning informed the Committee that the LMC was generally supportive of the Project, including providing services in the community, but that it was important that these services were available prior to the closure of existing facilities rather than a promise for the future.

Dr Canning felt that the opportunity to meet this Scrutiny Forum was generally helpful to the relationship between the LMC as representative body for GPs and the Scrutiny Forum, and it is important that these relationships are developed.

08/09/12 NEW PRACTICES AND HEALTH CENTRES

08/09/12.1 Consider press release by Tees PCTs (22 August 2008)

£11m investment in primary care across Teesside takes a step closer

The Boards of the four Primary Care Trusts (PCTs) across Teesside today approved plans to increase the number of GP practices and health centres in the area.

The PCTs plan, to build on the strength of existing GP services across Teesside to help tackle some of the area's more serious health problems, has now been approved and will be supported by additional investment of over £11 million a year to set up these new health services, in areas where we know there is significant health need.

Following an extensive three month public consultation, in which the PCTs received just short of 5,000 comments and views from patients across Teesside on the proposals, the Boards approved the following:

Hartlepool:

- *An additional two GP practices and a health centre in the Hartlepool area*
- Stockton on Tees:*

- *An additional health centre within the Stockton borough*

Middlesbrough:

- *An additional two GP practices and a health centre in the Middlesbrough area*

Redcar & Cleveland:

- *An additional two GP practices and a health centre in Redcar & Cleveland*

These plans link in with national plans to establish 150 GP-led health centres and 100 new GP practices across the country in areas with the greatest need. The new GP practices will offer a range of new services and extended opening hours so people can visit the practice at times beyond the normal working day. The new health centres will offer the usual GP services, and people will be able to get a GP appointment or walk-in service regardless of whether they are registered with the doctors at the practice. The health centres would be open from 8.00 a.m. to 8.00 p.m., every day of the week.

Now with Board approvals, the PCTs will progress their plans to ensure that these services are put in place in 2009.

Colin McLeod, Chief Executive of Middlesbrough PCT and Redcar & Cleveland PCT, said: "I'm delighted that the Boards have supported the proposals for the much-needed additional investment of £7m across the two areas. In Middlesbrough, we plan to put new GP practices in the Hemlington and East Middlesbrough areas and use the existing North Ormesby Health Village as the site for the health centre. In Redcar & Cleveland the two practices are planned for central Redcar and Skelton with the health centre being an integral part of the new Low Grange Farm medical facility currently being constructed on Normanby Road, South Bank."

Mrs Chris Willis, Chief Executive of Hartlepool PCT and Stockton on Tees PCT, added: "This is a tremendous boost for primary care provision and should improve access to GP services for the residents of Hartlepool and Stockton. Coupled with the current consultation 'Momentum – Pathways to Healthcare' the future of service provision across primary and secondary care for the people of Hartlepool, Stockton, Easington and Sedgefield, looks a lot brighter."

The Chairman declared an interest in APMS bids.

The LMC had not been aware that there was a PCT Board Meeting in August, because the websites indicated there were no August meetings. The first the LMC office knew about the PCT Board Meeting was when BBC Tees contacted the office to ask for comments on the decision. The meeting took place a very short time after the consultation period closed, and no replies had been received to concerns listed in the LMC's responses to the consultation documents. PCTs did not seem to be listening to the views expressed in the consultation and were going ahead with their plans anyway. They are at the short listing phase of selecting bidders for the new practices.

The LMC had taken legal advice on how the consultation had been conducted. The advice received was that the consultation appears to have been conducted properly. The PCTs had consulted on things they had to consult on, but did not consult on whether the practices/health centres were required/necessary. There is a possibility of challenging the lack of consultation on new practices, however, the only people able to challenge the PCTs are those who have the right to be consulted under the NHS Act which is local authorities and patients. GPs have no rights to be consulted on this matter whatsoever.

The only way to challenge the decision is by going to Judicial Review which is beyond the current funding available to either the LMC or any patient groups known to the Committee.

Members expressed an interest in knowing how PCTs are going to monitor the success of these new practices/health centres.

08/09/12.2 WALK-IN CLINICS

North Ormesby Walk In Clinic: A practice in Middlesbrough had issues with the Walk In Centre at North Ormesby. There was a clinical governance issue in that the Walk In Centre was seeing people and giving them medication which had been refused by the patient's own practice on medical grounds. Other patients had been told to go to the Walk In Centre by Health Visitors. The Middlesbrough practice will see any patients who come to their surgery and view the Walk In Centre as unfair competition. A lot of money was being put into the Walk In Centre with no evidence of any success.

