**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 02/06/17**

**PRESENT**: Dr Singh Sahni (Chairman), Dr Horsburgh (Secretary), Dr Mittal (Treasurer), Dr Bhardwaj, Dr Dawes, Dr Nancarrow, Dr Prashara, Dr Abuaffan (Public Health), Jacquelyn Horwood (Practice Manager rep).

**1. APOLOGIES**: Dr Plant, Dr Ahmad (GPC Black Country rep), Jacqui Jones (Practice Manager rep).

**2. CONFIRMATION OF MINUTES**

The minutes of the meeting held on the 05/05/17were signed as correct.

**3. MATTERS ARISING**

3.1 Primary Care Development Steering Group (PCDSG) / MCP Developments – Discussions have been held with the lawyer Robert Breedon ( Gowlings )regarding the possible organisation forms for the MCP,which could be as a limited liability company. A meeting will be held with potential providers to discuss their ideas of the legal structure of the organisation followed by a collaborative meeting during the evening on 20th June. The PQQ stage of the procurement process commences 12/06/2017; the options for individual practices as part of the MCP model include remaining as independent GMS contractors ( Partial Integration ), becoming employees of the MCP ( Full Integration) or a combination of the two positions. Dr Suleman and Dr Horsburgh are to lead on developing the Integration Agreements options; the final document will not be formalised for several months. Dan King and his team continue to visit all practices to find out what the issues are for each individual practice and for the GP members of each practice to feed relevant information into the Integration Agreement developments. National information regarding the process is available; the LMC will continue to debate the relative merits of options and the Integration Agreement.

3.2 Personal Independence Payments – Dr Ahmad has escalated this issue to the GPC and will feedback at next LMC meeting. Dr Singh Sahni to forward letter to Dr Horsburgh which is used in his practice given to patients regarding assistance GPs are able to provide and fees for work when patients wish to make an appeal against a decision made in regard of a PIP claim.

**Action:** Dr Horsburgh to circulate letter to LMC members for use.

3.3 NHS Property Service, Lease Issues – Tenants in a building operated by NHSPS should have received a Heads of Terms for new leases at the premises. Two types of lease are available, the Fully Insuring and Repairing Lease (FRI) being whereby the tenant has responsibility for **all** external and internal maintenance or the Internal Repairing Lease (IRI). NHSPS is encouraging practices to take out FRIs, however the advice from the CCG is **not** to sign a FRI lease. Practices should act together to agree on any new lease and negotiate standardised utility costs; financial support is available for legal advice if required. Phil Cowley is the CCG contact for these matters.

An application has been made by the Ridgeway Surgery for the sale and lease back of their current premises, the lease is the same value as the notional rent payments. In addition there is a pharmacy attached with a 12 year lease. The LMC has been asked to consider whether the proposal is required to support the delivery of the services that the provider has agreed to provide under the GMS contract and whether the proposal represents value for money. Although it was acknowledged that the premises are not of a size to provide services in line with the care model or Health Infrastructure Strategy of the CCG, the LMC will support Ridgeway’s application as it was decided that it would offer both value for money and support service delivery.

**Action:** Dr Horsburgh to draft a document to be sent to the CCG.

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

4.1 DMARD – Approval has been given by the Pharmacy Committee for DMARDs to be commenced in primary care. Initiation of treatment should be the responsibility of a specialist, once the patient is stabilised on treatment, and then the GP can prescribe the drugs over the longer term within the guidance of an effective shared care agreement. Duncan Jenkins is drafting a business plan which will include nurses or pharmacists, to continue the monitoring of these patients with complicated regimes in primary care that was previously carried out in the hospital. The LMC made it clear that no shift of work would be accepted by General Practice without appropriate shift in resources to support these patients and their GPs. The LMC will review the Business Case when available.

4.2 Extended Access – Dudley CCG is required by NHSE to commit towards improving patient access to primary care services, CCGs have been funded to achieve this ( £6/patient ) . This issue has been discussed at the locality meeting, Dr Gee and Jo Guthridge are investigating the skill mix of clinicians required to provide the service, types of appointments offered and options if GPs are unable to provide the service; Dr Dawes raised the option of the involvement of Future Proof Health if the service was put out to tender.

The BMA remains opposed to seven day working in primary care without adequate workforce.

4.3 Dudley LMC Accounts – Dr Mittal presented the accounts, which were then signed off. Dr Horsburgh questioned the need for a levy increase as the GPDF are proposing a levy increase this year – Dr Mittal will keep reviewing the issue.

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

5.1 The Primary Care Commissioning Committee – The last meeting was held on 26 May 2017 - issues discussed included reports from the Primary Care Operation Group – full mins on the CCG website.

5.2 Clinical Development Committee – The last meeting was held on 17 May 2017, issues discussed included a draft policy to support the decommissioning of services and interventions, as a basis for consultation.

5.3 Sustainability and Transformation Plans – A clinical reference group has been established to facilitate pathway development; Dr Horsburgh will update the LMC as this work progresses. The dominance of the acute services was noted.

5.4 Notification to Medical Directorate - Dr Kiran Patel has circulated a letter setting out when incidents require immediate notification to the medical director including inappropriate physical or sexual examination accusations.

**6. PUBLIC HEALTH**

6.1. Update – The number of health checks is to be increased, with weekly target numbers set, the difficulty engaging patients in the process was acknowledged, support is available for practices experiencing difficulty achieving the targets.

The integrated healthy lifestyle service is moving forward, Solutions4Health is working with local health partners providing a single point of access.

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

7.1 GPC News – See LMC website

7.2 GPFV GP Transformational Board –CCG Primary Care reps including Dr Lewis are attend the various sub-groups of the Board to ensure funding delivery.

7.3 GPFV - Regional event feedback can be obtained from Dr Horsburgh.

7.4 LMC Conference Feedback – This is available on the LMC website.

7.5 RCGP Scientific Foundation Board – This is now open and seeking new members.

7.6 Practice Resilience Programme – An event is to be held in Birmingham on 26/06/2017 to share learning from the RCGP Peer Support Programme and includes a presentation from Dr Geddes, NHSE Director of Primary Care Commissioning.

7.8 GPDF levy – The GPDF are to postpone the increase in levy from 6 pence to 7 pence until the Directors have reviewed the projected expenditure.

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

8.1 WMRC – The meeting was held on 01/06/2017 in Birmingham – mins awaited

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

9.1 Pharmacy Applications – Nil.

**10. MISCELLANEOUS**

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

**11. AOB**

11.1 Dr Prashara raised the issue of achieving immunisation targets in practices with difficult to reach populations

due to the demographics.

NEXT MEETING**: Friday 28th July 2017, 12:45pm at Brierley Hill Health and Social Care Centre, Orange Room, CCG offices, (second floor).**

Lunch will be provided.