# Newham and Waltham Forest new specifications webinar, 18 April 2024

# **Questions & Answers**

# **Childhood Immunisations**

Q: Can we have the immunisation coordinators' details?

A: Newham: Fatima Begum - Fatima.begum7@nhs.net

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(WF GP Fed)

## Q: Are the new Childhood Immunisations searches published yet?

**A:** These will be available in your clinical system QOF searches. However, to identify the decliners you can use the CEG APL-Imms tool.

# Q: Do we know how long the Federation will take to confirm exceptions, as there are deadlines for achievement?

**A:** Dr Ashraf (WF GP) will try to get clarification from the transformation meetings to understand how this is organised, but please do not wait until the end of the year to send lists to the coordinators. Send them once you have received a decline from the parent/carer or following the 3 DNAs.

### Q: Will CEG provide searches?

**A:** The QOF searches are the baseline and, once updated for 2024/25, practices must use these searches to check for eligibility etc. Practices should also use the CEG <u>APL-Imms</u> tool as this will enable practices to check the status of their cohorts and also those that have declined/DNA.

## **End of Life**

### Q: We use Valida in Waltham Forest, is this ok?

A: It's fine to use whichever platform has been agreed to develop the urgent care plans.

#### Q: Will the template and searches be available in the PCN e-hubs?

**A:** Yes, the template will be available but you need to have Enterprise search and reporting to access the searches.

### Q: Will practices get the 2024/25 searches?

A: They are already live in Newham and Waltham Forest – both SystmOne and EMIS.

#### Q: Will payment be based on Valida?

A: Yes, that is correct. Valida or BETTER, whichever platform is supported by your borough.

# Q: How will we know payment is accurate? And will we receive timely notification of achievement so we don't find out at the end of the year that reporting has been missed/inaccurate?

**A:** Ensure you also code the care plans on the LTC template 'End of Life' page, which CEG will be reporting from. Pat (NEL ICB) has access to the universal care plan system so can confirm achievement.







# Q: It would be useful to see data from last year, as practices have done lots of care plans but we don't know if they are being picked up?

**A:** Pat (NEL ICB) has been on the system looking at the figures, and there is lots of activity. They will be putting this together and communicating out to practices.

# **Simple Wound Care and Suture removal**

## Q: What is the pathway for patients to access this service?

A: This is an SNS and as long as there is a five-day service, practices/PCN can decide the pathway.

### Q: Why is there a difference in service provision and payment between Newham and WF?

**A:** This is related to the requirement of getting simple wound care out of urgent treatment care. Payment per procedure is the same in both places.

# Q: If there are multiple procedures for a patient, do we need to access different templates to record this every time?

**A:** No – the template has three different dropdowns for 'open wound', 'wound intervention' and 'closed wound'.

### Q: There are a lot of push backs from NELFT re complex wounds.

A: The ICB needs to be informed of this so it can be monitored appropriately.

# Q: Repeated returns for patients are not reflected in the searches.

**A:** Please make sure that you have copied across the latest searches, as CEG are reporting on the counts of procedures not the number of patients – look at the [PAYMENT] searches.

# Q: Do we need to use specific slot types for these held appointments (Newham only) – is the data extracted?

A: No, slot types will not be searched as the data will be extracted via the template for all boroughs.

# Q: Do the patients have to be referred via the Single Point of Access (SPA) – what if they come directly to the practice?

**A:** Practices will be paid for the procedures they perform – in Newham the requirement is to hold two appointments daily for the SPA to book into, but more patients can be booked depending on the service capacity.

# T2DAY

### Q: The search shows around 11 care processes, not nine?

**A:** This is a quality report, not for payment.

# Q: Can CEG add a search/report for the eight care processes?

A: Yes, we can do that.

# Q: Will the patients eligible for this programme also be in the locality searches for T2DM patients?

**A:** Yes, that's correct. But remember the age cohorts for T2DAY (18 - 39), so it will not be all the T2DM patients.







Q: Urine ACR has been an issue, which means practices lose payment for all the work they have done. Will there be an exception for this?

A: Unfortunately not, as the indicators have been rolled over.

Q: Could we invite CEG to PCN meetings?

A: Yes, we would be more than happy to attend any meetings where you need us.







