



Salford and Trafford Local Medical Committee 5th Floor, Sentinel
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**Minutes of the meeting of Trafford Subcommittee, held on March 16th 2011 at
Sam Platts, Trafford Wharf Road, Old Trafford.**

Present:

Executive

Dr R Mene (in chair)

Dr I Maclean

Dr Nigel Hyams

Asit Raja - Lostock Pharmacy
and LPC rep

Alison Overton - Practice
Manager, Boundary House

Gina Lawrence - Pathfinder
Trafford GP Commissioning
consortium lead

Dr Simon Musgrave - Medical
Director, Trafford General

Members:

Dr Mark Jarvis

Dr Colin Westwood

Deborah Darlington - PM

Urmston Group practice

Christian Booth - PM bodmin
Road

Apologies

Dr Raymond Wilson

Dr C Marchi

Mr S Belk

Dr G Patel

Observers:

Ms Sharon Woodward - Trafford
PCT

Ms Charlotte Edwards - Trafford
PCT

Ms Cathy Cox- Trafford PCT

Ms Andrea Ferguson –
Mastercall

In attendance

Mrs V Simenoff

PART A

Dr Mene welcomed Dr Simon Musgrave to the meeting as well as Gina Lawrence and Cathy Cox. He expressed sympathy on behalf of the Committee to the Japanese nation for the devastation caused by the recent earthquake and subsequent tsunami.

1. MINUTES OF LAST MEETING

Minutes of the last meeting held on February 16th were recognised as an accurate record subject to amending Sharon Woodward's name on Page 4.

2. MATTERS ARISING

Update on the walk in centre. Dr Mene asked Andrea Ferguson to update the Committee. She said that drawings are now approved and back with the hospital. Dr Hyams said that Salford PCT is closing its Walk in Centre. He said that there will be a sustained public education programme to encourage appropriate use of NHS emergency and out of hours services. A discussion ensued about the new QOF points .

Trimming list sizes

Dr Jarvis said that under GMC Terms and conditions practices are required to ensure that they do not have ghost patients.

It was agreed to check with LaSCA to see what their procedures are and to ensure that they are not writing out to patients during summer holidays. It was also hoped to ensure that they flag up with practices which of their patients have not responded and will be removed.

Dosette prescribing

Dr Mene said that the LMC continues to work with the PCT and LPC on this issue. Asit Raja said that there is a problem in Trafford where Social Services are about to publish new guidance to say that home helps will not give medication unless they are in dosettes. He said that their role should be to prompt the patient to take medication not to administer it, and as such dosettes may not be necessary. He said that pharmacists cannot conduct DDA assessments, they can only conduct pharmaceutical assessments. He said that the LPC is working with the PCT, the prescribing advisor and social services to commission a repeat prescription system. He said that his optimism is tempered by the current changes and financial pressures. He said that the assessment tool is the key part of the LPC policy that is supported by the LMC, but pharmaceutical indemnity does not cover it.

Action: The LMC and PCT will revisit this issue, and continue to try to find a solution. Asit Raja asked to invite Social Services to the next

LMC/LPC meeting, and asked that Ami Lepoiz attend the next LMC/PCT meeting.

Appraisal toolkit funding.

The PCT had noted the comments of the LMC on this issue, but Dr Jarvis said that no decisions had been reached on this as yet.

CQC event

Mrs Simenoff said that the LMC is awaiting guidance on CQC from the GPC. It hopes to be able to run an event for practice managers later in the year.

LMC/PCT LIAISON MINUTES.

Minutes of the last meeting held were tabled. Dr Mene thanked Cathy Cox for her assistance to the LMC in her previous capacity at the PCT and noted that she was now attending as the Acute commissioning lead for TCC

ICATS

Sharon Woodward confirmed that changes to the ICATS discharge summaries will be implemented across Greater Manchester.

Choose and Book component 2

It was noted that the PCT does not want to pay as there was no questionnaire carried out and therefore no evidence that the work was done. The LMC made the point that whilst there was no evidence that the work was done, there is also no evidence that the work was not done. Gina Lawrence agreed to take back this view to the PCT and to discuss this further.

Effective Use of Resources (EUR policy)

Members expressed their grave concerns about the medico legal impact on GPs if they implement the PCTs policy. Concern was also expressed about the implications on GPs to try to enforce such a policy.

