

PORTSMOUTH AND SOUTH EAST HAMPSHIRE HEALTH AUTHORITY**Gosport Locality GP Steering Group**

To be held on Wednesday 21 January 1998 at 12.30 pm in **Room 9, Gosport Health Centre.**

AGENDA

- 1 Apologies for Absence**
- 2 Notes of the meeting held on Wednesday 10 December 1997**
- 3 Matters arising**
- 4 GMS developments**
- 5 Update on practice-based Physiotherapy waiting lists**
- 6 Update on GP Commissioning Pilots in Fareham, Havant and Portsmouth**
- 7 White Paper - GPs views on its implications and how Gosport wishes to proceed**
- 8 Update on the allocation of district nurses, practice nurses and health visitors**
- 9 AOB**
- 10 Date of next meeting**

PGEA has been applied for and refreshments will be provided.

PORTSMOUTH AND SOUTH EAST HAMPSHIRE HEALTH AUTHORITY

Gosport Locality GP Steering Group

Notes of the Meeting held Wednesday 21 January 1998

Present:	Jane Barton	JBa	Shirley Hardy	SH
	David Young	DY	Rodney Tayler	RT
	John Bassett	JB	David Evans	DE
	Bob Pennells	BP	Brendan Coonan	BC
	John Grocock	JG	Hugh Janes	HJ
	Evelyn Beale	EB	Alex Clark	AC

No	Discussion	Action
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- 1** **Apologies for Absence**
Chris Tart

- 2** **Notes of the meeting held on Wednesday 10 December 1997**

These were agreed.

- 3** **Matters arising**

Rodney Tayler, Haslar's new Medical Director, was introduced and it was agreed that he would discuss his role at the end of the meeting.

- 4** **GMS developments**

AC updated the group on the SIMPLE project and asked that any comments be sent directly to him. There was a general view that a list identifying the Gosport practices should be produced and AC agreed that this would be circulated with the meeting notes.

AC

AC explained that the contract for providing Mental Health Counselling had been awarded to Portsmouth HealthCare Trust and practices should now have given notice to any privately employed counsellors in accordance with the recent letter from the Health Authority (HA).

AC outlined planned expenditure of the GMS development budget. He explained that the HA had received half the development budget that it had received in 1997/98. AC also explained that an increase in cost rent, superannuation and an anticipated pay increase of 2.75% had to be taken into account before staffing, computing and building developments could be assessed. The reduction on out of hours money had also been topped up to the previous level by GMS. There was approximately £400 000 available for computing, together with some resources for small building projects. Bids for additional staffing from practices exceeded £370 000, whereas the available budget was only £200 000.

5 Update on practice-based Physiotherapy waiting lists

HJ explained that the initiative had started and although it was still early, it seemed to be going well. It was therefore agreed that Ian be invited to a future meeting to discuss how the project was running.

HJ

6 Update on GP Commissioning Pilots in Fareham, Havant and Portsmouth

HJ explained that recent discussions within both Havant and Portsmouth had centred on their response to the White Paper and both groups appeared to be moving towards the conclusion that they needed to start the process of bringing in the non-pilot groups within their localities. This would mean that each group would have a population of approximately 200 000 and may therefore be able to achieve some economies of scale in their management costs, together with potentially increased negotiating power. At this stage further guidance was still expected to provide further details on the implementation of the White Paper.

7 White Paper - GPs' views on its implications and how Gosport wishes to proceed

HJ outlined some of the issue raised by the recent White Paper, highlighting the introduction of cash limited prescribing budgets, with an anticipated start date of 1 April 1999. Work had already begun with practices who were part of the GP Commissioning Pilots and many now had pharmaceutical advisors working within practices for a number of hours each week. Practices within the pilots were therefore reviewing their individual and collective prescribing position on a monthly basis.

HJ circulated anonymised practice-based figures for practices within the Gosport Locality. Whilst these figures may contain a number of inaccuracies and had not been adjusted to take account of changes in practices' population, they did show that Gosport was spending at a rate which exceeded the notional budget. Whilst this was not an issue at present, because the prescribing budgets were non-cash limited, this could potentially be a problem when they became cash limited. The White Paper also sets out new arrangements for unifying the three separate budgets - for hospital and community health services; family health service prescribing; and cash limited funding for GP practice staff, premises and computers. Again this has implications for groups that currently exceed their notional prescribing budgets, therefore HJ suggested that Katie Hovenden be asked to attend the next meeting in order to discuss the issue in more detail and in particular, the type of support that may be available to help practices move closer towards their notional budgets.

HJ

HJ also explained that the Defence Secondary Care Agency review of services was likely to have a significant impact upon service provision from Haslar and the Health Authority was also pressing for real money as apposed to activity levels for services provided by Haslar. These two factors, together with the White Paper's introduction of cash limited prescribing budgets, were likely to be significant factors in the need for Gosport GPs to consider their involvement in the Primary Care Groups of the future. HJ explained that Penny Humphris had offered to come and speak with the Gosport GPs and it was agreed that this issue would be discussed at the forthcoming meeting of the Gosport Medical Committee.

GPs

8 Update on the allocation of district nurses, practice nurses and health visitors

No further progress had been made on obtaining details on the type of information recorded by Portsmouth HealthCare Trust using their new light pen system, but work was currently underway and Liz Ross had agreed to attend a further meeting to discuss this issue.

9 AOB

RT outlined his role at Haslar, explaining that a new management structure was to be introduced from 1 April 1998 and that he would be the Chair of their Clinical Management Board. RT expressed a wish to hear GPs' views on service delivery from Haslar, together with any improvements that may be made eg improvements in communications.

GPs

RT also outlined recommendations following a recent visit by the Royal College of Physicians, stating that they has recommended that more 'fresh' outpatient cases should be seen by SHOs, as this was in line with national policy. The proposed solution was to increase the number of joint consultations, whereby the SHO reviews the patient and presents them to the Consultant. This was accepted by those present. RT also explained that the new endoscopy site was due to open shortly.

RT also commented upon prescribing formularies, expressing Haslar's interest in becoming involved with a joint formulary in conjunction with the GPs as this may be useful in tacking the issue of hospital led prescribing.

10 Date of next meeting (to discuss prescribing)

Thursday 12 February 1998 at 12.30 pm in **The Meeting Room, Gosport War Memorial.**