



Kent Local Medical Committee

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Making Connections in Canterbury & Coastal and Ashford CCGs January 2015

Drs David Grice, Gaurav Gupta, Jim Kelly, Simon Lundy, Mark Speller and Mr Carlo Caruso joined Mrs Liz Mears at the recent LMC/Canterbury & Coastal and Ashford CCG liaison meeting. Mrs Sue Luff and Dr Navin Kumta attended on behalf of Ashford CCG.

Mental Health Care (ASD)

The CCG provided an update on the delays in the assessment of Autistic Spectrum Disorder patients. For patients aged 8 to 11, the Kent and Canterbury ("K&C") had no patients experiencing long delays. The William Harvey ("WH") had 30. The reason for the apparent increase in patients experiencing long delays was due to the retirement of a consultant and the absence of a succession plan.

It was also reported that the waiting times for adult patients was excessive and the CCGs have made extra funds available to address this.

Primary Care Workforce Tutor

It was reported that an appointment has been made to the position of Primary Care Workforce Tutor ("PCWT"). The appointee will support the work of the Primary Care Strategy Group in a variety of ways, namely: supporting GP trainees; developing protected learning times for nurses; and networking with colleagues and the GP training team through the CEPN.

PwSI Accreditation currently remains the responsibility of the NHSE Area Team but is expected to be transferred to CCGs. However, there was uncertainty around the anticipated timeframe for the transfer and whether the process would be managed. Options for incorporating the reaccreditation process with GP Appraisal were discussed and how the PCWT might support this.

It was agreed that the PCWT could assist with the coordination of child and adult safeguarding training across the area for general practice staff, including locums.

Flu Vaccinations (Housebound)

The CCG reported that the Community Trust has been contracted to provide flu vaccinations for housebound patients. It was noted there have been organisational issues which have resulted in housebound patients not being put on community nursing staff case load and therefore did not receive their vaccination. This has caused concern about the resilience of the service. Ian Jackson would be asked to provide an update to the next liaison meeting about the progress towards resolving the issues discussed.

The CCG was asked to look into the issue whereby pharmacists that provide vaccines were not linked into the reporting system so there was a potential for patients to be given more than one vaccination.

Shared Care Prescribing Agreement

Canterbury CCG locality has agreed a list of 31 medicines that are appropriate for shared care between secondary and primary care. Payment is being made on a weighted patient basis but this was decided without reference to the LMC and some GPs have asked for this to be paid on a per patient basis.

Ashford CCG had agreed to fund the scheme on a per drug basis. It would share the progress of scheme after one year of operation.

Primary Care Strategy Update - Workforce

The group discussed the guidance recently released by the BMA, Quality First: Managing workload to deliver safe patient care. The guidance explores how General

Practice can manage its workload in the context of increasing demand and diminishing resources. The group agreed that the document would prove crucial stimulus to the debate around the distribution of resources between primary and secondary care and how a transfer of these resources could be facilitated via an increase in commissioning of enhanced services. Practices would be encouraged to review what unfunded work is causing pressure on core service provision that could be commissioned by CCGs through GP Plus contracts. This approach would also facilitate the development of MCPs.

The LMC agreed to share the document amongst practices and invite them to raise issues similar to those highlighted in the document with their LMC representative and the Liaison Manager who can then ensure appropriate follow up.

The group also discussed the merits of the hub employing a salaried locum to provide backfill to facilitate the participation of Clinical Lead support to CCGs. It was felt that candidates for the role could be found amongst recently qualified GPs who may be attracted by the flexibility a post such as this can provide and encourage GPs to remain in the area.

Workforce Planning Tool

Liz Mears reported that there have been discussion between the LMC, the Area Team and HEKSS about the requirements for both the HEKSS and HSCIC workforce data entry requests. HEKSS has been looking into enabling the HSCIC tool to extract common data from the HEKSS data set in order to minimise data entry requirement for general practice. An announcement about this will be made in early March 2015. In the meantime practices have been advised to refrain from entering data onto either tool and continue to attend any training sessions currently planned for the HEKSS Workforce Tool.

Co-Commissioning

Sue Luff reported that at the recent Protected Learning Time event Ashford CCG members voted for the model of Co-Commissioning they wanted to adopt. 13/14 member practices voted and all that voted chose option A. None of those in attendance abstained from the vote.

Five Year Forward View

The group discussed the Five Year Forward View and noted that the preferred model of care was Multi-speciality Community Providers ("MCPs"), with the Primary and Acute Care Systems ("PACS") only desirable where general practice is under strain and recruitment and retention is a particular challenge. The group agreed that general practice in Kent is capable of moving towards the MCP model of care.

EKHUFT has been in discussions with practices within the localities to gauge interest about them possibly co-locating on hospital premises. It was speculated that this would be with the intention of adopting the PACS model.

Anticoagulation

The review of the whole care pathway is still underway for the whole of Kent and Medway. The review is looking at the clinical specification and pathway and has not yet progressed to the procurement stage.

Out of Area Registration

It was reported that the Area Team has achieved the required level of coverage with 90 practices having signed up to provide the service.

LARC

The LMC reported that the specification had not yet been issued. Mike Parks and Carlo Caruso had met with the Public Health Team who advised that it was likely that they will be seeking to harmonise prices across the area, require providers of this service to have the relevant Letters of Competence and to undertake a specific number of insertions and procedures per year.

The group was of the view that general practice was currently facing unprecedented demands and if providing the LARC service is significantly disincentivised then GPs may choose not to provide it and instead concentrate on providing core services.

Mental Health Update

Due to the imminent retirement of the PwSI. Practices need to be informed of the referral criteria for patients aged 8 - 11, who will need to be referred to the KMPT and not EKHUFT. The South East Coast

Commissioning Support Unit (“SECSU”) is managing the procurement of this service for Ashford CCG, with the Mental Health Commissioner leading on this work.

MSK Triage Service - Ashford

The MSK triage service is running well and will be evaluated after 3 months. GP colleagues are to be asked to share any issues with the service with JK which can then be used to inform the review of the pathway.

EKHUFT Liaison Meeting November 2014

The group discussed the introduction of named GPs and thus the need for EKHUFT to ensure the accuracy of its database in order that patients’ GPs receive secondary care letters.

It was also noted that this situation is likely to deteriorate with the Primary Care Support Services contract out for tender, because the mail redirection service currently provided by the KPCA will not be part of the of the specification for the new primary care support service. This is likely to result in an increased burden for practices having to deal with misdirected post.

The CCGs agreed to put this on the agenda for the upcoming MIG and if the issue was not resolved then to take it to the Contract meeting.

Date of Next Meeting

TBC

Carlo Caruso

Deputy Clerk on behalf of Kent LMC