

**NHS CUMBRIA CLINICAL COMMISSIONING GROUP (CCG)  
MINUTES OF THE EDEN LOCALITY EXECUTIVE  
Thursday 30<sup>th</sup> January 2014, 1.30pm  
The Conference Room, Hackthorpe**

Present:	Dr Helen Dunning, GP, Shap Medical Practice (HD) Dr Michael Hanley, GP, Alston Medical Practice (MH) Dr Lynne Harris, GP, Court Thorn Surgery (LH) Dr Stephen Huck, GP, Upper Eden Medical Practice (SH) Dr Helen Jervis, GP, Temple Sowerby Medical Practice (HJ) Dr Mark Plenderleith, GP, The Lakes Medical Practice (MP) Dr Rachel Preston, GP Lead <b>(Chair)</b> (RP) Amanda Riley, Practice Manager, Birbeck Medical Group (AR) Dr Jonathan Smith, GP, Glenridding Health Centre (JS) Dr Shonagh Speed-Andrews, GP, Appleby Medical Practice (SSA) Lisa Gibbons, Commissioning Manager (LG) Andrew Gosling, Finance Business & Perf Mgr (Carlisle & Eden) (AG) Andrea Loudon, Primary Care Development Lead (Carlisle & Eden) (AL)
In Attendance:	Amy Aitken, Eden Locality Administrator (Amy)
Item 7 only:	Russell Norman, General Manager (Children's Services, CPFT) (RN)
Items 1 to 7:	Andy Airey, Network Lead (Carlisle & Eden) (AA)
Items 1 to 8(i):	Helen May, Children and Families Lead (HM)
Items 1 to 10:	Neil Hughes, Lay Representative (NH)
Items 9 (in part) to 11:	Dr Venetia Young, Safeguarding Lead (VY)

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**1. AGENDA ITEM 1: WELCOME AND APOLOGIES**

*Action*

The Chair welcomed everyone to the meeting.

Apologies were received from:

Cathryn Beckett-Hill, Project Development Manager, Public Health (CBH)  
Rachel Fleming, Senior Commissioning Manager (RF)  
Kerry Harmer, Practice Manager, Upper Eden Medical Practice (KH)  
Caroline Rea, Network Director (North) (CR)

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## 2. AGENDA ITEM 2: DECLARATIONS OF INTEREST

All GPs present declare an interest regards any provider and dispensing issues which may appear on the agenda.

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## 3. AGENDA ITEM 3: MINUTES OF 19<sup>TH</sup> DECEMBER 2013

The minutes of the previous meeting were approved as a true and accurate record.

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## 4. AGENDA ITEM 4: ACTION LOG

The action log of the previous meeting was updated and approved



Eden Locality  
Executive Action Log.

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## 5. AGENDA ITEM 5: MATTERS ARISING

**Pulmonary Rehabilitation:** Further to discussions at December's meeting, AG updated the Executive on the locality's position in establishing an Eden-based pulmonary rehabilitation service. Whilst an increase in capacity was included in Cumbria Partnership NHS Foundation Trust's Commissioning for Quality and Innovation (CQUIN) targets, it is believed that this is applicable countywide, and is not locality-specific.

The Executive discussed this matter, noting and considering: potential options for the initiation of an Eden-based service; the importance of a locally accessible service; current efforts to ensure the increased robust monitoring and management of performance; and ways Cumbrian health and social care organisations can work collaboratively to facilitate target achievement.

**ACTION:** AA/AG to determine what is written in NHS Cumbria CCG's contact with CPFT, updating the Executive at the next meeting.

**AA/AG**

**ScriptSwitch Report:** Reports were received regarding functionality issues with repeat medication requests.

**ACTION:** AL to raise this with ScriptSwitch.

**AL**

**Locality PLT:** The Executive discussed the requirement for a Locality PLT focusing on safeguarding and in particular, domestic violence and alcohol. It was suggested that this could be held in April 2014.

