



Dear Colleague

Welcome to this week's edition of the LMC Express.

The local updates for this week include:

- Integrated Care Board Nominations for GP Partner Members
- Kent and Medway ICS Structure
- At Scale working: Practice mergers, super-partnerships, federations and PCNs Webinar: 18th May 2022 at 12.30pm
- PSA Update

Integrated Care Board Nominations for GP Partner Members

Just a reminder that nominations can now be submitted for the two GP partner member roles on the Kent and Medway ICB board.

Nominated individuals:

- must be from a GP practice within Kent and Medway in receipt of a GMS, PMS or APMS contract and must be a practicing GP
- must be seconded by four other eligible Kent and Medway practices: One of these must be outside of the nominee's PCN area and another one of these is to be outside of the nominee's Health and Care Partnership Area (*DGS, east Kent, Medway/Swale, east Kent*)

More details and a link to the nomination form can be found [HERE](#). **Nominations must be submitted to mikegilbert@nhs.net by no later than 5.00pm on Friday 20th May**

If you would like to discuss the role or need support with the nomination process please get in touch (info@kentlmc.org).

The Kent and Medway ICS Structure

The Health and Care Bill received Royal Assent on the 28th April 2022, the Bill is now an Act of Parliament (Law). In Kent and Medway this means that Kent and Medway CCG will transition to

be the NHS Kent and Medway Integrated Care Board, our new statutory NHS organisation to be established from 1st July 2022. Within the Integrated Care Board (ICB), there is an ICB Board – this is the board which is currently looking for two representatives of General Practice. In addition to this the ICB are inviting representatives for other Partner roles. There will be Two Partner Members from NHS and Foundation Trusts, one will provide the perspective of acute and ambulance services and the other the perspective of community and mental health services. Each of these will ideally be a chief executive, or can be an executive director. Two Partner Member(s) from the upper tier Local Authorities, one of which will provide a perspective of the Kent population and the other the perspective of the Medway population. Each of these will be a local authority chief executive officer or a local authority director. In addition to the partner representatives there will be, A Chief Executive (Paul Bentley), A Chief Finance Officer (Ivor Duffy), A Chief Medical Officer (Kate Langford), A Chief Nursing Officer and A Chief Delivery Officer (both to be appointed), there are Five non-executive members (Elizabeth Butler, Hugh McIntyre, Angela McNab, Valerie Owen and Gurminder Sandher), all led by the Independent Chair of the ICB Board who is Cedi Frederick.

NHS Kent and Medway Integrated Care Board (ICB) will be responsible for arranging the provision and oversight of health and care services across the system to meet the needs of local people. Partners will be expected to set aside their loyalties to their individual organisations and act to ensure the statutory obligations of the ICB are met. In addition to this ensure the strategic vision of the ICS is achieved which encompasses the triple aim of improved population health, quality of care and cost-control. The LMC have agreed to assist in the process of appointing the GP Partner Roles. If you have any questions about the role please feel free to contact the office and/or Mike Gilbert (whose details are in the attached Appointment process information).

The formalisation of the ICB and the ICB Board is enabling the future governance structures to begin to emerge. Health and Care Partnerships, Dartford, Gravesham and Swanley, East Kent, Medway and Swale, and West Kent have been meeting regularly with partner organisations giving their time to discuss and develop strategy and implement plans to improve the health of their population. There have been national directives which have and are being developed such as the Community Diagnostic Centres, the first has opened at Buckland Hospital, Dover. There are additional sites being planned in West Kent, DGS and Medway and Swale. Clinical pathways are being reviewed and developed for conditions such as Diabetes, acute respiratory care, community cardiology and respiratory care. As part of this work services are being reconfigured to offer localised care for patients.

The Integrated Care Partnership will contribute to the Kent and Medway ICB Board. The membership will include one of the GP members of the ICB Board, the LMC, and other partners and this board will oversee the Health and Wellbeing Strategy of Kent and Medway.

The ICB will have Committees:

1. Improving Outcomes – provide assurance of quality and performance of commissioned health and care services
2. Audit and Risk
3. Remuneration
4. Inequalities and Population Health
5. Productivity and Investment
6. Primary Care Commissioning

The Four Health and Care Partnerships remain and are in the process of nominating representatives to the ICB Committees. This process is starting to crystallise the governance structures of the Health and Care Partnerships and these are being developed further.

As we move beyond July we anticipate the roles within the Health and Care partnerships will become formally appointed. Budgets are likely to be delegated to place and most importantly human resource. Provider Collaboratives will continue to emerge and are likely to be locally project led with MOUs between providers.

We know that the Clinical Lead CCG roles are contracted to continue until the end of September. It is anticipated that the Chief Medical Officer will develop the clinical directorate to give clinical representation throughout all levels of the Integrated Care System.

There will be a System Quality Group which sits outside of the ICB Committees and Health and Care Partnerships, it is likely that the Health and Care Partnerships will consider developing localised versions in addition to this.

Primary Care Commissioning will remain separate to the Health and Care Partnerships. It is likely NHSE will delegate responsibility for Pharmacy, Optometry and Dentistry to the Kent and Medway ICB. The Primary Care Commissioning Committee will remain with GP and LMC representation to continue and this will report to the ICB Board. Primary Care Operational Groups will also remain. We are assured that contact points for practices within the commissioning teams will remain and that it will be clearly communicated.

At Scale working: Practice mergers, super-partnerships, federations and PCNs
Webinar: 18th May 2022 at 12.30pm

Kent LMC, in conjunction with Nils Christiansen from DR Solicitors, will be hosting a webinar on Practice Mergers. Nils Christiansen is the Managing Partner and co-founder of the DR Solicitors, and is an acknowledged expert on the NHS regulations and on the commercial environment in which GP practices and other primary care providers operate. Nils has supported numerous practice mergers, GP federations and super-partnerships on their growth strategies and advised clients faced with complex regulatory problems.

The webinar will look at the different forms of scale working in primary care, consider the pros and cons of each, and explain how they can all co-exist. We will examine the different possible entities for at-scale working, including limited liability entities, explain the different models for merging practices, and the steps for a successful merger, including setting out the pitfalls and how to avoid them.

To Book a place please click [HERE](#)

Prostate Specific Antigen (PSA) follow up Primary Care

We understand some practices, having agreed to take on the service some time ago, may be uncertain about the start date for the PSA follow up service. We understand that once the CCG has confirmed arrangements for all practices, and then confirmed transfer of care pathway with each secondary care trust, it will provide further information on an official commencement date, including providing the variation to the PCQS contract and additional supporting information. All practices should receive this by the beginning of June 2022.

Practices are reminded that, as part of a soft launch, the CCG has agreed practices can claim for all patients on their list receiving PSA follow up in primary care from February 2022.

Kind Regards

Kent Local Medical Committee