The Life Store, Cleveland Shopping Centre: The premises always looked empty and adhered to office hours. Again, a huge amount of funding was being put into the premises, without any evidence of benefit.

It was suggested that practices have meetings with their Health Visitors/Midwives to forge better relationships with them and to let them know what services the practice has to offer to patients.

It was **AGREED** that the LMC would design a mechanism for doctors to report their concerns.

08/09/12.3 LOCATION OF NEW PRACTICES / HEALTH CENTRES

It was not known exactly where the Redcar & Cleveland or Eston health centres were going to be located. It was anticipated that Eston would be as near to Low Grange Health Village as possible, and may be open next year.

Practices catering for Skelton will be devastated by the opening of a new surgery there.

08/09/12.4 ADVERTISING

Practices are allowed to advertise their services without saying they are better than any other practice. Details have to be factually correct and must not disparage other practices. Practices can state the areas they cover and services they offer.

08/09/12.5 INTERESTED PARTIES

Concern had been raised by East Cleveland GPs regarding possible conflict of interest where a GP was involved in several different areas of primary care.

It was noted that north of the river, former members of the PEC together with a former NT Director had set up a private company to run a PMS practice.

Members were concerned that GPs, and others, were placed at risk of allegations of potential breaches of trust, probity and corporate governance, for example, when they are privy to information in another capacity.

The Secretary understood that PCTs are supposed to abide by the code of practice in the Companies Act in terms of members declaring an interest in topics under discussion. It was **AGREED** that :

- assurances be sought from PCTs as to how their corporate governance arrangements will guarantee that there is independence when allocating APMS practice bids, and that members declare an interest on topics in which they are involved; and
- advice be sent to GPs about declaring interests and making sure their interest are properly declared.

08/09/13 DH CONSULTATION ON DISPENSING DOCTORS/PHARMACY – WHITE PAPER

It was **AGREED** that support be given to the three dispensing practices in the area, and the LMC would formulate a response and pursue further.

08/09/14 CLINICAL DIRECTED ENHANCED SERVICES (DES) GUIDANCE FOR GMS CONTRACT 2008/9

The document was five months late. The advice encouraged PCTs to provide appropriate back-up services. There was concern that IT support was only available during office hours Monday to Friday.

It was **NOTED** that the LMC would be talking to PCT about the DES.

08/09/15 TEES HEALTH INFLUENZA PANDEMIC PLAN STEERING GROUP: FUTURE ARRANGEMENTS

An LMC nomination had been requested by Peter Kelly, with appropriate funding from the PCT, to attend 2-hour meetings at Board Room, Tower House on:

- Tuesday, 30 September 2008 : 12.30 – 2.30 p.m.
- Friday, 31 October 2008 : 9.30 – 11.30 a.m.
- Wednesday, 26 November 2008 : 2.00 – 4.00 p.m.

It was **AGREED** that the three LMC members who had previously attended the Flu Pandemic Panels (Dr Birch – Dr McMahon – Dr Ramaswamy) be nominated so that one of the three could attend the meetings on an availability basis, and the PCT be so informed.

08/09/16 ANY OTHER NOTIFIED BUSINESS

There was no Any Other Business to discuss.

08/09/17 RECEIVE ITEMS**08/09/17.1 Medical List****Applications:**

<u>Effective Date</u>	<u>Name</u>	<u>Partnership</u>	<u>Practice Area</u>
6.8.8 <i>6 months locum cover for maternity leave</i>	Dr A Elliot-Smith	Dr Beeby & Partners	M PCT
11.8.8 <i>Salaried GP</i>	Dr A J Mehta	Dr Bolt & Partners	H PCT
11.8.8 <i>Salaried GP</i>	Dr D R Bannar-Martin	Dr Contractor & Partners	NT PCT
8.8.8 <i>Salaried GP</i>	Dr Y G Soni	Dr McGowan & Partners	NT PCT
11.8.8 <i>Salaried GP</i>	Dr A Micklethwaite	Dr Wood & Partners	M PCT
1.7.8 <i>Partner. Notification only just received</i>	Dr S Veeraswamy	Dr Bhattacharyya & Partners	R&C PCT
1.7.8 <i>Partner. Notification only just received</i>	Dr A Gongloor	Dr Bhattacharyya & Partners	R&C PCT
11.9.8 <i>Salaried GP</i>	Dr S R Shenoy	Dr Saha & Partners	R&C PCT
1.9.8 <i>Salaried GP</i>	Dr S Sayammagaru	Dr Brash & Partners	H PCT
17.8.8 <i>Returning following 24 hour retirement.</i>	Dr B S Chaudhry	Dr Chaudhry & Dave	M PCT
1.10.8 <i>Change in status from S(PCT) to partner</i>	Dr J B Howe	Dr Brash & Partners	H PCT
1.9.8 <i>Partner</i>	Dr J Hameed	Dr Lone & Partners	R&C PCT

