

ROYAL COLLEGE OF GENERAL PRACTITIONERS
CLINICAL NETWORK

RURAL PRACTICE STANDING GROUP

Minutes of the meeting of the Rural Practice Standing Group held on Thursday 27 April 2006 at The Kings Fund Centre, Cavendish Square, London

PRESENT: Dr Gordon Baird – Chairman
Dr John Elder
Dr James Moore
Dr Iain Mungall
Dr Jane Randall-Smith
Dr Malcolm Ward

In Attendance: Mona Lindsay

1. **Apologies for absence**

Apologies were received from Professor Sheena Asthana, Dr Walter Boyd, Dr David Johnston, Dr Paul Kettle and Dr John Wynn-Jones.

2. **Minutes of the Previous Meeting**

The minutes of the meeting held on 26 January 2006 were approved as a true and accurate record of proceedings.

3. **Matters Arising**

Relationship with College in Wales

Helen Herbert was keen for the College to respond more to consultations in Wales. Gordon Baird had spoken to Mark Boulter a member of Welsh Council, who would have liked to be a member of the group but due to circumstances unable to.

Action: Jane Randall-Smith to clarify with Dr John Wynn-Jones his membership of the Rural Group.

A representative was needed from Wales who would liaise and deal with Welsh Council. It was considered important that the Institute of Rural Health continued to be represented on the group. The group was missing out on a medical view from Wales.

ACTION:

- Dr Baird to write to Helen Herbert requesting someone from Wales to be a member of the Rural Group and suggestions of ways of joint working as the group was keen to forge closer links with RCGP Wales.

- Dr Baird to write to faculties regarding their response to his previous letter, asking that the invitation for faculty members to join the rural group be an item on their agenda.

Item 9 Publications: Occasional Paper/Country Matter

Dr Baird had responded to the White Paper. An editorial by Dr Baird had been accepted by the British Journal of General Practice (BJGP).

The Discussion group was lively and still performed a function. Although it was Scottish orientated which reflected its membership. Members were urged to encourage colleagues to join the group.

4. **Report from the Chairman**

Budget Report

Received: A financial report for the group for the year April 2005-March 2006. The balance at year end was £1, 590 in credit. To reduce meeting costs members agreed meetings should be held at the College.

Jane Randall-Smith asked if the group would like to meet at the Rural Doctors Conference to be held 27-29 September in Wales. Due to previous commitments the group was unable to consider this option.

a) **Network Chairs Meeting**

The next Network Chairs meeting will be held on 11th May 2006. Dr Baird asked members for topics to bring to the meeting.

The Group discussed their status. It was questioned whether they had cross border remit. Clarification was needed as to whether the work of the group was just for England. If the group was not UK-wide then reformation would be needed.

Agreed: That clarification of the group's status is discussed at the Chairs meeting.

c) Membership

Dr Richard West had been nominated as Dr Malcolm Ward's successor by the Dispensing Doctors Association to represent them on the Group.

Action: Gordon Baird to write to Dr West welcoming him to the group.

5. **This item should be headed:**

“Establishing Rural Representation in England, Wales and Northern Ireland and Lobbying Rural MPs – A paper for College Officers planning the way ahead”

a) **The group received a report tabled by Malcolm Ward for submission to Council.**

Action: That the draft paper be circulated to the group via email for comments.

It was felt important that the idea of reaching a wider audience was not lost. Links needed to be forged with both local and national journalists.

b) **To Plan and Organise**

Members agreed that the group's status/authority had to be established before they could move forward. If the group was UK-wide links with other rural and countryside organisations should be established.

Jane Randall-Smith suggested the group consider a joint meeting with the Rural Health Forum which would add value to both groups. She explained that the Forum was the Institutes Policy group. Funds for the group had come initially from England, so the forum had focused primarily on England. The DoH had ceased funding. The Forum had broadened its scope but no post was currently dedicated to running it; resources were needed to fund a post. The Forum was currently supported by Rural Health. They had terms of reference; currently had 20 members and ran Rural Health Week.

A joint event rather than a joint meeting was suggested. Although the Rural group had a different remit, the groups had a lot of issues in common.

Agreed: a) The Rural Practice Standing Group holds a joint event with the Rural Health Forum to look at issues of common interest and concern. The event is to be hosted by Defra. John Elder and Jane Randall-Smith to liaise on setting up the event.

Agreed: b) That the aims and terms of reference of the Rural Practice Standing Group should be reformatted to be ratified by the group after the Clinical Chairs meeting on 11th May.

Action: Jane Randall-Smith to produce a basic list of organisations with their acronyms and a contact name. The list, to which members could add, should be made a link on the group's website.

6. **Department of Health Consultation Paper National Institute for Health & Clinical Excellence: Selection of Topics**

The deadline for comments to formulate a response from the RCGP was 16 May.

It was questioned what the minimum service was that should be available to the rural population. The group discussed topics to forward to NICE. It was felt that the level of access to services should be developed as a standard. Suggested topics which the group felt should be available in rural areas were:

- Access to rural services
- Accident & Emergency
- Out of Hours
- Chest Pain
- Neonatal Care
- Response
- Assessment
- Intervention
- Healthcare
- Access to appropriate medical services
- Standards of dispensing

Agreed: That a letter is to be sent to Maureen Baker seeking guidance on the best way to put these proposals forward. The Colleges response on minimum Standards of access to care from the intercollegiate paper on Service Configuration should be quoted.

Action: Gordon Baird

7. **New Editor for Country Matters**

Iain Mungall would be happy to discuss with a successor the process of putting Country Matters together. To reduce the role, it was agreed members should submit more articles. Dr Mungall had one more Country Matters to edit. Two suggestions were put forward regarding the next editor.

- That the group edit Country Matters on a rotational basis
- That Phoenix be asked to edit the magazine with contributions from the group on a rotational basis.

Agreed: That Country Matters should be edited by the group. If an editor was not forthcoming by the next meeting, a member not present at that meeting would be nominated.

8. **Reports from Members**

James Moore - The Out of Hours service in his area had been disseminated by the new group running it.

Iain Mungall - In his area he felt patients were being let down by the OOH service. As well as access, there were issues regarding the company running the service which was very bureaucratic. The public should be made aware of the situation and encouraged to push for their rights.

There had been an excellent survey of the rural population in Northumberland. He had recently spoken on the issue of transport. Emergency transport was complicated but it was important there was broad agreement over all rural areas. There was no minimum response time and there was concern people in rural areas accepted they had to wait a long time for transport. There should be minimum standards and it was gratifying that many of the Colleges supported the idea.

Jane Randall-Smith - There was reconfiguration of acute services in mid and west Wales. The Welsh Assembly has asked for views on what was being done to address the issue. A response is expected from Helen Herbert. Public Health bodies in Wales are to be reviewed. A new Chief Medical Officer had started.

John Elder – The United Lincolnshire Hospital will be closing. There was a high level of interest by general practitioners in belonging to clusters; this was considered to be a way of safeguarding general practice.

Malcolm Ward – Guidelines produced by the Dispensing Doctors Association on VAT registration was on their website. The DDA were liaising with the DoH to get it as flexible as possible.

9. **Next Meeting**

It was agreed that dates in late August/September when there is room available at the College be circulated to members for the next meeting.

Action: Mona Lindsay