Gina Lawrence said that EUR has always existed, although this may not have been widely shared outside Hospital Trusts. She said that there had been a recent publication of guidelines on what should be in it. She said that Trafford had used NICE guidelines on what

should be included, as well as local policies. Each individual piece of work had been taken through CEC, led by GPs. She said that GPs still had the option of not following the Trafford guidelines if:

- By exception
- Limited number
- Or not included.

Gina Lawrence said that concerns had been raised about hernia and hip replacement scoring systems in the guidance and that Dr Nigel Guest and Trafford Commissioning consortium (TCC) will look at the issues raised. She said that this will then be reconfigured to cover these points and to make it easier to read. She said that there will be an expectation that GPs do not refer unless there is exceptionality which will still apply for each case. She said that EUR s are policed carefully in acute trusts as they know that they will not be paid for the work if the cases are not approved and accepted into EUR. She said that most of this work is already stopped by GPs or comes via the commissioning team for approval. She said that it is always better to stop the referral early in the process rather than build up unnecessary expectations in the patient.

Dr Mene expressed concern about deferred referrals, and the potential pitfalls for any GP suggesting to colleagues that they do not refer.

It was noted that Mike Barker is undertaking a large piece of public engagement, using a citizens jury of 1,000 patients looking at the preferred use of resources. Gina Lawrence said that the letter she had signed with Dr Nigel Guest on this issue had not been about compromising clinical care, but about slowing down the rate of referrals.

Dr Mene said that if any GP is unsure about referring a patient it is better to work with TCC and the PCT, but to seek LMC advice.

4. WHITE PAPER UPDATE

5. TRAFFORD COMMISSIONING CONSORTIUM – UPDATE

Dr Mene thanked Gina Lawrence for attending the LMC and said that he hoped that TCC and the LMC would be able to work collaboratively.

Gina Lawrence said that the TCC's pathfinder status so its programme of work has been accelerated. It is setting up governance arrangements, as well as looking at deploying PCT staff and the required skills needed. Staff are being assigned in shadow form to support the consortium. Transitional plans have been received from the StHA, including 3 pages of high level work for the organisations development. This includes key indicators one of which is to demonstrate commissioning from what is being termed as "a wider market". TCC will have to explain why they are not using a wider market if they do not. She said that outline paper will go to the Board in April to support the consortium structure. She said that she will share a portfolio with Dr Guest and they will both sit on the Board.

Dr Mene said that if there are elections to the Board the LMC will be pleased to conduct these.

6. GMS CONTRACT UPDATE AND DES 2011-2012.

It was noted that the DES had still not been published, but the outline guidance had. It still remained unclear what will constitute a patient participation group.

[Gina Lawrence, apologised and left the meeting].

A member asked if a practice could stop providing out of hours now and return to the scheme once it becomes clearer. Dr Mene said that he believed this to be possible

7. ROYAL WEDDING BANK HOLIDAY

Sharon Woodward confirmed that that 29th April has been called as a bank holiday to celebrate the Royal Wedding and as such Mastercall will be covering practices.

8. DRUG USER LES

Sharon Woodward confirmed that practices will be able to provide this LES if they see fewer than 12 patients in a year.

9. PREPARATION AND ASSURANCE FOR 2011/12 SEASONAL INFLUENZA IMMUNISATION PROGRAMME

Guidance from the newly appointed CMO was noted. The key points were the patient groups to be vaccinated, and that GP practices should continue to purchase their own vaccine.

10. ANY OTHER BUSINESS

Deborah Darlington advised of a case where one of her practices patients had attended Trafford General for a procedure, but the practice had not received results. The patient was told that the practice had been sent them. On investigation it transpired that the hospital staff believed they were sharing information with GPs when they put information on their own IT systems. GPs do have access to these systems, but should not need to search for results they should be sent them separately. The LMC expressed grave concern as to the action of the Trust. Dr Simon Musgrave, the MD of the Trust, who was present at the meeting said that he would take this back immediately to his colleagues and the administration staff within the Trust.

11. DATE OF NEXT MEETINGS:

April 13th – lunchtime, Sam Platts
May 18th lunchtime, Sam Platts
June 15th lunchtime, Sam Platts
July 13th lunchtime, Sam Platts
August- usually no meeting
September 14th lunchtime, Sam Platts
October 12th lunchtime, Sam Platts
November 16th lunchtime, Sam Platts
December Monday 12TH evening – joint for all Members of Salford and Trafford sub-committees