MINUTES OF HEREFORDSHIRE LMC MEETING HELD 19^h February 2020

Those in attendance: A Seftel, P Adams, R Dales, N Fraser, R Dua, C Reese, P Clayon, E Scotland, J Johnson, F Nikitik, P Dye, A Hargreaves, A Leeman, M Waters

- 1. Apologies S Parkinson, D Horne
- 2. Conflicts of interests: No new conflicts of interested.
- **3.** Minutes of the last meeting were agreed as correct with a spelling correction for Dr Hargreaves

4. MATTERS ARISING

• GP provider board update

The chair updated the committee. Funding for GP representation had been agreed by the CCG. If practices or PCN felt they we being asked to provide any systemwide change could they please contact the GP provider board.

• Service Charges

WVT was now paying service charges from October 2019 as agreed. The secretary was working with the CCG to ensure payment was secured from the new and old mental health trusts

MAIN BUSINESS

• New Contract changes

The secretary advised the LMC on the new contact changes. These were generally welcomed by GPs. The chair was to represent the LMC at the special conference

• Private Vaccination Service

Both secretaries from Herefordshire and Worcestershire had been working with the GPC to clarify whether this service could be provided from NHS premises. Awaiting further clarification.

• 111 Data Sharing

The LMC believes the current data sharing agreement for 111 in Herefordshire was compliant. However, practices are advised to check with their DPO that their privacy statement reflects the new changes.

• Pharmacy application

The LMC was informed that the Pharmspire Ltd application has been rejected

• Integrated Quality Committee

The LMC was updated on this new committee. Key areas to be looked at were End of Life, Pressure Sores, and Advance Care planning. Practices were asked to input via the DATIX system any examples in these areas where they believed care could be improved.

• Motions for Conference

The LMC discussed the concerns that there might be too many conferences now and whether the financial and environment cost may outweigh the benefits. Secretary to draft a motion on these lines for the UK wide conference.

• Collaborative Arrangements

The secretary was to work with the CCG and social care to ensure a new model for collaborative arrangement especially in child protection. This was like to be part of the new REVIVO contact from July.

ANY OTHER BUSINESS

• Electronic signatures for radiology

JJ wondered whether electronic signatures could be uses for radiology. Other practices advised this was already the case.

• CAHMS

Concern had been raised that ECGs for children were no longer being provided for CAMHS by paediatrics. The chair has taken this up with commissioners with both clinical and contractual concerns.

• Endoscopy

Practices had ongoing concerns regarding the responsibly of anticoagulation in endoscopy

Action: the secretary will take this forward again with the endoscopy dept

• New enhanced services

The secretary advised practices what was like to happen with enhanced services after his recent discussion with commissioners. The Hereford half hour was likely to remain in future outside of enhanced services but would continue with the agreement of the GP federation. Further details will be announced at the next GP Parliament.

• A and E reports

Despite some initial improvements concern was raised again in the time taken for A and E report to get to practices. CAU reports and death notifications were also of concern.

Action: the secretary to take forward concerns

• GP training

PC advised the committee he was leaving general practice in Herefordshire after a long career in the county. He advised the committee on the robust state of GP training and the large number of new GP coming through. The LMC thanked him for all his hard work and commitment to GP training over the years.

DATE OF NEXT MEETING

Next Meeting: was to be 25th March 2020