

CCG Headquarters St James' Hospital Locksway Road Portsmouth Hampshire PO4 8LD

29 September 2014

Cllr. David Horne Chair of HOSP Member Services The Civic Offices, Guildhall Square Portsmouth PO1 2AL

Dear Cllr Horne,

## **CCG update for Portsmouth Health Overview and Scrutiny Panel**

This letter is intended to update you and the members of the Portsmouth Health Overview and Scrutiny Panel on some of work the Clinical Commissioning Group has been involved with over the past few months.

I have set out a brief summary of a few key issues within this letter but please do contact me if you need more information about any of these.

### 1 CCG Annual General Meeting

We held our AGM on Wednesday 17<sup>th</sup> September at which we were able to give people an overview of our progress in our first full year as a clinical commissioning group. The presentation and papers from the AGM are available on our website, together with our annual report and a summary version that Panel members may be interested in:

#### http://www.portsmouthccg.nhs.uk/About-Us/agm-2014.htm

We used part of the meeting to engage people in discussions about Better Care in Portsmouth (often referred to as the *Better Care Fund – see item 2 below.*) We were able, again, to share some of the progress that the local NHS and Portsmouth City Council have made so far in terms of the service integration agenda, and, by means of an interactive table top exercise, give people the opportunity to discuss how they would prioritise some of the key elements of the Better Care Fund.

#### 2 Better Care - Portsmouth

We are working with our NHS providers locally and with Portsmouth City Council to raise awareness about the Better Care initiative across the city.

The Better Care partnership approach, which includes social care, the NHS and voluntary sector, builds on current successes in Portsmouth and will look to further integrate health

and social care teams; bring about flexible services tailored to individual needs, as well as health and social care that is closer to people's homes.

In particular, the CCG and City Council will be pooling around £16 million of existing funds in 2015/16 to look after older people's health and supporting them to remain active within their communities and maintain their independence.

Patients, service users and carers are to be encouraged to share their experiences of services, through a variety of consultation methods, to ensure local views are central to any developments.

The government's Better Care Fund initiative requires existing local budgets to be shared so that there is a more effective use of resources with simpler and easier processes for staff and service users and less duplication.

The Better Care plan sets out targets to reduce emergency admissions to hospital, provide health and social care in the community, and reduce the extent of social isolation amongst older people.

Projects include: trying ways to join up GP, community nursing, social care and voluntary sector services in single teams to provide care for older people and people with long term conditions, a review of reablement provision, often needed by those leaving hospital to support them in re-learning daily skills and gaining confidence; a review of beds in community settings (based outside of the main Queen Alexandra Hospital) for assessment, rehabilitation and respite, and the facilities for nursing homes supporting residents needing more complex care.

The Portsmouth BCF supports the Health and Well-Being Board's vision and strategic objectives through putting individuals at the centre of a single commissioning vehicle and integrated service delivery. This will create a sustainable health and care system and achieve the long term savings and system changes required to bridge demand and funding gaps and manage the increasing demands of an ageing population.

### 3 Urgent care

In our last update we wrote that members would be aware that urgent care services (how and where people access health services when they need help urgently or in an emergency) continue to experience heavy demand and the issue remains a key point of focus for the local health system.

This continues to be the case as you will no doubt have seen through local media coverage and work continues across the whole health system to try and address the demand issues that we are facing, and the effect these have on the ability of our local Emergency Department to meet the four hour wait target on a regular basis.

A system-wide urgent care working group is now in place and a local diagnostic review of the issues around urgent care performance has been undertaken to identify why planned improvements are not yet working. A recovery plan to deliver rapid but sustainable improvements across the system for urgent care has been developed as a result of this. This looks at a number of areas that will help alleviate the current situation including capacity planning (within QA Hospital and in primary care), discharge arrangements, and access criteria for community beds.

Accountable officers across the system have given full organisational commitment to delivering these plans. While our immediate focus is on addressing the short term and immediate issues to improve ED waiting we plan to also:

- develop a clear vision and approach that simplifies the urgent care pathway and addresses the strategic objective arising from the urgent care review;
- continue to educate patients, carers and the public around appropriate use of services;
- Implement a proposal to invest a further £4m in further improving and redesigning the system.

