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The Minutes of the Worcestershire Local Medical Committee Ltd held on Thursday 20th May 2021 at 7.00pm Via Zoom Conferencing

OPEN MEETING

PRESENT: Dr D Herold, Dr I Haines, Dr C Whyte, Dr L Jones, Dr R Williams, Dr P Bunyan, Dr G Farmer, Dr D Pryke, Dr M Davis, Dr F Martin, Dr K Hollier, Dr J Chun, Dr K Gines, Dr R Khehar, Dr R Benney, Meryl Foster, Helen Garfield, Charmaine Hawker, Scott Parker, Dr W Safdar, Dr S Manton (observing), Dr S Parkinson, Lisa Siembab

2. **APOLOGIES:** Dr S Morton, Dr J Rankin, Dr E Penny, Dr M Shah, Dr S Morton, Dr M Venables, Michelle Hallahan
3. **FORMAL APPROVAL OF THE MINUTES OF THE MEETING HELD ON THE 22ND APRIL 2021 BY THE CHAIRMAN VIRTUALLY.**

The Secretary updated on the actions from the last meeting:-

List of Co-optees – Lisa Siembab has shared a list of these with the committee.

PCSE Payment System - Meryl Foster has shared the communication on the new PCSE Payment System with the LMC Secretary.

The minutes of the last meeting were signed off virtually by the Chairman.

4. **MEMBERSHIP**

The Secretary welcomed Dr Stephanie Manton who is observing the meeting with a view to joining the Committee as the Non-Principals Representative. Dr Waqas Safdar has indicated that he wishes to leave the Committee at the end of June. The LMC Secretary also shared that Michelle Hallahan has also joined the Committee as the R&B Practice Manager Representative and will be joining the meeting.

As Dr Waqas Safdar was our BAME Representative the Secretary asked for Committee Members to consider whether they would be interested in taking on this role.

5. CCG

Covid Vaccination Programme and Flu Vaccination Update – Scott Parker attended the meeting from the CCG to update on the Covid Vaccination Programme and the Flu Vaccinations for this year. He started by thanking primary care for their huge effort on the vaccination programme so far.

Scott Parker shared that there are a couple of planning scenarios that the CCG are working through and he shared the detail of these. A discussion followed on these planning for these scenarios in terms of staffing and resources.

The Secretary thanked Charmaine Hawker for joining the meeting and she gave an update on ReVlvo. She gave some background aims of what they are trying to achieve this year and the timelines. They have very limited funding this year and it is all tied up with ReVlvo. The existing ReVlvo Contract was rolled forward with a new contract to be implemented on the 1st July 2021.

The CCG is investing £9m into the ReVlvo Contract and Charmaine ran through what is to be included. This will be a universal offer across both counties and will be allocated on a PCN basis.

A discussion on this followed.

The Secretary discussed the issue around some practices having had a reduction in their QOF income and the reasons for this provided to practices.

6. HEALTH AND CARE TRUST

The Secretary shared that the CAMHS service have been asking GPs to undertake blood tests and ECGs again. She shared that she has received an email from the Service Lead on this issue and there has been a meeting set up to discuss this further.

The Secretary shared that the LMC Officers are working to ensure the LMC has a place on the ICS Place Based Board as it is very important that we are represented on this board.

Dr R Williams raised an issue with the 2 hour response that is a community shared initiative. There is a substantial budget attached to this that the Trust has bid for. This has caused some friction as there has been little discussion with primary care / CDs around the bid or how the service will be implemented.

7. STP/ICS

The Chairman shared that any decision on the ICS Executive Board composition is on hold at present awaiting a national directive to determine who should be represented on the board.

8. Acute Trust

The Secretary shared that some practices have shared issues with a backlog of results being sent to them. This issue has now been resolved.

There is a note on the bottom of the discharge / outpatient letters from the Trust stating that if the patient does not understand the content of the letter they should contact their GP to explain it. The Secretary has raised this and asked for this to be removed.

