



# 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 December 2019

Drs Gaurav Gupta, Senthil Balasubramaniam, Mark Speller, Julian Mead and Simon Lundy joined Dr John Allingham at the joint East Kent CCGs liaison meeting. Bill Millar and Karen Benbow attended on behalf of the CCGs.

### **What patient identifiable information can the CCG receive**

CCG to liaise with LMC office to meet key commissioners to consider what identifiable patient data the CCG can receive. Remains Active.

### **Follow up ultrasound scan appointments**

CCG confirmed contracts with Non-Obstetric Ultrasound providers have been amended to follow up appointments for repeat scans will be organized by the provider and communicated to the referrer for information.

### **Changes to clinical referral pathways without consultation with GPs**

This issue will be taken up with EKHUFT. LMC will add to next liaison meeting agenda.

The new community paediatrics referral process was cited as an example. This will be followed up.

### **Improved Access funding calculations**

The CCG reported that Improved Access funding calculations have been agreed with all providers.

### **PMS Investment Monies**

The CCG reported that reinvestment of PMS monies work is complete.

### **Data Protection Officer (DPO) Function**

The DPO is in place and has attended membership meetings. The CCG will seek to resolve the issue of the DPO giving 'open ended advice'.

### **CCGs General Update**

There is a procurement process ongoing for a new interpretation service.

Connect Rheumatology work is ongoing CCG to report back.

The Accountable Officer for the new CCG is being appointed and an announcement is due on the 13th December 2019. The GP Strategy has been approved. LMC commented on the need to invest more and make Kent an attractive place to work.

### **K&M Primary Care Quality Standards (PCQS)**

Four practices have not responded at all to communications, and only 8 have given a response to the contract sign up. The issue is that this scheme includes activity for which practices are already getting paid. Aim now is for a full launch in January 2020 providing all paperwork is complete. Data extraction using EMIS is being worked on.

Wound Care service is not finalized, and there are ongoing issues with tissue viability service, training and education and the need for first assessment to be 45 mins not 15. Work continues on a service for 24/48/72hr ECGs.

### **IT Update**

The Brexit readiness laptops for practice remote working are available. The collection has been amended so that engineers will attend localities on set days as well as GPs collecting from the central locations. This will take place in December and January.

HSCN roll out continues. It is not solving all issues as there is still a need for hardware replacement in many practices.

PLT time has been allocated to the issue of e-consult.

### **Dungeness**

Pharmacists are being issued with stocks of Iodine in preparation for the decommissioning process at Dungeness. Practices have not been contacted to be advised of the process in the event of a radiation leak.

### **Primary Care Networks (PCNs)**

Recruitment for additional roles in PCNs was discussed. The need to look at maturity matrices and the development plan was highlighted.

There are no concerns around flows of money. PCNs should be reminded to claim for development monies.

### **LMC Constitution**

LMC updated the CCG about proposed changes to the constitution to reflect development of ICPs. New constituencies will be organised in this way.

**KMPT Interface Issues**

This is challenging work. The LMC continue to liaise and recent work has looked at increasing the time the GP advice line is available for.

**Local Care**

Provider contracts have been issued for all Urgent Care Centres except where there is competition.

**What to Expect when you are referred to a specialist**

The posters produced by the LMC have been distributed to all practices and EKHUFT are displaying them. The possibility of the information being added electronically to the outpatient letters sent to patients is being looked into by EKHUFT.

**GPs copied into results**

This issue has been raised with EKHUFT and essentially is going to need a gradual culture change.

**Date of Next Meeting**

Wednesday 4th March 2020

**Dr John Allingham**  
**Medical Secretary**