

**North Oxfordshire Locality partnership**
**Notes of Meeting:** Tuesday 20 November 2018

Chair: Shelley Hayles

## Attendance

<b>Practice</b>	<b>GP representative</b>	<b>Practice Manager</b>
Banbury HC	Dr Marlett Smit	Bridget Acock
Bloxham	Dr Cath Rose	Fiona Jefferies
Chipping Norton HC	Dr Neil Fisher	Chris Bean
Cropredy	Dr Barry Tucker	Andrea Kirtland
Deddington	Dr Sue Ruddock	
Hightown	Dr Louise Cornwall	Di Stringer
Horsefair		
Sibford	Apologies	
West Bar	Dr Stephen Haynes (StH)	Helen Murphy
Windrush	Dr Simon Bentley	
Woodlands	Apologies	Apologies
Wychwood	Dr Katy Walsh	Apologies

<b>Other attendees</b>		
Lay members	Andy Anderson	Chris Ringwood
Cherwell DC	Apologies	
NOLG Clinical Directors	Dr Shelley Hayles (ShH)	Dr Neil Fisher
OCCG	Diane Hedges, Julie Dandridge, Fergus Campbell	
PML / NOxMed	Laura Spurs	

		<b>Actions</b>
1.	<b>Apologies &amp; Declarations of Interest</b> <b>i. Apologies</b> Anita Higham, Janet Garrison, Dr David Spackman, Vanessa Newman, Jane Carr, Deb Chronicle, Dr Shishir Kumar <b>ii. Update declarations of interest</b> No additional declarations <b>iii. Conflicts of interest pertaining to agenda items</b> None stated	
2.	<b>Locality Clinical Director introduction</b> <b>i. Gynaecology project</b> Working with federation to develop local provision for patients who can't be seen in own practice for e.g. coil fitting. Anyone interested in providing please contact <a href="mailto:shelley.hayles@nhs.net">shelley.hayles@nhs.net</a> .	GPs

Continued over

	<ul style="list-style-type: none"> <li>• Windrush may be able to offer from Jan 2019.</li> <li>• Note existing arrangements should be able to continue e.g. Hightown providing for other practices' patients.</li> </ul> <p><b>ii. Chairing rota for meetings</b></p> <p>PMs had stated as a group that they did not wish to participate.</p> <p>Shelley noted that the rota either a GP or practice manager (PM) from the practice. PMs want to discuss again at their separate meeting – in the meantime Di Stringer prepared to chair December meeting.</p> <p>FC to clarify the proposed rota – 2 different versions in circulation.</p>	<p>PMs</p> <p>FC</p>
3.	<p><b>Integrated Front Door - North urgent care</b></p> <p>Neil Fisher noted the circulated document on Integrated Front Door (IFD) proposals and updated on recent developments – particularly staffing. He proposed a shared model where experienced practice GPs (ingrained in local primary care) are subcontracted to IFD. Issues and queries arising from discussion included:</p> <ul style="list-style-type: none"> <li>• Shared staffing should assist with re-appraisal for GPs working in A&amp;E</li> <li>• May flex over year to meet seasonal pressures and also to enable cover at practice and IFD for eg sickness</li> <li>• Agreed practice and IFD employers should share staff liability eg for sick leave</li> <li>• Concern over net loss of experienced GP sessions to practices. NF suggested: <ul style="list-style-type: none"> <li>○ the shared role would create attractive posts which might aid recruitment locally</li> <li>○ mixed team of experienced and newer GPs at IFD and practice. Training benefit.</li> <li>○ Not just GP staffing - also develop skill-mix</li> <li>○ Potential for A&amp;E staff to work in primary care</li> </ul> </li> <li>• LS suggested reviewing recent recruitment experience to understand incentives and barriers.</li> <li>• Phased implementation planned, so need for sessions from local practices after April 2019. OUHFT currently recruiting staff to deliver Phase 1 to meet winter pressures.</li> <li>• West Bar noted their support for the proposal. Hightown asked for more opportunity to discuss the detail of the whole scheme.</li> </ul> <p>Further discussion using time available at the end of the meeting:</p> <ul style="list-style-type: none"> <li>• Noted 39% of A&amp;E patients from Banbury. Others from rural North and also non-Oxon. LC raised risk of using scarce local GP resource for non-local patients</li> <li>• Concern over case study example of A&amp;E booking including 3 day review in hub which practice might not offer.</li> <li>• NF working to ensure consistent thresholds across system, hence need for integrated staff.</li> </ul>	

