The Unconfirmed Minute of the General Practice and Primary Care Group Meeting held on Wednesday 15 May 2013 at 2.00pm in Conference Room 4, Lynebank Hospital, Dunfermline

Attendance Listed in Alphabetical Order by Surname:

Members Present:
Dr Frances Baty, Psychology Department
Dr T Browne, GP Representative, Bellyeoman Surgery
Lesley Bruce, Physiotherapy Representative
Dr Martin Clayton, GP Representative, Park Road Surgery
Ben Conway, Public Member
Elaine Duncan, Business Manager, Dunfermline Locality
Lesley Eydmann, CHP Localities Manager
Dr Colin Firth, GP Representative, Primrose Lane Surgery
Fiona Forrest, Lead CHP Pharmacist
Nicola Gilmore, Practice Manager Representative, Park Road Surgery
Dr Alan McGovern, Clinical Director (Chair)
Dr Lesley Prentice, GP Representative, Valleyfield Health Centre
Fay Richmond, Clinical Services Support Manager
Fiona Robertson, Management Accountant
Dr Patrick Sheil, GP Representative, Kelty Medical Practice
Marion Clacken, Practice Manager, Cowdenbeath Medical Practice

In Attendance:
Vicki Chesher, Secretary (Minutes)
Ivy Elder, Head of Information (Item 10 only)

Apologies:
Laura Adams, Practice Manager, Benarty Medical Practice
Karen Baxter, Podiatry Representative / Chair of Diabetes Clinical Group
Crystal Beveridge, Practice Manager, Crossgates
Rhona Brown, Lead Nurse, Dunfermline Locality
Marion Clacken, Practice Manager, Cowdenbeath Medical Practice
Ian Cochrane, Practice Manager, Drs Mathie & McMinn, Oakley Health Centre
Lorraine Cooper-King, Business Manager, West Fife Locality
Vicki Cunningham, Practice Manager, Kelty Medical Practice
Gill Dennes, Chair of Respiratory Clinical Group / Drs Boggon & Halford Representative
Susan Fisher, Speech & Language Therapy Manager
Dr David Garmany, GP Representative, Inverkeithing Medical Group
Margaret Grey, Practice Manager, Drs Farrell, McKean & Sweeney, Lochgelly
Margaret Henderson, Operational Divisional General Manager, Ambulatory Care
Dr Estelle Holligan, GP Representative, Bellyeoman Surgery
Christine Malcolm, Speech & Language Therapy Representative
Anne McEwan, Team Leader, Vascular Nurse Team
Belinda Morgan, Improving Health Team Representative
Dr Gail Murdoch, GP Representative, New Park Surgery
Dr Paul Murray, GP Representative, Cowdenbeath Medical Practice
Lawson Rennie, Public Member
Lorna Sherriffs, Staff-side Representative
Dr Nicola Smith, Psychology Representative
Sheila Stubbs, Practice Manager, Nethertown Surgery
Dr Kenneth Thompson, Lochgelly Health Centre
Dr Elizabeth Weir, GP Representative, Linburn Road Health Centre
Dr Anne Woods, GP Representative, Millhill Surgery

ITEM ACTION
1 Welcome & Apologies
Apologies noted as above.

2 The Minute of the Previous Meeting 20 March 2013
The Group accepted and confirmed the minutes of the previous meeting as an accurate record.

3 Matters Arising from the Previous Minutes
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| 4    | **DWF Adult Psychology Service**  

A presentation is to be provided at the July meeting which will update on the direction the Service will be taking in terms of meeting demands in relation to HEAT targets for referral to treatment for Psychological Services. In the meantime, Dr Baty requested feedback from the Group on their thoughts of the Service currently being delivered. The Service is aware of the issues relating to waiting times and work is being undertaken to address this.  

The Practice Representatives highlighted that the Service being provided was good but waiting times are an issue.  

