

Central Locality

Local Executive Team Meeting

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Tuesday 25 November 2013

In attendance – P Wike, M Wilde, R Pickering, C Nichol, Drs Read, O'Connor, Afzal, Hooson

- 1. Declarations of interest none were registered
- 2. Central Locality Mth6 Financial Position

Mth8 position was discussed

3. Winter Pressures funds – Same Day Appointment Service and Roving GP / Nurse Service

All services are working in all four Associations and the Roving GP is to extend the hours available from Monday 10 February.

All activity figures are being collated.

4. GP Associations

A general discussion was held around the scope of commissioning and providing of services by GP Associations, the issue of conflict of interest was again discussed.

All Practices are supportive of the expression of interest being worked on by the Locality in an effort to secure some of the national funding around extended Primary Care access this has to be submitted 14 February.

A major non-elective service redesign was discussed. After looking at the non-elective spend for the city and the Locality, 60% of activity and spend is related to respiratory related admissions.

The Locality will present to the CCG a whole system approach to reducing emergency admissions of these patients – looking at individual Practice respiratory care, QOF data, utilisation of Primary Care Development Nurses, patient preventative support from AGE UK and Community Support Workers, Community Nurses, Secondary Care and Community Specialist COPD Nurses, Secondary Care Discharge Teams and a Locality Based Rapid Response Team.

5. Care Planning Service

This has been implemented by all Practices and internal and Association training events have taken place to bring Practices up-to-speed, some Practices have started doing the checks other Practices have checks scheduled to start in March or April

6. Service Redesigns for 2014/15

Community IV Service, Celiac Service, Dermatology and Lesion Clinic, Ultrasound and Fibroscan, Patient PreOp assessments

Date and time for next meeting:

Tuesday 9.00 am, 4 March, Dovercourt Surgery



HALLAM AND SOUTH COMMISSIONING LOCALITY

Local Executive Group Meeting

Thursday 16 January 2014 at Charnock Health Centre 2-4pm

Minutes Part A

Members: Dr C Heatley (Chair), Mrs S Nutbrown, Mr G Osborne, Dr M Boyle,

Ms Helen Cawthorne

Present Dr A McGinty

Note taker: Susan Lister

Declaration of Interests – All declared an interest in PPL except Ms Cawthorne. There was no conflict at this meeting.

Minutes of last meeting accepted as a true reflection of proceedings.

Matters Arising:

Freed up Resources (FURS) – Learning Sets for Nurses - looking for appropriate course, also to discuss at next CC the release of nurses to attend.

LEG members – Dr Heatley had spoken with Ian Atkinson re lay members. He was happy with this but preferred them to be called patient representatives.

1.Locality Manager Appointment

The Board welcomed Ms Helen Cawthorne as the new locality manager. They also expressed their thanks and appreciation to Mr Gordon Osborne for the work that he had done and is continuing to do in the interim.

2. Cardiocall

A discussion took place around the merits of continuing with this scheme. After much debate it was agreed that the cardio memo was an excellent service for our patients and will continue for a further year funded from our FURS budget.

3.New LEG Process and GPA Debate

Dr Heatley had circulated a paper around the requirements of the new LEG Board that was to reflect the GPA associations participation. It was felt that LEG was a conduit between the GPAs and the CCG. Its role was to support and encourage practices to engage and to promote the relationship within – and also ensure that patients benefit from any services that are available across our practices.

There still remains a concern that the members of the LEG are at practices who have shares in PPL. Clarification will be sort on this. Ms Cawthorne is to meet with Linda Tully at CCG to discuss governance and reporting arrangements.

It was agreed that the LEG is a commissioning organisation whose duty is to practices and their patients. The GPAs are there to commission and provide services for their patients bringing services closer to home.

The future LEG Board will include members of the GPA associations, a practice manager, a practice nurse and also a patient representative. It was discussed as to whether there was a mandate for a member of the GPAs to be a representative on the board or should this go out to election. This will be discussed at the next meeting on 13 February. A discussion then took place around the role of GPA Development Manager. At the present time possibly 2 practice managers are interested — but the board thought that the GPAs themselves could decide if it should be done by one or two persons and who those persons should be.

