



# Kent Local Medical Committee

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

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## Highlights from the Full Kent Local Medical Committee Meeting September 2018

Dr Gaurav Gupta welcomed members and observers to the meeting.

### QOF Review

The LMC had provided a response to the Qof review which was shared with LMC representatives and which reflected the views expressed.

### Unfunded Work

Dr John Allingham provided an update on discussions with Gail Arnold from West Kent CCG identifying services currently provided by practices but unfunded. The next meeting is on the 25th September 2018.

### Spirometry

Following the LMC letter to CCGs it was reported that there have been responses acknowledging the need to address this non-core service but to date no commissioning intentions from the CCGs. Spirometry enhanced services elsewhere in the country will be investigated.

### Electronic Referral Service (eRS) Update

The LMC office is having regular teleconferences with NHSE, NHS Digital and CCGs and they are not reporting many issues. The general feedback from the Committee was one of improvement. However, in West Kent there is still no named consultant facility. In DGS there are not enough appointments in NHS hospitals and they are having to choose private providers to get an appointment soon enough. Some reported technical issues which make it difficult to use. Dr Caroline Rickard confirmed that Consultant to Consultant referrals are out of scope of eRS but they can still do referrals in the normal way and should not return any to the GP to do. There is a national Directory of Services (DoS) within eRS to help identify the correct clinic.

Paper referrals for 2 week waits will be processed by the Acute Providers to avoid

delay. Practices will be encouraged to use eRS going forward.

It was reported that some specialities are not able to cope with amount of 2WW referrals being generated. It was reported that some out of scope services (i.e. not first outpatient consultant appointments) are insisting on the use of e-RS. Dr Gupta confirmed that all the specific issues raised by LMC reps have been fed back and taken on board. He asked that any other specific issues should be sent to [info@kentlmc.org](mailto:info@kentlmc.org) and they will be fed into the meetings with NHSE/NHSD, CCGs and Acute Providers.

### Report of the Sessional Sub-Committee 6th September 2018

A Facebook group for sessional GPs being administered by the group is due to go live next week.

There are sessional vacancies in Ashford and Medway CCG areas and two trainee LMC vacancies. The elections will commence on the 14th September 2018.

It was proposed that the 2019 sessional conference will be held in May and will concentrate on portfolio careers and pensions.

Dr Rickard had discussed the Next Gen programme she is leading on behalf of the LMC.

The lack of salaried GP trainer's reimbursement will be raised nationally.

A discussion took place about the BMA's Partnership Review and what sessionals may feedback including a rather radical suggestion for a conference motion.

### STP Primary Care Board

Dr Gupta reported this is a new STP work stream co-chaired by Dr Mike Parks and Dr Fiona Armstrong with around 14 others

including CCG primary care leads, NHSE, GP Federation reps, CCG clinical chairs, PPG rep, comms lead, Q&S nurse lead, LMC Chair, STP workstream lead. Dr Parks reported the first meeting was held yesterday. The agenda was deliberately loose so that a discussion could take place about what the Board should be delivering and to start to set some clear objectives. The STP Programme Board have said that they would like to see some radical objectives. Dr Parks reported that there is a real possibility of obtaining some STP funding and support for primary care with the development of a robust investment plan commencing in 2019/20.

Liz Mears reported that the main outcomes from yesterday's first meeting were:

1. Workload and workforce - including workload shift
2. Kent and Medway patient offer - East Kent already exploring this based on the Salford model which brings funding for quality standards
3. Long term investment plan
4. Education and Training for new GPs
5. Employment opportunities
6. Safety for patients and also for staff
7. Local Care

It was noted the differences in the federation role in Local Care across K&M. The unfunded workload transfer was discussed, and it was suggested that the associated funding should be held back and directed to where the work is being carried out.

Dr Ian Jones reported that the DGS GP federation and Dartford and Gravesham Trust are exploring how they could work more closely together.

Dr Parks invited everyone to suggest potential solutions to these problems to help direct the work of the Board.

Suggestions included:-

- can the Board move the indemnity issue forward
- work around investment in technology
- coordinating an approach towards provision of additional hours/out of hours
- training for GPs to provide tiers of work

- finding and diverting funding to support implementing 10 High Impact Actions
- provide in house consultancy for practices to develop working at scale
- properly commissioned, primary care led frailty scheme
- LMC should sign off clinical pathway changes before they are implemented
- Hospitals should be stopped from passing work back to practices
- a payment be introduced for every letter received by practices that is asking the GP to do something the hospital or other providers should do
- a unified comms strategy to inform patient across the patch what they can and cannot expect in terms of meds and treatments rather than the GP having to explain at every contact
- mandate that all junior doctors do a year in general practice as part of their training
- a STP premises workstream to take an overview of practice premises
- the Board work to make CQC visits less onerous
- look at the Brighton cancer model which also is being run in West Kent as an incentive scheme
- uplift in Enhanced Service payments as payments have stayed the same for many years.

Dr Parks asked that people continue to feedback ideas such as this to him, Liz Mears and Dr Gupta so that they can take them to the Board.

### **Motions: Conference of England LMCs - 23rd November 2018**

The committee formed small groups to discuss and draft potential motions for conference.

### **Consultations:**

#### **Partnership Review**

Liz Mears reported on the recent visit to Kent and Medway by Dr Nigel Watson. The feeling was that it went well, and those involved provided some valuable feedback to him. Liz highlighted that you can still feed into the review. The first draft report is due in the Autumn.

### **General Practice premises policy review - call for solutions process**

Liz reported that this consultation ended yesterday. She had sent in comments on behalf of the LMC around the issues faced by GPs who have problems with long term leases and the inability to transfer that liability currently.

Dr Gupta reported that he is working with the GPC premises group and would be interested to receive information regarding problems and/or solutions.

### **Draft Integrated Care Providers (ICP) Contract**

Liz Mears tabled the documents that have just been released and suggested that people take time to read the GP Integration Agreement document. There will be a consultation on ICP contracts and the agreement coming out in due course.

### **Digital-first primary care and its implications for general practice payments**

Donna Clarke explained the process being followed to review how practices are paid to reflect the advent of the likes of GP at Hand. The consultation closed 31/8/18.

### **Kent LMC Interim Elections**

Dr Gupta reported that there are Sessional LMC representative vacancies in Ashford and Medway, and Contract Holder LMC representative vacancies in South Kent Coast, Swale and Thanet. The LMC will commence the election process for these localities on the 14th September, with the closing date for nominations of the 5th October 2018. Representatives were encouraged to share this information widely.

Any GPs interested in becoming an LMC representative can contact the office for more information.

### **Kent LMC Conference, Ashford International Hotel**

Dr Gupta reminded members that the Kent LMC Annual Conference 'Survive & Thrive in General Practice' will be held on Thursday 1st November 2018. The conference is free to attend, and registration is open on the LMC website.

### **Mental Health letter response**

Dr John Allingham tabled a copy of the response to the LMC letter of concern about the state of mental health services received from Patricia Davies, Director of Acute Strategy at the STP. The feeling was that the response had not satisfactorily addressed the concerns.

Dr Ian Jones expressed concern about the lack of help for severe mental health patients who are simply referred back to the GP if they do not engage.

Concern was also expressed that the letter states that the Single Point of Access is only for urgent referrals which is the opposite of what GPs understood.

Options for further action were discussed.

Dr Allingham will review and attempt to engage in some meaningful liaison before bringing back to the November LMC.

Donna Clarke  
Practice Liaison Officer