



Thanet Clinical Commissioning Group

NHS Thanet CCG
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20 May 2015

An open letter to the people of east Kent

Over the last couple of weeks, our local papers have carried worrying headlines about the possibility of the east Kent hospitals trust changing emergency care and, perhaps, centralising the most high-risk procedures in one centre.

We chair the clinical commissioning groups (CCGs) for east Kent which have the job of planning and paying for most local health services. Our aim is to make sure that everyone in our areas who needs healthcare receives safe, high-quality care.

This is in a context where GPs, nurses and consultants are a limited resource; the NHS in east Kent does not always find it easy to recruit despite the advantages of our part of the world; demand for healthcare, especially for frail elderly people, continues to grow; and money is tight.

Nonetheless, in the past two years, since the CCGs came into being, we have made real strides.

We have worked with NHS and social care colleagues to:

- Begin introducing a much more joined-up approach to community care for people across east Kent, so that district nurses, social care and mental health staff work in single teams. This means patients only having to tell their story once, and staff working together behind the scenes to improve their care.
- Improve help for people dialling 999 or attending A&E so they are supported at home by community teams whenever possible and admitted to hospital only if there is no alternative. We plan to have a local team handling NHS111 calls from next spring which will

be integrated with the GP out of hour's service, so all calls for help will be dealt with by the same team of people.

- Set up a multi-disciplinary team working with frail elderly people in our hospitals to ensure they can leave for home as soon as they are medically stable – increasing their chances of being able to carry on living independently, rather than going into care.

GP practices across our areas are looking at how they can work together to offer more services to local people, such as diabetes care for many patients who currently have to travel to hospital.

We appreciate the constraints on East Kent Hospitals University NHS Foundation Trust (EKHUFT): care is increasingly specialised, requiring dedicated teams of doctors and nurses who must treat enough cases to maintain their skills; the move to seven day working by the NHS means more clinicians are needed to cover weekends; all NHS organisations must spend taxpayers' money in the most efficient way; and, of course, the over-riding principle is that services they provide must be safe.

EKHUFT is very clear that no change is not an option that is clinically or financially sustainable in the long term. So, over the next few months, we will be working with the Trust and with you to explore how services can best be delivered for the future and what the options are. We can assure you that no decision has been taken behind the scenes. What lies ahead is a genuine process of working together to come up with the best solution for the people of east Kent, so you know you will get safe, high-quality care.

It may not be fully understood that EKHUFT can only go out to consultation if we give it the green light. As the commissioners, we hold the purse strings for east Kent and we will give the go-ahead to consultation only if we are convinced its proposals are clinically sound, safe and will achieve an improvement in care.

As GPs, we are all absolutely committed to the welfare of local people. We, like you, want to see the very best care for our population and a health system for east Kent that works now and for the future.

Yours sincerely



Dr Tony Martin
Clinical Chair
NHS Thanet Clinical Commissioning Group

Dr Navin Kumta, clinical chair, NHS Ashford Clinical Commissioning Group

Dr Mark Jones, clinical chair, NHS Canterbury and Coastal Clinical Commissioning Group

Dr Darren Cocker, clinical chair, NHS South Kent Coast Clinical Commissioning Group