

MINUTES	
MORGANNWG LOCAL MEDICAL COMMITTEE	
The Mercure Hotel, Phoenix Way, Swansea SA7 9EG	
TUESDAY 14th January 2020	
GUESTS: <ul style="list-style-type: none">No guest speakers had been invited to the meeting. Instead a SOAPBOX session preceded the main business with a summary enclosed with the Minutes.	
GUESTS AT FUTURE MEETINGS: <ul style="list-style-type: none">10th March 2020: Dr Richard Maggs has been invited to attend	
1. GENERAL	
1(i)	ATTENDANCE: LMC MEMBERS: Drs R Beynon (RB), T Cufflin (TC), H Dean (HD), P Evans (PE), I Harris (IH) (Chair), J Kerrigan (JK), S Perman (SP), M Rickards (MR), N Shah (NS), R Thomas (RT), H Wilkes (HW), P Williams (PW) LMC Secretariat: M Liddell (Executive Officer), E Harris (Secretarial Assistant) (EH). SBUHB/PCCU: H Dover (HDo) (from 8pm), Dr A Mehta(AM); PRACTICE MANAGERS: C Boland (CB), M Haynes (MH), REGISTRARS: B Roberts (BR)(Bridgend), R Spacie (RS) (Swansea)
	APOLOGIES: LMC Members: Drs P Cox, J Donagh, C Jones, R Jones, S Karupiah, K Mellin, P Ramkumar, A Rayani, K Wallis Dyfed Powys LMC: Drs P Horvath-Howard, L Williams Registrars: L Parkinson, J Shah
1(ii)	DECLARATIONS OF INTEREST: no forms completed
1(iii)	MINUTES: <ul style="list-style-type: none">Full LMC Tuesday 12th November 2020 – The Minutes were agreed and signed by the Chairman.
1(iv)	MATTERS ARISING: None raised
1(v)	MLMC Executive Committee 10th December 2019: The draft minutes had been circulated with the agenda and were noted.

1(vi)	Morgannwg LMC Election 2020-23: Members were reminded that the election process for a new committee for the period 2020-23 would commence in the next week with a closing date for nominations of Monday 17 th February 2020.	All to note
1(vii)	MLMC Constitution / Articles of Association: As a result of the transfer of representation of Bridgend GPs and Practices to BroTaf LMC wef 1 st April 2020 some minor amendments would be required to the Constitution /Articles of Association. Amended documents would be circulated to members and approval of the changes would be sought at the AGM(s) on 31 st March 2020.	ACTION ML
2.	GMS & PRIMARY CARE ISSUES	
2(i)	Sustainability Programme /Practice Support team: (standing item) It as agreed that reports / updates from the Primary Care Access and Sustainability Forum would be merged with this item. The PST was proactively supporting practices who requested assistance and the managed practice continued to receive regular input. NS summarised some of the discussion at the Primary Care Access and Sustainability forum on 21 st November 2019. A bi-lingual telephony script would be circulated to practices. IH confirmed that it would be shorter than 2 minutes and could be adapted as required. He also advised that practices did not have to meet all the requests for communications and appointments within the Welsh Language standards as they were not public bodies.	
2(ii)	GP Clusters / Transformation Funds: HDo advised that an evaluation company had been appointed to measure project outcomes. There was no evidence of clinical staff being poached between clusters. Project management may be an issue going forward due to a lack of staff qualified to act as Project managers.	
2 (iii)	Cluster Leads & Heads of Primary Care Meeting 27th November 2019: Attended by AR. A single point of Access (SPOA) had been promised for Mental Health Services in SBUHB but the timescale had still to be confirmed.	
2(iv)	MLMC/ SBUHB Liaison Group 19th November 2019: The Draft minutes and Action log had been circulated with the agenda. IH highlighted Anjula Mehta’s contribution to resolving issues although the log continued to contain a large number of uncompleted items. A meeting of the Task & Finish Group led by Tanya Spriggs to look at a range of concerns around community nursing had been very positive. TC stated that additional patient details were being requested in Diet Datix including the NHS number. AM agreed to check and to confirm if completion was mandatory. IH advised that NHSSP Legal & Risk section had taken over Diet datix. The provision of Web Cams for use in Dermatology referrals was raised. It had been suggested that there were no unresolved issues in Swansea practices but this now appeared not to be the case. AM would explore further.	ACTION AM ACTION AM
2(v)	BroTaf LMC/CTMUHB Liaison Group 22nd November 2019: Attended by IH. The draft minutes had been circulated with the agenda and were noted.	
2(vi)	Issues raised by Constituents /Practices (standing item): The updated schedule (April – December 2019) of queries raised had been circulated. No new issues were raised.	

