

5<sup>th</sup> June 2018

Cllr L. Madden  
Chair  
Portsmouth Health Overview & Scrutiny Panel  
Member Services  
Civic Offices  
Portsmouth PO1 2AL

Dear Cllr Madden,

### **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 the work the Clinical Commissioning Group has been involved with over the past few months.

This formal update is in addition to the regular informal meetings with your panel colleagues which CCG colleagues and I attend, and which I hope continue to be useful for all concerned. Our website – [www.portsmouthccg.nhs.uk](http://www.portsmouthccg.nhs.uk) – may provide some further details about what we do if members are interested, but of course we are always happy to facilitate direct discussions if there are particular issues which are of interest to the panel.

### **NHS 70<sup>th</sup> anniversary**

The NHS is turning 70 on 5 July 2018, offering a perfect opportunity to celebrate the achievements of one of the nation's most loved institutions, to talk about the wide array of opportunities being created by advances in science, technology and information, and to thank NHS staff in all our organisations who are always there to greet, advise and care for us.

Local NHS organisations will be marking this anniversary over the coming month or so, helping us to reflect our pride in the NHS throughout the city.

As we all know, the NHS has delivered huge medical advances and improvements to public health, meaning we can all expect to live longer lives. It is thanks to the NHS that we have all but eradicated diseases such as polio and diphtheria, and pioneered new treatments like the world's first liver, heart and lung transplant.

None of this would be possible without the skill, dedication and compassion of NHS staff, as well as the many volunteers, charities and communities that support the service.

The history of the NHS is one of evolution, of responding to the changing needs of the nation. Today's NHS is rising to the challenge of a growing and ageing population, which means pressures on the service are greater than they have ever been. As the NHS turns 70, we are developing plans to address these pressures and make sure the NHS is fit for the future, such as our Health and Care Portsmouth blueprint.

Our key priorities locally reflect those nationally – the need to make it easier to see a GP, to improve cancer diagnosis and provide swift treatment, and making sure that mental health services and urgent and emergency care are available, and effective, whenever they're needed.

We can all play a role in supporting the NHS in this special birthday year. This could be by volunteering, raising money for local NHS charities, or even just taking steps to look after our own health and use services wisely.

## **2 Annual report**

The CCG's annual report will be published in June. The report will provide a commentary on some of our main achievements over the past year, will consider our performance against important national and constitutional targets and reflect on our financial position for the year 2017/18. There are some positive stories to tell within a year of change and challenge and we will ensure that the report is made available to Panel members once it is published.

## **3 Health and Care Portsmouth**

Panel members will be familiar, from previous discussions, that there are some big challenges facing NHS and care providers that can only be tackled by everybody working together.

We know that demand is increasing, but resources are limited. GPs, community, hospital and social care services are all under increasing pressure, whilst all are having difficulty with recruitment and retention of sufficient GP, nursing and therapy staff. This means that we need to meet these challenges by changing the way we work to ensure that clinical staff time is deployed as effectively as possible.

The Health and Care Portsmouth blueprint document set out the context for this and a plan for more effective joint working in future when it was published in 2015. Out of this came seven commitments to support the implementation of this ambitious programme.

Building on the effective working relationships that have been established over recent years, the Portsmouth Primary Care Alliance (PPCA – an alliance of all the GP practices in the city), Solent NHS Trust, NHS Portsmouth CCG and Portsmouth City Council (PCC) committed to work together to meet the challenges facing health and care services in the city.

Organisations were given encouragement, through the NHS Five Year Forward View, to develop an approach by which we can deliver stronger, more robust services through an ambitious integration of primary, community and social care and even some hospital services across the city.

This is, in essence, what sits behind the development of a multi-specialty community provider. Under this new care model outlined in the NHS five year forward view, GPs practices come together in networks or federations and collaborate with other health and social care professionals to provide more integrated services outside of hospitals. This might include GPs working with some specialists currently working in acute hospitals, as well as nurses, community health services and social workers.

These new models of care begin to dissolve the traditional boundaries between the delivery of these services as part of an agreed process of change. For us locally it is also something that can be developed in tandem with, and to meet the aims set out in, the Health and Care Portsmouth blueprint.

Developing a new type of integrated provider, combining primary, community and social care, also enables us to use resources more effectively and harness new ways of working, including making best use of digital technology, with the aim, as described above, of delivering stronger, more robust services that enable us to deliver the vision of the Health and Care Portsmouth blueprint.

It is vital that we address issues around increasing workload and reducing workforce and we can only really do that by doing things differently: proactive management of demand, especially from our older population and people with long term conditions such as diabetes and COPD. By changing the way we work, we will be able to reduce the reliance on secondary care. This may mean that we also have to rethink how some of the resources available to us (such as money, staff and buildings) are used, but in a way that makes sense.

