



**Kent LINK External Representatives  
Meeting Report**

<b>Name of LINK Representative</b>	Roy Coles and John Gallimore
<b>Name of External Organisation</b>	NHS Eastern and Coastal Kent
<b>Name of External Group</b>	PCT Board
<b>Name of lead contact of External Group</b>	Colin Tomson, Chairman
<b>Date of Meeting</b>	16 March 2011
<b>Venue of Meeting</b>	Borden Grammar School, Sittingbourne
<b>Summary of Meeting (If appropriate attach papers)</b>	<p><i>The following reports were tabled for assurance:</i></p> <ol style="list-style-type: none"> <li>1. <b>PCT Transition Programme</b> During this period NHS Eastern and Coastal Kent will cluster within a Kent and Medway PCT which will include NHS West Kent and NHS Medway. The cluster chief executive will be Ann Sutton.</li> <li>2. Clinical Engagement and Leadership: into transition and beyond.</li> <li>3. <b>Arrangements for Shadow Clinical Accountable Officers</b> A programme has been developed for each officer in each interim consortium of which there are currently nine. The expectation is one Shadow Clinical Accountable Officer for each confirmed consortium by September 2011.</li> <li>4. <b>Board Performance Report</b> You will be aware that Ofsted with Care Quality Commission (CQC) produced a fairly damning report which had implications for both the PCT and Kent County Council (KCC). As a result the PCT has produced its action plan which addresses the availability of Children and Adult Mental Health Services for 18 year olds into adulthood, and those children in need of tier 2 provision. Partnership working is currently being strengthened</li> </ol>

through regular improvement liaison meetings between the Vulnerable Children's Commissioner and the interim Head of Service Improvement for KCC Children, Families and Education.

Winter pressures led to an increase in the number of mixed sex episodes with East Kent Hospitals University NHS Foundation Trust (EKHUT) and Medway Trust; these issues are being addressed with the providers.

**5. Chief Executive's report**

Steps are being taken by South East Coast Ambulance NHS Trust (SECAmb), Medway and EKHUT to improve ambulance handover and turnaround times at acute hospitals.

A joint working group between KCC and the PCT, focussing on better communication and awareness of how patient transport is accessed, improving the service for Eastern and Coastal Kent service users, improving support for the voluntary car schemes as highlighted by Kent LINK, consistent and equitable car parking access to all services. The cost of providing patient transport services is approx £3.8m. In addition patient transport for renal dialysis is approximately £800,000.

**6. Assurance Framework**

This is a high level report which identifies the controls in place to mitigate identified risk. This was accepted by the Board

**7. Human Resources Report**

The PCT has to decrease management costs whilst at the same time being reshaped to better support practice based commissioning. By the end of March 2011, 51 further posts will have been lost. Since April 2010 to the end of March 2011 a total of 192 posts will have been lost, with a transfer of estate and information governance teams reducing this figure further to 320.

*The following reports and items were tabled for decision:*

**1. Annual Operational Plan**

This ensures that robust delivery plans are in place for both the consortia plans and those that will be delivered across the PCT or the county.

**2. Rand D Operational Capability Statement**

This is required by the National Institute for Health Research. It is a statement of capability not one of commitment.

**3. An Equality Delivery System for the NHS**

This has been requested by the Strategic Health

	<p>Authority (SHA) for the South East Coast so as to secure agreement to adopt the equality delivery system at the highest levels. This ensures compliance with the Equality Act 2010 and the requirements of the white paper, 'Equity and excellence: Liberating the NHS'.</p> <p>4. <b>Security Management Arrangements</b> The secretary of state requires that the PCT has certain security management arrangements in place.</p> <p>The following reports were received from the Committees of the Board:</p> <ol style="list-style-type: none"> <li>1. Commissioning Strategy Report</li> <li>2. Patient Safety and Care Quality Committee</li> <li>3. Finance Committee</li> <li>4. Remuneration Committee</li> <li>5. Specialised Commissioning Board.</li> </ol> <p>A complete record of the reports and minutes can be viewed at <a href="http://www.easternandcoastalkent.nhs.uk/about-us/the-board/board-meetings-and-papers/">www.easternandcoastalkent.nhs.uk/about-us/the-board/board-meetings-and-papers/</a></p> <p>The LINK needs to keep a watching brief on the developments with regard to the Ofsted / CQC report.</p> <p>The LINK should investigate the possibility of having an external representative on each of the emerging GP consortia and on the PCT consortia group during the transition.</p>
<p><b>Recommendations / Actions</b> eg</p> <ul style="list-style-type: none"> <li>• <b>Items for LINK bulletin</b></li> <li>• <b>Items for individual interest group</b></li> <li>• <b>Issue to Priorities Panel / Governors' Group</b></li> </ul>	
<p><b>Date of Next Meeting</b></p>	<p>18 May 2011, New village Hall, St Mary's Bay</p>