

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

<b>MINUTES</b> Part Two of the 262 <sup>nd</sup> LMC Meeting held in the Committee Room, Admin. Building, St. George's Hospital, Hornchurch on 3 September 2009 <i>A n Open Meeting</i>
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### **PRESENT:**

GP Members	Dr M Rahman (Chairman) Dr V Goriparthi (Vice Chairman) Dr A Mittal (Treasurer) Drs B Beheshti, A Deshpande, R Goriparthi, A Jabbar, R Kalra, J O'Moore, S Pervez, S Subramaniam, I Sudha Non-principals: Drs S De, S Hora, D Weaver, R Yadav Co-opted: Drs A Arif, S Poolo Madhu Pathak (LMC Secretary) Sue Elliott (Admin. Secretary) Suzy Iskander (Admin. Asst/IT Support)
NHS Havering	Philip Ainsworth, Dir. of Healthcare Procurement & Performance
NHS B&D	Eric Saunderson, Medical Director
BHRT	Stephen Rubery, Director of Commissioning & Contracting

### **APOLOGIES FOR ABSENCE:**

NHS Havering	Chas Hollwey, Interim Chief Executive
NHS B&D	Stephen Langford, Chief Executive
ONELCS	John Cowman, Dir. of Business Planning & Performance (Designate) Suzanne Farris, Int. Director of Adult Services
BHRT	John Goulston, Chief Executive Mr C Claoué, Ophthalmic Surgeon
GP Members	Drs K Alkaisy, A Baldwin, T Bland, B Dixit, M Gouldie, F Islam, R Kumar, A Patel, P Patel, O M Sanomi, A Sharma, S Symon

- 28. MINUTES:** the minutes of the Open Meeting held on 6 August 2009 were approved and signed as a true record of the meeting after the following correction:  
Page 4, PMS Review, 4<sup>th</sup> Paragraph, Lines 1 and 5: should read, "...APMS...".

### **29. MATTERS ARISING**

#### ***Choose & Book***

Members expressed the following concerns:

- A letter sent by the Havering C&B Office to say that slots at Queen's were "retired". Steve Rubery said he was not aware that there were slot availability problems at Queen's and will take this back. B&D GPs have not had notification of this. Eric Saunderson will take this back.
- For some specialities there will only be one "not retired".
- The surgeon's name is not shown but there are some initials, which mean nothing to the GPs. Steve Rubery replied that this is the surgeon's initials followed by the clinic code where you can book the referral to. You book into a speciality and the speciality shows what clinics are available. It has been set up for speciality rather than the consultant so you go to the first available slot. He will see if there is a mechanism to tell the GP what the abbreviations mean.

- GPs would like to be advised of any changes in the C&B service so that it does not necessitate increased workload. Dr O'Moore thought that the consultant option still comes up on the KGH C&B

Eric Saunderson advised that in October the independent treatment service becomes directly bookable.

### ***IT Upgrade***

Dr Beheshti raised the issue regarding an extra computer. The practice was told they had no money and the practice could not purchase their own as it may not be compatible. It has now been agreed that the PCT will purchase the computer and invoice the practice. Computers are a very important part of the daily running of the practices and many practices need upgrades but when practices ask for help they are told there is no money.

Philip Ainsworth replied that the PCT has got significant challenges within their IT infrastructure and have a server issue. They have been trying to get more funding to upgrade the server as everyone is suffering and are working on how to upgrade so that everyone benefits. A whole review of the capital is needed as the PCT has a responsibility to support the equipment and the service. More and more business is being done electronically and the PCT can only start to continually develop this if the whole system is robust.

He advised that Simon Midlane is keen to come to the October LMC and he is very happy to link with the LMC out of this meeting on how he wants to address some of the challenges. He can give an appraisal and the LMC can make him aware of the issues he needs to add to his plan, set a deadline and agree response times. Dr Pathak said the LMC would have a separate meeting with Simon Midlane but GPs are encouraged to sign GPSoC, which already has response times built in. Philip agreed to update in next meeting.

Members were asked to let Eric Saunderson know if there are any IT issues in B&D so that he could take them back.

### ***Swine Flu***

Dr Goriparthi advised that in the last B&D PTI, healthcare professionals gave information on the vaccine, the type and the programme. It was a very useful afternoon. The programme should start in the first week of October. The PCT has now got walk-in fridges to store the vaccination.

Dr Rahman stated that the LMC had formed a subgroup to discuss the issues around Swine Flu. Matthew Cole from B&D, Elaine Rashbrook from Havering, two GPs from each area, Dr Pathak and himself will attend and are currently discussing a date when they can discuss the vaccination and anything that has been asked for nationally, e.g. practice buddy, and remuneration.

### ***Two-Week Cancer Referrals***

Some of the consultants are still not doing these referrals and clarification is required on what the policy is in ISTC as they seem to be under the impression that it is in their policy that they cannot refer. If the patient has got suspected cancer anyone can refer the patient. The LMC will get information on this.

Dr De said if the work keeps getting passed to GPs against protocol then nothing is going to be done. Steve Rubery agreed and said the GP needs to tell the people who

are bouncing it out to them that it is their responsibility to re-refer, not the GP's. If this is not done the re-referrals will keep bouncing back to the GP.

**30. ANY OTHER BUSINESS**

***Post Operative Care***

When a patient rings BHRT for a follow up they are told they need to see the GP for another referral. If an operation causes complications it should be the one referral. Steve Rubery replied that he thinks this is a ISTC policy. It should be a straight follow-up. If the consultant does not have the patient's medical history it may be inappropriate for him to refer to another consultant.

***Polyclinics***

A Stakeholder meeting is to be held in East Dagenham to discuss polyclinics. Eric Saunderson said he has no other information other than there are discussions being held in that area.

***Patient Assessment Form***

Dr Kalra presented a very long form sent to him by Social Services for practice to complete. This form has not been seen by LMC before and Dr Pathak agreed to look into it.

***Discharge Letters***

Dr Goriparthi has received an Endoscopy discharge letter and where it should have been signed it says "signature unknown". This was from In-Health, not BHRT. He has had another letter from the Gynae Clinic saying they have not been able to examine a patient and they have sent her to the physiotherapist. Patients wait a long time to go to the Gynae Clinic, sometimes as long as six months, and are then left very disappointed if not seen. Steve Rubery said that BHRT is following the 18-week pathway and he finds it unbelievable if patients are waiting six months. He will look into this.

***Cancelled Appointments***

Steve Rubery was informed that patients are getting appointments cancelled more than once with no information sent to the GP. Dr Jabber requested, could a copy of communication to the patient also be sent to the GP.

***LMC Meetings***

Members had a discussion about timing of the open meetings to be 15 minutes earlier than before. It was suggested to all present whether it would inconvenience anyone if the meeting started at 2.15. Everyone present agreed.

- 31. DATE OF NEXT MEETING:** There being no further business for discussion, the meeting closed at 3.30 pm. Members agreed that the next meeting would take place on 1 October 2009.

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Chairman

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