Patients will benefit too, becoming more engaged, willing and able to manage aspects of their conditions themselves, with the support of an extended primary care team, personalising their care to meet their needs.

The four partners in the programme, the CCG, the Council, Solent NHS Trust and the PPCA have been working as a partnership to begin to deliver change through the MCP approach, acknowledging that other partners, including Portsmouth Hospitals NHS Trust amongst others, will have a role to play as the process unfolds.

The CCG's Governing Board recently received an update on progress over the past year against the seven Health and Care Portsmouth commitments – available here:

[http://www.portsmouthccg.nhs.uk/Downloads/Board/Gov%20Board%20Papers/2018/March%202018/AI09%20HCP%20Update%20\\_%20CCG%20Presentation.pdf](http://www.portsmouthccg.nhs.uk/Downloads/Board/Gov%20Board%20Papers/2018/March%202018/AI09%20HCP%20Update%20_%20CCG%20Presentation.pdf).

#### **4 Integrated Primary Care Service**

One part of the move towards a more integrated system of primary care will come into effect in July.

From the beginning of that month, a new Integrated Primary Care Service (IPCS) will be introduced, meaning that a single provider (the Portsmouth Primary Care Alliance, the local federation of city GPs), will deliver three primary care components to supplement the 'core' in-hours primary care provision: out of hours; Extended Access, and the Acute Visiting Service.

This new approach takes advantage of the fact that the contracts for the home visiting, and the out of hours services, both expire in the coming months. Therefore, there is an opportunity to test out and develop new ways of delivering integrated primary care before the potential award of a longer term contracts such as the Multi-speciality Community Provider (MCP), in line with the NHS Five Year Forward View.

The new, integrated service will use a single IT system across all three elements, bringing benefits both to patients – who will be seen by clinicians who are able to see their records – and also to clinical staff – who will be able to make better-informed decisions about their patients. The change means that the out of hours GP service (providing booked appointments) will move from Queen Alexandra Hospital to the Lake Road Surgery. The ‘walk in’ Urgent Care Centre will continue to provide GP-led care at QA. More details about the change are provided in a briefing paper, which accompanies this letter.

## **5 Your Big Health Conversation**

The second phase of the CCG’s *Your Big Health Conversation* engagement programme is underway – building on the initial work last year which gathered feedback about a range of ‘big picture’ potential issues such as seven-day services, centralisation of specialist services, and concentrating more resources in community-based settings.

The latest phase is largely concerned with gathering feedback from face-to-face engagement sessions with patient groups, to inform the development of new models of care, especially outside major hospitals.

The work is going on throughout Portsmouth as part of the Health and Care Portsmouth programme, but will also be undertaken in surrounding CCG areas.

The CCG’s Communications and Engagement team is organising a series of meetings to explore people’s views on care in four specific areas – mental health, same-day access, frailty, and supporting those with multiple long-term conditions.

These areas were chosen because they affect a large number of people, and because changes to way these services are delivered in future are highly likely. In essence, the task is to set out the general direction of travel towards community-based, integrated care, and to seek in-depth feedback relating to what people is most important in terms of ensuring a good patient experience, what people’s concerns are, and whether the local NHS needs to consider anything else as it develops its plans.

The meetings will continue taking place into the summer, and feedback from these discussions will be published and will be of significant help to us in planning the way care is delivered in future.

## **6 Gosport War Memorial Hospital/Gosport Independent Panel**

The Gosport Independent Panel will publish its report about the historic concerns at Gosport War Memorial Hospital on 20 June. This will include a meeting with families of some of those patients whose deaths gave cause for concern at Portsmouth Cathedral on the morning of the 20th.

The national Panel was set up in 2014 and is chaired by Bishop James Jones, who also chaired the Hillsborough Independent Panel.

It was established to review documentary evidence across a range of organisations concerning initial care and subsequent deaths of older people at Gosport War Memorial Hospital from the 1980s through to the early 2000s.

Its terms of reference are here: <https://gosportpanel.independent.gov.uk/terms-of-reference/> but, in essence, these were to: obtain, analyse, examine and oversee the maximum possible disclosure of all public documentation.

The report will provide an overview of information received and illustrate how the information disclosed adds to the public understanding of these events and their aftermath.

We are not expecting to see the report ahead of its publication but we do anticipate significant interest in this nationally and locally. We will provide further updates to the Panel once we know the findings of the report and the impact the report's publication has on the NHS locally, and nationally.

Yours sincerely

A handwritten signature in black ink, appearing to read 'L. Collie', with a long, sweeping flourish extending upwards and to the right.

Dr Linda Collie  
**Clinical Leader and Chief Clinical Officer**  
**NHS Portsmouth Clinical Commissioning Group**