



Cleveland Local Medical Committee

Chairman: Dr I Bonavia
Vice Chairman/ Medical Director/Asst Secretary: Dr J-A Birch
Secretary: Dr J T Canning
Development Manager: Ms J Foster
Office Manager: Ms C A Knifton

First Floor
Yarm Medical Centre
Worsall Road
Yarm
Stockton-on-Tees
TS15 9DD

LMC office email: christine.knifton@tees.nhs.uk
Web: www.clevelandlmc.org.uk

Tel: 01642 745811
Fax: 01642 745812

Minutes and report of the second Annual General Meeting of Cleveland LMC Limited commencing at 7.15 p.m. on Tuesday, 16 September 2014 at The Maureen Taylor Conference Suite, Stockton Riverside College, Harvard Avenue, Thornaby, Stockton on Tees TS17 6FB.

Present:

Dr I Bonavia (Chairman)	Dr S H M Arifulla	Dr W J Beeby
Dr M Betterton	Dr J-A Birch	Dr A Boggis
Dr J T Canning	Dr G Chawla	Mrs V Counter
Dr R Craven	Dr H El-Sherif	Dr I Guy
Dr J Hameed	Dr E K Mansoor	Dr R McMahon
Dr T Nadah	Dr R Roberts	Dr O Sangowawa
Dr S Selvan	Dr P Singh	Dr R Singh
Dr M Speight	Dr H Waters	Dr D White
Ms A Wilson	Dr C Wilson	

In attendance: Ms J Foster : Development Manager
Mrs C A Knifton : Office Manager

14/09/1 APOLOGIES

Apologies had been **RECEIVED** from Dr K Ellenger, Dr J Gossow, Dr C Harikumar, Dr M Hazarika, Dr M Hulyer, Dr N Miller, Dr B Posmyk and Dr A Thornley.

14/09/2 MINUTES OF THE MEETING HELD ON 15 July 2014

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

14/09/3 MATTERS ARISING FROM THE MINUTES OF PREVIOUS MEETINGS

There were no matters arising.

14/09/4 ANNUAL ACCOUNTS OF CLEVELAND LMC LIMITED as at 31.03.14

Members had been sent copies of the audited annual accounts. No questions were raised and the accounts were **ACCEPTED**.

14/09/5 GP HEALTH

The Secretary explained that in light of the donation CLMC was making to GP Health, it was felt appropriate to ascertain how the service was running. 22 consultations had been undertaken (not known how many people this covered) since April 2014 and GP Health reported a lack of uptake. CLMC had notified GPs about the confidential anonymised service available covering psychiatry / counselling / psychology / CBT / mentoring / occupational health.

Discussion centred around:

- Was CLMC getting value for money
- If money is not being spent should it be returned to CLMC
- After another quarter, if uptake not improved, should CLMC seek to terminate the donation
- Should service be made available to Practice Managers / senior practice staff / practice nurses
- Was it a small number of people siphoning through the system again
- GP Health was similar to an insurance policy – to be there in case it was needed
- Are GP Appraisers aware of GP Health? The service could be promoted via GP Appraisers whilst undertaking appraisals
- The service could be promoted via GP Appraisers Conference taking place in November
- Is uptake slow because GPs are worried funding will be terminated and they will be left unaided
- GPs may not have taken on board that GP Health is available to them – should it be advertised more
- Service could be advertised in Time In / Time Out sessions
- Ali Wilson offered to promote GP Health through H&S CCG newsletter.
- Henry Waters also offered to promote the service through the ST CCG newsletter
- Are GPs utilising their own GP rather than accessing GP Health
- GP Health going to initiate a survey to gauge possible reason for lack of uptake – is there a possibility of using someone else's questions for the survey
- Undertake a very short and anonymised CLMC survey asking various questions including: Do you know GP Health exists / Why are you not accessing GP Health / What services need to be covered by GP Health

It was **AGREED** that more factual information would be sought from GP Health as to the numbers of people being treated and this would be presented at the November LMC meeting.

14/09/6 APMS REVIEW CONSULTATION

The Development Manager had sent the consultation documents to practices, (as had NHSE), but not many responses had been received at the LMC office in order to formulate a constructive LMC response. The proposal was that five Tees APMS practices would close covering over 8,000 patients and a further three practices (one of which will replace two practices) being re-procured in Tees. Can other practices cope with the number of former APMS patients registering with them and did they have the capacity to take them?

