



Kent Local Medical Committee

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

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Making Connections in Dartford Gravesham & Swanley CCG May 2018

Drs Ian Jones, David Lawrence, Kevin Tan and Siva Nathan joined John Allingham and Mrs Donna Clarke at the recent LMC/CCG liaison Meeting. Rachel Jones and Debbie Stock attended on behalf of the CCG.

Direct referral to the Memory Clinic

Sarah McDermott in her role as CCG Clinical lead for mental health, is working with Stephen Fenlon from the acute trust to find a process so that the trust can perform a memory assessment and relevant tests to directly access the memory clinic. Debbie Stock commented that as part of the Local Plan these patients should be being diagnosed earlier and will arrange for Naomi Hamilton who is leading on this to contact Ian Jones. The LMC agreed to bring up the issue of the dementia pathway at the KMPT/LMC liaison meeting.

Flu Immunisations in Swanley

Ian Jones reported that they have now received a serious complaint as a result of Virgin being late administering flu immunisations to their caseload. It is widely recognised that the earlier flu vaccines are given the better and this is especially important in this vulnerable patient group. This year some were not done until February. The CCG confirmed it is mandated in the community contract and she will follow up with Virgin.

Virgin generic prescription

The BMA document Prescribing in General Practice was discussed, which makes it quite clear that the FP10 prescription form and instructions thereon are sufficient authorisation for community staff to administer drugs. The CCG agreed to take this up with Virgin.

NICE Cancer referral guidelines symptom list

Ian Jones explained the issue and his request for a pathway for undifferentiated malignancy symptoms to be put on DXS in line with NICE guidance NG12. The CCG agreed to look into this.

General Practice Forward View (GPFV) Update

The CCG has received pressure from NHSE to achieve 100% coverage of Improved Access by October despite the CCG desire to do it properly and not rush it. The Federation is presenting to the PCCC next week on their plan to deliver.

The CCG is hoping to be able to recruit a head of Primary Care to replace Vicky Mason.

The CCG is progressing 2 schemes with £2.7m from ETTF. This alone will not be enough to create a Dartford hub. This is part of a larger regeneration of the town centre and the CCG is working with the local authority (LA) to ensure CIL funding and that the hub is included in the planning application. It is hoped the LA will take the head lease. As things progress this will be fully discussed with local GP representatives to ensure the correct facility is provided to meet need. There is also a bid in for capital for developments in Swanley and Greenhithe which will also go through the appropriate consultations.

Local Care Update

The CCG reported that 3 local priorities have been agreed:

1. Creation of Rapid Response service
2. MDT working
3. Care Navigation

There are 2 sub-groups working on different aspects and these will involve GPs.

GP Federation

Siva Nathan and Liz Lunt have recently been duly elected as directors of the federation and Vicky Mason is working one day per week for them. Improved access is their main project currently. They are also looking at using Advanced Nurse Practitioners (ANPs) in the improved access hubs with access to GP advice.

The wound care project is facing difficulties at present because of the block contract being offered which makes it difficult to offer participating practices a price per activity. There is also a concern about space in the hubs for adequate provision. They are therefore likely to commence with a hub model initially and assessing after a period of time to see whether a hub and spoke model may be viable. Rachel Jones confirmed that she is in discussions with the federation lead to try to find a way forward.

The subject of flat screens in practices which deliver self-care messages and are a relatively small cost was also raised. The CCG were asked whether they would mandate the federation to deliver these in all surgeries across the DGS area.

A discussion took place about the national pharmacist scheme and whether the federation could employ pharmacists that could then be shared between the practices and they can be cross charged proportionally. Ian Jones confirmed that a bid has been submitted.

New standard hospitals contract 2017/19

Update on process for reporting breaches/single point of notification

The CCG are now having a quality meeting with DVH and as part of that Liz Lunt is having a monthly meeting with Steve Fenlon. The CCG has carried out clinical variation visits with practices and have picked up the breaches and seen a pattern emerging, particularly within A&E, that will enable Steve Fenlon to start to address the issues. Rachel Jones has asked that for the time being she would like issues emailed to her personally rachel.jones22@nhs.net so she can continue to identify trends.

A discussion took place about the difficulty GPs have getting patients seen urgently at DVH and that they are being advised to send the patient to A&E. The CCG agreed to investigate.

Unfunded Work

This issue is being raised Kent wide as a big issue. Ian Jones highlighted particularly the removal of an ECG LES which is being funded elsewhere to help in the diagnosis of AF, plus it is cheaper and more convenient for the patient. The CCG asked for a list of LES that the LMC would like considered. DGS CCG are working with other CCGs across Kent and Medway to consider things such as this as part of the Local Care Plan and moving things into the community.

VMO/Step Down

The CCG is looking at this as part of the Local Care Plan. The LMC explained how the Care Home service in West Kent is funded and the way they have categorised the homes into 3 tiers. The CCG confirmed that they are aware of the West Kent work and are planning to put something in place. John Allingham highlighted that medical care of step down patients also needs to be considered and appropriately planned for and funded. The CCG confirmed this is being taken into account. It was suggested there may be a role for a Primary Care physician.

Community Education Provider Network (CEPN)

The LMC reported on the development of the North Kent CEPN which John Allingham chairs. There is a newsletter that has been sent out to practices. They are accessing various pots of money for GP education. John Allingham agreed to ask Tara Humphrey to share the plan with the CCG.

Adult ADHD Shared Care Agreement

This is an ongoing issue. The LMC suggested that the CCG speak to someone in East Kent where there is now a good agreement in place with funding attached.

Electronic Referral Service (eRS)

John Allingham explained that this is controversial but contractual. There is

17p per patient being paid to practices for this year only. DVH is the last trust in Kent and Medway to move to paper switch off so DGS practices will be able to see what has happened elsewhere.

GDPR

Donna Clarke reported that she has emailed information to all Practice Managers and that practices should be taking on board the BMA information produced by Paul Cundy. The ICO has confirmed they will take a pragmatic approach and practices will not be expected to be totally compliant on 25th May but will need to demonstrate an awareness and a plan. The LMC encouraged people to ensure their PMs have attended the staff training team training.

DartOCM

There are issues with not all results being visible to GPs. The LMC agreed to raise with Steve Fenlon.

Date of Next Meeting: 9th October 2018

Donna Clarke
Practice Liaison Officer