

# **HIGHLAND LOCAL MEDICAL COMMITTEE**

Tuesday 16<sup>th</sup> June 2015  
Board Room, Assynt House, Inverness at 3.10pm

## **AGENDA**

### Timings

- 3.10pm 1. Welcome and apologies - **for information**
- 3.15pm 2. Confirmation of Minutes of the Meeting held on 21<sup>st</sup> April 2015 - **attached for approval**
- 3.20pm 3. Matters Arising from the Minutes (not otherwise on the agenda)
- 3.25pm 4. Committee Membership
- 4.1 GP Sub and LMC Members – **attached for information**
- 4.2 GP Sub and LMC Associated Committees – **attached for information**
- 3.35pm 5. Update from other groups - **for information**
- 5.1 GP Reps/GP Sub – **anything to report from the Chairman**
- 5.2 Chairman's Group Meeting 2<sup>nd</sup> June 2015 – meeting postponed date TBC
- 5.3 RCGP Update – Miles
- 5.4 SGPC – **April Update Attached**
- 5.4 Any other groups
- 3.45pm 6. Heads UP/Issues
- 6.1 Locality Negotiations – Committees Thoughts on Moving Forward
- 6.2 GP Page on Intranet – Update Claire - **SBAR Attached**
- 6.4 Pre Op Assessment – Update from AMC - Lorien
- 4.10pm 7. SGPC Roadshow 26<sup>th</sup> May 2015 – Debrief Jonathan
- 4.15pm 8. Health and Social Care Integration (HSSCC/IJB) - Chris
- 4.25pm 9. LMC Policy and Administrative Matters
- 9.1 GP Counselling Service – Update Lindsay
- 9.2 Cameron Fund – **Letter Attached**
- 9.3 LMC Website – Password Protected Area – Update Chris
- 4.35pm 10. Motions for Conference – Standing Item
- 4.40pm 11. Verbal Update UK Conference – Iain
- 4.45pm 12. Management Unit Issues
- 12.1 Argyll and Bute Issues
- 12.2 North and West Issues
- 12.2.1 Follow up With Patient with MGUS in the Community – **SBAR Attached**
- 12.2.2 Housebound Patients – **SBAR Attached**
- 12.2.3 Flu Vaccinations - **SBAR Attached**
- 12.2.4 Late letters for Clinics – **SBAR Attached**
- 12.2.5 Durness Practice - Anne
- 12.3 South and Mid Issues – None Notified
- 12.4 Sessional / Locum Issues
- 12.4.1 Rheumatology Cover – Update Lorien Cameron Ross

12.5 GPs in Training Issues – None Notified

13. AOCB

14. Date of Next LMC Meeting – 25<sup>th</sup> of August 2015

15. Dates for LMC Meetings 2015

- 20<sup>th</sup> October 2015
- 15<sup>th</sup> December 2015

## **HIGHLAND LOCAL MEDICAL COMMITTEE**

**Tuesday 16<sup>th</sup> June 2015  
Board Room, Assynt House, Inverness at 3.10pm**

**Present:** Anne Berrie, Chris Williams (VC), Claire Robertson, Dave Gillman, Fiona Neal (VC), Ishbel Hartley (VC), Iain Kennedy, Jonathan Ball (Chair), Lorien Cameron Ross, Miles Mack, Neil Wright, Peter Von Kaehne (VC), Susan Hussey Wilson, Lindsay Dunn (notes)

### **1. Welcome and Apologies**

Apologies were received from Steve McCabe and Sheila Carbarns.

### **2. Confirmation of Minutes of the Meeting held on 21<sup>st</sup> April 2015**

**Peer reviews** – The proposal to replace QOF is peer-based, values driven. Lindsay will update the previous minutes.

**Action:** *Lindsay will update the minutes.*

The minute of the last meeting is otherwise accurate.

