

**North Oxfordshire Locality partnership**
**Notes of Meeting:** Tuesday 15 January 2019

Chair: Dr Martyn Chambers

**Attendance**

<b>Practice</b>	<b>GP representative</b>	<b>Practice Manager</b>
Banbury HC	Dr Richard Taylor	Apologies
Bloxham	Dr Cath Rose	Fiona Jefferies
Chipping Norton HC	Dr Neil Fisher	Chris Bean
Cropredy	Dr Barry Tucker	Andrea Kirtland
Deddington	Dr Martyn Chambers	
Hightown	Dr Sarah Lourenco	Di Stringer
Horsefair		
Sibford		
West Bar	Dr Stephen Haynes	Helen Murphy
Windrush	Dr Simon Bentley	
Woodlands	Dr Shishir Kumar	Deb Chronicle
Wychwood	Dr Katy Walsh	Vanessa Newman

<b>Other attendees</b>		
Lay members	Anita Higham	
Cherwell DC		
NOLG Clinical Directors	Dr Shelley Hayles	Dr Neil Fisher
OCCG	Diane Hedges, Julie Dandridge, Fergus Campbell	
PML / NOxMed	Andrew Elphick, Eleanor Baylis	

		<b>Actions</b>
1.	<b>Apologies &amp; Declarations of Interest</b> <ul style="list-style-type: none"> <li>i. Apologies: Laura Spurs, Janet Garrison, Dr David Spackman, Dr Louise Cornwall, Nicci Bennett, Chris Ringwood</li> <li>ii. Update declarations of interest: AH reiterated her role on the OUHFT Council of Governors..</li> <li>iii. Conflicts of interest pertaining to agenda items: none indicated</li> </ul>	
2.	<b>Locality Clinical Director introduction</b> <ul style="list-style-type: none"> <li>i. <b>NHS 10 year plan</b> Shelley Hayles gave a <a href="#">presentation</a> introducing the NHS Long Term Plan. Noted targets and performance available on the <a href="#">NHS England website</a>. NB new 28 day target for cancer diagnosis or ruling out.</li> <li>ii. <b>Neighbourhood working update</b> <b>Rural North neighbourhood</b></li> </ul>	

	<p>Chris Bean presented <a href="#">slides</a> on the current and potential development of the North Oxfordshire Rural Cluster (NORC) and noted that it was a working title for the grouping. Noted additionally:</p> <ul style="list-style-type: none"> <li>• Cropredy now included and Sibford has not joined at this time.</li> <li>• Need a clear purpose for development</li> <li>• while formal arrangements not yet required, current status might not be sufficient for more major services/developments in future</li> </ul> <p><b>Banbury neighbourhood</b></p> <p>Stephen H noted on behalf of Banbury practices:</p> <ul style="list-style-type: none"> <li>• complexity of neighbourhood comprising a very large PML merged practice and some smaller practices</li> <li>• practices agree that they wish to operate services as a single neighbourhood.</li> <li>• Need some guidance and support to develop discussion. Note NORC paid for CSU facilitator.</li> <li>• Further Banbury meeting planned after this locality meeting.</li> </ul> <p><b>Issues for all neighbourhoods:</b></p> <ul style="list-style-type: none"> <li>• JD advised that much of direction for primary care networks in NHS Long Term Plan. Services likely to be commissioned from networks. The proposed national network contract may affect requirements</li> <li>• AE to advise practices further on emerging Oxfordshire Care Alliance proposals for neighbourhood development. He noted that progress with services would need: <ul style="list-style-type: none"> <li>○ data broken down by neighbourhoods/networks</li> <li>○ Infrastructure eg ICT</li> </ul> </li> <li>• AH asked whether there were questions to take to the patient forum. Neighbourhoods will need strategies to develop patient engagement.</li> </ul>	AE
3.	<p><b>NOXMED business items (discussed after Item 4)</b></p> <p>AE presented slides showing recent activity data for the NOxMed federation services and also advised:</p> <ul style="list-style-type: none"> <li>• mental health services provided in practice not hub.</li> <li>• Nurse capacity not well used</li> </ul> <p>AE to respond to practice request for updated advice/summary on which patients can be referred to which service.</p>	AE
4.	<p><b>North locality partnership review Jan 2019</b></p> <p>FC highlighted that:</p> <ul style="list-style-type: none"> <li>• The locality needed to decide whether to continue the NOLG/NOxMed pilot as only agreed for 1 year initially.</li> <li>• The context of change discussed earlier made it impossible to develop long-term arrangements</li> </ul>	