**ACTION:** NH to be added to the invitation list.

**AL/Admin**

**CPN Links:** Further to discussions at December's meeting, HD advised that Shap Medical Practice have had contact with a Mental Health Social Worker, but still require CPN links. SH reported that CPN links at Upper Eden Medical Practice are improved, which has resulted in increased proactive working.

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**ACTION:** LG to invite MH and Kath McGleenan to the next Healthcare Communities meeting.

LG

**Sexual Health Services:** HM advised the Executive that the younger people's sexual health service has now moved from the centre of Carlisle to Hilltop Heights, with the frequency of clinics reducing from every Saturday to one Saturday per month. This has caused some concern regarding accessibility, as it had proved a viable option for younger people in Eden who may prefer not to access sexual health services at their local GP practice. Work is currently underway to address this issue.

**ACTION:** HM to circulate the new contact details for the younger people's sexual health service in Carlisle.

HM

**ACTION:** NHS Cumbria CCG to investigate options for delivering younger people's sexual health services locally.

LG

**Mindfulness:** Following the re-tendering of this service, LG advised that two bids have been received. Work continues to determine levels of funding within existing contracts, and whether this can be retrieved and reinvested, ensuring duplication is avoided.

**ACTION:** LG to forward bids to RP, HJ and MH for consideration.

In response to concerns raised about waiting times for First Step appointments, AA reported that work is underway to extend target setting beyond initial assessment.

LG

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## 6. AGENDA ITEM 6: CHAIR UPDATE/CCG UPDATE

Further to discussions regarding financial pressures at December's meeting, RP advised the Executive that NHS Cumbria CCG has come to a monetary settlement with North Cumbria University Hospitals Trust (NCUHT) for the financial year 2013/14. This settlement links with the formation of an alliance between statutory health organisations in Cumbria, which will facilitate collaboration in the modernisation and transformation of services, working to ensure ongoing financial sustainability.

RP highlighted the importance of primary care's engagement with the alliance, explaining that whilst Eden Locality performs well against national benchmarking, ongoing work is required to ensure continuous improvement. The future efforts of Public Health will be fundamental in terms of prevention, and there may be call for other health and social care organisations to become increasingly involved with this type of work.

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## 7. AGENDA ITEM 7: THE VISION FOR CHILDREN'S SERVICES IN CUMBRIA

RN presented the attached, outlining the vision for children's services across Cumbria. Discussing the justifications for developing a paediatric and child health strategy, RN explained that joint investment has already allowed for service improvements, enabling/initiating: an increase in resources; more appropriate provision; a move towards better integration between partners; and the minimisation of duplication.



Additional work, however, is needed to further meet requirements, address key priorities/long-standing issues, and ensure a consistent, best practice approach is taken countywide. RN advised the Executive that there are a number of initiatives which will facilitate/contribute to advancements, including:

- CPFT's plans to reshape into thematic care divisions, reducing the number of children's service locations from 52 and creating a number of 'children's centres' (possible co-location with social care);
- CPFT's procurement of a new IT system, which will have interoperability (timescale to implementation is approximately 18 months); and,
- CPFT's plans for continuous improvement, taking an evidence-based approach and looking to measure success/effectiveness.

Concerns were raised regarding the timescale for implementation of a new IT system, and that developments may impact upon current working practices between Health Visitors and GPs. RN advised the Executive, however, that each GP practice will continue to have a named Health Visitor, and changes relate to trialing innovation, as well as ensuring consistency across the county.

**ACTION: RN to feed back concerns regarding the timescale for implementation of a new IT system.**

**RN**

In response to queries about alcohol-related services for children, the Executive were advised that this falls under Local Authority commissioning responsibility. RN stated that CPFT currently delivers the DASH (Drug, Alcohol and Sexual Health) service, but is in the process of updating the specification based on current risk-taking behaviours.

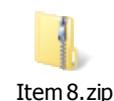
**ACTION: HM to forward information on those working with younger people who access A&E due to alcohol misuse.**

**HM**

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## 8. AGENDA ITEM 8: PERFORMANCE MANAGEMENT

**Finance and Performance Report:** AG presented the attached report, asking the Executive to note its content.



**ACTION:** Further to discussions about A&E attendances, AL is to investigate whether any action has been taken in relation to the recording issues

**AL**

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highlighted by the review.