Comments received included:

- Uncertainty / instability for patients - Hemlington APMS practice not closed yet but already patients registering with other practices
- Darzi practices were government-led and set up at great cost and financially supported whereas existing practices only receive £70+ p.a. per patient
- Darzi practices did not reach the anticipated list size after six years
- It was felt there were sufficient practices in Redcar to take patients from Langbaugh Medical Centre APMS practice

- APMS practice patients had different expectations from those registered with GMS/PMS practices i.e. 8.00 a.m. – 8.00 p.m. access and may have been run by Nurse Practitioners
- Practices simply do not have the staff to undertake the vast amount of accurate summarising required for the large number of patient notes
- Better planning by the Area Team was vital prior to an APMS practice closing – Area Team not informing local practices of what was happening with APMS patients
- Where is APMS funding going to go - is it going back into primary care or being used to top up AT/NHSE deficits
- What is going to happen to the premises space the APMS practices are occupying
- Capacity in Stockton is of grave concern and the added pressure of the Stockton APMS practice closing causes major problems for practices who were taking on patients when other practices were struggling to manage capacity
- Skelton APMS practice closed with 900 patients causing severe difficulties for the nearest existing practice – no planning by the AT for the work involved in registering / summarising patients records
- If one practice is willing to register all the former APMS patients in that area, why do the AT insist patients register with practices of their own choosing
- Problems may arise with flu jabs and immunisation planning when APMS patients start to register with new practice – Public Health should be made aware of this as practices may not have sufficient vaccine for the newly registered patients
- APMS patients do not understand what is happening whilst consultations are taking place
- Closing then re-procuring APMS practices is confusing and disruptive for patients – will patients return to re-procured practices
- Is there any possibility of having 'floating summarisers' to assist practices when registering patients
- What happens to APMS patients in the violent patient scheme (two of the practices proposed for closure operate the Violent Patients Scheme for that area)
- What will the impact be on walk-in centres
- Any possibility of APMS practices providing patient summary and list of medications to new practice
- There may be a delay of 6 – 8 weeks before records are received by new practice – patient safety concern
- Possible delays in treatment whilst practices wait to receive patient records – patient safety concern
- Can new practice contact APMS practice to discuss patient treatment – dependent on APMS practice still being open

A PMS doctor whose practice had used the Development Manager's negotiating skills, recommended that practices contact her in order to speak to the AT and attempt to get a relaxing of the PMS threshold for six months, as well as the practice talking to the AT itself. This still leaves the problem of accurately summarising the patient notes.

Dr Waters said that if the LMC had any suggestions as to realistic ways of managing the situation in the best possible way, then CCGs would support such views. The AT had also advised the LMC that they would consider positive proposals to support practices. Ms Wilson said H&S CCG were involved in the consultation and she would take some of the comments into account and would also welcome other views.

The Development Manager would formulate responses to the consultation based on comments made.

NOTED.

14/09/7 PMS REVIEW - Update

The Development Manager had sent a holding statement to practices. The PMS review is on hold at the moment. The review has not stopped, it is simply on a national pause. The pause has been caused because different areas had negotiated different transitional timescales ranging from 2 – 7 years. Local negotiations have been stopped and a national transitional timescale may be implemented of, say, 2 - 4 years – though this was not definite. CLMC had negotiated a 6 year deal but this may no longer be possible. As soon as CLMC hear from the Area Team, practices will be notified. Practices were advised to work as if budget changes were going to commence as of 01.04.15.

NOTED.

14/09/8 REPORTS FROM REPRESENTATIVES

No reports received.

14/09/9 MEETINGS ATTENDED BY LMC SENIOR OFFICERS (since LMC Board Meeting on 15.07.14)

22.07.14	Succession Planning Meeting @ LMC – John Canning / Iain Bonavia / Julie Birch / Janice Foster
23.07.14	£5 per head meeting with ST CCG @ NOHV – Janice Foster
24.07.14	Transferring Primary Care conference @ Manchester – Janice Foster
31.07.14	Primary Medical Care Assurance meeting @ Darlington – Julie Birch
05.08.14	Urgent Care Project Group @ Billingham – Janice Foster
06.08.14	Tees 111 Clinical Gov meeting @ Teesdale House – Janice Foster
06.08.14	PMS Review Meeting with DDT AT @ Darlington – John Canning / Janice Foster
08.08.14	ST CCG commissioning intentions event @ Community Hall, Middlesbrough – Janice Foster
11.08.14	Seasonal Ailment Scheme @ Teesdale House – Janice Foster
12.08.14	Practice Nurse Training DDT AT @ LMC – John Canning / Janice Foster
14.08.14	Tees Medicines Gov Group @ Billingham – Julie Birch
18.08.14	Sharing backroom staff, Lesley Curren, NECS @ LMC – Janice Foster
19.08.14	Patient Participation Group meeting @ Redcar – Janice Foster
21.08.14	Integration Partnership Board @ NOHV – Julie Birch
01.09.14	Tees Flu Group @ North Tees Hospital – Janice Foster
02.09.14	H&S CCG Urgent Care project Group @ Billingham – Janice Foster
03.09.14	CCG/PPG Meeting @ Coatham Surgery – Janice Foster
03.09.14	ST CCG AGM @ Eston City Learning Centre – Janice Foster
09.09.14	ST CCG/CLMC Liaison Meeting @ NOHV – Janice Foster / Julie Birch
11.09.14	Local Pharmaceutical Committee Chair & Chief Officer re Commissioning @ LMC – Janice Foster
11.09.14	Tees Medicines Management Meeting @ Billingham – Julie Birch

NOTED.

14/09/10 ANY OTHER NOTIFIED BUSINESS

**14/09/10.1 CQC Open Meeting : Holiday Inn, Washington : Thursday, 4 September 2014
Hosted by Gateshead & South Tyneside / Sunderland / Newcastle & North
Tyneside LMCs**

The LMC Chair + 1 other GP from Tees had attended this evening meeting which was about the responsibilities that contract signatories have with respect to CQC inspections. He asked if members were interested in CLMC holding such an event?