	<ul style="list-style-type: none"> <li>OCCG recommended continuing all existing arrangements for 1 year</li> <li>A vote of the member practices was necessary to vary from the published constitution</li> </ul> <p>The 10 practices represented agreed unanimously by a show of hands with the recommendations that:</p> <ol style="list-style-type: none"> <li>The North locality continues the existing partnership between NOLG and NOxMed with joint leadership and joint monthly meetings until March 2020.</li> <li>the North locality does not hold the open elections due for LCD and Deputy before March 2020 as the roles are likely to evolve or change significantly over a full term</li> <li>the North locality retains the experience, commitment and continuity offered by the incumbent interim Locality Clinical Director and Deputy until March 2020</li> </ol> <p>FC to ensure this decision registered with OCCG Governance team and HR changes made.</p>	FC
5.	<p><b>NOLF public forum update</b></p> <p>AH advised that next North Oxfordshire Locality Public &amp; Patient Forum steering group in early February expected to consider:</p> <ul style="list-style-type: none"> <li>Patient concern whether on-line access is a barrier to face-to-face appointments. Shelley advised that national aspiration for 30% non face-to-face largely achieved through existing phone and on-line use this. No plan to reduce GP access.</li> <li>OOH – any problems. No concerns about access.</li> <li>Topics of public meetings in North to be discussed</li> <li>Implications for patients from NHS Long Term Plan</li> </ul> <p>AH noted the HealthWatch Oxfordshire 22 January 2019 network event for Patient Participation Groups. Neil Fisher to speak.</p> <p>As OUHFT governor AH commented on:</p> <ul style="list-style-type: none"> <li>Her welcome for the chair-elect</li> <li>Query over impact of OUHFT/Mayo collaboration reported in 2017.</li> </ul>	AH
6.	<p><b>Information updates for noting</b></p> <p><b>i. Planned care projects update</b></p> <p>Shelley Hayles highlighted:</p> <ul style="list-style-type: none"> <li><b>Gynaecology project</b> – CCG talking to federations about delivery. Need more GP involvement in the North – contact <a href="mailto:shelley.hayles@nhs.net">shelley.hayles@nhs.net</a> with interest.</li> <li><b>Gynaecology Outpatients</b> Shelley responded to GP questions: <ul style="list-style-type: none"> <li><b>waiting list</b> at OUHFT falling slowly but need extended period of diverting patients to help service resolve waiting list.</li> <li><b>e-mail advice</b> - anticipate will re-start soon.</li> </ul> </li> </ul>	GPs