### **3. Matters Arising from the Minutes (not otherwise on the agenda)**

**Microbiology Swabs** – we have had no feedback from Andrew Evennett yet.

**Action:** *Jonathan will follow up on this*

**Argyll and Bute Contract Group** – Andrew attended this group but did not feedback to committee. He has now resigned from LMC. Peter attended the last meeting on behalf of LMC.

**Tenofovir prescribing and monitoring** – There are many policies appearing on the intranet including extra-contractual work for Practices which have not been consulted on/aged or ratified. This includes Tenofovir and clozapine. Part of the problem is that some GPs will do it thinking that it has been agreed by the Policies, Procedures and Guidelines Group or GP subcommittee. Even though Health Boards can use Enhanced Services to resource such work, these are now cash limited, and do not get round the basic issue that funding should come from secondary care to cover this secondary care managed treatment. Enhanced Services come out General Practice funding.

**Action:** *Sue to write about Tenofovir and to respiratory medicine*

**RCGP** - Miles reported that the pictogram has been superseded and will not be circulated.

### **4. Committee Membership**

#### **4.1 GP Sub and LMC Members**

This is the last meeting of this cohort. It looks like we have 3 rep vacancies which we will continue to look at between now and August.

#### **4.2 GP Sub and LMC Associated Committees**

Iain needs be removed from the information as ACF rep and Andrew Evennett needs to go on. Miles needs to be on Chairs group as he has appears to have been removed in error.

**Action:** *Lindsay to update the lists.*

### **5. Update from other groups**

#### **5.1 GP Reps/GP Sub**

- **Inverness midwife letter regarding vaccinations (plus other areas)** - Claire is not sure that it should just be accepted by HHB that midwives are continuing to refuse to vaccinate. This was supported by the whole committee. LMC are not really clear why HHB cannot sort this out. The problem is that pregnant women do not return for vaccinations, and because of this uptake is low increasing clinical risk unnecessarily. This was also raised by the 12 Practice forum who pointed out that Practices are hosting midwives in their buildings for free. We could consider raising a grievance or a datix or we could carry out an audit on vision. The picture in North Highland and Argyll and Bute is variable. This will be discussed as part of the new contract but that does not help us at the moment.
- **Administration of vaccinations to pregnant women**
- **Primary school flu vaccination**
- **Care home SLA**
- **PLT survey and plans for moving PLT forward update from NHS 24**
- **Drug monitoring and transfer of work from secondary care**
- **GP page on the intranet**
- **MS guidelines**
- **Golden hellos**
- **SGPC and Scottish government roadshow debrief**
- **Review of recruitment issues**
- **Durness**

## 5.2 Chairman's Group Meeting 2<sup>nd</sup> June 2015 – meeting postponed date TBC

We are looking to hold this meeting within the next couple of weeks.

## 5.3 RCGP Update

- **Workforce and Workload** - RCGP seem to be making some progress on the work planning issue. Miles can share the blueprint with us very soon.
- **Interface work** – Pilot work with pharmacies and RPIW work has been done locally.
- **Peer based Values driven** – Work is being done on this as an alternative to QOF.
- **National NHS Clinical Strategy** – We need to grow General Practice
- **NES** – RCGP are currently working on a Scottish returner scheme and the retainer scheme seems to be effective
- **Workforce Survey** – This is in the pipeline, please engage when it comes out.
- **Rural work** – This is moving along. There is a project being carried out where Community Hospitals are seen as community Generalists which is being trialled in Dunfermline and Stirling.
- **OOH Review** – Workshop looking at quality and IT communication. Overall theme is mirroring the direction of travel for the SGPC contract
- **New Contract** – RCGP broadly support this
- **Integration** – GP Clusters within Locality units seems to be accepted. This is likely to be similar to our current constituencies and peer referencing is really useful. Geography needs to be considered when talking about cluster areas in the new contract. It is not clear how LMC fits into the locality cluster picture. Probably the local LMC reps can report back to LMC, and vice versa from their local cluster group.
- **The Deep End** – Practices are doing useful work and are being supported by the College.
- **Curriculum** - The curriculum will remain pretty similar under the new contract. We will need to monitor this.

