



WEBINAR: NHS Advice & Guidance for the “new normal” – Q&A

24th June 2020

Speaker panel:

- Stephen Wells, Senior Programme Manager, North Central London CCG
- Keith Spratt, Head of Contracts, North Central London CCG
- Dr Mohammad Choudhry, GP, North Central London CCG
- Jonathan Patrick, CEO, Consultant Connect

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Question 1: Where can we find the evidence behind the proportion of avoided referrals from using Consultant Connect?

Answer:

(Jonathan Patrick):

You can find out more by reading [our Enhanced Advice & Guidance Performance Benchmarks for Telephone and photo advice](#) (elective, urgent care and mental health specialties).

Question 2: For patients with a complex history - how have clinicians overcome giving A&G where having a full patient’s history is not present? Is there duplication of tests, i.e. test conducted before the Consultant Connect consultation, and then during the Consultant Connect call the specialist recommends other tests?

Answer:

(Dr Choudhry):

In answer to both of these, because we (GPs) share the patient’s NHS number on the app, the consultant we are speaking to is able to log onto hospital terminal to see if there are any additional information/scans/results there to help piece the picture together. This also prevents duplication of any tests (unless the results are now outdated). This does however, only work well (at present) if the consultant is local.

Question 3: What learning can you share in terms of safeguarding photos e.g. with Dermatology?

Answer:

(Stephen Wells):

We worked with local Consultant Dermatologists to agree protocol for both patients and GPs taking photographs. The protocol and service specification for tele-dermatology was agreed by the North Central London Clinical Advisory Group, a joint group between all NCL providers and NCL CCG. If GPs use the Consultant



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Connect App to take photos on their mobile phone the images are NOT saved on the phone but are uploaded via the secure iCloud as part of the patient's record. This is fully compliant with NHS England IG requirements. We also reviewed the photo-messaging solution independently through the North Central London CCG IG team to ensure Consultant Connect photo messaging is fully compliant, with the NHS England IG regulations, which it is.

Question 4: Have you used video e.g. for tremor advice and guidance referrals?

Answer:

(Stephen Wells):

No, but the use of video messaging may be looked at going forward.

Question 5: Did the consultants job plans have to be altered to enable them to respond to these calls?

Answer:

(Stephen Wells):

No, each Trust agrees their consultant rota with Consultant Connect for those participating on the Consultant Connect service. The overall approach fits easily into how consultants work in their day to day activities i.e. duty consultant and existing approach to advice and guidance in North Central London.

Question 6: Do North Central London CCG pay for this service?

Answer:

(Keith Spratt):

Yes, there is a contract in place signed previously by NHS Enfield CCG that covers the service in Enfield Borough. We recently extended this to cover the borough of Barnet. There is a fixed annual fee which also covers the mobilisation cost. In addition, there is also a call charge if we use the National Consultant Network support with call answering.

Question 7: How do you propose to fund something like this within the new block contract environment?

Answer:

(Keith Spratt):

Enfield commissioned this service before the block arrangements came into place because of COVID. This was accounted for as part of our local QIPP investment. Going forward it needs to be viewed as a system-wide cost/benefit.





Question 8: Do GPs speak to a mix of local NHS consultants and non-local NHS consultants on this service? Which specialties are local now?

Answer:

(Keith Spratt):

Enfield initially wanted to use local consultants as part of a Cardiology pathway. COVID put an end to this and we went exclusively with a launch using Consultant Connect's National Network for all specialties. Now the peak of COVID has passed we have brought back on board the local consultants for Cardiology. Work is going on with local providers and consultants from a range of specialties to bring them on board as well. Positive conversations are happening, and we believe we will have local networks for most specialties.

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