



Cambridgeshire LMC Meeting Minutes

Thursday 12th November 2020 at 2:45pm

Virtually, via Webex

Present:

Drs Diana Hunter (Chair), Fatima Alkali, Kavita Bhardwaj, Sean Culloty, Ben Curtis, Francesca Frame, Emma Gayton, Liz Halliday, James Howard, Steve Jones, Lisa Lim, Liam Loftus, Harshad Mistry, Neil Modha, Mike Moor, James Morrow, Kathryn Newell, Paula Newton, Duncan Outram, Simon Poole, Nathalie Rodriguez-McCullough, Jo Scrivens, Richard Weyell, Jennifer Wheatley

In attendance: Dr Katie Bramall-Stainer, Alice Benton and Emma Drew

1. Welcome, introduction & apologies for absence

Apologies were received from Drs Clare Routledge and Nanette Kelly.

The Chair noted that tomorrow, 13th November 2020 marks the last day of Executive Officer, Jo Audoire's employment with Cambs LMC after nearly a decade. The Committee were saddened that global events have prohibited a well-deserved send off, but reflected on her dedicated support to the LMC, Committee and Constituents during that time. The Chair read out a message from Jo to the Committee and wished her all the very best for the future.

2. Minutes of previous meeting

2.1. Minutes of the meeting Thursday 15th October 2020

The minutes were approved.

3. Matters arising

3.1. Matters arising not elsewhere on the Agenda

There were no matters arising not elsewhere on the agenda.

4. Cambs LMC Capacity Calculator & Workload Transfer Survey

4.1. Findings and Report

4.2. Next steps

The Committee took the above items together and received item 4.1.

The Chief Executive presented the report, highlighting the key findings, recommendations and conclusion, expressing thanks to Cambridgeshire & Peterborough constituents for their engagement which reflected a response rate of over 80%.

The data demonstrates the true feeling and frustration within General Practice which needs to be addressed to strengthen closer working relationships so that smarter collaboration, and an understanding of each part of the system enables a more sustainable future.

The Committee commented on the high level of detail within the report; how powerfully the data supports the narrative; and agreed that this can now be used to develop an approach to secure sustainability for General Practice in the future.



5. STP update

5.1. Findings and Report

5.2. Next steps

The Committee took the above items together and received item 5.1.

The Committee noted that the plan of action locally is fast moving and heard from the Chairs' of both the North & South Alliances, who explained the work undertaken over the last two years to promote collaborative provider working, and to ensure the voice of general practice is not lost.

The Committee heard that there will be three system tiers, and what the implications of this will be – the Integrated Care System, the north and south Integrated Care Partnerships & PCNs - which will include the opportunity to have General Practice in the decision-making process from ICS board to practice level, contributing to setting the system agenda.

The Chief Executive thanked the Committee, confirming that although national legislation is currently under consultation, it is important for General Practice to understand and be part of the local ICS narrative.

6. Covid-19 Vaccination Programme

6.1. CVP specifications and cover letter

6.2. Location implications and feedback

6.3. Next steps for practices, CDs and PCNs

The Committee took the above items together and received item 6.1.

The Chief Executive confirmed that the reported details of the Covid Vaccination Programme has led to confusion as to whether it will be delivered as a Directed Enhanced Service or an alternative statutory instrument, and reminded the Committee of the 'LMC View' that was based on the information that had been provided thus far.

The Chief Executive reminded the Committee, that General Practice is currently working at 156% capacity and of the importance to remember key messages, imploring General Practice to focus on what they can do, should do, and will do - and that more clarity is still required.

It was noted that a local mass vaccination webinar is planned for next week which Committee members were encouraged to attend. It was also confirmed that details will be published in tomorrow's newsletter.

The Committee were also informed of a 'Covculator' spreadsheet tool developed by Surrey & Sussex LMCs which will assist practices in gauging whether the programme can be realistically delivered within the primary care workforce. This will be shared via tomorrow's newsletter also.

The Committee were supportive of the LMC's proposed local solution, suggesting, pending the publication of the contract specification:

- General Practice to vaccinate care home residents
- Mass Vaccination Centres to vaccinate care home workers
- CPFT to vaccinate housebound patients
- General Practice to vaccinate patients over 80 years olds through local collaboration, either via PCNs or Federations
- Mass Vaccination Centres to vaccinate over 60s
- General Practice to potentially vaccinate those who are < 65 years old considered to be high-moderate risk

The Committee agreed that General Practice will want to be part of a wider system solution and were reassured that the LMC Executive is working with local system partners to explore options of how a workable local solution can be agreed.



7. CCG update

7.1. CCG's spot check exercise

The Committee received this item and were reminded of the CCG GP Access Communications Toolkit which can be found on the Primary Care COVID-19 communications update gateway emails.

The LMC has had previous input to wording on posters and the Committee considered that a future joint communication from the CCG/LMC might serve as a helpful reminder of the toolkit and encourage all practices to undertake a review of their websites, door signs and telephone messages.

7.2. Draft Diabetes LES

The Committee received this item, discussed the prospective LES and guidance and agreed with the proposals. The Committee stated its desire for all expectations around reportable activity that falls outside the revised QOF, to be stepped down with immediate effect until 31.03.2021.

7.3. Income protected QOF indicators for discussion

The Committee received this item and thanked the Executive team for their work in securing a low bureaucracy, high trust solution with the CCG.

7.4. Proposed Governing Body changes – LMC consultation sought

The Committee heard that the LMC had been asked to comment on the proposed amendment to the CCG Governing Body Membership, and unanimously passed a vote to accept this.

8. Executive Team actions, feedback & questions

8.1. LMC Elections coffee room/kitchen poster

The Committee received this item, noting that subsequent to this being sent to the Practice Managers for circulation, the office has started to receive subscription requests. The Committee also heard that between now and February 2021, the back page of the newsletters and the rolling front page of the website will also feature a piece on LMC elections for Spring 2021.

9. Report from our GPC Representative

9.1. Verbal update

The Chair thanked the Committee for their support during what has been a challenging and pressured time on GPC England, with representatives not being able to candidly share early discussions with LMC members, despite media speculation, after which guidance then shortly followed.

The Chair proposed a plan for the last committee meeting of 2020, and how perhaps the PCN Clinical Directors could join the LMC Members, with a view to focus on a future local strategy for General Practice given the ICS agenda. This will give both groups an opportunity to reflect together on moving forward in the system as a united profession, continue supporting each other and build on more collaborative work in the future. The Committee endorsed this proposal.



10. Items to receive

- 10.1. LMC October 2020 Newsletter
- 10.2. LMC update emails from GPC

The Committee received these items

11. Any other business

There was no further business to discuss

12. Date of next meeting

Thursday 17th December 2020 3:00pm-5:30pm – virtual, via Webex