



Kent Local Medical Committee

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

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Making Connections in East Kent CCGs September 2019

Drs Gaurav Gupta, Senthil Balasubramaniam, Manuel Fernandes, Mark Speller, Sadia Rashid, and Thilla Rajasekar joined Mrs Donna Clarke at the joint East Kent CCGs liaison meeting. Bill Millar, Andy Oldfield, Michele Sault, Oena Windibank, Heather Lucas and Drs Simon Lundy and Brighton Chireka attended on behalf of the CCGs.

What patient identifiable information can the CCG receive

Only the Quality Team and sometimes the CSU can receive patient identifiable data. There has to be a legitimate reason to share. If something is being dealt with as a Serious Incident then the information can be provided. If it is something that is a frustration with something that has happened, that would not constitute a legitimate reason. The referral support tool helps with reporting, but this is currently only available in Canterbury and Ashford. Dr Lundy suggested that the referral support tool should be rolled out across East Kent.

Follow Up Ultrasound Scan Appointments

The LMC asked for clarity on what is commissioned regarding follow-up scans. GPs are receiving scan results stating that a patient should have another scan in a certain period of time and suggesting the GP should monitor and arrange follow up. The CCG reported that the AQP contract may restrict their ability to arrange follow up scans. Dr Gupta stated that there is inconsistency and some of the providers do arrange any necessary follow up. The CCG agreed to investigate the inconsistencies and check what the contracts specify.

Protocol and Referral Pathways

The CCG plans to write to EKHUFT to inform them of the need to consult with the CCGs when changing any clinical pathways that may have an impact on General Practice. The LMC suggested letters should also be sent to other providers.

Retiring Consultants

Bill Millar reported that Paul Stephens has written to all departments reminding them of the requirement to ensure patients are passed to someone else in the department when consultants leave and should not be discharged to their GP.

CCG General Update

Bill Millar reported that the CCG is looking to providing a bulletin to practices that contain links to

all new relevant information rather than bombarding them with multiple emails.

Improved Access funding calculations

The CCG is in contact with NHSE to ascertain where the Improved Access population figures come from as they are different to the numbers that NHSE had previously agreed, as submitted by the CCG. Dr Gupta commented that if numbers are changed providers cannot be expected to change hours immediately.

DPO Function for Practices

Bill Millar reported there will be 5 people in this role hosted by Medway CCG. They will provide the DPO Function to all practices across Kent and Medway. The LMC asked that practices be provided with information about how to contact the DPOs. The CCG agreed to send information that has gone to practices to the LMC.

KMPT Interface Issues

The CCG has looked at the examples sent to them and identified themes running through that are causing issues for GPs. They regularly liaise with KMPT and believe the Trust have a good programme of change happening now. The CCG acknowledges that referrals that would have been taken up by KMPT in the past are not being taken up now. In addition, KMPT and the CCG acknowledge that there is a gap in the service. The CCG has therefore begun mobilisation of a new contract with Invicta this week that will see up to 12 more primary mental health practitioners in East Kent in the coming months. This service will pick up any referral where there is doubt about whether it is urgent or not.

In respect of rejected referrals the CCG commented that in other areas of the country referrals are not rejected but those areas have seen significant investment. There is new investment coming to K&M now which should help to address this in time.

The LMC suggested that KMPT staff and clinicians could be invited to sit with GPs to improve understanding of how General Practice functions and experience the pressures GPs are facing.

CCGs General Update

A joint letter from the LMC and CCGs has gone out to practices regarding the proposed merger of the 8 CCGs into a single Kent and Medway CCG. Bill

Millar and Gail Arnold have started exploring how CCG departments can be brought together. The STP are holding an event for CCG staff when Glenn Douglas will update all staff on the proposals.

The CCG gave an update on the Urgent Treatment Centre (UTC) procurement. They are about to begin the process, but this will not apply to the 5 smaller sites where a direct award may now be made. The procurement will apply to the 3 large acute sites. The CCG will be formally advising MIU LES providers of their intention to terminate these contracts reflecting the mobilisation timelines of the individual sites.

K&M Primary Care Quality Standards

Concerns have been expressed by practices re confusion around which wound care is covered by the Treatment Room spec and which by the Complex Wound Care spec. The LMC had sent an email out to practices the previous day to clarify.

The CCG reported that so far about a third of East Kent practices have responded.

Date of Next Meeting

5th December 2019

Donna Clarke
Practice Liaison Officer