The MoodCafé website is a useful resource although acknowledged doesn’t suit all and some users have difficulty with the current layout. Dr Baty explained that the site is to be redeveloped to help alleviate some of these issues, it’s also hoped this will allow better access from mobile devices. It’s also hoped if funding can be identified that an ‘app’ will be introduced.  

The lack of counselling available was noted, the Group discussed possible alternatives that could be accessed and Dr Sheil advised the Listening Service provided by one of the Chaplains has worked well for his patients.  

It was asked whether a text reminder service could be introduced which would allow appointments to be reallocated if patient unable to attend. Dr Baty reported that the Psychology Service have been looking into this. Unfortunately there are problems with psychology patients receiving text reminders automatically from Practices (e.g. via Emis) as patients usually contact psychology directly regarding appointments.  

Further discussion took place on the changes to Voluntary or semi-Voluntary Services and the different ways they are delivered. Dr McGovern suggested he meet with Dr Cheshire and Dr Baty to take forward a piece of work in relation to QOF and the variations of referrals for Clinical Psychology and could possibly have a facilitated review within a GP Practice on what is available, used for and when etc.  

Dr Baty advised that leaflets should have been disseminated to GP Practices regarding telephone CBT. The Psychology Service will put together information on this and other self help services for all Practices.  

5  

**Scottish Patient Safety Programme – Primary Care**  

The Launch of the Scottish Patient Safety Programme – Primary Care (SPSP-PC) will take place in Fife on 5 June 2013, as well as a session at PLT on 19 June 2013. Dr McGovern advised that the Enhanced Service stipulates two representatives, one must be a GP as well as either a Senior Nurse and/or Administrator attend this session. The launch event will introduce participants to the programme and the tools that are used. M Clacken highlighted that the launch clashes with a mandatory training session and hoped that this would not affect points being achieved.  

F Richmond and Yvonne Bradley have attended the National Trainers Event and can assist Practices if required.  

Dr McGovern advised that agreement in relation to funding is still to be agreed and clarity is expected soon.  

A Core Group is being established and will comprise of representatives from each of the CHPs, a letter has been sent out to GP Practices seeking representation. It is acknowledged locum costs will be required.  

6  

**PMS Monitoring Group Update**  

The following update was noted:
ITEM

• F Richmond has been pulling together data packs for GP Practices, discussion took place on the validity of the data, it was noted that work is underway to ensure data is refined;
• clarification awaited on the pathways for this year, any suggested topics to be forwarded to Dr McGovern;
• data for Anticipatory Care Plan, Care Home Local Enhanced Service and Professor Guthrie Poly-pharmacy Project to be circulated shortly, if assistance required on receipt, contact F Richmond;
• QOF Poly-Pharmacy, Dr McGovern outlined the classification for each of these and noted that they are colour coded and clear guidance notes are contained within data;
• QOF External Review is scheduled for the afternoon of Tuesday 3 September 2013, the internal report is required by 1 September 2013 and final reports required by 15 March 2014;
• next PMS Monitoring Group meeting is scheduled for 21/05/13 where it’s anticipated further discussion will be held on payments regarding Enhanced Services and the workload incurred by Practices as part of the Shared Care Protocols.

7 Hospital at Home Clinical Advisory Group

A copy of the unconfirmed note of the first Hospital at Home Clinical Advisory Group meeting was circulated to the Group for information. The next meeting is scheduled for Tuesday 2 July at 1.30pm in Conference Room 4, Lynebank Hospital, interested GPs and Practice Managers are welcome to attend.

8 Finance

The finance report for the 12 months to 31 March 2013 was circulated to the Group. F Robertson highlighting the following:

• NHS Fife financial position at the year end was a break-even position;
• the DWF CHP financial position at the year end was an approximate £594k (1.4%) underspend;
• for 2013/14 a draft financial framework was submitted to the Finance & Resource Committee, it’s anticipated that the savings requirements for NHS Fife will be £5.3m, some £1.3m of this to be found by delivery units, specific targets for the CHP are not yet agreed but planning is underway and progress will continue to be reported.