It was agreed that there should be a larger meeting on 13 February involving the GPA groups. Dr Heatley will raise a series of questions to put to the attendees in order to bring clarity to the role of the LEG and its relationship with the GPAs.

Action - Dr Heatley Action - Mrs Lister Action - Ms Cawthorne

AOB Dr Boyle asked if there had been any problems with the trial of the bladder diaries. None were reported – most of our practices are on board.

Clinical Council. The board agreed that we should have speakers in mind for future Clinical Councils and that any business involving PMs should be tabled first with the clinical items later.

Action Dr Boyle to approach speaker

Dr Heatley suggested that we have a library of project ideas for monies available at short notice. **Action** ALL

DONM – 13 February 2-4pm at the Doubletree by Hilton Sheffield Park in the Park Room

NORTH LOCALITY

COUNCIL MEETING AT ST THOMAS MORE COMMUNITY CENTRE

Wednesday 8 January 2014, 08.30 - 11.00

Agenda Item	Action
Welcome, introductions and apologies TE welcomed everyone to the meeting and introduced Kerry Dunne who will be providing admin support for the North Locality Execs.	
<i>GP Attendees</i> : Dr M Ainger (MA), Dr W Carlile, Dr D Chatterjee, Dr R Corker, Dr L Cormack, Dr R Deslandes, Dr N Field, Dr E Gabrawi, Dr A Grover, Dr P Johnstone, Dr R Kemp, Dr H Key, Dr S Lupton, Dr A McCoye, Dr C Nwafor, Dr A Rosario & Dr A Shirley.	
PM Attendees : J Burgar, D Emmas, B Foster, S Grundy, P Hardy, A Hartley, C Hitchmough, J King, M Neville, C Normington, N Normington (NN), M Payling, L Platts, J Stevens, C Stocks, T Tate & M Tindall.	
North LEG Members: Dr T Edney (TE), Simon Kirby (SK) & Dr L Sorsbie (LS)	
Other Attendees: Richard Barnes, Kerry Dunne & Lynda Liddament (LL) (SCCG)	
Apologies from: Dr M Durling & Dr N Patel.	
Minutes of the last meeting 27/11/2013 were accepted. There were no matters arising.	
FURS Update	
TE gave an update on the approaching deadline for FURS by reminding the group that there is approximately £200k for 2014/15 (excluding the £250k ring fenced for care planning) financial year and this money will be non-recurrent, for one remaining year only. Exec have considered the applications already sent and have focussed on four, supporting in principle:	
Mental Health Scheme, Willowbeck Nursing Home, Enhanced Care Home, Vulnerable Families.	
TE encouraged the GPAs to put projects forward before the end of this financial year for Exec to consider and seek approval for, all of which must relate to the CCG's commissioning intentions.	All

Roma/Slovak Screening

MA updated the group on the Hep B LES to confirm it has been approved. The LMC are currently evaluating the scheme before the LES goes citywide.

Ann Gregory (Practice Nurse at Page Hall) has contacted practice nurses within practices with a large number of Roma/Slovak patients and organised two training sessions on Tuesday and Wednesday lunchtimes, the next training date being the 14th January. Please send all queries to LL.

MA mentioned that she will look at creating a community awareness project. The Public Health contact is interested and they have been invited to speak at a later Council meeting.

LS apprised the group on the Roma/Slovak primary care business case which has been approved. The Roma/Slovak population is unaware of how to use public health services and this has led to the practices struggling as this disadvantaged demographic has huge health needs, child protection concerns and literacy issues. Finding a Roma translator can be difficult and presents a challenge when explaining complex medical issues.

The 2 GPA's most affected are Shiregreen and Pitsmoor. The plan is to have a translator on site, focus on new Roma/Slovak arrivals and create a drop-in centre. The plan has been sent to lan Atkinson who forwarded it to NHS England. They have agreed that the North Sheffield Locality will receive funding for a 3 month trial with a view to expand this project citywide if successful. Any practice that has a Roma/Slovak demographic greater than 5% will be invited to join the trial and this will be evaluated with feedback given to NHS England.

TE stressed that there is a possible precedent for this business case to apply to other Eastern European populations if the pilot influences NHS England to expand the trial nationwide. With regard to the project only applying to half the Locality, the Roma/Slovak population move frequently and so it is worth bearing in mind that it may not be applicable to every practice now, but there is a possibility in the future.

Governing Body/CET Update

LS has received commissioning intention information from the CCG which will be evaluated over the next few months. LS reminded the group that it is possible to influence these intentions and to contact LS, SK or TE with any feedback.

LS advised the group that the plan to create a GP triage in A&E is continuing to develop and we are still awaiting STH approval.

SK reminded the group of a new short term project called Inclusion North that will be looking at learning disabilities via primary and social care. They will be working closely with GPs and will be in contact with the practices

shortly. SK will be attending a meeting next week to discuss the project and Inclusion North will be attending the next Council Meeting.

SK thanked the group for their involvement with both the North and citywide care planning reports which began in October. Early findings are currently being collated and there will be a discussion about care planning at the next individual GPA meetings before the end of March.

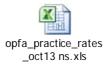
Update on Locally Commissioned Services

SK has been meeting with the CCG to discuss the emerging basket of services. Contraception issues are being carried over to public health this year and will be funded by them. They are looking at demand citywide. SK suggested that, even though contraception issues will be funded by public health they still might be included in the basket of services. Public health has been evaluating the citywide activity projection over the past couple of years and some practices are over their projected activity but they will be paid to the end of this financial year and SK will discuss levels of activity for the next financial year soon.

First Appointment Report

RB advised the group that the access to the reporting system has now changed to the PCI system and is now looking at first attendance; not referrals. RB gave a presentation explaining how to access the practice reports and the figures that we have received. 11 out of 22 practices were under the Sheffield average with the other 11 being over. There is a smaller variation in the rates than in other localities.





RB informed the group that the figures are non-weighted by CCG agreement. A question was raised as to whether the team would be able to monitor referrals over a yearly period and RB will investigate this possibility.

RB

SK

GPA Discussion and Feedback

Each GPA had a 45 minute discussion about current agenda items and were given the opportunity to discuss and feedback. TE reminded the group of the basket of services that have already been discussed (DMARDS, ring pessaries, CEA's for colorectal cancer and NHS health checks).

AOB

TE informed the group that the acute trust are aiming to move to electronic

referrals and electronic discharge summaries before December 2014 and GP practices will be encouraged to use the Choose & Book system from now on. The CCG will offer help and guidance, such as secretarial training, where required.

SK notified the group that if they are interested in the 7 day opening pilot that is being exhorted by the Prime Minister, then practices can put their name forward. SK encouraged practices to contact him with any ideas on how to configure this pilot.

TE reminded the group that Margaret Ainger will be leaving Execs and so there will be an opportunity for another GP to join the team if anyone is interested.

Date and Time of Next Meeting

Wednesday 19th February 2014 8.30 – 11am



WEST LOCALITY

Executive Team meeting minutes

Thursday 9 January 2014

8.00am Fairlawns, Middlewood

Members Attending: Dr Nikki Bates, Kate Carr, Diane Dickinson, Rachel Dillon, Dr Julie Endacott, Dr Mike Jakubovic, Dr Tim Moorhead, Dr John O'Connell, Dr Emma Reynolds, Lynda Liddament, Liz Sedgwick, Dr Jenny Stephenson, Dr Steve Thomas, Susie Uprichard (Chair), Fiona Walker

In attendance: Tracey Dunbar,

Apologies: Caron Best, Robina Okes-Voysey, Susan Rutherford, Heidi Taylor, Jayne

Taylor,

Welcome and Apologies.

1. The apologies above were noted.

Minutes of meeting 5 December 2013

2. The word 'provider' should be deleted from para 13. Following this amendment the minutes of the last meeting were agreed.

Matters Arising

- 3. Regarding the action under paragraph 16 of the previous minutes, no action has yet taken place; a Memorandum of Agreement is to be developed.
- 4. Regarding the MDT post, the advert for the job will be out very shortly with a closing date of the end of January. Volunteers were sought for the interview panel. Dr Steve Thomas and Susie Uprichard volunteered.
- 5. Regarding suggestions for areas of development for the Medicines Management team, Dr O'Connell provided details of a proposal for a CCG prescription pad. GPs seem to increasingly see patients who have been discharged from hospital without the required drugs and where the patient has been informed by the hospital to get a prescription from their GP. The CCG prescription pad could be used which would separate these prescribed items and the expenditure on these items could be monitored by Medicines Management. Heidi Taylor is speaking to Peter Magirr about the proposal to take this forward city wide.
- 6. On behalf of the Executive Team, Rachel thanked Dr Endacott and Dr Reynolds for their input to the Executive over the last year; Dr Thomas and Dr Stephenson were also thanked for being mentors. An evaluation of the roles is to be undertaken by the Deanery by April 2014, this will be useful to inform the process of including others in commissioning and developing leadership and succession planning. There is a proposal for an ST4 post being considered by the CCG. The post would be shared between the CCG and the practice.

Action: Rachel is to copy Dr Thomas into an email to Dr Moorhead and Kevin Clifford.

7. In the future Dr Endacott will be undertaking one session per two weeks whilst Dr Reynolds will be undertaking one session per week.

CCG/CET/CRG/Planning and Delivery updates

- 8. CCG Governing Body:
 - Dr Nikki Bates has been elected as a member of the Governing Body.
 - Approved the Primary Care Enhanced Services Review paper and agreed the recommendations.
 - Received an update on Personal Health Budgets.

9. CET:

- Discussed management of system performance and winter response.
- Discussed management of financial performance.

10. Planning and Delivery:

- P&D noted that in several cases schemes had only recently commenced and hence project evaluations needed to be completed in 2014. It recommended that further consideration be given as to which projects are funded recurrently and which projects continue to be funded non-recurrently in 2014/15 subject to the completion of the evaluations.
- Facilitated the prioritisation of the commissioning intentions.

GPAs Update

- 11. Most practices have signed up to the winter pressures scheme. Practices are required to complete a weekly return to show the extra appointments.
- 12. The CCG has now been informed that the locality is now one GPA. A report will go to the Council on the 16th Jan regarding the provider status of the GPA.
- 13. Guidance has been received on the 7 day working pilots, funding of £50m is available nationally for these pilots. A discussion will be required at the Council meeting.

Innovation Fund

- 14. The Executive reviewed and discussed each of the proposals and agreed which should be supported.
- 15. Lynda Liddament has written a paper highlighting the patient support which is currently in place in West. Practice Managers have been asked for their views on extra support needed however they thought that it is too soon to obtain evidence from the care planning reviews.
- 16. The Nurse Commissioning post has already received approval from the executive and the interview is to be held at the end of January.
- 17. The Exec agreed to support a number of the proposals. The Community Alcohol Scheme proposal for a pilot in 3 practices was supported together with funding for an

evaluation of the scheme. The Executive agreed that Public Health input was required to develop the evidence base for the service, that a specification and contract should be developed.

Action: Rachel will inform Caron on the outcome of the discussions and approved proposals.

Action: Rachel Dillon

18. The Executive did not support the other proposals in the report.

A.O.B

19.A member asked if the Executive meeting minutes can be circulated to the Council Members.

Action: Tracey is to circulate the Executive meeting minutes to the Council Members.

Action: Tracey Dunbar

Date and Time of next meeting:

6 February 2014, Boardroom, Fairlawns