

Kent Local Medical Committee

Supporting list based personalised care, the partnership model and meaningful collaboration

8 Roebuck Business Park, Ashford Rd, Harrietsham, Kent ME17 1AB Tel. 01622 851197 Fax. 01622851198

Making Connections in Swale CCG February 2018

Drs Reshma Syed and Awadh Jha joined Mrs Liz Mears and Mrs Donna Clarke at the recent LMC/CCG liaison meeting. Dr Fiona Armstrong and Mrs Debbie Stock attended on behalf of the CCG.

Acknowledgement of Requests to Community teams

It was reported that GPs are not receiving an acknowledgement from Community Services that requests have been received or actioned and is concerned the implications may impact on patient safety. The CCG agreed to make sure this is investigated further.

ADHD Prescribing

It was reported that the CCG are still trying to address this important issue but it is proving to be quite complex. Dr Jha reported that a major problem is that all drugs used for adult ADHD are unlicensed. It was suggested that this could be developed as a GPwSI and commented that in Medway a learning set has been opened where GPs bring cases for discussion and a local consultant is there to advise. The LMC agreed to draft a letter to the CCG outlining concerns about the issue and the fact that GPs are being asked to prescribe drugs that are outside their professional sphere and to ask for an urgent solution.

General Practice Forward View

Debbie Stock and Vicky Mason attended an assurance meeting at NHS England this week and confirmed the monies are being tracked and agreed to forward a copy of the current tracking spreadsheet to the LMC.

The CCG is planning to offer the £3 per head transformation money to practices in return for working together to help with Improved Access provision. A proposal is being written for PCCC to enable the money to start to be released.

The CCG reported that monies for Care Navigation are being passed direct to practices this year to help with the development of Multi-Disciplinary Teams (MDTs) as part of the local care, new models of care work. It is recognised this money will not be enough to

achieve much. The CCG is looking at other possible avenues of funding for this and the STP (Sustainability and Transformation Partnership) is also working on this.

The CCG is moving forward with work to procure an online consultation solution. Concerns were expressed about ongoing issues with existing network and there was a feeling that it is not robust enough to take anything else. Debbie Stock agreed to request that the IT team, headed by Dan Campbell, contact practices experiencing problems to identify if any action can be taken to improve the network issues.

Local Care Update

The CCG still has ETTF funding for the work towards creating a Health and Wellbeing Hub based in Sheppey hospitals. The aim is to utilise the community hospital space available better and could link to the Urgent Treatment Centre.

The CCG has acquired section 106 monies in Sheppey and Sittingbourne which although not a great deal should help with some development of health services where the new housing is being built.

It is worth practices considering now how they might apply for Minor Improvement Grants should they be announced in 2018 as time to submit bids is usually limited.

GP Federation Update

The CCG are looking at how staff may be made available to support development of a federated model.

New standard hospitals contract 2017/19

The CCG reported that there are still issues with MFT breaching the contract, with lots of anonymised examples still being received from GPs. Jim Loftus is taking this up with MFT and will be discussing with locality groups to understand the full extent of the problem as the suspicion is that the examples received are the tip of the iceberg because only 3 practices are actively reporting. The LMC will continue

to raise this issue at liaison meetings with MFT.

Reshma Syed reported that they are receiving discharge summaries for patients who are not actually discharged. Debbie Stock agreed to ask Jim Loftus to look into this.

The CCG requested that the LMC continue to raise awareness of the need to report these issues to Jim Loftus at the CCG (jim.loftus@nhs.net). Practices should also use the BMA template letters:

(https://www.bma.org.uk/advice/employmen t/gp-practices/quality-first/quality-firsttemplates) to report breaches to the hospital trusts.

Kent & Medway Stroke Consultation

Fiona Armstrong reported that she will be talking to GPs about this at the next PLT. The consultation is currently taking place until 13th April and is proposing 3 hyper acute stroke units across Kent and Medway with 5 site options. A lot of work has been done on this as it is acknowledged that stroke patients have better outcomes in areas where there are hyper acute units and treatment by a multidisciplinary team. For further information or to respond to the survey see: https://kentandmedway.nhs.uk/stroke/

Kent & Medway Clinical Vision and Strategy

Fiona Armstrong is co-chair of the STP Clinical and Professional Board and they are currently formulating the K&M clinical vision and strategy. Sections include local care, mental health, children and young people, cancer, urgent and emergency care and prevention. The strapline is "Quality of Life, Quality of Care".

The strategy is being taken out for engagement and will be taken to PLTs to ensure GP engagement. The LMC invited Fiona Armstrong to a Full LMC meeting to provide an overview.

Fiona Armstrong reported there are some vacancies within the CCG being advertised - GP Governing Body member; Primary Care Commissioning Committee GP member and people to support a GP sustainability group.

Clinical variation was discussed. The CCG have agreed an approach that is intended to be supportive. Donna Clarke asked about the recent letter to GPs about RaTC. Fiona Armstrong reported that this has been robustly considered across Kent and Medway and the CCG Clinical Strategy Group have agreed an approach.

Date of Next Meeting Friday 1st June 2018

Donna Clarke
Practice Liaison Officer