## 5.4 SGPC

Iain referred to the April summary that was attached to the papers. At a recent meeting, there was not one single thing that all GP reps at SGPC could unanimously agree to give up in the new contract. Pointing out how difficult it is to get GPs not to take on all new tasks. The proposal is to move from a contract for services to a contract of service and our Chief Executive was surprised to hear that Health Boards would be responsible for providing services.

## **5.5 Any other groups**

No other groups were discussed.

## **6 Heads Up/Issues**

### **6.1 Locality Negotiations – Committees Thoughts on Moving Forward**

We were going to discuss this at Chairs group but the meeting was cancelled. We do not have any solutions.

Peter (A&B) was recently in a negotiation situation alone and was met with opposition from the 5 people present. GP Sub agrees that reps need to be clear in advance as to what is being asked of them. If they are being asked to negotiate they need to be sighted in advance of the meeting and have 2 reps present. Single reps are not mandated to negotiate at a meeting.

***Action: Sue and Jonathan will discuss this outwith the meeting and will speak to Peter out with the meeting. They will speak to Mike and Joyce about how we can move this forward.***

### **6.2 GP Page on Intranet**

Nothing further was discussed.

### **6.3 Pre Op Assessments**

Nothing further was discussed.

## **7. SGPC Roadshow - 26<sup>th</sup> May 2015**

Claire has had some negative responses about the future contract from Constituents in Inverness. Constituents are encouraged to feedback to SGPC directly via the email link. There seems to be an acceptance that something radical needs to be done as General Practice is breaking. There has been a long standing problem of recruiting more GPs and also getting any help through the current system in terms of managing workload.

## **8. Health and Social Care Integration (HSSCC/IJB)**

There seems to be less and less people attending the meeting. Michael Foxley is Chairing the Finance and Performance Sub Committee. He is doing this as a Counsellor but it is helpful that he has a General Practice background.

A Children's Service plan for Care and Learning is coming out and it is accessible under [www.forhighlandschildren.org](http://www.forhighlandschildren.org)

There was an update on the Moray Firth Masterplan. HHB are looking on a room by room basis to consider how we can maximise the estates they have.

Updates were given from the different Management Units and these were fairly substantive reports.

## **9. LMC Policy and Administrative Matters**

### **9.1 GP Counselling Service**

We have all our Counsellors in place and the website has now been updated. This will be removed from the agenda.

## 9.2 Cameron Fund

The Cameron fund wrote to all LMCs to discuss alternative ways of providing resource to the Charity.

There are 3 options:

- Maintain status quo and give an amount annually which is not tax deductible.
- Levy deduction at source
- Add a small charity levy to the statutory levy. This would be an opt-in or opt-out system and would work out at about £8 per year per GP (as a tax allowable expense).

The Cameron Fund is a national body. We would need to work out the cost for Salaried and Sessional GPs and £5 would seem sensible.

Committee were supportive of moving forward with option 3.

**Action: Lindsay and Susan to move this forward.**

## 9.3 LMC Website – Password Protected Area

There is no movement with the website at present.

In terms of our Communication Strategy, we now have more than 70 followers on Twitter including the Chair of Highland Health Board, Primary Care Managers and many others. We have not used Twitter to campaign around particular issues but have used it to show we are not Inverness-centric and we are aware of issues going on across the whole of North Highland and Argyll and Bute.

Chris is hoping to have an update on the website within the next couple of months so this will remain on the agenda.

## 10 Motions for Conference – Standing Item

There are no motion suggestions from this meeting.

## 11 Verbal Update UK Conference

Iain gave a verbal update. Lorian and Chris attended as Highland LMC reps and Iain attended with SGPC. All LMCs across the UK are in attendance and Chris spoke well to a couple of motions. The main topics included workload and retention.

We tweeted throughout the conference and Chris has storified this and can give access to those that are interested.

Mary O'Brien from Tayside has been elected as Deputy Chair for next year.

We want to encourage Committee members to attend conference, delegates don't have to speak but can contribute in other ways such as Twitter, engaging in debate and flying the flag for Highland.

