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Secretary: Dr J T Canning Worsall Road
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Minutes and report of Cleveland LMC Limited commencing at 7.56 p.m. on Tuesday, 10 March 2015 at Norton Education Centre, Junction Road, Norton, Stockton on Tees TS20 1PR

Present:	Dr I Bonavia (Chairman)	Dr S H M Arifulla	Dr W J Beeby
	B M B II I	D 7 A D' 1	

Dr M Betterton Dr A Boggis Dr J-A Birch Dr G Chawla Dr A Cooke Dr J T Canning Mr S Donlan Mrs V Counter Dr R Craven Dr H El-Sherif Dr K Ellenger Dr S Gandhi Dr J Hameed Dr M Hulver Dr E Mansoor Dr J Murray Dr R McMahon Dr N Miller Dr T Nadah Dr B Posmyk Dr R Roberts Dr S Selvan Dr P Singh Dr R Singh

Dr M Speight Dr J Walker

In attendance: Ms J Foster : Chief Executive

Mrs C A Knifton : Office Manager Mrs J Jameson : Office Administrator

The Secretary thanked the Chairman for his services to the Committee as this would be his last meeting. He had been appointed as Associate Sub-Dean for Primary Care at Newcastle University and would be stepping down from the Committee at the end of the meeting.

15/03/1 APOLOGIES

Apologies had been **RECEIVED** from Dr I Guy, Dr H C Lamprecht, Dr O Sangowawa, Dr A Thornley, Dr D White and Dr C Wilson.

15/03/2 MINUTES OF THE MEETING HELD ON 13 January 2015

These has been circulated to members and, with the addition of Dr R Craven in Apologies for the last meeting, were **AGREED** as a correct record and duly signed by the Chairman.

15/03/3 MATTERS ARISING FROM THE MINUTES OF PREVIOUS MEETINGS

15/03/3.1 GP Health

Minute Ref: 14/09/5: 14/11/4: 15/01/3.1
To be discussed 'below the line' with GP elected members only

It was **AGREED** that this item should be discussed 'below the line' with GP elected members only, at the end of the meeting.

15/03/3.2 PMS Review – Update – Janice Foster, CLMC Chief Executive

Every practice had notified the Area Team of their decision to opt for the 7-year pace of change and becoming GMS, with the exception of one practice that would remain on PMS for the time being. The three specialist practices would be going through a full PMS review though the Area Team had not decided how to proceed with the review and CLMC will be supporting those practices through the review.

Practices had been provided with templates to complete to populate the new contracts, but nothing further is expected to be received from the Area Team until the new contracts are released nationally. The next step will be how CLMC, the CCGs and practices manage the changes in the 7 years.

NOTED.

15/03/4 GENERAL PRACTICE SERVICE REVIEW – Janice Foster, CLMC Chief Executive

Now that PMS practices were becoming GMS practices, all practices in Tees could work together when looking at reviews and what services practices have provided in the past, what services can be provided in the future and which services can no longer be managed because of capacity or funding. The CLMC Chief Executive will be writing to all practices within the next month to ascertain what services are currently being provided in general practice that may be outside the general contract prior to discussions with practices / LMC / CCG.

ST CCG has been very helpful and supportive in discussions with CLMC on the general practice service review and are currently working on the detail of specifications to support practices in carrying out this work.

CLMC is not aware as to whether H&S CCG has held any such discussions; there has been no CLMC involvement if this was the case, so no feedback was available, but it was hoped that the CCG would make contact in the not too distant future so that we could work together.

It was commented that funding for a phlebotomy service provided outside general practice was being withdrawn in North Tees wef 1 April. Where are phlebotomy services going to go?

CLMC Chief Executive explained that this was one of the things 'above practice' unless it is covered specifically within a specification / service to which a practice is contracted to provide. CLMC do not know what is being withdrawn and this was the first time they had heard of the imminent deadline by which the service would be removed. Practices were asked to forward such notifications to the CLMC office (janice.foster@tees.nhs.uk / fax to 01642 745812) so that we could enter into discussions with CCGs prior to implementation of service withdrawal.