	<ul style="list-style-type: none"> <li>• JD noted that the proposal might offer more hub appointments in future.</li> <li>• Need to have regular slots at locality meetings to feedback data and intelligence.</li> </ul> <p>JD note significant communications element to project to help develop realistic patient expectations.</p>	
4.	<p><b>Moving forward with neighbourhoods</b></p> <p><b>i. Feedback from LIS sustainable transformation</b></p> <p>FC noted unfortunately not enough time at this meeting to hear highlights from individual practices. Aim to give time for this at a future meeting.</p> <p><b>ii. Link to neighbourhood working</b></p> <p>NF noted national move towards neighbourhood working (called Primary Care Networks) which OCCG is picking up. This includes community services as well as general practice working across groups of 30-50,000 patients.</p> <p>Issues and queries arising from discussion included:</p> <ul style="list-style-type: none"> <li>• Rural cluster has begun to develop in this direction already.</li> <li>• Agreed that that Banbury made sense as one large neighbourhood (currently 66K). Noted that the practices are currently quite disparate.</li> <li>• NF note that key point of neighbourhood is that it knows the local population and can provide appropriately for that.</li> <li>• Risk of creating another layer beyond federation.</li> <li>• The topic was raised for information. Shelley urged practices to go away and think about the issues – more discussion required in future before any decisions.</li> </ul> <p>SH/LC proposed that 6 Banbury practices need funded time to meet together to work out their preferred approach and proposals. NF to consider.</p> <p><b>iii. Primary care - one voice</b></p> <p>Circulated report noted.</p>	<p>FC</p> <p>NF</p>
5.	<p><b>Respiratory project</b></p> <p>Dr Karen Kearley and Paul Swan attended to discuss the Integrated Respiratory Team pilot and shared slides (available at <a href="#">this link</a>):</p> <ul style="list-style-type: none"> <li>• Boehringer Ingelheim Ltd funding enables Oxfordshire to test concept, but it was stressed in response to questions that they have no influence over the meds prescribed for treatment (these will follow the APCO recommended formulary for Oxfordshire) or the project management.</li> <li>• Note already have community respiratory team</li> <li>• Want respiratory GPs on the team</li> </ul> <p>KK checked the locality view on key questions:</p> <ul style="list-style-type: none"> <li>• Rooms available at no cost to host service available to patients across locality: <ul style="list-style-type: none"> <li>○ Chipping Norton, West Bar potentially available</li> </ul> </li> </ul>	<p>PS/HM</p>

	<ul style="list-style-type: none"> <li>○ West Bar suggested could deliver part of this through group consultation. Paul Swan to follow up with HM.</li> <li>● Access to clinical records for Integrated Respiratory Team – no dissent</li> <li>● Population Review Meetings - respiratory MDT funded through the <a href="#">Long term conditions LCS</a></li> <li>● Practices requested to run EMIS searches for audit - no dissent</li> <li>● Shared anonymised data for evaluation. Confirmed that patient information not shared with Boehringer Ingelheim – they will only receive aggregated anonymised data.</li> <li>● IRT to have access to bypass numbers for time-sensitive clinical queries – no dissent. FC to pass list to Paul Swan</li> </ul>	FC
6.	<p><b>NOXMED business items</b></p> <p>Laura Spurs highlighted the following:</p> <ul style="list-style-type: none"> <li>● <b>Visiting service</b> at 96% so some more capacity. (Cropredy reported limited capacity when ring after 12 noon)</li> <li>● Note the merged meetings mean that NOxMed not always having detailed clinical conversations about whether to adjust commissioned services</li> <li>● Will offer <b>Health Care Assistant dressings training</b> to North practices when available (requested in West). Planning with Janet Garrison – locality practice nurse lead.</li> <li>● <b>Hub - Sunday utilisation</b> still 71%. Banbury HC advised practices can book patients to weekend hub for dressings.</li> <li>● PML getting prices to purchase <b>Doppler</b> equipment for individual practices</li> <li>● Additional <b>Level 3 safeguarding</b> training requested in West – linking to OSCB. LS to look into offering this across North locality.</li> <li>● Standardising documentation for <b>GDPR follow-up</b></li> <li>● Hoping to have <b>contract extension</b> for 2 years confirmed by OCCG</li> </ul>	<p>LS</p> <p>PMs</p> <p>LS</p> <p>LS</p> <p>JD</p>
7.	<p><b>NOLF public forum update</b></p> <p>Andy Anderson noted that the NOLF steering group met last week and discussed:</p> <ul style="list-style-type: none"> <li>● 2 public meetings in 2019 (FC add dates)</li> <li>● On-line triage system – some patients happy to trial to aid development</li> <li>● role of Patient Participation Groups (PPGs) generally. Need to work more closely and get PPGs more consistent and involved in projects to be a positive input into primary care development. Noted that HealthWatch Oxfordshire plan an event to bring PPG reps and practice staff together across an area to share ideas.</li> </ul>	FC
8.	<p><b>Information updates for noting</b></p> <p><b>i. OPCCC meeting 6 November 2018</b></p> <p>FC to circulate link. JD highlighted items including:</p>	FC

