



MINUTES OF MEETING - 19 July 2018

Present: Julie, Simon, Cheryl, Charmagne, Jane, Lynne, Sharon, Anne, Kaysia, Yolanda, Suki, Justine, Yolanda, Nic, Michael

Present: Rob Hill, CCG and Michael Whitworth, Director of Commissioning Operations, CCG

MSK CATS

Mandated by NHSE to provide the service - little later than other areas as already had a triage service but this does not meet NHSE requirements. Single Derbyshire approach. Evidence suggests should be a reduction in out patient referrals and surgical interventions by using this system.

All referrals must go through triage, for complex MSK and pain conditions. Standard referral form which self populates through the clinical system - submitted by C&B. Advanced physio practitioner triages within 48 hours and then refers on to which ever treatment option - telephone call, face to face appointment. DCHS are running as a pilot in partnership with CRH. No intention to remove joint injections from primary care. Patient can't be referred direct to secondary care.

Go live 23 July in Amber Valley.

Michael Whitworth left the meeting.

1. Extended access - Rob Hill here to enable us to ask any questions
 - Marion asked why the up-front payment of 3 month had been declined by Carol Foster when Rob hadn't seen a problem with this before. Rob thinks may be dependent on funding to CCG by NHSE. He will check with Carol and let Marion know. Would also be helpful to know the payment mechanism.
 - IT - no update available. Potential issue with fall-back cards. Amanda had sent round a spreadsheet to add pc information on for addition of community module. **Sharon hadn't seen this and will send her information to Amanda. Need to set up auto consultation using agreed read code - Marion/Cheryl to take forward. Cheryl/Marion to liaise with Amanda for up to date position and will keep Nic updated.**
 - Cost of invoicing - concern raised over time needed for PM's to complete the invoicing process for staff who are working in the hub. Agreed that need to be recompensed but to audit time taken first. **PM's will audit for first 2 months. Sharon will need to see how this work for DCHS.**
 - SLA - need to sort final wording in a couple of areas (Julie/Marion discussing after meeting). Opening/closing needs funding, only cost of opening has been factored in - **Marion will adjust finance sheet and circulate to directors.**
 - Rob mentioned abatement of rent for GMS space if payment for hub services. Happy to review SLA and comment accordingly. **Marion will amend and send to Rob for review.**
 - Staff hub events 7 and 22 Aug but there will be no training on clinical systems. Some clinicians may want this if unfamiliar with EMIS/SystemOne. To advise that clinicians can buddy up with someone to look at the system - and invoice AVH with first timesheet. **Cheryl to add to email when sending Sept rota.**

- Nurse indemnity - covered under the practice as have access to full clinical record.
- Flu clinics at Church Farm. Ivy Grove running 15 Sept and a date in Nov - will be busy but doesn't affect use of Jessop clinical rooms. Jessop 13 Oct - will affect hub as there will be no clinical rooms available to use - **Julie to check date of clinic**. Need plan before Oct rota sent out 27 July.
- 30ppp funding has been agreed by CCG for set up costs. 15ppp is for back fill for training practice staff on community module.

2. PQS

Anne is sending round the AF information. Can be removed as agenda item.
Diabetic proof of concept - Ripley are using Heanor model.

3. Any other business

- Respiratory consultant has asked to attend to discuss new community service - agreed.
- CCG re-structure - new posts within primary care team but 26% reduction in staff within the CCG.
- GPFV programme board meeting 25 July, Rob conscious that there is no representative from our group. Will discuss with Clive Newman and copy Kaysia/Justine and Anne in - may be worth sending someone.
- **Charmagne to send the information to Michael for the website.**
- Pathology code for IGS - Michael not aware of practice decision. Discussed - Nic will send a further email and IGS will discuss again in practice. May mean a reduced service in the hub if clinicians unable to request blood tests for patients seen.
- Dressing's clinics - looking at for the November rota with process that booked by a PN in practice and patient takes their dressings with them. Could also do swabs (October). Still need to look at process for smears and how to get open exeter forms to the hub. **Justine will speak to PCP**. Also need specifications for staff to sign up to for these appointments. **Justine/Cheryl to arrange**. Future appointments could be ECG's and ear syringing.
- IGS advised that they had given notice to CCG that they would no longer be providing dressing appointments other than post-op care.

Rob Hill/Sharon left the meeting

4. Company

- Insurance is moving forward - this is now a CCG requirement for the contract.
- Directors met to discuss roles. Nic - IT/finance, Justine - Staff, HR and complaints, Anne - prescribing and audit, Kaysia - CQC and safeguarding. All are joint clinical leads. Remuneration as a director agreed at £450 per month and hourly rate over and above £80ph.

Next meeting - 16 August - 1.15pm at Jessop MP, Leabrooks