

## **BARKING AND HAVERING LOCAL MEDICAL COMMITTEE**

**MINUTES** Part Two of the 227<sup>th</sup> LMC Meeting held in the Committee room,  
Administration Block, St. George's Hospital, Hornchurch, on 06 JULY 2006  
*An OPEN Meeting*

**PRESENT:** Dr A Mittal (Chairman)  
Drs A Aggarwal (Vice Chairman)  
Dr M Rahman (Treasurer)  
Drs T Bland, A Deshpande, A Jabbar, J Kakad, R Kalra, J O'Moore, P  
Patel, S Poolo, P Prasad, G Saini, O M Sanomi  
Non-principal: Dr S De  
Co-opted: B Dixit

Madhu Pathak (Medical Secretary)  
Sue Elliott (Admin. Secretary)

Ralph McCormack, Chief Executive, HPCT  
Hilary Ayerst, Chief Executive, B&D PCT

### **APOLOGIES FOR ABSENCE:**

Rebecca Scott, Director of Strategy  
Eric Saunderson, Joint Medical Director  
Robert Evans, Associate Director of Commissioning (Primary Care)  
H Ahmad, G Barclay, C Claoue, V Goriparthi, A N Patel, N Rao,  
M Roy, S Subramaniam, I Sudha, N P S Teotia

8. **MINUTES:** The Minutes of the Meeting held on 01 June 2006 were approved and signed as a true record of the meeting.

### 9. **MATTERS ARISING OUT OF THE MINUTES**

#### ***Enhanced Services***

*B&D* – About 50% of claims have been received. The PCT are urging other GPs to encourage colleagues to claim their payments. The Chairman stated that other services have been discussed with Simon James and should be finalised within the next few weeks.

#### ***Choose and Book***

*B&D* – The policy has been changed and the system has been suspended until further guidance has been received. The PCT have given a lot of support to practices to encourage them to use the system. 25% of appointments needed to be made on the system by the end of June but this has been extended to the end of the year.

### ***Practice Based Commissioning***

*B&D* – The budgets for 2006-07 have been finalised and signed off and are ready for circulation. The Board will decide at its July meeting to restructure the PEC to include the three cluster leads as full members.

*Havering* – Dr Deshpande asked, what is the input from BHRT as far as PBC is concerned, have the clinicians been involved? Do they know what will happen with PBC? Dr Saini stated that Suzanne Lawrence had been invited to the PBC Steering Group meetings but she had only attended one. HPCT have been telling BHRT to be mindful of the fact that PBC is expected to have a big impact on the services BHRT currently have. There is recognition that PBC will decrease BHRT activity.

Dr Saini stated that the seven cluster leads have received unified budgets showing what had devolved to practices. Most practices know they have to sign an inter-practice agreement.

### ***QOF Visits***

*B&D* – The website has now been corrected. Hilary Ayerst will check if the PCT has agreed a way to take this year's visits forward.

*Havering* – The PCT's intention is to agree a mechanism for visits next year, which will be shared with the LMC. Dr Bland said that it is helpful that the PCT are going to look differently at the QOF visits this year as in the previous two years practice staff have taken a lot of time preparing for the visits. If there is to be a more targeted approach to this it will have to be agreed between the PCT and the LMC.

### ***Midwifery Services***

*B&D* – Hilary Ayerst stated that the PCT regularly meet with BHRT to discuss Midwifery Services and are looking for representation from the LMC to attend these meetings. Dr Dixit's name had been put forward previously to attend these meetings. It has come to light that midwives have advised patients to change GPs to get services.

*Havering* - Ralph McCormack stated that the PCT has received a letter from Gillian Walton concerning the rearrangement of Community Maternity Care. A copy of this letter was given to the LMC.

### ***Lift***

*B&D* – Dr Goyal has now moved into Church Elm Lane, Chilvers McCray into Markgate and Care UK into Broad Street. Hilary Ayerst has been interviewed by the BBC for News 24 regarding Broad Street.

*Havering* – Dr Sudha has now moved and South Hornchurch should be occupied sometime in July. Dr Jabbar stated that there has been no progress in the outstanding issues at Harold Hill.

### ***Anti-Coagulation Clinic***

*B&D* – Hilary Ayerst stated that Eric Saunderson has written to Dr Brownell regarding the prescribing of Warfarin but has not yet received a reply. He is following this up. BHRT has alerted both PCTs that they cannot continue the service when they move as they cannot oversee the medicine at the new site and cannot source Warfarin in the quantity required.