	<ul style="list-style-type: none"> <li>Practice sustainability work in Oxford and Witney</li> <li>Priorities for primary care: sustainability, workforce &amp; estates, neighbourhood</li> </ul> <p><b>ii. Planned care projects update</b> Noted without discussion</p> <p><b>iii. Cancer care review</b> Shelley reminded practices to consider taking up this review at 12 months as part of the cancer improvement scheme, which attracts small subsidy. Please contact Zoe Kaveney (<a href="mailto:zoe.kaveney@nhs.net">zoe.kaveney@nhs.net</a>) for details.</p> <p><b>iv. Brief information items</b> Noted without discussion</p>	All
9.	<p><b>Notes of 11.10.18 North locality meeting</b></p> <p><b>i. Approve minutes for accuracy</b> Agreed</p> <p><b>ii. Matters arising, and actions not yet discussed</b> None discussed</p>	
10.	<p><b>Oxfordshire Winter Plan 2018/19</b></p> <p>Tehmeena Ajmal introduced the discussion noting that admission avoidance, Care Closer to Home and early discharge place demands on primary and community care. Finding ways to work together to support this:</p> <ul style="list-style-type: none"> <li>How does primary care flag pressures locally?</li> <li>How should we communicate about winter pressure locally?</li> </ul> <p>Issues and queries arising from discussion included:</p> <ul style="list-style-type: none"> <li>Noted e-mail re hospital pressures unwelcome, but could reiterate the contact and advice routes about managing patients Closer to Home</li> <li>Can hub appointments, Rowan unit assist practices under particular pressure? Could PMs adjust hub priorities early in day if needed? LS to propose WhatsApp group or equivalent.</li> <li>Neil Fisher looking at monitoring telephone systems to assess primary care demand.</li> <li>Winter Director role to merge with urgent care lead role to September.</li> <li>LC queried hours of Ambulatory Care Unit. – TA to review.</li> <li>Social care can be main block to remaining at home esp. arranging urgent carers. TA looking at how to give GPs better access to social care.</li> <li>Note links into SCAS and PTS – eg discuss clear messaging from 111.</li> <li>Deddington raised cross-border ambulance problems. FC pursuing with commissioner.</li> <li>TA adjusting Hospital at Home and HART approaches to minimise travel and maximise capacity.</li> </ul>	<p>LS</p> <p>NF</p> <p>TA</p> <p>TA</p> <p>FC</p> <p>TA</p>

	<ul style="list-style-type: none"> <li>district nursing reporting no capacity for catheter change. NF queried with DN manager – reviewed approach.</li> <li>FC to contact PMs urgently for current housebound flu immunisation figures and follow up gaps via CCG flu lead.</li> </ul> <p>Queries and comments to: <a href="mailto:Winterteam@ouh.nhs.uk">Winterteam@ouh.nhs.uk</a></p>	FC
11.	<p><b>AOB</b></p> <p><b>i. Horton obstetrics</b></p> <p>Shelley H introduced 2 slides (available at <a href="#">this link</a>) to say that OCCG is working with OUHFT and neighbouring CCGs to:</p> <ul style="list-style-type: none"> <li>Relook at housing and population growth across the catchment area</li> <li>Review all identified options to see if there is a feasible staffing model to main obstetrics at the Horton</li> <li>Address service interdependencies</li> </ul> <p>Members invited to e-mail <a href="mailto:shelley.hayles@nhs.net">shelley.hayles@nhs.net</a> with queries and comments. Discussion expected at future meetings.</p> <p><b>ii. January 2019 meeting</b></p> <p>Noted some localities discussing whether to cancel January 2019 meeting to release more clinical capacity. Agreed too early to decide as:</p> <ul style="list-style-type: none"> <li>level of clinical need not known</li> <li>need to discuss response to pressure and other issues including IFD</li> </ul> <p>FC to contact practices in early January to assess winter pressures on practice clinicians and inform a decision by the locality leadership. Until then the meeting stands.</p>	All
12.	<p><b>Key issues to take back for action or info to:</b></p> <ul style="list-style-type: none"> <li>Discuss Integrated Front Door staffing proposal</li> <li>Discuss neighbourhood working options</li> <li>Prepare to implement Integrated Respiratory Team pilot</li> </ul>	All

**Items anticipated on the 13 December North locality agenda:**

- Review of North locality partnership working**
- Integrated Front Door** next steps
- Transformation for Sustainability** Discussion of practice/cluster actions

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**Dates of scheduled North locality Meetings (all Tuesdays)**

Date	Time	Venue	Chairing practice
18 Dec 2018	1330-1530	South Bar House	Hightown
15 Jan 2019	1330-1530	South Bar House	Deddington

26 Feb 2019	<b>1330-1700</b>	South Bar House	Cropredy
19 March 2019	1330-1530	South Bar House	Chipping Norton HC

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**Future North locality meetings agreed at October 2018 meeting**

16 April 2019

21 May 2019

18 June 2019

16 July 2019

20 August 2019

17 September 2019

15 October 2019

19 November 2019

17 December 2019

21 January 2020

25 February 2020 (Delayed due to school holiday)

17 March 2020

Sandwich lunch available from 1.15pm for each meeting

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