

Northern Locality Board Meeting

February 2014

Locality Managing Director's and Clinical Chair's Report

1.0 Introduction

This report provides an overview of work streams progressed by the Locality Managing Director in December 2013 and January 2014.

Topics covered in this paper include:

- Patient Transport Services
- NDHT resolution of dispute
- Primary Care Oversight Group (PCOG)
- Out of Hours
- Planning Process
- Care Closer to home public meetings

2.0 Patient Transport Services

Discussions are still on-going with one of the providers for non-emergency patient transport services. There have been some small improvements in performance but this has not been delivered quickly enough and therefore a revision to the remedial action plan has been requested and received. All contract levers are being utilised to manage performance on this contract.

3.0 Northern Devon Healthcare Trust (NDHT) resolution of dispute

Following the contract query notice issued by NDHT in relation to the non-delivery of the cost improvement programme the dispute that occurred with NDHT has now been resolved at the time of preparing this report. Resolution occurred following mediation supplied by NHS England and the NHS Trust Development Authority. Resolution included establishing rules of engagement between both parties as well as an agreement financially. The rules of

engagement set out a set of behaviours and processes to be followed including a risk share approach.

4.0 Primary Care Oversight Group

The Chair has represented NEW Devon Clinical Commissioning Group (CCG) at the Primary Care Commissioning Oversight Group (PCCOG). This group is looking at ways of commissioning some Primary Care Services through collaborative work between the Local Medical Councils, NHS England, Kernow CCG and South Devon and Torbay CCG. The first important proposal from this group was the Preparatory QOF (Quality Outcomes Framework) Scheme. This has allowed GPs to concentrate on

- Achieving a named doctor for all registered patients over 75
- Identifying 2% of adult registered list who may be considered vulnerable
- To begin immediately to prepare for the Avoiding Unplanned Admissions and Proactive Case Management DES (Directed Enhanced Service)
- Securing a direct dial telephone number.

The PCCOG is looking to bid for funding through the Prime Minister's Challenge Fund: Extending Access to General Practice. If successful there is an intention to pilot different models of care under two overarching themes

- To introduce a model of integrated primary care which provides seamless in- and out-of-hours care, and which integrates better with other services particularly community services;
- Increased access to primary care outside current core hours through a number of different models developed according to local need in conjunction with local populations;

Essential to an integrated care delivery model is an IT solution to enable various providers of health and social care to be able to share patient information. Services would be wrapped around the patient with the GP practice taking a central role in coordinating care for individuals through its integration with out-of-hours, community services and other health and social care providers.

5.0 Out of Hours

An event was held in January over two days for commissioning leads, practice managers, health watch colleagues, primary care clinicians to come together to discuss the future of an out of hours service. The event was facilitated by the primary care foundation. The purpose of the event was to start understanding what service users required from an out of hours service and the model of care.

The outputs from the event have been framed in relation to what the patient would like, for example what are the key characteristics of a good service and how would this be measured. This has resulted in a set of 'I' statements. The model of care has been described in terms of function which helps to clarify where the service needs to be one and the same as with other parts of the system and therefore allows a wider out of care model of provision to be provided by a range of clinicians according to presenting condition.

6.0 Planning Process

On 6 February NEW Devon CCG published Commissioning Framework (CF) 15. This is the third and final set of high level commissioning priorities published by the CCG, focusing on the Partnerships Directorate priorities around mental health, continuing healthcare and care homes. CF15, along with the earlier commissioning priority publications CF04 and CF11 (which focused on elective and non-elective care) concludes an important first stage in the planning process for 2014/15, and now enables the CCG Localities to work directly with their local key providers in linking the contracting and finance frameworks (also recently published with the Commissioning Framework documentation) to a clear set of CCG commissioning priorities for the coming 12 to 24 months. In addition to the Commissioning Framework publications, the Northern Locality is supporting the intense work underway across the CCG to develop the Better Care Fund agenda, ensuring a close link is made between key existing health and social care services, and the pooling requirements of existing NHS funds with local authorities that begins in April 2014.

7.0 Care Closer to home public meetings

The Chair and Vice-chair will be speaking at a series of public meetings about Care Closer to Home in some of the towns around North Devon. This initiative involves close collaboration between the locality, Northern Devon Health Care Trust and Devon County Council. They will be inviting people to become involved in the development of future healthcare in their immediate area. Topics for discussion will include Community Nursing Services, Mental Health Services, Physiotherapy Services, End-of-Life care, Maternity and Children's Services. The first meeting is at Barnstaple Rugby Club on Wednesday 19th February with full details to be found on the website <https://www.newdevonccg.nhs.uk/northern/care-closer-to-home/100955>.