A member mentioned that a colleague had attended a CQC meeting with a view to becoming a CQC doctor and found some of the Practice Managers and Nurses talking about making other Practice Managers very upset during their visit and seeming pleased with this outcome, as if they wanted to make trouble during practice visits. Dr Canning asked for more details, if possible, and enquiries would be made of the colleague.

Members did not express an interest but mentioned it would be useful to receive a guide / myth buster containing up to date information.

NOTED.

14/09/10.2 Out of Area Visiting

IMPORTANT POST MEETING NOTE: The information below was correct at the time of the meeting on 16.09.14, however, NHS England deferred the process to January 2015

The Secretary explained that as from 01.10.14 the rules changed concerning out of area visiting. The new rules **do not** apply to existing patients who move out of the area and want to remain registered with the practice – the practice is obliged to visit them. If an existing patient moves out of the area you can remove them under the existing regulations.

Only someone who wishes to register with the practice and is outside the practice area can be told you will not visit them.

A practice is entitled to refuse to accept a new patient who does not live in their area who wishes to register with the practice.

Immediate and Necessary Treatment applies to anyone. There are walk-in centres across the country that people can attend if they are out of the area. Nothing has been set up by NHSE to facilitate home visits to those people registered near their place of work in another area.

NOTED.

14/09/11 RECEIVE ITEMS

14/09/11.1 Medical List

Applications:

<u>Effective Date</u>	<u>Name</u>	<u>Partnership</u>	<u>Practice Area</u>
06.08.14 <i>Salaried GP.</i>	Dr L E Falcus	Tennant Street Medical Practice	Stockton

01.10.14 <i>Partner.</i>	Dr G Chawla	The Dovecot Surgery	Stockton
01.09.14 <i>Partner.</i>	Dr S Zaman	Alma Medical Centre	Stockton
08.10.14 <i>Returning after superannuation break.</i>	Dr M M Hinman	Alma Medical Centre	Stockton
01.09.14 <i>Salaried GP. APMS practice.</i>	Dr W U Zakariya	Stockton NHS Healthcare Centre	Stockton
01.09.14 <i>Partner.</i>	Dr A L Woolder	Coulby Medical Practice	Middlesbrough
15.09.14 <i>Salaried GP.</i>	Dr S N Akowuah	The Endeavour Practice	Middlesbrough
01.09.14 <i>Salaried GP.</i>	Dr H A Tahir	The Garth Surgery	Langbaugh
06.08.14 <i>Salaried GP.</i>	Dr T A Bielby	The Green House Surgery	Langbaugh
11.08.14 <i>Partner.</i>	Dr L B Jardine	Brotton Surgery	Langbaugh
01.07.14 <i>Partner.</i>	Dr S R Lord	Hillside Practice	Langbaugh

Resignations:

<u>Effective Date</u>	<u>Name</u>	<u>Partnership</u>	<u>Practice Area</u>
04.09.14 <i>Taking superannuation break. Returning 8 October 2014.</i>	Dr M M Hinman	Alma Medical Centre	Stockton
30.06.14 <i>Resigned. Partner.</i>	Dr S N Akowuah	Hillside Practice	Langbaugh

RECEIVED.

**14/09/11.2 Change of GP name
Communication from Contractor Services, DDT Area Team**

Please note that Dr C J Lynch working at Queens Park Medical Centre, Stockton, has married and will now be known as Dr C J McTernan.

RECEIVED.

**14/09/11.3 Change of Practice name
Communication from Contractor Services, DDT Area Team**

Please note the following change of name for a GP practice wef 9 June 2014:

Previous Name	New Name
Dr Syed's Practice	North Shore Medical Practice
Endurance House	Endurance House
Clarence Street	Clarence Street
Stockton on Tees	Stockton on Tees
TS18 2EP	TS18 2EP

RECEIVED.

**14/09/11.4 Closure of Branch Surgery @ Endurance House, Clarence Street, Stockton
Communication Elm Tree Surgery**

Elm Tree Surgery has received approval from the Area Team to close their branch surgery in Endurance House, Clarence Street, Stockton with effect from 31 August 2014. Elm Tree Surgery will continue to operate from their main surgery at 51 Westbury Street, Thornaby TS17 6NP.

RECEIVED.

14/09/11.5 Report the receipt of:

GPC Newsletter 2 – Friday, 18 July 2014 - available on www.bma.org.uk
GPC Newsletter 3 – Friday, 8 August 2014 - available on www.bma.org.uk
GPC Newsletter 4 – Friday, 22 August 2014 - available on www.bma.org.uk

RECEIVED.

14/09/11.6 Date and time of next meeting

**Tuesday, 18 November 2014 : 7.00 p.m. : The Maureen Taylor Conference Suite,
Stockton Riverside College, Harvard Avenue, Thornaby, Stockton on Tees TS17 6FB.**

RECEIVED.

There being no further business to discuss, the meeting closed at 8.12 p.m.

Date: Chairman: