

HALLAM AND SOUTH COMMISSIONING LOCALITY

Local Executive Group (LEG) Meeting

Thursday 17th July 2014 at Charnock Health Centre 2-4pm

Minutes Part A

Members: Dr C Heatley (Chair), Dr M Boyle, Dr S Davidson, Dr A McGinty, Mr G Osborne, Mrs J Coakley, Mrs M Smith, Ms L Butler Mrs J Hoskin Mrs S Nutbrown

Attending – Richard Crosby

Apologies: Dr G Wood

Note taker: Susan Lister

Declaration of Interests – None in conflict with the Agenda

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

Matters arising:

Dr Heatley had met with the Robert Broadhead from Sheffield City Council who informed him that the council did not wish to contribute towards the Medical Optimisation Scheme so HASL would have to meet the full cost which the board agreed they were prepared to do. Dr Heatley is to meet next week to discuss further.

Mrs Nutbrown had some concerns with the report on the discharge co-ordinator scheme. She is to meet with Kevin Clifford to examine the issues.

1.Practice Nurse Update Issues

Mrs Nutbrown reported that the recent nurses meeting had been well attended and that that a significant number of nurses were getting on board with the future changes. They welcomed the training and educational benefits that HASL were providing and the opportunity to network with their counterparts in the Multi Disciplinary Teams(MDTs). Mrs Hoskins reported that the Learning Set (a short course for Practice Nurses starting in September) is gathering support. The aim is for 10 nurses and it was hoped that practices would make a concerted effort to release their nurses.

2. Medicine Management Team Update.(MMT)

Richard Crosby attended to represent the above team and to update on progress to date. The aim of the MMT is to help the Clinical Commissioning Group (CCG) achieve its cost saving agenda whilst maintaining the quality of care to patients. They are working closely with the Primary Care Development Nurses, and supporting practices with systems and processes via the Practice Support Team (PST)

Dr Heatley asked if there were any issues that HASL could address, Mr Crosby advised that there were improvements within the locality and he had no specific issues with how HASL was performing.

Dr Boyle asked if they had looked at the variations in prescribing for asthma particularly with the increase in deaths. He also asked if they were revisiting acupuncture as a means of pain management. Post myocardial infarction and atrial fibrillation – what does a practice do that is successful in this treatment – could they offer practical guidance. Mr Crosby welcomed these questions and will address them.

It was agreed that the MMT should attend the LEG meetings on a bi-monthly basis. They were invited to attend the next Clinical Council in September and meet with the GPA groups in the locality to offer support and practical help around the Quality and Incentive Scheme (QIS).

3.Winter Resilience Fund/Freed Up Resources(FURS)

Mr Osborne raised concern over the lack of time localities had to respond to the winter resilience plan and also how the monies should be despatched. Practices were unaware of how this was going to be rolled out and the timescale given for them to reply was Mon 21st July. Dr Heatley is going to pursue this matter with the CCG and get back to Mr Osborne.

ACTION- Dr Heatley

FURS – It was agreed that decisions around the projects that the FURS will support will be made at the next LEG meeting in September. Mrs Coakley said that she would circulate a template seeking views on priority projects. Mr Osborne advised that he had a template which he would send to Mrs Coakley.

ACTION – Mr Osborne and Mrs Coakley.

4. QIS Planning

CCG are in the process of finalising the scheme – having taken into account amendments that had been suggested. The Board agreed that they would go ahead and support the plan.

Dr Heatley read out a number of decisions that had been made in the scheme and he would circulate these to the practices. When the final scheme is presented the LEG will ask practices if they would like the board to be involved. Help and guidance could be given at clinical council. Mrs Coakley and Mrs Smith offered to guide practices and Dr Davidson offered to guide GPs.

5. Locality Session Meeting

Dr McGinty and Mr Osborne had attended this meeting. There was representation from all four localities in the Sheffield CCG. This was the second meeting - HASL was not represented at the first. Draft notes had been given to the board on what was discussed. It was thought that this was a good way of promoting better understanding between the four localities. It also served as a sounding board for ideas - prior to them going to the Clinical Executive Team (CET) and then onwards to CCG. It would also be useful to feed up any common concerns across the localities to the CCG.

6. AOB – Clinical Council 11th Sept – Dr Boyle is to liaise with Bayer around which consultant will be speaking on Atrial Fibrillation at 3pm. Mrs Hoskin and Mr Osborne will arrange the earlier session.

ACTION – Dr Boyle and Mrs Hoskin

7. DONM - The August meeting has been cancelled due to holidays the next meeting is the 18th Sept 2-4pm at Charnock Health.