



Salford and Trafford Local Medical Committee
Suite 3, 6th Floor, St James's House, Pendleton Way, Salford M6 5FW
E-mail: vsimenoff@nhs.net or kerrie.rowlands@nhs.net

**Minutes of the Trafford Sub-committee
held on Wednesday 11th Feb 2015 at Sam Platts, Old Trafford**

PRESENT:

EXECUTIVE MEMBERS

Dr I Maclean (IM)
Dr C Kelman (CK)

MEMBERS

Dr A Freeman (AF)
Dr J Chandy (JC)
Dr S Johnston (SJ)

CO-OPTED MEMBERS & OBSERVERS

Mr J Swift (JS) Trafford CCG
Ms A Ferguson (AF) Mastercall
Ms M Buck (MB) Mastercall
Mr C Booth (CB) (representing
Pm's Trafford South)
Mrs D Darlington (DD)
(representing PM's Trafford North)
Ms A Overton (AO)
Mr J Helgason (JH)- Salford and
Trafford LPC
Ms J Crean (JC)
Ms K Thornton (KT) Trafford Council
Ms J Taati (JT) Trafford Council

IN ATTENDANCE

Mrs V Simenoff (VS)
Mrs K Rowlands (KR)

APOLOGIES

Dr A Probhakaran (AP)
Mr A Raja (AR)
Ms D Eaton (DE)

AGENDA - PART A

1. Declaration of interest

There was none declared.

Special Business

Krista Williams Diabetes Project Lead & Dr Clive Marchi Clinical Lead Diabetes attended the meeting to update the LMC on progress to date on developing a Diabetes Strategy for Trafford. There was a short presentation which included information on the National Diabetes Audit 2012 - 2013 and the proposed future service model. Further detail can be found in the slides inserted here for reference:



LMC Diabetes
Slides.pptx

Dr Marchi agreed to come back to the LMC as the project develops.

2. Approval of last month's minutes

No further amendments were suggested and the minutes of the meeting held on Weds 14th Jan 2015 were approved.

3. Review of actions from the last meeting

No	Subject	Action	Who
1	Practice data collection There was discussion in the meeting around the detail being requested from practices on members of staff, such as DOB and NI. It was felt that whilst the provision of data was compulsory under the Health & social care act, identity of individuals was not protected and therefore did not comply with data protection	(DD) agreed to highlight this to the data commissioner on behalf of the PM group and to check with the practice defence organisation. Action carried forward from the last meeting. Done. Action closed.	(DD)
2	Unsafe Discharge - an issue regarding unsafe discharge from Wythenshawe was raised in the meeting. (GL) requested examples to be forwarded to her	Forward details to (GL) who would raise with the Trust Action closed	(SJ)
3	Deprivation of Liberty (DOL)m	Add to Feb Agenda to be discussed further. Done Action closed	LMC

4. Deprivation of Liberty (DOL)

(VS) introduced this agenda item by saying that DOL comes into place for people who are in a form of care and do not have the freedom to move around to protect their interests. The legislation states that when this safeguard is in place and a person dies the death must be treated as unexpected i.e. the police informed and an ambulance should be called. The LMC had spoken to John Pollard who had agreed that this was an unfortunate consequence of the legislation.

Discussion followed and suggestions made as to how this should be dealt with in the future. Members were concerned that families may not fully understand what happens when this safeguard is put in place. Kylie Thornton (KT) agreed to highlight the issue to Debbie Goldstone and to ask her to attend the next LMC **Action (KT)**

5. Area Team Update

There was no update available.

6. Council Update

(KT) provided the following update:

((KT) began by apologising that there had been no representative from the council at the last meeting in January.

Locally Commissioned Service - details of the specification changes had been agreed and there was one contract for all now in place. This would go out shortly. (KT) re-iterated that there was no need to re-sign all specifications for practices currently delivering these services.

LARC - a report had been written for the Service Leadership Team which was due to be discussed the following day after the meeting and the LMC would be informed of the outcome.

R U Clear - this service was being discussed at a GM level. There was the potential for the service to be withdrawn. Further work on the contract was on hold until the outcome of discussion was clear. This prompted discussion on the cost impact on the wider health economy of withdrawing this service. (KT) agreed to feed this back.

IRIS - (general practice-based domestic violence training, support and referral programme for primary care staff) The tender process has been completed and an announcement would be made soon as to who the

supplier would be. It was expected to be around June/July before this programme would be rolled out across 17 practices in the first year.

PPV visits - (Annual Post Payment Verification Audit and Quality Visits)
These had been carried out and the majority of those practices that were randomly selected were 'green'. There had been one practice that had been awarded 2 reds and the detail would be shared with (VS) outside the meeting.

Self assessment and Customer Satisfaction Survey Options paper - feedback had been requested from members and as yet this had not been received. **Action LMC to follow up**

(KT) concluded her update by saying that contracts would be for 2 years.