2.10.8 Dr K M Barker Dr Davidson & Partners R&C PCT
Returning following 24 hour retirement

Resignations:

<u>Effective Date</u>	<u>Name</u>	<u>Partnership</u>	<u>Practice Area</u>
8.8.8 <i>Salaried GP</i>	Dr A R Holmes	Tithebarn Medical Centre	NT PCT
15.8.8 <i>24 hour retirement. Returning 17.8.8</i>	Dr B S Chaudhry	Dr Chaudhry & Dave	M PCT
30.9.8 <i>24 hour retirement. Returning on reduced commitment 2.10.8</i>	Dr K M Barker	Dr Davidson & Partners	R&C PCT

RECEIVED.

08/09/17.2 Determination that an area is/is not a controlled locality

Ref Minute 08/03/7

Letter from Contractor Administration Team Leader, NEFHSA, Poole House

“Following receipt of a request from the Local Pharmaceutical Committee under Regulation 31 of the NHS (Pharmaceutical Services) Regulations 2005 to consider whether the areas comprising the Hart and Throston Wards of Hartlepool should continue to be classified as rural in nature (a Controlled Locality), the Hartlepool PCT Pharmacy Panel at its meeting on 1 May 2008 considered the results of the consultation carried out in accordance with the requirements of regulation 31 (4) and (5).

Having considered:

- The local environment
- Employment patterns
- Size of the community
- Overall population density
- Transportation
- Responses received as part of the consultation process

the Panel determined that the area comprising Hart Ward, Throston Ward and the adjoining area east of a line connecting the junction between Hart Lane and Merlin way **should no longer be determined rural in nature.**

The PCT is in receipt of an application for inclusion on the List from Norchem Healthcare Limited. There will be no further consideration of that application until the final determination of any appeal received by the FHSAU within the designated time period.”

RECEIVED.

08/09/17.3 General Practitioners and Forensic Medical Examinations

Letter from Superintendent Ian Richards, Head of Community Services, Cleveland Police

(Patients being directed by police to their GP to document injuries)

“Thank you for your letter of 27 March 2008, in respect of the above matter. First of all let me apologise that this situation has arisen again. I note your comments outlined in your letter and assure you I will take steps within Cleveland Police to both inform officers of the agreed procedures, and ensure we don't encounter this issue in the future. I trust this matter can now be resolved.”

RECEIVED.

08/09/17.4 Documents sent to GPs and/or Practice Managers since the last meeting on 15 July 2008

July LMC Minutes (28.7.8)

Baseline Assessment & Extended Hours (1.8.8)

NHS Connecting for Health - GPSoc Update ENGLAND ONLY (5.8.8)

Advert - Vacancy: Salaried GP, Redcar - Hartlepool (5.8.8)

Focus on .. the Corporate Manslaughter Act (5.8.8)

Interim seniority figure (5.8.8)

Letter to all GPs (from BMA) (5.8.8)

WARNING: NovaChannelAG and others (14.8.8)

Clinical waste (two separate emails) (19.8.8)

MMR Catch-up Programme (26.8.8)

Advert: Locum - Normanby Medical Centre (2.9.8)

RECEIVED.

08/09/17.5 Report the receipt of:

GPC News 1 – Friday, 18 July 2008 (*available at www.bma.org.uk*)

RECEIVED.

08/09/17.6 Date and time of next meeting

Tuesday, 14 October 2008, at 7.30 p.m. in the Committee Room, Poole House,

RECEIVED.

There being no further business to discuss, the meeting closed at 8.47 p.m.

Date:

Chairman