## 12 Management Unit Issues

### 12.1 Argyll and Bute Issues

No issues were raised.

### 12.2 North and West Issues

#### 12.2.1 Follow up With Patient with MGUS in the Community

A protocol has appeared in Haematology guidelines which has workload implications.

**Action: Sue will write to Haematology saying we have not agreed to do this. We are happy to discuss this if they want to attend GP Sub.**

**Action: Sue to feed back to Lucy.**

### **12.2.2 Housebound Patients**

This is quite variable as some Practices will do this and some Community Nurses will do this.

**Action: Sue to feedback to Silke**

### **12.2.3 Flu Vaccinations**

This is quite variable as some Practices will do this and some Community Nurses will do this. The fee agreed does not actually cover the cost of administering the vaccination, and certainly does not cover a home visit and the cost of administering the vaccination.

**Action: Sue to feedback to Silke**

**Action: Sue to write to Kate Patience Quate inviting her to attend GP Sub to help us understand roles and responsibilities.**

### **12.2.4 Late letters for Clinics**

Anne spoke to her SBAR and she is creating Datix reports for each delayed letter. Committee could take this to AMC and try and get it to ACF.

**Action: Anne to do SBARs for the other examples and send them to AMC.**

### **12.2.5 Durness Practice**

The GP retires at the end of June and Durness is getting merged with Scourie and Kinlochbervie. NHS Highland have now decided that they are not fully going to merge so as not to upset the patients so there will be two passwords for all clinical systems. Anne wants to either be the named GP or not and feels there is a grey area here. HHB wanted to transfer all the Patients into Anne's name and she is unhappy about this. Anne has a prescribing code but they also need a locum prescribing code. Patients in Durness need to be told of the changes to surgeries times. Anne does not want to operate a drop in surgery which currently happens in Durness.

### **12.3 South and Mid Issues**

No issues were raised.

### **12.4 Sessional / Locum Issues**

No issues were raised.

#### **12.4.1 Rheumatology Cover**

Nigel spoke to Linda Kirkland and Ian Scott put the issue to Rod Harvey and the message given to Lorien this afternoon is that NHS Highland has appointed a Consultant which should ease the issues within Rheumatology.

### **12.5 GPs in Training Issues**

No issues were raised.

## **13. AOCB**

### **13.1 Chasing Results and Onwards Referrals Secondary Care**

It would be helpful if we could have anonymised specific details.

**Action: Fiona to send this to Lindsay.**

Lorien is keeping a similar list for workload transfer.

**Action: Lorien will send this to Lindsay.**

The SBARs are really useful and bring issues to our attention.

### **13.2 Argyll and Bute GMS Contracts Group**

This was discussed under item 6.1

### **13.3 Medication Monitoring**

We will write to the respiratory clinic to say this has not been agreed.

**Action: Sue to write to the respiratory clinic.**

**Action: Sue to feedback to Alistair**

#### **Clozapine**

We still have to carry out Annual Reviews but a lot of the process would already be done. Lorien took this to 12 Practice Forum. GPs only have to do face to face reviews, contraception and cervical screening. This seemed to be a good offer. If patients do not turn up to clinics three times we can exception report this. If we have sent a third letter we will alert the clinic. It would be useful to find out what is happening around the Board area.

**Action: Lorien will find out from them is happening**

It was added in Argyll and Bute and is part of the Basket LES.

**Proposed Savings North and West** – The proposal is to save £100,000 from Enhanced Services and £200,000 from OOH. There are a couple of issues as there is some inequality in Enhanced Service funding due to the SAF formula they are calculated on.

**Action: Sue to write to Gill CC Ishbel for more information.**

### **14. Date of Next LMC Meeting**

The next meeting is on the 25<sup>th</sup> of August 2015.

### **15. Dates for LMC Meetings 2015**

- 27<sup>th</sup> October 2015
- 15<sup>th</sup> December 2015

**The meeting finished at 5.25pm**