



Kent Local Medical Committee

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

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Making Connections in South Kent Coast CCG February 2018

Drs Julian Mead and Andy Parkin joined Liz Mears and Donna Clarke at the recent liaison meeting with South Kent Coast CCG. Dr Jonathan Bryant and Ray Berry attended on behalf of the CCG.

Referral Proforma (Children and Young People's Therapy)

The CCG reported that it has been agreed that the families can complete the bulk of the form rather than the GP.

Post-Exposure Prophylaxis with Antiviral drugs for influenza

The CCG reported that a specification for the in-hours service has been developed and has recently been sent out to all practices but details of uptake are not available yet. IC24 have been commissioned to provide the out of hours service. It was suggested the service could be provided through Channel Health Alliance (CHA) if practices do not come forward. The CCG agreed to discuss if necessary once uptake is known.

Out of Area Registrations

The CCG have had the handover of this Enhanced Service from NHSE with a list of practices purported to have signed up to the service but with no paperwork to confirm sign up. Practices may believe the service has ended and therefore the CCG are in the process of checking with the listed practices. The incidence of patients falling into this category has been low (only one so far which the Home Visiting service dealt with). It was suggested this is something else that CHA may be able to take on and the CCG agreed to discuss further.

General Practice Forward View (GPFV)/ Primary Care Strategy Update

The CCG has now entered the implementation phase of the GPFV and the agenda for today's PLT includes presentations showing different ways of working at scale to enable SKC practices to consider how they would like to proceed.

A discussion took place about the difficulties encountered in trying to ensure equality of use of the hub appointments. The CCG confirmed they would support measures to ensure fair use.

GP Federation Update

Julian Mead reported progress including CQC registration and developing 4 hubs The CCG is supporting the development. There are some IT issues largely due to the mix of EMIS and Vision systems in practices. The CCG is still keen for an interoperability solution rather than a single clinical system for SKC practices.

New standard hospitals contract 2017/19

The CCG reported an external arbitrator has been appointed to challenge significant variance being claimed by the Hospital Trust believed to be associated with incorrect coding at the Trust.

The LMC asked for confirmation that the CCG are still monitoring and challenging inappropriate workload shift and the CCG confirmed they are and gave some examples. A discussion took place about whether GPs could make a charge to the CCG for issuing Med3s, undertaking blood tests etc., at the request of the hospital. It was acknowledged that this would involve work for practices and they would be unlikely to receive payment. It was suggested that the CCG could hold some money back to cover such costs. The CCG welcomed this suggestion and agreed they would consider this.

East Kent CCG Structure Update

The CCG reported that the proposed new structure for Kent and Medway is to be discussed at the PLT this afternoon. The LMC expressed concern that practices might not feel able to vote today due to the limited information available and the lack of time to discuss it. It was noted communication only came out to practices on Monday and the CCG agreed that the ballot should not take place today as people need time to give fully informed consideration to the proposal. It

was also agreed that more time should be devoted to discussing this issue at the PLT today.

Gender Reassignment

The CCG were asked whether they are planning to commission a specialist service locally. The CCG agreed to look into this.

eRS

The LMC expressed concern that hospitals are being mandated to only accept referrals via eRS and reject referrals made by other means and there is already anecdotal evidence of London Trusts doing this. This raises patient safety concerns as well as the fact that a move to eRS only will be a major change for practices and involve significant work. The CCG confirmed they are working on this and EKHUFT has a later paper cut-off date than other areas in Kent and Medway so will watch what happens in the other areas with interest.

Date of Next Meeting:

21st June 2018

Donna Clarke
Practice Liaison Officer