

Northern Locality Board Meeting

September 2013

Locality Managing Director's Report

1.0 Introduction

This report provides an overview of work streams progressed by the Locality Managing Director in August 2013.

Topics covered in this paper include:

- Torrington Community Cares
- Winter monies
- Pathology

2.0 Torrington Community Cares

As noted within the last board meeting the locality, in partnership with Northern Devon Healthcare Trust, acknowledged the public concerns including those from the District Council. For this reason we have reviewed the process and paused. We will restart the consultation once the beds are fully staffed and it will run for eight weeks. It is hoped that the public will work with us in assessing the services provided as well as the evidence gathered before any permanent decision can be made. No decision will be made until the start of the New Year and any decision to be taken will need to be made at a locality board meeting, assurance sought from the Clinical Commissioning Groups Governing Body as well as the Trust's Board.

Actions to date include a review of the process, the production of a new consultation document, the continuation of the drop in events as well as the planning of two public meetings in September.

Meetings in the past month have been held with the District Council overview and scrutiny committee as well as STITCH. At both meetings we have listened to the feedback provided and have explained the process which we will now follow. STITCH has kindly offered to support the process and we are keen to work with them.

3.0 Winter Monies

The locality has been tasked with coordinating a list of schemes across the urgent care network if new winter monies were to be released. In all 25 schemes were submitted from six areas involved in managing the provision of urgent care pathways. It is not yet known if the locality would be successful in receiving any monies but full submission of the schemes from all organisations comprising the network was submitted to the area team in August. All schemes need to be non-recurrent in their nature and range from the reconfiguration of beds and reducing the impact of safe patient transfer out of ED, to providing further staff supporting 7 day a week working and enabling greater input from Primary Care and SWASFT at times of increased pressure on community service provision.

The schemes which are successful in attracting funds will be overseen by the joint Urgent Care Forum.

The northern locality is leading on the whole-Devon winter escalation plan. This sets out the response triggers and actions that will sit above very localized triggers linking the whole together. It is also being supported by a whole-Devon dashboard that allows activity and status metrics for all of the acute hospitals in Devon to be viewed in one place; updated automatically

4.0 Pathology

The CCG has become aware of two acute trusts within the NEW Devon CCG foot print who have declared their intention to tender pathology services through an open dialogue with potential providers. As primary care pathology currently represents over 50% of all pathology carried out across the CCG it feels an appropriate point for commissioners to consider the future arrangements for these services that will best service the NEW Devon CCG population. The CCG is undertaking an options appraisal to inform how we should look to commission and procure direct access pathology services in the future. Within the options appraisal a clinical led service specification will be developed using the collaborative links already established between clinicians from primary and secondary care. The Northern locality is leading this work within the CCG.