MINUTES OF HEREFORDSHIRE LMC MEETING HELD 28th Feb 2018

Those in attendance: N Fraser, P Adams, R Dales, A Seftil, S Bowen,R Walthew, T Jones,A Heal, A Leeman, P Clayton, R Davies, A Hargreaves, S Girby, C Reese, J Sleath, Ritesh Dua, J Johnson, A Jones and E Gwilliam

- 1. Apologies C Hawker, L Woakes, S Parkinson and P Dye
- 2.
- 3. Conflicts of interests: No new conflicts of interested.
- **4.** Minutes of the last meeting were signed off as correct.

5. MATTERS ARISING

• Service charges

This was further discussed. The CCG had previously had concerns regarding potentially high service charges and a simple flat rate had been discussed at recent meetings. Practices were via the regulations able to levy a reasonable service charge to cover expenses to external non GMS providers but not rent which was reimbursed by the NHS via the premises regulations.

• Orthopaedic referrals

The LMC felt in cases going for surgery BMI and BP would be useful and ideally should accompany a referral but that surgery was often not the reason for referral. Further discussion was had regarding the e-referral system coming out shortly (March) for some specialities. Concerns were raised whether enough appointments to deal with demand would be there. Await events.

Antiviral prescribing

An enhanced service and payment had been agreed by the CCG. The was welcomed by the LMC.

STP update

NF gave an update on current events within the STP and wider transformation. Primary care involvement at within the Integrated Care System was discussed and agreed. The new CEPN (Community Education Practice Network) contract was out and the Taurus the GP federation was looking to bid to take on again. Concern that sexual health services may have reduced funding going forward was also raised.

MAIN BUSINESS

• Local Incentive Scheme

NF and RD had seen an outline presentation of draft Herefordshire Outcomes Framework (HOF) at primary care steering group. Documentation was awaited. Concerns had been raised re workload within local enhanced services generally and the knock on to practice stability.

Action: LMC officers to look to get further data from practices on current enhanced service workload

• GDPR (General Data Protection Regulations)

Concerns had been raised on how these new regulations may affect practices moving forward. Federation and CCG aware of the issues.

• Termination of pregnancy update

After recent concerns for the service a new pathway of referral had been agreed.

• Collaborative Arrangements

The CCG had agreed at last steering group meeting to looking into this issue and bring back to LMC. Practices were advised to invoice the CCG for this work and keep records.

Quality Assurance for Glucose meters

Concern had been raised the hospital would no longer service some glucose meters. Many practices now provided disposable meters and this may be an option for the future.

• Workforce Monitoring System

The GPC are looking at mechanisms to monitor workload. Concerns have been raised that on busy "duty" days GP workload has the potential to become unsafe.

ANY OTHER BUSINESS

• MPs

The officers had visited both local MPs and updated them on the current issues in general practice

• Shared care agreements

The CCG had been working on further share care agreement.

Firearms

The chair had written to the police regarding system concerns within the current firearms licencing system.

• Vice Chair

JS advised the committee that he would be stepping down from the vice chair role in April at the AGM. Elections for chair vice chair and secretary at next months. AGM

DATE OF NEXT MEETING

Next Meeting: 18^h April 2018 at 7.30pm with AGM