

CCG Briefing: Wellbeing Policy Development & Scrutiny Panel Meeting

Friday 16th January 2015

Winter pressures update

The past few weeks have seen A&E departments across the UK under severe pressure with a number of hospitals deciding to declare an internal major incident. Here in BaNES, last week saw the highest number of ambulance drop-offs at the RUH since records began five years ago. There were 628 drop-offs compared with the usual 500 to 550 – an increase of about 17%. As a result, the RUH has not been able to meet its target of seeing 95% of patients within 4 hours although staff have worked incredibly hard to ensure that every patient still receives the best quality care possible in the circumstances.

There are a number of reasons that have contributed to the pressure on the A&E system. These include a higher than expected number of people turning up at A&E, cold weather leading to higher levels of illness in the elderly population which can often require admissions. There have also been delays in discharging people from hospital when the necessary health or care facilities are not in place. This then results in blockages across the entire health and care system and impacts on the flow of patients through our system.

Dr Ian Orpen is the Chair of the B&NES System Resilience Group which includes representation from all the NHS providers involved in the urgent care system including the RUH, 111, the ambulance service, Sirona and the GP out-of-hours service. This group is carrying out a review of activity levels and plans for the period from 15th December to 12th January to help us understand the reasons behind our system's poor performance and to identify what further actions we can take to improve things and ensure that we are meeting the 95% target again as soon as possible.

Your Care, Your Way launch

The CCG and the Council will be launching their joint review of community health and care services on Thursday 29th January at the Bath Assembly Rooms.

Over 100 people have already signed up to attend the afternoon event to learn more about Your Care, Your Way and to contribute their own early ideas about how community services in B&NES could look like in the future. The event will include representatives from the CCG, the Council, health and care providers, voluntary and community sector organisations and members of the general public.

Following the launch event, we will be spending the months of February and March outreaching to a wide range of groups to talk to them about community services and their vision for the future. This includes events organised in conjunction with the Area Forums in Somer Valley, Chew Valley and Keynsham as well as attendance at the Young People's Equalities Summit in April.

Primary Care: Preparing for the Future

The CCG and the NHS England Area Team are jointly funding a two year project to drive improvements in primary care. B&NES is already one of the best places in the country for getting an appointment with a GP but there is more that can be done.

The Primary Care: Preparing for the Future fund has been provided to our local GP provider organisation, Banes Enhanced Medical Services (BEMS+). Working jointly with the 27 GP practices in B&NES they will be focussing on four key projects:

1. **Focussed Weekend Working** – a targeted service for at risk and vulnerable patients who would benefit from a GP visit on a weekend to prevent avoidable hospital admissions and support earlier discharge.
2. **Information Management and Technology** - interoperability across GP practices using networked telephony software and improved working and flexibility through the use of mobile tablets
3. **Workforce Analysis** - Working with Skills for Health to prepare an analysis of current primary care workforce, identify future challenges and prepare a workforce development and skills mix strategy.
4. **Collaborative working** - Working with Skills for Health to scope opportunities for collaborative working between GP practices enabling them to work in partnership to offer a wider range of services to local communities.

Proposed Endoscopy Changes

A detailed paper has been provided to Wellbeing Policy Development and Scrutiny panel members on the proposed transfer of endoscopy services from the Royal National Hospital for Rheumatic Diseases (RNHRD) when the acquisition of the RNHRD by the RUH is expected to be completed.

Equality, quality and privacy impact assessments have all been completed and confirm that the effects of this change are considered to be minimal and that there are a number of positive aspects to the service change. It is therefore recommended that the transfer of the endoscopy services should now proceed.

Specialist Mental Health Services

A substantial engagement exercise with stakeholders and staff has taken place in relation to the transferring of Ward 4 dementia inpatient services from St Martin's Hospital to the Royal United Hospital into a new build specialist mental health unit.

There has been overwhelmingly positive support for the move of Ward 4 by stakeholders, staff and Healthwatch and it is recommended to Wellbeing Policy Development and Scrutiny panel members that the local engagement, assessment of impact and support is adequate to enable continued proposal development for a new build mental health and dementia unit on the RUH site.