Concern was raised regarding Salaried GPs and their contract when a practice changes from PMS to GMS; SGPs were being offered contracts inferior to the BMA model. The CLMC Chief Executive said she would include this on a list of items for practices to check when moving to new GMS

contracts and would continue to recommend the BMA model Salaried GP contract or an equivalent to it as a basic standard.

What is the definition of core services? The Regulations for all list based services describe essential services as:

Services required for the management of its registered patients and temporary residents who are, or believe themselves to be:

- (a) Ill, with conditions from which recovery is generally expected;
- (b) Terminally ill; or
- (c) Suffering from chronic disease

delivered in the manner determined by the practice in discussion with the patient.

The Committee was reminded that one of the 2004 agreements was that if it is an enhanced service anywhere, it is a core service nowhere.

NOTED.

15/03/5 REPORT FROM ANNUAL OPEN MEETING 15/03/5.1 Consider Motions to LMC Conference – deadline 23 March 2015

The Secretary **AGREED** to circulate motions to members, once formulated, for approval prior to being submitted to BMA London later this month.

15/03/6 CLMC WORKFORCE SURVEY – Janice Foster, CLMC Chief Executive

The Chief Executive said she would circulate the workforce survey which concentrated on recruitment and retention. The survey showed a shortage of GPs and nurses with a lot of people looking to retire / reduce their hours.

The survey has been shared with CCGs and could be of assistance in relation to GP retention and general practice / primary care strategy planning. ST CCG has discussed some of the results with the CLMC Chief Executive who has been involved in the primary care strategy development and in considering how we can work together going forward to ensure that general practice is in the best possible place to respond to changing needs and demands.

NOTED.

15/03/7 PERFORMANCE ADVISORY GROUP / PERFORMERS LIST DECISION-MAKING PANEL - FUNDING Letter from Ken Megson, Secretary, NE & C Regional LMC

"As I am sure you are aware, the new national guidance for membership on these two groups has changed recently. An LMC representative is no longer part of the PAG, as a quorate member, but is allowed to attend as an observer. Within the PLDP they require a discipline specific practitioner to be quorate, and again this did not need to be an LMC representative but the Area Team is keen for this to continue.

In addition, they have reduced the funding from £75/hour down to £50/hour, but it is now expected that reading/preparation time will be paid as well as travel expenses.

At the last regional meeting we tasked the Area Team to find some funding to top-up the nationally agreed funding so that we can continue with LMC representatives at both the PAG and PLDP.

In addition, there is mandatory training for quorate members. The Area Team has identified 3 LMC representatives, as quorate members, and will pay them a maximum of £350/day for the training despite locum costs exceeding that.

Whilst we have made representations to the Area Team to try and find proper funding to cover this, I am not hopeful and, as requested by the regional committee, I've attempted to price up the cost of LMCs 'topping up' to maintain the present input into these important groups.

Of course we have had to make some assumptions based upon the number of hours preparation and attendance at meetings, and also we have assumed the number of panels per year and this could be greater or lesser depending on how many of our colleagues are in trouble.

We all know that the workload of the PAG is much greater than the other group and therefore I've assumed 2 hours reading time and 3 hours attendance for the monthly meetings. For the PLDP I've assumed 1 hour reading and 2 hours attendance and similarly for the panels that are held.

In pounds, shillings and pence, this means that for the PAG we would need about £4,500 per year, the PLDP £900 per year and the panels £900 per year. This gives a total cost to the LMCs of approximately £6,300 per year or £900 per LMC if we divide this equally.

I am sure that we can shave some of these costs off, as occasionally the PLDP does not sit or the number of panels and time of meetings may be shorter.

In addition to the identified 3 quorate members (Bill Westwood, Roger Ford and myself) who attend most of the PLDP meetings and panels, we have another 4 GPs that take part. Kamal Sidhu and Jane Irwin attend the PAG, Judith Neaves and Michael Hanley attend the occasional PLDP in the Cumbria region. Payments for these to attend as a one off cost will be in the region of £4000 for locum costs etc. This amounts to about £575 per LMC.

