

Clinical Commissioning Group

MINUTES: Draft V3

TITLE: South East Oxfordshire Locality Executive Meeting Held on: 6th March 2018
Venue: Hampden House, Chalgrove
Chairing practice: The Hart Surgery

Present:	Practice	Representative
	The Bell Surgery	Dr Chris Langley, GP
		Louise West, PM
	Chalgrove and Watlington	Dr Angus Gregory, GP
	surgeries	Carole Montague, PM
	Goring and Woodcote Medical	Dr Angela Rowe GP
	Practice	Julia Beasley, PM
	The Hart Surgery	Dr Philip Unwin, GP
		Sarah Moberly PM
	Mill Stream Surgery	Dr Lucy Jenkins, GP
		Sarah Denton PM
	Morland House Surgery	Dr David Copping, GP
		Nollag McGrath, PM
	Nettlebed Surgery	Dr Lisa Silver, GP
		Pat McGill, PM
	The Rycote Practice	Dr Merrell Vaughan, GP
		Karl Savage, PM
	Sonning Common Health Centre	Dr Ralph Drury, GP
	Wallingford Medical Practice	Dr Charles Hughes, GP
		Debra Perry, PM
	Non-medical clinicians	
In attendance:	OCCG	Ed Capo-Bianco (ECB), Locality
		Clinical Director
		Anne Lankester (AnL), Locality Co-
		ordinator
		Gareth Kenworthy OCCG
		Lucinda Kenrick (LK) Minutes
	SELF	John Reid
	Others	Dr John Hughes, Sue Ryder
		Holly Spiers, Sue Ryder
		Alison Toomey, Sue Ryder
		Janet Lailey, Sue Ryder
		Dr Jonathan Crawshaw, OCCG
		Paul Swan, OCCG
		Andrea Shand, CAMHS
		Mel Noton, CAMHS
		Lajla Johansson, OCCG

1.	items: 1, 2, 5, 3, 4, 6, 8, 7 Introduction	Action
	The Chair – Dr Philip Unwin of The Hart Surgery welcomed everyone to the South East Oxfordshire Locality (SEOL).	
	Apologies received: Andrea Tsoi, PM, Sonning Common Health Centre	
	There were no updates to the declarations of interest.	
2.	Minutes of the last meeting, 6 February 2018, and Matters Arising	
	The minutes were agreed for accuracy.	
	It was noted that there was still confusion around prescription of the Mirena Coil following a letter circulated from Shelley Hayles; AnL informed the group that the changes had not yet been agreed as they first have to be ratified at APCO (Area Prescribing Committee Oxford) first.	
3.	LCD Update	
	i. Mental Health Workers in Primary Care- £72K ii. Clinical Pharmacists in Practice- £32k It was noted that AnL has met with two private companies who would be able to provide the pharmacist services in practices to discuss a pilot scheme with the money available. Of the companies, PS UK and SOAR beyond, it was agreed that AnL would arrange a follow up meeting with PS UK and the federation to discuss the pilot in detail.	
	In order to allow the pharmacists to begin work immediately it was agreed that the practices would send AnL the number of patients they have on over 10 medications (excluding creams and appliances). PS UK will be asked to come up with options for agreement on the period and frequency of visits outlined in the contract from these lists.	All
	iii. Care Home support: who convers homes not in the scheme? Can they provide assurance that matches the current Enhanced service?	
	AnL went through a list of those Care Homes not covered by the scheme and Practices were asked to inform AnL of any private arrangements in place.	

The Rycote Practice expressed concern around provision of funds to include planned care homes in the scheme in the future; with at least two already planned in Thame it would be difficult to provide the same service in different care homes if one is funded and one is not. GK noted that the OCCG were aware of many plans to open care homes across the county and were looking into the possible provision of future funds.

A query was also raised around the extension of funding to sheltered accommodation; AnL confirmed that these situations are looked at on a case-by-case basis and therefore, provided at least 50% of patients are registered to the practice, similar funding may be allocated.

iv: Federation

ECB informed the group that Sara Doughty has been appointed following an interview process and will likely be attending the May Locality meeting to introduce herself to the practices.

4. SE Locality Forum Update

Nothing on which to report.

5. Integrated Community Palliative Care Service – South Oxfordshire

Representatives from Sue Ryder, and Dr Jonathan Crawshaw and Paul Swan from OCCG attended to introduce the pilot scheme being developed for an enhanced community palliative care service in South Oxfordshire.

Sue Ryder currently run 7 hospices across the country, but have received feedback requesting greater access to community palliative care; especially in Nettlebed where this pilot is to begin. Here the inpatient units would act as activity hubs; maintaining inpatient services until a new venue can be found (no beds will be closed, but beds will be moved in the next 18-24 months), and providing a Single Point of Access (SPA) and advice line run by clinical nurse specialists (CNSs) to refer palliative care into the community. This number would be available to professionals, and patients and their families to make referrals. A detailed outline of the Proposal and Scope of services is provided in Schedule 2.

It was requested here that Sue Ryder be careful to explicitly label their SPA so as to avoid confusion with the other SPA services available. It was also advised that they contact the current SPA services and inform them that they may get some mistaken calls to be signposted to Sue Ryder.