# 4 Other current engagement activity

There are three other areas of engagement activity that it would be useful to draw your attention to this quarter. These are:

### 4.1 In-Vitro Fertilisation (IVF)

The Clinical Commissioning Groups from across Southampton, Hampshire, the Isle of Wight and Portsmouth are currently asking their local residents for views about providing In-Vitro Fertilisation (IVF) in the future.

In February 2013 the National Institute for Health and Care Excellence (NICE) published updated clinical guidelines in relation to fertility services. As a result the NHS in the area has asked public health specialists to review the most recent evidence of clinical and cost effectiveness for IVF, and Intra-Cytoplasmic Sperm Injection (ICSI).

As part of that review process the CCGs are also seeking views from local people, their representatives, GPs and interest groups. That feedback will then be considered alongside the recommendations of clinicians, before each CCG makes a decision about funding of, and eligibility for, NHS assisted conception services. An engagement document has been widely circulated and this explains how people can make their views known. Details are on the CCG website and responses can be made until October 19, 2014.

# 4.2 Falls services

Working with our neighbouring CCGs (South Eastern Hampshire/Fareham and Gosport CCGs) we are currently looking for feedback on the current falls service in the area, from those who have actually used it themselves, or the people who care for them. We have been speaking to people in small groups to discuss what works and well and what could be better, as well as running a short survey which we have used with some residential homes and has also been available online.

Falls remain a huge issue for the health service and those affected – usually older people. In Portsmouth and south east Hampshire there are around 117,000 people aged 65 or over, and approximately 30% of them will fall at least once a year. For this group the stakes are very high, with injuries such as a broken hip having drastic consequences. While we understand that many of the current services are already very good, we want them to be even better for our patients that are using them every day.

So, we are looking again at the entire range of services which may be required after a fall to see what can be done better. That includes both short-term and long-term treatment, such

as the immediate hospital stay, bone-strengthening medication and rehabilitation classes to improve balance.

#### 4.3 Rationalisation of St James' Hospital/St Mary's Health Campus sites

As members will recall there have been regular updates provided over the progress of these plans to make better use of the St Mary's Healthcare Campus and rationalise the NHS' use of the St James' Hospital site.

We continue to work closely with Solent NHS Trust (the land owner for the campus and provider of most of the services at both St Mary's and St James') and NHS Property Services, the national body that owns the St James' site, as they prepare for the forthcoming service moves.

While it is fair to say that much of the interest from local residents focuses on the future plans for the St James' Hospital site it is important to ensure that service moves are undertaken smoothly and are well communicated. To that end, the three organisations held another drop-in event at St James' Hospital on 24<sup>th</sup> September so that local patients and residents could view, and discuss the latest plans.

### 5 Inviting investment in health proposals from the not for profit sector

Last year we ran an investment programme that invited not for profit organisations to bid for allocations from a non-recurring pot of £250,000 we set aside to support innovative projects that helped address local health priorities. We were delighted with the response and allocated funds to 17 different projects in all, including: a club in a pub scheme to combat social exclusion in older men; a memory collection of reminiscence boxes and other items available in local libraries to help people with dementia; a world in a story initiative that supported a black and minority ethnic women to open a weekly support forum, welcome newcomers, maintain good mental health and provide health information; and a support group for women suffering depression before or after the birth of their child.

Following the success of last year's initiative, we are now inviting not for profit groups to bid for a share of £200,000 we have made available this year (maximum bid is £30,000) as we are keen to support some more 'grass roots' proposals that can make a real difference to the health and wellbeing of many local people and contribute towards our CCG priorities.

Representatives from the city's Patient Participation Groups, GP Executives and CCG senior officers will be involved in evaluating applications and awarding funding later this year.

Alongside this initiative we have also launched two other bidding schemes for NHS organisations.

- **Sign up to Safety**: as part of our commitment to the national Sign up to Safety campaign we are asking organisations commissioned to provide NHS care to submit proposals to develop and implement patient safety initiatives; and
- Primary care development and quality: individual practices and emerging Federations and Alliances are being invited to submit proposals to support development within primary care.

I hope you find the contents of this update helpful. I will, of course, be happy to answer any questions that members have at the meeting in October.

# Yours sincerely

Dr Jim Hogan Chief Clinical Officer and Clinical Leader, NHS Portsmouth CCG