7. Trafford CCG Update

Jason Swift (JS) attended the meeting and gave the following update:

Co-commissioning - The Area Team had supported proposals and there was to be a National evaluation in February. It was expected that final decisions would be made in March. (JS) said that the CCG were working with the Area Team to define areas of future responsibility. It was expected that during year one the pace of change would reflect the work undertaken to define roles and function of both CCG and NHS England for each work area. PMS Reviews – CCG and NHS England would be working together under co-commissioning for the PMS review work however NHS England still hold statutory contractual responsibility. However the expertise sat in NHS England at the moment. Therefore the detail of how this could be done still needed to be worked through. The LMC expressed concern that PMS practices that have their funding reduced over a four year period to bring funding in line with GMS. Practices experiencing these reductions have expressed the view that with regret they would most likely need to lose staff who were recruited to fulfil the original PMS contract. Concern was expressed that losing staff at a time when additional work is being transferred to general practice would be regrettable. (JS) was asked if there was a way of slowing down the pace of change locally. There was also a query regarding continued payment for PMS practices who were doing work over and above their GMS contract. It was understood by (JS) that where this could be proven and that services being provided over and above core GMS work that this would be practice mitigation for funding to be retained. Clarity would be sought and communicated following NHS England/CCG meetings **Action JS**

CQC - 13 practices had been through the process and the CCG were supporting the practice that had been put into special measures.

Locality development - the lack of patient choice in Sale was being addressed and short term non-recurrent funding had been made available to provide support

8. Cardiology Locally Commissioned Services

There was discussion around the payment for carrying out the above service. It was agreed in the meeting that this had been undervalued and that the LMC should respond formally to Dr Marik Sangha. Action (VS)

9. Healthier Together/Primary Care Strategy

There was no further update this month.

10. PMS Practices.

Discussed as part of CCG update agenda item 7.

AOB

- Alison Overton (AO) raised the issue of tape validations. This used to be under the DVS account, with EMIS and historically paid by PCT/NHS, which covered LV & PCS practices. When practices migrated to WEB it came under TVS / GPSOC account and therefore purchase orders were not raised by NHS England. This had resulted in invoices not being paid. (AO) felt that practices should not have to cover the cost of validation when they have been urged to go across to WEB by CCGs without the knowledge that a) the system does not back up all the data and b) that practices would have a cost to pay. The LMC agreed to look into this again **Action LMC**
- Michaela Buck gave the following update on behalf of Mastercall:

Mastercall had been approached by a practice in special measures to provide support.

There had been an item in the press recently regarding an issue with fraud carried out on Mastercall by a member of their staff. Mastercall are carrying out their own internal investigation. (MB) said they would be prepared to share their learning from this event with GP practices to try to

reduce the likelihood of such a thing happening elsewhere. This was welcomed by the LMC .

Unfortunately there was not enough time to cover two other items of AOB and therefore Vivienne Simenoff sent out an email after the meeting which is copied here for reference:

1. GPC election

Our current GPC rep, Dr John Hughes will not be re-standing for the role representing Manchester, Stockport and Salford and Trafford – and as such nominations are being sought. Anyone who would like to stand for this position would need to be nominated by the LMC. I am aware that the current Chair of the Assoc of GM LMCs and Hon Sec of Manchester LMC, Dr Tracy Vell intends to stand. Numerically there are more GPs in Manchester than in Salford and Trafford and it looks like the vote will not be split there – if more than one GP stands there will be an election requiring us to send information on all our GPs through to the electoral commission.

If you would like to put your name forward please can you let me know. The process is as follows:

Candidates must be:

- GPs who contribute to the voluntary levy of an LMC in the constituency and who provide personally or perform NHS primary medical services for a minimum of 52 sessions distributed evenly over six months in the year immediately before election (5 March 2015); or
- GPs who are on the doctors retainer scheme and who contribute to the voluntary levy of an LMC in the constituency; or
- medically qualified secretaries of an LMC in the constituency.

Nominations should be made on forms available from the GPC at the British Medical Association, BMA House, Tavistock Square, London WC1H 9JP (tel: 020 7383 6375) and on the BMA website, www.bma.org.uk/gpcelections

Each nomination form must be signed by the candidate, five proposers and a representative of the LMC who can confirm that the candidate and proposers contribute to the voluntary levy.

Nomination forms and statements in support of candidature should be returned to:

Holly Higgs, GPC, British Medical Association, BMA House, Tavistock Square, London WC1H 9JP by no later than **5pm on Thursday 5 March 2015**. Please note that it is the candidate's responsibility to ensure that GPC have received their completed nomination forms and statements.

Please get in touch if you have any questions.

2. Motions for the LMC Conference.

These need to be submitted to the Agenda Committee by 23rd March at the latest – so we need to agree them at the next Committee meeting. Motions drafted so far are:

- Conference believes that Integrated Care systems with hospital trusts as lead providers pose the greatest individual threat to current general practice since the creation of the NHS.
- Conference believes that Integrated Care systems with hospital trusts as lead providers are the wrong solution to the right problem.
- Conference believes that it is vital for there to be care taken of the mental and physical health of GPs currently working in General Practice with a fully functioning, funded, national scheme.
- Conference believes that the removal of funding from PMS practices at this point of time is ill judged and likely to destabilise practices when general practice is already experiencing major capacity issues.
- Conference believes that it is vital to ensure equality of funding for Docman backup for all GP practices.

Please can you let Vivienne Simenoff have other topics that you would like to include remembering that conference motions determine the direction of GPC policy, and also get coverage in the press

DATE OF NEXT MEETING

Trafford subcommittee – 2015 Meeting dates
1-2.30pm, preceded by lunch from 12.30pm. Held at Sam Platts, Trafford Wharf Road, Old Trafford M17 1EX
Weds March 11th
Weds April 22nd
Weds May 20th
Weds June 10th
Weds July 15th
No meeting in August
Weds Sept 16th
Weds Oct 14th
Weds Nov 11th
Monday December 14 TH evening JOINT FOR ALL MEMBERS OF BOTH SALFORD AND TRAFFORD COMMITTEES at Sam Platts, Trafford Wharf Road, Old Trafford, M17 1EX

No Part B