# Wandsworth LMC News

**Chair: Dr Amer Salim** 

September 2015

# **Co-Commissioning**

All CCGs in South West London are currently seeking a mandate from their members to make an application to NHSE to move to level 3 commissioning (fully delegated), subject to due diligence. This process is underway; Croydon however has openly stated its non-readiness to move at this moment in time. The applications need to be made by 6 November 2015.

# South West London Primary Care Cocommissioning Joint Committee

Julie Freeman, Director of Primary Care Strategy at Londonwide LMCs represented MSW LMC as an observer at the meeting on 3 September 2015. The items discussed were:

- Finance report from HSEL and the significant reporting of a QIPP deficit
- PMS Contract Review NHSEL briefly outlined their intended approach which was questioned by all six CCGs in South West London especially with regard to the timeliness and appropriateness of applying such a process before the Strategic Planning Group (SPG) has agreed its commissioning intentions. The CCGS would be making a formal request to delay the process but with a commitment to follow through next year when CCGs would be better informed.

The agenda and papers of the South West London Primary Care Cocommissioning Joint Committee can be accessed <u>here</u>.

### Londonwide LMCs support to South Sector Federations

On 22 September 2015 the LLMCs South Sector team facilitated a meeting to which all the Federation leads across South London were invited to support their development. The aim of the meeting was for the leads to share experiences to date and share any learning. The meeting was successful and it was agreed that the leads should continue to meet on a quarterly basis and that a list server for the leads be set up for them to discuss issues that arise in between meetings.



# PMS Contract Reviews

We are aware that NHSEL are still developing their Londonwide approach to this nationally driven exercise and that robust local borough £s per patient figures are still unavailable. The current LMC position is to ensure that LMC representation is made at any local negotiating group. The LMC understands that NHSEL are currently consulting with CCG about the application of premium funding; but as yet we do not know the outcomes of these discussions.

We will keep you posted as information is received.

### Payment problems

If you are continuing to experience problems in relation to payments please contact NHS E directly by emailing <u>Nhsscb.lon-sth-</u> <u>pcc@nhs.net</u>.

Please copy any communications to pay@lmc.org.uk.

# Important reminder that Friends and Family Test is a contractual requirement

Practices are reminded that it became a contractual requirement on 1 December 2014 for all GP practices to undertake NHS Friends and Family Tests (FFT) and for practices to submit data to NHS England on a monthly basis by the 12<sup>th</sup> working day of the month. Please note that if you fail to submit your FFT data for three consecutive months NHSE are threatening to issue breach notices.

NHSEL have reported that 39% of practices across South London did not submit any data for June 2015.

Please remember that if even if you have no returns you need to submit this to demonstrate you are engaging in the process. Any returns fewer than 5 will not be counted as this potentially would enable patient identification, however you will have demonstrated engagement.

Please note that practices that have run out of FFT collection cards can request an additional 100 copies by contacting <u>england.londonfft@nhs.net</u>.

Further advice about the FFT requirements can be found here.

# Discharge Summaries and requests that might impact on GP workload and patient safety

Issues regarding discharge summaries and requests that might impact on GP workload and patient safety are being raised with Merton CCG.

We would be grateful for anonymised examples of inappropriate requests that you have received from hospital doctors and diagnostic departments in relation to GPs arranging tests pre and post op. Examples of inappropriate requests include those for potassium levels and BP pre op assessments.

The issue of consultant to consultant referrals is also being considered. We understand that there have been instances where during the treatment of a patient, a hospital doctor has requested that the patient is referred by their GP to another hospital department. Anecdotally, an example given has been of a hospital consultant requesting that a patient who the hospital is treating for cataracts is referred by their GP to the same hospital for retinal screening. In the circumstances we would also be grateful for examples of where a consultant to consultant referral would have been more appropriate than a referral request to the GP.

In addition please send any anonymised examples of discharge summaries in relation to which there are issues with the content and format.

Please be clear for which acute trust the anonymised examples relate to; these examples will then be passed onto the commissioners, (CCGs) to take up with the providers, (the acute trusts), with whom they have the contracts.

### SMS Service to Replace NHS Mail Service

We should like to reiterate the message sent by Nicola Jones on SMS last week: The NHS Mail SMS (Text) service will cease on 30/9/15. The CCG has agreed in the short term to replace this like for like with the SECSU provided service. The CCG is aware that there are other alternatives such as iPlato which it wishes to look at in the middle to long term, and will discuss this at the GPIT Group. Unfortunately the CCG had less than a week to look at the new service spec and is of the view that it could do better. The CCG wishes to reassure practices that you will continue to have a free service after 30 September 2015.

There should be no need to do much in the line of changes in your practice but there will be information from the SECSU in the near future. The NHS Mail service was free. The CCG is having to fund the new service from the GP IT budget (GPSoC) and costs are likely to become an issue. It wishes to avoid passing these back to practices, but that will mean looking at what it can procure and ensuring fair use. The CCG will keep all practices posted.

The LMC will assist the CCG wherever it can.

Please send any examples to <u>Stuart.Pick@lmc.org.uk</u>

In the meantime we would encourage you to continue to raise any concerns by using the quality alert system.

## Epsom and St Helier University Hospitals NHS Trust - Maternity Services - GP Survey

Epsom and St Helier University Hospitals NHS Trust has launched a GP survey actively seeking feedback on a range of issues designed to help them improve their maternity services. These include: Service accessibility; Likes and dislikes; Areas for improvement; Education; and Communication.

The survey should take no more than 10 minutes to complete. The deadline for completion is Wednesday 14 October 2015. If you would like to be considered for the prize draw (£25 amazon voucher), please ensure you name, practice and email address are completed at the end of survey in the 'about you' section.

Please <u>click here</u> to take part in the survey.

#### **Contact us**

Wandsworth LMC, Londonwide LMCs, Tavistock House South, Tavistock Square, London, WC1H 9LG Tel: 0207 387 2034; Fax: 0207 383 7442; Web: <u>http://www.lmc.org.uk.</u>

The next MSW LMC meeting takes place on Tuesday 13 October 2015. The next Sutton and Merton LMC meeting takes place on Thursday 5 November 2015.

#### Wandsworth LMC Team

Dr Amer Salim – LMC Chair Dr Theodora Kalentzi – LMC Secretary Julie Freeman – Director of Primary Care Strategy Nicola Rice – Assistant Director of Primary Care Strategy Stuart Pick – Committee Liaison Executive