We are persisting with our view that the Area Team should fund this completely, but I don't think they will step out of line with national diktat, and therefore we may need to make a decision whether we pull all LMC representatives out of these meetings or fund it ourselves.

Personally I believe that an LMC representative should be at these meetings, and this role would be expected of us by our constituent GPs and therefore is a legitimate call on LMC funds.

I would be grateful for an early reply, but think that as a minimum the LMCs need to fund the GPs who attend the PAG but be aware of any representative being out of pocket due to their attendance at other meetings."

The Vice Chairman spoke on the item. It would be beneficial for a GP to be present at both the PAG and PLDP meetings. This would result in a maximum contribution from CLMC of £900 p.a. towards attendance and £575 p.a. towards training of those GPs = £1,475 p.a. CLMC was looking for agreement in principle for providing this funding but \underline{not} to be shared equally amongst the LMCs in the region as some were much larger than others.

Members were informed that the Area Team had decided to use one of the Deputy Medical Directors as the discipline specific member of the PLDP! This made it even more essential to have funding in place to have an independent GP member on the panel.

It was **AGREED** in principle to provide the funding but that it should be costed on the size of population within each LMC.

15/03/8 PERFORMANCE ADVISORY GROUP / PERFORMERS LIST DECISION-MAKING PANEL – GP MEMBERS FOR THE PANELS Extract from email from Ken Megson, Secretary, NE & C Regional LMC

"Can LMCs ask for more GP volunteers to attend 2-day training for PLDP and also about attendance at the PAG meetings,"

It was **NOTED** that Dr R McMahon / Dr R Roberts / Dr S Selvan / Dr J Hameed / Dr H El-Sherif expressed an interest in attending training for PAG / PLDP meetings.

15/03/9 LMC MILEAGE & ATTENDANCE ALLOWANCE

Attendance Allowance is currently £46.05 per hour and will be increased in line with DDRB as at 1 April 2015.

Mileage is currently 45p per mile in line with Inland Revenue guidance, and will remain in line with Inland Revenue guidance as at 1 April 2015.

NOTED.

15/03/10 REPORTS FROM REPRESENTATIVES

No reports from representatives had been received.

NOTED.

15/03/11 MEETINGS ATTENDED BY LMC SENIOR OFFICERS (since LMC Board Meeting on 13.01.15)

15.01.15	H&S CCG co-commissioning & primary are quality : Sue Greaves & Karen Hawkins @ LMC – Janice Foster
16.01.15	LMC/DDT Area Team Liaison Meeting @ Darlington – Janice Foster & Julie Birch
21.01.15	ST CCG Urgent Care Meeting @ NOHV – Janice Foster
23.01.15	PMS Review meeting with Merrol Hay @ Ravenscar Surgery – Janice Foster
27.01.15	H&S CCG QIPC meeting @ Billingham – Janice Foster
28.01.15	Meeting at Newlands Medical Centre – Janice Foster
02.02.15	Middlesbrough Health Scrutiny Panel @ Middlesbrough Town Hall – John
	Canning
04.02.15	Medical Assurance Group Meeting @ Darlington – Julie Birch
04.02.15	RCGP Federations Event @ Newcastle – Janice Foster
05.02.15	Update meeting with Craig Blair @ CLMC – Janice Foster
05.02.15	CLMC PMS Review Meeting @ Norton Education Centre – Janice Foster / Julie
	Birch
09.02.15	BMA NE Regional Council meeting @ Holiday Inn, Washington – Julie Birch
10.02.15	H&S CCG Systems Resilience meeting @ Billingham – Janice Foster
10.02.15	PMS catch-up with Sue Greaves @ H&S CCG – Janice Foster
11.02.15	ST CCG Leadership Group @ NOHV – Janice Foster
11.02.15	ST CCG Extraordinary Systems Resilience Group @ NOHV – Janice Foster
12.02.15	Tees Medicine Governance Group @ Billingham – Julie Birch
17.02.15	Normanby Medical Centre @ Normanby- Janice Foster
18.02.15	ST CCG Urgent Care Meeting @ NOHV – Janice Foster