<p>2(vii)</p>	<p>Practice Managers: MH queried a request his practice had received from POW to undertake a 3 year repeat scan (osteoporosis) which in the absence of a safe recall system could not be done. IH would raise at BroTaf / CTMUHM Liaison meeting (15/01/20).</p> <p>MH asked when Enhanced Services in Bridgend would be harmonized within CTMUHB. IH confirmed that the DOAC LES had been agreed and he would push to sort the remainder by April 2020.</p> <p>MH asked when issues around IT/Telephony would be resolved as three practices still had telephony provided by SBUHB. IH would raise at the BroTaf /CTMUHB Liaison meeting.</p> <p>MH asked for information about the level of funding included in the Global Sum to improve infrastructure. IH advised he could confirm the amount if needed but to be aware that it was non recurring. There was no mandatory requirement to use it for telephony improvements but if not it was unlikely that any future request for an improvement grant to upgrade telephony would be agreed.</p>	<p>ACTION IH</p> <p>ACTION IH</p> <p>ACTION IH</p>
<p>2(viii)</p>	<p>111 /OOH Service (standing item): HD confirmed that the evening / weekend day time rota fill rate was good. Filling overnight shifts presented some problems and managers were having to 'think outside the box' to ensure that cover arrangements were adequate. Cover arrangements over the Christmas / New Year period had been good.</p> <p>OOH arrangements for Bridgend practices was unlikely to change before April 2021 whilst the roll out of 111 to CTMUHB was being developed.</p> <p>IH advised that there were national concerns around OOH services and in particular in Hywel Dda and North Wales.</p>	
<p>2(ix)</p>	<p>Mental Health Services: Access to Crisis Teams: AM advised that she was waiting for confirmation of the date of implementation of the Single Point of Access (SPOA) which was being supported by Transformation funding.</p>	<p>ACTION AM</p>
<p>2(x)</p>	<p>Community Nursing: The Task & Finish group led by Tanya Spriggs had met on 11th December 2019 and IH confirmed that it had been a productive meeting. HD would prepare notes of the meeting. ML to ascertain the date of the next meeting.</p>	<p>ACTION HD/ML</p>
<p>2(xi)</p>	<p>SARs Spreadsheet: MH had used the spreadsheet (compiled by the Practice Manger in OakTree surgery) to assist with the collation of data /costs. ML to ask practices to provide data for one month.</p>	<p>ACTION ML</p>
<p>3.</p>	<p>PRIMARY /SECONDARY CARE INTERFACE ISSUES</p>	
<p>3(i)</p>	<p>WAST Issues – Ambulance Delays: IH provided a summary of the background to LMC concerns and proposed actions. A letter outlining the concerns had been signed by the five Welsh LMC Chairs and sent to Vaughan Gething, Minister for Health and Social Services on 20th December 2019 with the expectation of a coherent plan being put in place by 23rd January 2020 when GPCW would meet with the Chief Ambulance Services Commissioner for Wales.</p> <p>BR asked if the public believed that the problems were due to a lack of ambulance vehicles. IH replied yes but stated that the Health Boards had a population responsibility and the problems now affected GP /practice decisions around admitting patients, and especially frail elderly patients, with the result that they were now subtly assuming responsibility for the risk.</p>	

3(ii)	<p>As previously stated by Alistair Reeves, Anjula Mehta confirmed that the Health Board would support GPs making the decision to send a patients to hospital by car when WAST was unable to release an ambulance.</p> <p>Issues raised by co-opted members: no new issues raised</p>	ALL TO NOTE
4.	CONTRACTUAL ISSUES	
4 (i)	<p>Enhanced Services: Executive Team members had reviewed 14 Local Enhanced Services Specifications/costs and these would be discussed at a meeting with SBUHB on Thursday 16th January 2020.</p>	
4(ii)	<p>Access Standards: IH advised that GPC Wales was not happy that there was a delay in Access documents being released by WG. He reminded members that compliance with the standards was voluntary and practices should model provision on a business basis.</p>	
5.	GPC WALES	
5 (i)	<p>Allocation of seats for LMCs: The Executive team had discussed the option paper prepared by GPC Wales who were reviewing the number of seats held by each LMC in Wales following the agreement to transfer representation of Bridgend GPs / practices to BroTaf LMC. This was currently 3 per LMC. The Exec view was that the number of seats allocated to Morgannwg LMC should not reduce to less than three and that allocation should remain consistent to ensure equitable representation of each LMC. IH would represent this view at the GPC Wales meeting on 30th January 2020.</p>	ACTION IH
6.	OTHER	
6(i)	<p>Dyfed Powys LMC: PH-H /LW had been unable to attend. No report available</p>	
6(ii)	<p>Swansea Sessional GP Group: No report available.</p>	
6(iii)	<p>NHSSP: The List of MPL changes between April-Dec 2019 had been circulated to elected members with the agenda.</p>	
6(iv)	<p>Firearm Licensing: IH advised that South Wales Police were consulting with GPs and Health Boards in respect of proposed changes to the granting or renewal of shotgun and firearms certificates to members of the public. With effect from 1st April 2020 the force planed to introduce a requirement for a pre-medical screening of all applicants which would involve the completion of a pro-forma medical report by the applicant's GP or suitably qualified healthcare professional. Requests would be limited to the provision of fact and not opinion. It was a patient led process and a charge could be made for completing the form. GPs could still conscientiously object.</p> <p>The LMC view was that the proposed process seemed reasonable.</p>	ALL TO NOTE
7.	<p>NEXT LMC MEETINGS</p> <ul style="list-style-type: none"> • LMC Executive Committee Tuesday 11th February 2020: The Grove MC • LMC Full Meeting Tuesday 10th March 2020: The Mercure Hotel Swansea • AGM(s): Tuesday 31st March 2020 (rearranged from 14th April 2020 due to Easter School Holidays): The Great House, High St, Laleston, Bridgend CF32 0HP 	