	<ul style="list-style-type: none"> <li>○ <b>access to medical records</b> -non-OUHFT clinicians (eg Warwick) don't have access which affects care and means GPs need to forward results etc. SH has flagged with national LHCRE (Local Health and Care Record Exemplars) project as a barrier.</li> <li>● <b>Respiratory pilot</b> in North: need GP staff (Job description tabled – FC to circulate <a href="#">final version</a>) and clinical rooms for delivery.</li> <li>● <b>Clinical lead</b> - Dr Stephen Attwood planned care clinical lead handing over to Dr Will O'Gorman in February. Shelley continuing her role and keen to receive and consider ideas about service development via <a href="mailto:shelley.hayles@nhs.net">shelley.hayles@nhs.net</a></li> <li>● <b>integrated cardiology service</b>. BT gave positive feedback about this new service and its implementation.</li> </ul> <p><b>ii. Brief information items</b></p> <p><b>GP Update</b> – discussion of timing and location ie 1300 start in Oxford not convenient for North GPs. JD noted that OCCG considering a different approach for 2019-20 and will discuss further with primary care.</p>	<p>FC GPs</p> <p>All</p> <p>JD</p>
7.	<p><b>Notes of 18.12.18 North locality meeting</b></p> <p><b>i. Approve minutes for accuracy</b></p> <p>Notes agreed as a fair record</p> <p><b>ii. Matters arising and actions not yet discussed</b></p> <ul style="list-style-type: none"> <li>● <b>Integrated Front Door</b> project: NF has circulated draft job description for a shared GP post to Banbury practices for comment. Some info about interest in shared posts highlighted by practices. NF will shortly need confirmed numbers of sessions needed in practice to move towards</li> <li>● FC to resend 20 Dec North Update containing links to NHS England evidence on neighbourhood sizes and network case studies.</li> <li>● FC still seeking concise explanation of STP vs CCG for AH.</li> <li>● Adult Safeguarding L3 – not all have received dates. FC to follow up with Vicky Spurs @ PML.</li> </ul>	<p>NF</p> <p>FC</p>
8.	<p><b>AOB</b></p> <p><b>i. Horsefair Surgery</b></p> <p>Shelley noted Horsefair's recent Good <a href="#">CQC judgement</a> which indicates a positive way forward for the practice.</p> <p><b>ii. Cancer screening education session</b></p> <p>Cancer screening education session on 17 January. Will hold further sessions – strongly advise attendance for practices who have not yet participated.</p> <p><b>iii. Suggested topics for future meetings</b></p> <ul style="list-style-type: none"> <li>● <b>Premises and estates</b> – planning for growth. JD noted that: <ul style="list-style-type: none"> <li>○ Survey underway currently</li> <li>○ OCCG has now appointed a qualified Estates lead – Peter Redman</li> </ul> </li> </ul>	<p>FC</p>

	<ul style="list-style-type: none"> <li>○ CCG is responsible for addressing growth but does not hold capital funding</li> <li>● <b>neighbourhoods</b> – need space and time to discuss what services should be developed at neighbourhood level.</li> <li>● <b>GP contract</b> for 2019-20 on (no information at present)</li> </ul> <p><b>iv. 26 February extended meeting</b></p> <p>FC advised that this would focus on working at scale for sustainable transformation and he would be doing further planning with Laura Spurs. Topics highlighted so far included signposting and group consultations. Potential for time working in neighbourhood groups.</p>	<b>FC/LS</b>
9.	<p><b>Key issues to take back for action or info to Federation or Practices</b></p> <p>None highlighted</p>	

**Items anticipated on the February 2019 agenda (extended meeting):**

- **Review of locality plan**
- **Neighbourhood / primary care network working**
- **Use of practice bypass numbers** - access for additional clinical services
- **Transformation for Sustainability** Discussion of practice/cluster actions and working at scale to meet LIS Quarter 4 requirements

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

<b>Date</b>	<b>Time</b>	<b>Venue</b>	<b>Chairing practice</b>
26 Feb 2019	<b>1330-1700</b>	South Bar House	Chipping Norton HC
19 March 2019	1330-1530	South Bar House	Bloxham tbc
16 April 2019	1330-1530	South Bar House	tbc
21 May 2019	1330-1530	South Bar House	tbc
18 June 2019	1330-1530	South Bar House	tbc
16 July 2019	1330-1530	South Bar House	tbc
20 August 2019	1330-1530	South Bar House	tbc
17 Sept 2019	1330-1530	South Bar House	tbc
15 October 2019	1330-1530	South Bar House	tbc
19 Nov 2019	1330-1530	South Bar House	tbc
17 Dec 2019	1330-1530	South Bar House	tbc
21 January 2020	1330-1530	South Bar House	tbc
25 Feb 2020	1330-1530	South Bar House	tbc
17 March 2020	1330-1530	South Bar House	tbc

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