The Secretary has asked for any rejection letters to have the name of the consultant and their GMC Number. She will also be raising an issue with Secretaries asking patients to contact their GP to be moved up the list through A&G as this is creating additional workload for practices and does not result in patients' appointments being expedited.

Dr C Whyte raised an issue with Consultants asking for GPs to make referrals for a scan and Consultants should be making these referrals themselves. Dr I Haines raised a serious incident that needs to be flagged with the CCG. There is an ongoing issue with departments asking GPs to refer on for conditions related to the presenting complaint and these should be made by the Consultant themselves. This has been raised with the Trust.

Action: The Secretary to raise with the Acute Trust, all issues discussed

8. REGULAR ITEMS

- a. **NHS England** – the Secretary shared that the letter from NHSE that went out to all practices has upset many of us and the LMC has drafted a letter to patients for practices to use in their communication with patients. The LMC has also written to all practices to reiterate their contractual obligations. The Secretary has also written to our Worcestershire MPs seeking their support. Dr S Parkinson gave an update from the GPC Meeting in response to the letter from NHSE and shared an emergency motion that was debated and voted on. This was voted for unanimously.

Action: The Secretary to feedback on responses from MPs

- b. **Public Health/County Council** – nothing to report
- c. **Education** – Dr F Martin shared that there is an advertisement currently out for Educator Posts for expansion in GP numbers that needs to be shared more widely.
- d. **People's Board** – nothing to report
- e. **Dispensing** – nothing to report
- f. **Out of Hours/NHS 111** – nothing to report

- h. **Non-Principals Group** – nothing to report
- i. **Registrars** – nothing to report
- j. **P.M. Groups** – nothing to report
- k. **Administration** – nothing to report
- l. **PAG** – the Secretary shared that she attended the first redesigned PAG this week. Each LMC attends the PAG meetings as part of a rota across the West Midlands. There were concerns around asking performers to make a voluntary undertaking not to work resulting in no payment for the performer whilst an investigation is taking place.
- m. **GPPF** – nothing to report
- n. **CAG/Clinical Practitioner Forum** – Dr R Williams outlined this new meeting that will be useful to feed clinical ideas into. The Trusts are represented with the CDs, LMC and Public Health, county council etc to look at how we can work together more effectively on specific issues. This will lead into the ICS discussions.
- o. **PCNs** – nothing to report

9. **MATTERS ARISING**

i) **LMC UK Conference Update**

The Chairman shared that conference was held virtually and debates were largely focused on covid, appraisal, workforce, 15 minute consultations, workload, zero tolerance to racism and the abolition of the listserver. The LMC Secretary spoke in support of a motion about ICS and funding and this motion was carried.

10. **COMMITTEES**

a) GPC Committee – Dr S Parkinson gave an update on the last GPC Meeting where the Emergency Motion discussed:-

GPC England is outraged by NHS England and NHS Improvement's lack of understanding of the pressures facing General Practice and:

- i) Calls for formal BMA action by escalating concerns about NHS England's apparent lack of knowledge of the applicable contracts and regulations relating to the delivery of General Practice services
- ii) Seeks both senior explanation and public action from the Department of Health and Social Care in view of the unacceptable decision to publish letter BO497 on 13 May 2021
- iii) Has no confidence in the Executive Directors of NHS England
- iv) iv) Calls upon the Chair of BMA U.K. Council to support the Chair of GPC England in demanding an urgent meeting with the Secretary of State for Health & Social Care, to discuss the spiraling crisis in General Practice
- v) v) Calls for GPC England's Executive to immediately cease all formal meetings with NHS England until a motion is brought back to GPC England by the Executive, requesting a vote on their recommendation that sufficient

steps have been taken to restore the Committee's confidence in the Executive Directors of NHS England, to justify the resumption of such meetings.

b) GPC England and UK – nothing to report

11. NEW ITEMS

There were no new items.

12. ANY OTHER BUSINESS

There was no AOB.

CLOSED MEETING

The Chairman closed the meeting at 9.09pm.