Sue Ryder also clarified that, though visits overnight may be arranged eventually as part of this 24/7 service; it is not in their contract to provide night sitting / night time care. Dr Crawshaw confirmed that this is a service that is out to re-tender, but is currently being provided by Marie Curie, and any problems GPs are experiencing with getting night time care from a Marie Curie nurse should be reported to OCCG Quality team. As the night-time care contract is out to re-tender it was asked if this would be something that could be covered by the Sue Ryder pilot, but Dr Hughes noted that the workforce implications were such that this wouldn't be feasible for the time being

It was noted that a workshop is planned for April to which all the practices and other palliative care service providers would be invited to provide input into the forming and running of the pilot. A couple of dates for this would be circulated via the GP Bulletin in the next couple of weeks. Further updates will be provided by Paul Swan, direct marketing materials form Sue Ryder, and the GP Bulletin.

6. CAMHS Service Update

Representatives from CAMHS and OCCG gave a presentation on the new CAMHS model (<u>here</u>); noting that the entire service was undergoing significant transformation and so this would likely not be the final version of the service.

It was noted that CAMHS will now be working more closely with third sector organisations that take referrals up to the age of 25 allowing for a smoother transition out of CAMHS; but this would only apply to those service users known to CAMHS – over-18 year olds would not be able to use the CAMHS SPA to self-refer to the third sector services.

The greatest concern raised by the group was the length of the waiting lists for CAMHS, but it was noted that this new model would allow service users to be given tele-support and advice before being seen face-to-face where possible which would help to reduce the waiting lists.

Circulate the communication from CAMHS on the new model of e-referrals when it has been finalised and sent via the GP bulletin.

ΑII

7. Locality Meetings Review

i. Break out time to discuss in clusters. Notes on Flipchart sheets typed up separately.

	SEOLG Agenda Item 7 Flipchart Write up 0	
	It was agreed that it would be best to keep the meetings monthly, but with the option of looking to cancel those in August and December if attendance looks to be low.	
	It was also agreed that every other meeting could be extended and attendees could split for the last hour to address the federation's meeting and the PM's meeting.	
8.	i. Other issues – contact Anne Lankester It was noted that two patients who had been referred to Abingdon Community Hospital for Echocardiograms arrived to find no record of their appointment. The appointments were then rearranged to Yarnton later that week, but the same problem occurred. AnL agreed to take to the OCCG Quality team to investigate.	AnL
	ii. Planned Care Project Report ECB noted that there were no actions arising from this report, but encouraged attendees to read through for information (here).	
	iii. Use of Email advice lines	
	iv. Pathology Issues (Julia Beasley) Goring and Woodcote Surgery reported a dramatic increase in the number of specimens going missing or showing strange results (particularly inaccurate Potassium levels being reported) since they began using the Wexham site; with some of their patients being unnecessarily called in the middle of the night by the out of hours service.	
	Julia noted that on Friday (09.03.2018) there is a meeting organised with the Goring and Woodcote Surgery partners and the director of Pathology (Ian Fry). It was requested that other practices get in touch if they have experienced any issues so that they can all be addressed at this meeting.	All
	AnL will also ensure that Victoria Harte and Sula Wiltshire are aware of the meeting and requested that practices continue to report any problems on Datix.	AnL
	v. LIS 17-18 update: reminder to all to complete actions and send in data as required.	All
	vi. Firearms Letter Following a new letter from Thames Valley Police outlining those	

	conditions they require GPs to disclose when a patient asks for a gun license; it was advised that practices should liaise with Paul Roblin to request advice from LMC on the appropriate response.	All
	vii. Easter Pressures It was noted that funding would be available, through the federation, for providing extra appointments over the Easter period. There was some confusion about the length of these appointments, when they would need to be offered, the money available, and how many appointments each surgery would have to offer. All agreed to opt into this funding scheme following clarity on the above points. Federation to discuss with Matthew Epton, OCCG. viii. Discharge Letter, Morland House Surgery: Practices are asked to Datix any issues, AnL has advised Merlin Dunlop at OCCG of issues	SM
	ix. Healthshare Feedback Feedback from Morland House Surgery, and echoed by other practices, was that the updated Healthshare was proving more difficult for users and it was requested that GP CCG lead for MSK be invited to the next meeting to discuss this.	AnL
	Date of Next Meeting: Chairing practice: Mill Stream	
	Tuesday 3 April 2018 13:00 -15:00 Hampden House, Monument Park, Warpsgrove Lane, Chalgrove, Oxford, OX44 7RW	
	Action Log/ Matters Arising (all completed actions will be removed)	
	removed)	
1.	Action: Practices to contact AnL with how they propose to spend their ECIS (Elective Care Incentive Scheme) money. Still waiting for response from some practices; AnL.	ALL
2.	Action: Investigate if the parking could be used at Townlands building it is vacant? Ongoing	ECB
3.	Action: Practices to send AnL the number of patients they have on over 10 medications (excluding creams and appliances) to inform contract discussions with PS UK.	All
4.	Action: Circulate the communication from CAMHS on the new model of e-referrals when it has been finalised and sent via the GP bulletin.	AII
	Action: AnL raising issue of echocardiogram referral appointments	

	disappearing with Quality Team at OCCG.	AnL
6.	Action: Practices get in touch with Julia Beasley (Goring and Woodcote Surgery) with any issues experienced with specimens going to the pathology lab in Wexham to be addressed at a meeting on 09.03.2018 with the Head of Pathology and the surgery partners. AnL to ensure quality team are aware of this and practices to continue to report issues on Datix.	All
7.	Action: LIS 17-18 update: reminder to all to complete actions and send in data as required.	All
8.	Action: Practices should liaise with Paul Roblin to request advice from LMC on the appropriate response to the firearms letter from Thames Valley Police.	All
9.	Action: Federation to discuss Easter pressures funding with Matthew Epton OCCG to gain clarity around requirements.	SM
10.	Action: GP OCCG lead for MSK to be invited to the next meeting to discuss Healthshare feedback.	AnL