Dermatology

In line with a national trend, the Royal United Hospital has experienced a significant increase in referrals for dermatology services. This sharp increase in demand has resulted in a number of patients waiting to see a specialist. The increase in referrals is largely attributed to the increased incidence of skin cancers nationally and the success of public health campaigns, meaning people are more vigilant about changes to their skin.

In view of the situation, it has been agreed between the RUH and local CCGs to temporarily suspend consultations for patients with non-urgent skin conditions in order to prioritise the most urgent and life-threatening cases.

Ensuring the rapid diagnosis and treatment of serious conditions such as skin cancers is of the utmost importance and we are committed to providing the continued high quality delivery of these important services. We do appreciate that non-urgent skin conditions, whilst not life-threatening, can cause considerable anxiety, discomfort and inconvenience. As such, provision of dermatology services is currently under review, and commissioners are liaising closely with other providers to offer alternative services to patients with non-urgent conditions. In the meantime, the RUH has written to affected patients to ask them to discuss their condition with their GP and agree next steps.

This suspension of service affects patients across Bath and North East Somerset, as well as some patients in Wiltshire, Somerset and South Gloucestershire who have been referred to the RUH.

Diabetes Survey

The CCG's survey of everyone living with Type 2 Diabetes in Bath and North East Somerset will begin in February.

Over 6,000 people with Type 2 diabetes will receive a letter from their GP practice asking them to participate in the survey and they will have the option to complete the survey online or through the post. The results of the survey will be used to improve the different forms of support available to people who have been diagnosed with

diabetes so that they can manage their condition better and avoid complications in the future.

The survey is being delivered in partnership with Bath-based “my Community” who are offering rewards to those who complete the survey. These include free exercise classes, wellbeing evaluations and workshops with nutritional therapists.

Establishment of a Transformation Group in B&NES

Earlier this year the CCG engaged on the development of its Five Year Strategic Plan and it was proposed that a Transformation Leadership Board (TLB) would oversee the development of the six transformational priority work streams that the CCG identified: -

1. Prevention, including self care
2. Improving Diabetes Care
3. Musculoskeletal service review and redesign
4. Improving the interoperability of patient records systems
5. Improving Urgent Care
6. Safe Compassionate Care for Frail Older People

It was also proposed that the TLB would oversee progress on the Better Care Fund.

This approach is still envisaged but the TLB will now be called the Transformation Group. It is proposed that the Transformation Group will replace the current sub-committee of the Health and Wellbeing Board (HWB) - the Strategic Advisory Group.

The newly formed Transformation Group will consist of senior commissioning representatives from the CCG and Council, provider representatives from all key provider organisations in B&NES, HWB representatives, a member of Healthwatch, 3rd sector representation and representation from the Local Education Training Board.

The Transformation Group will report directly into the Health and Wellbeing Board and in addition to acting as vehicle for supporting the delivery of the CCG's 5 Year Strategy and Better Care Fund, will provide a shared space for oversight of our local services and enable active input into the Health and Wellbeing Board's strategic planning. This is a critical enabler in the successful transformation of services in the local system.

The first meeting will take place on 4th February.

Update on RNHRD acquisition

The Royal National Hospital for Rheumatic Diseases NHS Foundation Trust (RNHRD) and the Royal United Hospitals Bath NHS Foundation Trust (RUH) continue to make significant progress towards joining together and have secured the necessary approvals from the Board and Council of Governors of each organisation.

On 27th November 2014 at an extraordinary RNHRD Trust Board held in public the Board formally approved the proposed acquisition of the RNHRD by the RUH.

On 2nd December 2014, at an extraordinary meeting of the Council of Governors, held in public, the RNHRD Governors formally approved the RNHRD's application to Monitor for the RNHRD to be acquired by the RUH.

In December 2014, the RUH Board of Directors and Council of Governors approved proposals for the acquisition of the RNHRD.

In January 2015, the RUH and RNHRD will make a joint application to the independent healthcare regulator Monitor to approve the proposed acquisition. Pending their agreement, it is anticipated that the earliest the transaction will take place is the beginning of February 2015.

Patients will continue to be seen and treated at the RNHRD as usual whilst our hospitals work together to deliver the proposed acquisition.

Dry January

The CCG is supporting this year's Dry January campaign with over 24 members signing their name up on the wall in the CCG's offices.