Discussion took place on the West Fife Physiotherapy figure. L Bruce provided information on 4-week referral to treatment target that has been set advising a Project Team has been established to look at this and will report back on the remodelling of the service to meet the target.

9 Clinical Groups:

9.1 Respiratory: A copy of the Respiratory MCN minutes circulated for information.

9.2 Prescribing: The note of the last meeting held on 30 April 2013 was tabled to the Group, a copy will be circulated with the minutes. F Forrest highlighted the following points:

• a £500k underspend noted at the financial year end and acknowledged the hard work by all involved;
• discussion held on Prescribing Incentive Schemes agreed by NHS Fife, a final model is expected soon and will come in two phases;
• Practice Visits are underway, this will provide the opportunity to feedback on the previous year, discuss possible project(s) for the coming year re QOF and update on poly-pharmacy.

The Group discussed the Incentive Schemes and the difficulty in participating when the Practice is at full capacity. F Forrest also provided information on the Prescribing Audit.

9.3 Older People: An update was tabled, copy to be circulated with the minute.
ITEM 9.4 CHD: Next meeting scheduled to take place on 29 May 2013. It was noted that the changes to Specialist Nursing input to routine clinics has been implemented.

9.5 Diabetes: Next meeting scheduled to take place on 12 June 2013.

9.6 Addictions: Dr Firth advised himself and Belinda Morgan are to attend the next ADP to discuss the role and remit of the DWF Addiction Group as well as the results from the recent survey that was carried out.

Discussion took place on clinical governance and the responsibility to ensure we are providing a safe and co-ordinated service. Dr Firth highlighted areas of concern regarding some services being provided by other agencies.

9.7 Stroke MCN: Following discussion at the last meeting, it was noted that feedback is awaited on the timescale from event to TIA/Stroke and the possible need to revisit the referral process.

F Forrest, B Conway and F Robertson left the meeting.

10 AOCB:

10.1 Sharing of Information

Ivy Elder, (IE) Head of Information spoke to the presentation handout circulated to the Group. A copy is attached for information.

The presentation outlined the background to the Scottish Accord on Sharing of Personal Information Model. A Multi-Agency Sharing Pilot has been kicked on in the Kingdom of Fife and IE reported on some of the benefits achieved, e.g. together (Health, Council, Police Scotland) communicating a collective vision of shared values and goals and building a strong foundation of “evidenced based” thinking and supporting partners more effectively to do their job.

IE stressed the importance of involvement and engagement being fundamental to the Partnership Programme, individual agencies need to be aware of all the information they need to work effectively. A template and standardised approach has been developed which will lead to clarity, consistency and greater understanding.

IE asked General Practitioners to give consideration to the following:

- Membership on to the Fife Data Sharing Partnership Group;
- National Guidance on when General Practice can share information with Partner Agencies;
- Getting It Right for Every Child – ICO Statement (risk to child or young person)
- Fife Data Sharing Group welcomed opportunity to work with Fife General Practitioners as a Pilot

Discussion took place on the potential input from GPs and Dr. McGovern noted that Medical legal requirements will also have to be taken into account. The Group discussed examples of information that is currently shared and its appropriateness. M Clacken also advised that the Fife Practice Manager Group tried to initiate a piece of work on the storage of information shared by other agencies which refers to a third party/named individual and appropriateness to store in the medical record, no decision was taken.

It was felt it would be useful to have guidance on the types of information that should be held, how much is kept. IE advised that they are updating guidance and liaising with the Commissioners Office and will keep the Group informed. IE also happy to be contacted direct with any queries Practices may have.

Post-meeting note: IE has asked Ann Allan, Public Records Bill to contact Marion Clacken to see if she can assist with any of the records retention/storage guidance.

11 Date of Next General Practice & Primary Care Group Meeting:
Wednesday 17 July 2013 at 2pm in Conference Room 4, Lynebank Hospital