**DUDLEY LOCAL MEDICAL COMMITTEE**

**www.dudleylmc.org**

 Dudley LMC

 c/o Dudley CCG

Chairman Dr. Harcharan Singh Sahni 2nd Floor

 Brierley Hill Health Centre Secretary Dr. Tim Horsburgh Venture Way

Treasurer Dr. Vipin Mittal Brierley Hill

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 **Minutes 06/05/16**

**PRESENT**: Dr Singh Sahni (Chairman), Dr Horsburgh (Secretary), Dr Mittal (Treasurer), Dr Bhardwaj, Dr Kanhaiya, Dr Nancarrow, Dr Prashara, Dan King (CCG), Anna Nicholls (NHSE), Dr Pitches (Public Health), Dr Abuaffan (Public Health).

**1. APOLOGIES**: Dr Plant, Dr Ahmad (GPC Black Country rep).

**2. CONFIRMATION OF MINUTES**

The minutes of the meeting held on the 014/04/16were signed as correct.

**3. MATTERS ARISING**

3.1 Future Proof Health (FPH) – The need for FPH to represent local GPs working together to provide services at scale was reiterated. The company was set up over a year ago, and although Nigel Grinstead, a management consultant, was brought in to assist in the process of establishing the company, FPH is still not in a position to bid for extensive services. Dr Sahni expressed the opinion that the Dudley CCG had encouraged local GPs into investing into FPH and should have provided better support and not put blocks in the system, such as requesting a change of board members, in order for FPH to develop to the stage of successfully procuring services which is to the advantage of all Dudley GPs.

Dan King (CCG) expressed the opinion that support had been offered by the CCG in the form of events to explore models used by other companies to generate income. FPH has to fulfil contractual conditions as will any company which the CCG uses to provide health care and currently FPH has not met the due diligence aspects and the pre qualification questionnaire needs that must to be fulfilled for this role.

The Dr Pitches , the public health representative, suggested that FPH could coordinate the contracts that they have with individual practices.

The overlap between FPH and the MCP model which is moving forward and will begin the procurement process July 2016 was highlighted.

**Action:** The LMC will encourage FPH to have an all members meeting to discuss the way forward.

3.2 Primary Care Development and the MCP model – The Primary Care Development Programme will have an investment of one million pounds. The LTC pilot projects are currently been evaluated and this may become a permanent contract. Only 8 out of 46 local practices have not signed up to the LTC model which is a voluntary variation of the GMC contract, these practices may subsequently miss out on additional investment outside the GMC core contract

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

4.1 GP and Health Visitor communication – To improve communications between primary care providers an agreed data set will be established and be expanded into a clear directive. The impact on GP workload was debated.

4.2 Immunisation Waiting Lists – legal advice - Dr R Morley ( Birmingham LMC ) has circulated a letter raising concerns regarding a DSA which will enable practice data on childhood immunisations to be shared. In order for practices to be advised that they can safely sign up to this, an expert legal opinion is required. Funding for this may be national, however if this is not the case Dudley LMC will fund the necessary legal advice.

4.3 Primary Care Support England (PCSE) – In March 2016 PCSE introduced a new medical records movement process for GP practices. Local issues include the failure of the drivers to provide identification or paperwork to confirm the movement of patient notes.

**Action:** Anna Nicholls to escalate concerns at NHSE.

4.4 CQC – The GPDF has undertaken to fund a Judicial Review concerning CQC inspections.

**5.** **CLINICAL COMMISSIONING GROUP / NHS ENGLAND**

5.1 The Primary Care Commissioning Committee – No issues.

5.2 Clinical Development Committee – The proposed Child and Adolescent Mental Health Service (CAM-HS) Tier 3 Plus has been approved, the service will provide outreach and support in the home to reduce hospital admissions.

5.3 Excluded Patients Scheme – The scheme has now been finalised, patients are required to book an appointment at the Urgent Care Centre.

5.4 Outstanding CDC Rating – Eve Hill Medical Practice has been the first Dudley practice to achieve an ‘outstanding’ rating.

**Action:** Dr Horsburgh to write a letter of congratulations to the practice on behalf of the Dudley LMC.

**6. PUBLIC HEALTH**

6.1. Update – Public Health has difficulty accessing routine data including health checks and medicines management. A data sharing agreement is to be circulated and will allow PH to support with intelligence management tools; Dr Darby is the lead GP.

Dudley Council received a poor Ofsted report, therefore a commissioner from the Department of Education has been put in place to assist the Council develop an improvement plan.

Difficulties engaging with the local Roma community discussed.

**7. CORRESPONDENCE FROM THE BMA / RCGP**

7.1 GPC News – See LMC website.

7.2 Workforce Feedback – According to The Lancet workloads in general practice have increased by 16% over the last seven years, although the total number of GPs rose over the study period this actually represents a 1% fall in the doctor: patient ratio.

7.3 Taskforce Report – The GPC has considered and broadly welcomed the report of the GPC Reform Task Group which contains positive proposals to increase accountability, create more efficient and effective working and to improve the functioning of the LMC/GPC.

**8.** **CORRESPONDENCE FROM WM RLMC / BMA BC DIVISION**

8.1 Update on GP Forward View– In a letter to Dr Chaand Nagpaul from the WMRLMC three “wants” from the government have been proposed: the removal of hurdles to the Performers List, a breathing space in CQC, Appraisal and Revalidation and a limit on the numbers of patients that can be safely dealt with in a day.

 **9.** **CORRESPONDENCE** **FROM NHS TRUSTS, DH, GMC**

 9.1 Pharmacy Applications – NHS England has approved a change of ownership application for T.D Pharma Ltd at 178 Stourbridge Road, Holly Hall, Dudley DY1 2ER by Knights Pharmacy and a no significant change relocation to 28 Pound Road, Oldbury, B68 8LY by BD healthcare Ltd. An application has been received for a no significant change relocation of premises within a HWB’s area by Murrays Healthcare, PO Box 226, Stourbridge, DY8 1WT.

9.2 Community Education Provider Networks Stakeholder Engagement Event –A national event was held to debate how different models function.

**10. MISCELLANEOUS**

10.1 Walsall, S. Staffordshire and Worcester Newsletters- received.

10.2 Clinical Leadership Training – Clinical Leadership and Management Course for General Practice to be held at Keele University Tuesday 14 and Wednesday 15 June 2016.

10.3 Black Country LMC/CQC Meeting – To be held 2 June 2016.

NEXT MEETING: **Friday 3 June 2016**, 12:45pm at Atlantic House, Dudley Rd, Lye, DY9 8EL.

Lunch will be provided.