



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 July 2015

Drs Julian Mead and Penny Barley joined Dr John Allingham and Mr Carlo Caruso at the recent liaison meeting with South Kent Coast CCG. Hazel Carpenter, Ray Berry and Darren Cocker attended on behalf of the CCG.

Buff Sheet

EMIS and Vision are working with KCHT to produce a Buff Sheet produced via the clinical system when an FP10 is issued.

The tension between GPs and community staff remain and a definitive solution is overdue. Paediatric palliative nurses have been trained to do transfer FP10/hospital prescribing records to a community instruction to administer, and pharmacists are completing MAR sheets for care homes, therefore solutions do exist.

Mental Health

Continuing issues with mental health referrals were highlighted. Concerns were raised from constituents with numerous rejected referrals and a feeling that only the seriously ill patients are seen. CAMHS remains a significant issue.

LMC remains concerned that there is a skills and capacity gap in primary care struggling to deal with some of the patients that mental health services refuse to see.

Housebound flu

The housebound patients will be immunised by KCHT this year according to the definition used last year. The CCG are trying to add it to contract going forward. It was confirmed that carers of housebound patients would be immunised in the same visit.

Concerns were raised about KCHT having the capacity to deliver this service, the ability to deliver it early in the flu season and the usual delay in staff obtaining their annual update training in a timely fashion was raised.

Workforce

A number of different strands looking to encourage recruitment were highlighted. These include the use of pharmacists, the development of physicians associates, a careers conference for 14-18 year olds in the cruise terminal in Dover and work with local schools. The CCG are looking at ways of attracting GPs to the area and retaining them.

Co - Commissioning

John Allingham reiterated the LMC position as outlined in a recent letter to all GPs, and reported that the LMC will be holding a full debate on 6th August. It was noted that with the development of an ICO SKC CCG were less concerned about progress towards co-commissioning.

Enhanced Services Update: LARC

The problems with contracts issued by KCC was noted, and it was highlighted that practices are surrendering this service as the training and registration requirements are onerous and the remuneration reduced.

Minor Surgery

Because of perception of an increase in governance arrangements some practices in the area have dropped out. The CCG has informed practices that inter-practice referrals are allowed.

Quality First, Managing Workload

The BMA guidance together with the letters produced by the LMC to return inappropriate work to other providers particularly EKHUFT was discussed. The letter sent discussing the responsibility of a consultant was discussed.

The GP info e-mail was applauded as a means of quick and effective feedback to EKHUFT was highlighted. It has been advertised by the LMC before and it is ekht-gpinfo@nhs.net.

EKHUFT Interface Meeting

The continuing mis-direction of clinical mail was highlighted. Each case is an Information Governance breach and with KPCA no longer forwarding mail it poses an additional workload for practices. The LMC suggested practices return mis-directed mail to sender or forward to the hospital IG guardian.

Kent & Medway Staff Training Team

The CCG reported the ongoing review which will report soon. There will be a dilemma concerning who is responsible for the decision with the LMC administering the top slice and the CCGs/NHSE paying the staff costs. The funding is secured until March 2016. Hazel Carpenter highlighted the need to conclude this process before beginning CEPN conversation. The service is currently running well.

SMS services post 2015.

It was noted that SKC usage of SMS messaging is below the national average. A new provider is being developed but the practices will not notice a change in service.

CCG reviewing the service to ensure it is available to all practices and to expand its use.

Commissioning of Specialist Nurses

Penny Barley reported that specialist cardiac nurses (arrhythmia/failure) are having to carry out dementia and pressure sore screening, which is impacting on their capacity to see cardiac patients. The LMC representatives were of the view that there would be greater benefit if the nurses did not have to spend time doing full assessments outside their specialist (and referred) areas. It was suggested that specialist cardiac nurses should refer back if they have concerns re dementia etc.

The CCG is looking at streamlining cardiology pathways.

Low Priority Referrals Criteria List

This list is available on the SKC website and is updated regularly. The link is <http://www.southkentcoastccg.nhs.uk/about-us/individual-funding-requests/>

Date of Next Meeting

The next meeting will be held on Thursday 19th November 2015 ahead of the PLT afternoon.

Carlo Caruso
Deputy Clerk