*Havering* – HPCT has not taken any action this year to reduce the SLA and will look at this as it needs to move to Primary Care. Dr De stated that without specialist training GPs have to prescribe Warfarin, which leaves them very vulnerable. Ralph McCormack agreed that this is not the sensible way to organise services and manage patients in a cohesive way. Dr Aggarwal asked, should the GPs be giving the Warfarin or should the PCT be writing to BHRT to say that if they cannot provide Warfarin they should be giving prescriptions that can be dispensed in the community.

### ***District Nurses***

*B&D* – District Nurses are to remain GP attached. Where patients live much closer to an other clinic the District Nurse referral will be made to the clinic nearest the patient but in these circumstances the PCT will notify the Ps in advance.

## **10. FIT FOR PURPOSE**

Hilary Ayerst stated that this is a requirement of the DoH to ensure that all PCTs nationally are fit for their purpose. B&D are being visited this week and a report will follow.

### ***Fit for Future***

Hilary Ayerst stated that this has encouraged some work with Waltham Forest and Whipps Cross. As a result of this work other inner London PCTs have found it interesting and will piggyback it as well. B&D will not wait for them but will go ahead with Phase 1 and the other PCT can join B&D for Phase 2 if they want to. Suzanne Lawrence has stated that there will be implications if capacity is decreased.

The question was asked whether there was only one B&D member on the Steering Group. Hilary Ayerst confirmed that it was the PCT's intention to have two members and that will still be a requirement for the future. These two members will probably be Dr Goriparthi and Dr Mohan. Hilary also confirmed that there has not yet been a decision on the closure of either King George's or Whipps Cross. This should go to consultation in October.

## **11. ANY OTHER BUSINESS**

### ***Transport for Patients***

John Young and Helen Crowley from BHRT attended the meeting to explain the non-emergency transport arrangements for patients. BHRT has introduced an eligibility criteria and have simplified the form, which will help BHRT manage the service.

Dr Aggarwal asked the following questions:

- Does the form cover LAS as well as BHRT?
- Will Outpatients book their own ambulances?
- Will ambulances for follow up appointments be organised by the hospital?
- What happens if patients need to be transported to a hospital outside the area?

Dr Kalra stated there should be a section on the form to say why a patient has been refused.

In reply Helen confirmed that this form is for BHRT only. There is a separate form for LAS and when practices fax this form to her office it is then faxed on to LAS. Helen stated that the receiving hospital should complete the form and arrange transport. John added that the form may come back to the practice for reassessment to determine if the patient's circumstances have changed but this will only happen if there is a long wait between appointments. Helen has made up a package, which includes the LAS form, but if a patient needs to be transported out of the area the practice can phone a specific hospital for a copy of their form. If the form is sent to Helen's office it will be faxed to the correct service. In reply to Dr Kalra's suggestion, John agreed that this could be added.

John stated that his department has a responsibility to manage public funds properly and assess the patient on medical need only, not on their financial situation.

It was agreed that Eric Saunderson would do another assessment of the form.

At the end of the session Ralph McCormack expressed a few concerns he had with the service and John asked him to put them in writing.

Helen stated that her phone number is on the form and she is happy to do an assessment over the phone.

It was also agreed that another meeting needs to be arranged between BHRT, B&DPCT, HPCT and the LMC. Dr Aggarwal agreed to represent the LMC.

The Chairman thanked John and Helen for attending the meeting.

### ***Future of Maternity Block Harold Wood Hospital***

Tim Bland asked if it was accurate that the Maternity Block at Harold Wood has been sold to Healthcare Alliance and is HPCT aware of opportunities to purchase parts of the Harold Wood Site and sell off parts of St George's Site? Ralph McCormack confirmed that the PCT is aware of the opportunities and has been working with BHRT on this. The overall disposition of healthcare and thinking about what model the PCT can use is changing all the time and the original concept has changed. HPCT have had various meetings with BHRT to reconfirm the plan to occupy part of the Harold Wood site. The PCT is looking at the opportunity to have extended Primary Care and are looking closely at the opportunities of community hospitals. Something along those lines is of interest to the PCT. Maternity will move to the new hospital. BHRT intends to keep some of the old building in the short term because of the phasing of moving to the new

site. There has been no confirmation that anyone has bought the Maternity Block.

12. **DATE OF NEXT MEETING:** There being no further business for discussion, the Meeting closed at 3.35 p.m. Members agreed that the next Meeting will take place on 03 August 2006.

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**Chairman**

*ANY QUERIES OR MATTERS ARISING FROM THESE MINUTES SHOULD BE DISCUSSED WITH THE LMC OFFICE*