**DUDLEY LOCAL MEDICAL COMMITTEE**

**www.dudleylmc.org**

 Dudley LMC

 c/o Atlantic House

Chairman Dr. Harcharan Singh Sahni Dudley Rd

 Lye Secretary Dr. Tim Horsburgh Stourbridge

Treasurer Dr. Vipin Mittal W. Midlands

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 Dudley LMC website – **www. dudleylmc.org**

 **Minutes 07/02/14**

**PRESENT**: Dr Singh Sahni (Chairman), Dr Horsburgh (Secretary), Dr Mittal (Treasurer), Dr Bhardwaj, Dr Dawes, Dr Khan, Dr Saroufeem, Dr Shather, Anna Nicholls (AT) and Dr Collins, Public Health.

**1. APOLOGIES**

Apologies have been received from Dr Plant, Dr Nancarrow, Dr Sulemanand Dr Handa.

**2. CONFIRMATION OF MINUTES**

The minutes of the meeting held on the 03/01/14 were confirmed and signed as correct.

**3. MATTERS ARISING**

3.1 LMC Constitution – The document which has been based on the BMA services template was previously emailed to LMC members for comment. No feedback from members has been received.Members agreed to sign up to the new constitution.

**Action:** Dr Horsburgh to circulate to Anna Nicholls for the AT.

**4. CHAIRMAN’S AND MEMBER’S COMMUNICATIONS**

4.1 QOF Variation Scheme – Members are been asked to participate in a scheme which commits the practice to establish protocols for sharing access to GP records between practices across each locality and with the new Urgent Care Centre. In addition, practices are expected to sign up to protocols once agreed and to continue to work towards the Quality Premium targets for dementia, AF and hypertension.

The LMC debated the issues surrounding obtaining patient consent for patient identifiable data to be used for the direct commissioning of healthcare by the CCG, including ensuring that data protection is not contravened as the financial consequences are not insubstantial. The requirement for a Read code to be allocated was highlighted and the danger of confusion with data.care codes noted. The potential problem of non payment to practices for health care delivered to patients who have declined to consent to the scheme and the difficulty of obtaining consent from patients that have not presented opportunistically were discussed. Practices cannot be expected to seek consent from patients that have not attended the surgery – CCG must resolve this issue if central government solution is not provided.

The LMC,in principle, supports the scheme.

**Action:** Anna Nicholls to send out list of retiring indicators.

Dr Horsburgh to write to Dan King regarding the concerns expressed by the LMC.

4.2 Payment for goodwill – Although the BMA and GPC have previously stated that there is no Goodwill Payment; an email is currently circulating asking GPs to add their signature to an e-petition “GPs must be allowed to have Goodwill Payments like other businesses.” The GPC does not support the sale of goodwill and LMC members supported this view.

4.3 Complaints Process – Dudley CCG are no longer buying a complaints service from CSU. New complaints received by Dudley CCG (not including NHS England cases) will be dealt with in-house.

**Action:** Dr Horsburgh to invite representatives from the CCG to a LMC meeting to explain the complaints process.

**5.** **CLINICAL COMMISSIONING GROUP**

5.1 WM LETB – No further update.

Feedback from BC LETC by Dr Dawes – Priorities over the next year will include care of older people, out of hours care, falls prevention and a volunteers proposal. The Physician’s Assistant role will be extended into primary care and student nurses are to spend a greater proportion of their training in primary care.

5.2 Interface Group – Next meeting to take place March 2014.

5.3 Primary Care Strategy- No recent meeting.

5.4 *Members News* –Available on LMC website.

5.5 Primary Care Development Committee – No feedback.

5.6 LES- The CCG will be implementing one standard contract to cover the entire LESs. No minimum requirements have been determined but may include the standard that the practice has an active Practice Participation Group, and that the full list of components of the LESs are provided by all practices.

The LMC discussed the issue that if small practices are unable to comply with all the prerequisites they could become disenfranchised and decide not to participate in any of the LESs to the detriment of patient care. Sharing the provision of the full range of LESs across a locality group seems a good way forward to preserve patient choice.

The LMC supports the use of a single contract but does not support the prerequisites discussed at the members meeting.

**Action:** Dr Horsburgh to write to the CCG to express concerns.

5.7 Physiotherapy waiting list initiative – Dudley CCG has agreed to invest in additional physiotherapy in order to reduce waiting times for patients.

5.8 Clinical Development Committee– No update.

5.9 Remote Care DES – Submissions need to be received by Dudley CCG and NHS England by 31/03/2014.

**6**. **CORRESPONDENCE FROM THE BMA & RCGP**

6.1 GPC Newsletter – On LMC website topics discussed included QOF scheme.

**7. CORRESPONDENCE FROM THE GPC WEST MIDLANDS / BCLMC Group**

7.1 The next Nuts and Bolts meeting will take place on 27/02/2013 with Steve Field.

Action – Flyer on LMC website

**8.** **CORRESPONDENCE** **FROM THE PCT, HOSPITAL TRUSTS & DH**

8.1 Pharmacy Applications The application for a no significant change relocation from Portway Pharmacy, 51A New Birmingham Road, Tividale B69 2JQ to Portway Lifestyle Centre, Newbury Lane, Oldbury B69 1 HE by Portway Healthcare LTD has been considered by the Pharmacy Services Regulations Committee and approved.

An application offering unforeseen benefits where premises are known has been received from Ridgacre Pharmacy Ltd for 83 Ridgacre Road, Quinton, B32 2TJ.

An application from Boots UK for a no significant change relocation from Unit 1, Moor Centre Brierley Hill DY5 3AH to Albion House, Albion Street, Brierley Hill, West Midlands DY5 3EE has been received.

8.2 Suspension by a regulator – The document which outlines the current Regulatory framework which, as drafted, requires NHS England to remove practitioners from the performers list where they have been suspended by their regulator is on the LMC website.

8.3 Primary Care Web – No action required by practices.

8.4 ‘Better Information means better care’ leaflets have been delivered to every household in England during January 2014.

8.5 Phasing out of the Minimum Practice Income Guarantee (MPIG) – Three practices in Dudley will be financially affected.

**Action:** Anna Nicholls to encourage affected practices to contact the LMC for support if required. The issue will be added to the agenda of the next Interface Group meeting.

**9.** **MISCELLANEOUS**

9.1 MTRAC – No update.

9.2 South Staffordshire Newsletter received.

9.3 Worcestershire LMC Newsletter received –County – wide GP federation discussed.

9.4 Walsall LMC News received .

**10. AOB**

 10.1 GP with Special Interest post to commence 17/02/14. Three days will be spent in general practice and two days in commissioning and engaging.

NEXT MEETING:Friday 7 March 2014, 12:45pm at Atlantic House, Dudley Rd, Lye, DY9 8EL.

Lunch will be provided.