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19.02.15	ST CCG QiPC @ NOHV – Janice Foster / Julie Birch
24.02.15	H&S CCG QiPC @ Billingham – Janice Foster
26.02.15	ST CCG Integration Programme Board @ NOHV – Julie Birch
03.03.15	Systems Resilience Group @ H&S CCG, Billingham – Janice Foster
05.03.15	ST CCG PETS 2015/16 @ NOHV – Janice Foster
09.03.15	ST Primary Care Strategy @ CLMC - Ian Reeve / Janice Foster
10.03.15	ST CCG liaison meeting @ NOHV – Janice Foster / Julie Birch

NOTED.

15/03/13 ANY OTHER NOTIFIED BUSINESS

There was no notified business.

15/03/14 RECEIVE ITEMS

15/03/14.1 Medical List

Applications:

Effective <u>Date</u>	<u>Name</u>	<u>Partnership</u>	Practice <u>Area</u>
19.01.15 Salaried GP.	Dr A Farzam	Woodbridge Practice	Stockton
06.03.15 Returning from	Dr N Robinson superannuation break.	Norton Medical Centre	Stockton
01.04.15 <i>Partner.</i>	Dr M O Myint	Queenstree Practice	Stockton
01.04.15 <i>Partner.</i>	Dr M Y S Kukah	Woodbridge Practice	Stockton
17.04.15 Returning from	Dr J T Canning a superannuation break.	Endeavour Practice	Middlesbrough
01.08.14 Salaried GP. Al	Dr S K Singh PMS practice.	Resolution Health Centre	Middlesbrough
02.02.15 Salaried GP. Ai	Dr A F L Adedapo PMS practice.	Resolution Health Centre	Middlesbrough
02.03.15 Salaried GP.	Dr O F Taiwo	The Green House Surgery	Langbaurgh
01.02.15 Salaried GP.	Dr A Carrasco	Park Avenue Surgery	Langbaurgh

Resignations:

Effective <u>Date</u>	<u>Name</u>	<u>Partnership</u>	Practice <u>Area</u>
31.05.15 Retiring. Partn		Thomaby & Barwick Medical Group	Stockton
	Dr N Robinson Inuation break. Returnin	Norton Medical Centre og to work 06.03.15.	Stockton
16.02.15 Resigned. Part		Woodbridge Practice	Stockton
31.03.15 Retiring. Partn	Dr B P Corbett er.	The Village Medical Centre	Middlesbrough
02.04.15 Taking superari	Dr J T Canning Inuation break. Returnin	Endeavour Practice og to work 17.04.15.	Middlesbrough
31.03.15 Resigned. Part	Dr R V McMahon iner.	Coulby Medical Practice	Middlesbrough
31.03.15 Resigned. Sala		Bentley Medical Practice	Langbaurgh
31.03.15 <i>Partner.</i>	Dr H Mohammed	Normanby Medical Centre	Langbaurgh
05.06.15 Retiring. Senio	Dr M J Betterton or Partner.	Hillside Practice	Langbaurgh
31.05.15 Resigned. Sala		South Grange Medical Group	Langbaurgh

RECEIVED.

15/03/14.2 Report the receipt of:

GPC Newsletter 11 – Friday, 16 January 2015 - available on www.bma.org.uk GPC Newsletter 12 – Friday, 20 February 2015 - available on www.bma.org.uk

RECEIVED.

15/03/14.3 Date and time of next meeting

Tuesday, 12 May: 7.00 p.m.: The Maureen Taylor Conference Suite, Stockton Riverside College, Harvard Avenue, Thornaby, Stockton on Tees TS17 6FB.

RECEIVED.

Co-opted and non-Committee members left the meeting at 8.25 p.m.