**ACTION:** AG to confirm with Ray Beale-Pratt that patients are no longer inappropriately coded as having attended A&E when sent to ambulatory care.

**AG**

**Cancer Performance:** LG advised the Executive that NCUHT continues to fail to meet targets in some cancer areas, and has a recovery plan in place to address this issue. Whilst this is not unique to NCUHT, with underperformance seen elsewhere in the North of England, non-achievement is not attributable to an increase in patient numbers. Difficulties also continue in the recruitment of oncologists.

**ACTION:** AG to find out the contract length for the Shap ultrasound service.

**AG**

**NCUHT and CPFT:** These items were deferred to February's meeting.

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**9. AGENDA ITEM 9: THE FUTURE OF PRIMARY CARE IN EDEN (INCLUDING THE HEALTH, WELLBEING AND RESILIENCE OF STAFF)**



Item 9 GPs Future Service.pdf

Referring to the attached, the Executive discussed the future of primary care in Eden, highlighting that all are passionate about ensuring continuity of care and good outcomes for patients. Practices therefore need to give consideration as to how they can work innovatively, ensuring their future sustainability and utilising any specialist skills to their advantage.

Extensive discussion was had regarding this matter, particularly in relation to: overcoming the ageing workforce; the types of collaborative organisations practices could form; logistics of the work required; potential benefits from economies of scale; and further investment in prevention work.

**ACTION:** GPs/PMs to discuss the attached document with partners ahead of the meeting on 27<sup>th</sup> February.

**GPs/PMs**

**ACTION:** AR to forward 22 questions obtained at a recent event for circulation ahead of the meeting on 27<sup>th</sup> February.

**AR**

**ACTION:** HJ to liaise with KH regarding plans for 27<sup>th</sup> February, considering whether to invite her contact to attend.

**HJ**

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**10. AGENDA ITEM 10: MINOR INJURY UNIT SERVICE SPECIFICATION**



Item 10 Draft Amended Service Spe

The Executive discussed the attached, raising concerns regarding the accuracy of the content and subsequent recommendations made.

Further to discussions at the Clinical Leads Group, RP highlighted that before any development occurs, NHS Cumbria CCG must establish what is ultimately best for patients. Eden locality is therefore given the opportunity to consider and propose and changes/requirements to be taken forward into discussions

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with CPFT.

**ACTION:** LG to feed back initial comments to AA.

**LG**

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**11. AGENDA ITEM 11: GP LEADS UPDATE**

**Safeguarding GP Lead:** VY presented and discussed the attached report, updating the Executive on the progress of her work. VY also advised that the Children's Safeguarding Board have online training available, which may be of particular interest to GPs.



Item 11 Locality  
Report 2013-14.pdf

**ACTION:** VY to forward details of upcoming session explaining thresholds for child protection referrals at 7pm on 26<sup>th</sup> February (venue TBC), and contact details for Danny McAllister (ASC).

**VY**

**Healthcare Communities:** HJ advised the Executive that one Healthcare Communities workshop has taken place, with two more planned over the next two months. A start date of 1<sup>st</sup> April has been given, by which time CPFT will have a dedicated team in place. Outstanding issues include governance and the interoperability of an IT system.

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**12. AGENDA ITEM 12: ANY OTHER BUSINESS**

**Outpatient Prescriptions:** Concerns were raised regarding the legibility of outpatient prescriptions from Westmorland General Hospital and Royal Lancaster Infirmary. Further to this, SH reported receiving prescriptions advising to check for contraindications, which should be the responsibility of the prescriber.

**ACTION:** NHS Cumbria CCG is to consider including improved information on discharge in 2014/15 CQUIN targets.

**AA/AL/AG**

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**13. DATE AND TIME OF NEXT MEETING:**

Thursday 27<sup>th</sup> February, 1pm in the Conference Room, Hackthorpe Hall Business Centre

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