NHS Cumbria Clinical Commissioning Group

NHS CUMBRIA CLINICAL COMMISSIONING GROUP
MINUTES OF THE ALLERDALE LOCALITY EXECUTIVE
Thursday 9 October 2014
Additional meeting

Present:		
	Niall McGreevy	Lead GP Workington **(Chair)** (NMcG)
	Simon Desert	Lead GP Cockermouth (SD)
	Tim Hooper	Lead GP Keswick (TH)
	Sean Hudson	Lead GP Maryport (SH)
	Anna Turnbull	Lead GP Solway (AT)
	Anita Barker	Deputy Network Director (AB)
	Ray Beale-Pratt	Business & Finance (RBP)
	Rachael Brown	Sub-locality Lead Cockermouth/Maryport (RB)
	Steph Mallinson	Sub-locality Lead Workington (SM)
	Anna Scamans	Sub-locality Lead Solway (AS)

AL 83/2014 **AGENDA ITEM 1: £5 Per Head/Interim beds**

£5 Per Head - The various projects in each sub-locality were discussed. The projects need to have clear KPIs, baselines and outcomes measures.

There are some issues around staff availability for additional posts.

Interim beds (Care Homes) – NMcG gave the background on the service in Workington and the reasons for changing it. SH expressed an interest in providing the service from Riverside care Home in Maryport as it was previously found to be helpful.   The meeting discussed the structure of the scheme and it was agreed that the 'step-up/step-down' function needs to be clearly defined.   Adult Social Care (ASC) need to be involved in the discussions and there is a meeting arranged between Gordon Barwick (ASC), SM, NMcG and AMG. NECS have now provided some information on care homes – the home is not named, but post codes are provided.

ACTION: RBP to bring the data to the next exec. Any sub-locality interested in having interim beds in their area to contact SM	**RBP** **ALL**

AL 84/2014 **AGENDA ITEM 2: Cockermouth ECG/BP Service**

RB gave the background to the service which started in Cockermouth in May 2014 and has just finished this week. The service was run by the pharmacies who accepted referrals from GPs and the community hospital. There has been an issue regarding information provided to patients on how

to use the machines to patients and this has led to higher fail rate than might have been expected. However, comments have been received from the GPs and pharmacies on how useful the service has been.

The main concern is on activity data for ECGs. There has been a large increase in activity carried out by the Acute Trust and an increase in non-elective admissions for cardio. The meeting discussed the data and believes it to be incorrect.

RB will let Cockermouth know that the service will be extended for 3 months while the data is examined.

ACTION: RB and SD will look at the options for the service to continue.	**RB/SD**
RBP will provide RB with the correct data.	**RBP**

AL 85/2014   **AGENDA ITEM 3: Measurement of Primary Care Capacity**

MB presented the case for improving the way to measure GP access for routine and urgent appointments. An external company will take the data supplied by GPs over a week, run surveys and put the information through a web based tool. This will give a snapshot of each Practice's access and urgent care.   The meeting had some concerns about the usefulness of this exercise as it would tell Practices what they already know. However, it was found to be a useful tool in South Cumbria and it would be useful to talk to other localities to get their feedback.

ACTION: MB to gather feedback	**MB**

AL 86/2014   **AGENDA ITEM 4: Sub-locality Updates**

Cockermouth – Large parts of the community hospital are still unoccupied.

Workington – The new Primary Care Centre has suggested that it would not treat people with minor illnesses who are not registered with a Workington GP and rather sign post them back to their own practice. It was noted that this could have unintended consequences (eg: increase A&E attendances) and that service should continue to see 'walk in' minor illness patients. It was agreed that service should be maintained at present but that meeting needs to see data to quantify issue.

ACTION: SM to provide some figures on the non-Workington registered patients who come to the new centre.	**SM**