



HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

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ADULT COMMUNITY HEALTH SERVICES RE- PROCUREMENT: REPORT FROM 2018 PATIENT AND PUBLIC ENGAGEMENT

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Summary

NHS Medway Clinical Commissioning Group (CCG) wants to transform the way adult community health services are delivered across Medway, so that they are less fragmented, more joined up and with more services within local communities, closer to people's homes.

There are seven key changes to services for local people which have been developed as a result of initial engagement with patients, clinicians, staff and local residents. In August 2018 the CCG consulted with the Medway Health and Adult Social Care Overview and Scrutiny Committee (HASC) on these seven key changes. Following this, the CCG then undertook patient and public engagement during September and October.

This report outlines the approaches taken during this engagement, the feedback received from local people and describes what the CCG will do to respond to the findings.

Appended to this paper is an engagement report – describing the engagement undertaken and an analysis of the findings. The engagement report was commissioned by the CCG and carried out by the Public Engagement Agency (PEA). Also attached is a document setting out the CCG's response to the each of the key feedback areas received during September and October 2018.

1. Budget and Policy Framework

- 1.1. Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway. The Council has delegated responsibility for discharging this function to this Committee and to the Children and Young People's Overview and Scrutiny Committee as set out in the Council's Constitution.
- 1.2. The terms of reference for the Health and Adult Social Care Overview and Scrutiny Committee (Chapter 4 Part 5 paragraph 21.2 (c) of the Constitution) includes powers to review and scrutinise matters relating to the health service in the area including NHS Scrutiny.

2. Background

- 2.1. The Community Services Re-Procurement Programme is critical to the development of the Medway Model – redesigning and improving the way in which community services are accessed and provided locally, supporting reductions in health inequalities, improving patient experience in using the services, which in turn, will ensure that patients remain well and cared for in their place of choice (home). This will also reduce the demand for A&E and inpatient care as well as continuing to support appropriate early discharge, and improving the use of technology.
- 2.2. The CCG has a legal duty to tender services when a contract is due to end.
- 2.3. In 2017 the CCG engaged widely with patients, families, residents and staff on their proposals for future adult community services and the feedback informed the development of the proposed model. Approaches included:
 - An online and paper survey open between 26 October and 6 December 2017
 - Two public events to launch the engagement programme – in mid-November 2017
 - A discussion with Medway GPs and Practice managers
 - Three workshops to build aspects of the future model held in November and December 2017
 - 14 focus groups within local community settings run through the CCG's community development partnership – Involving Medway
 - A patient panel to ensure that user voice was prioritised at all events
 - Training local residents as community health researchers who undertook 36 individual face-to-face and telephone interviews with users of services.
- 2.4. In January 2018, the CCG ran a day long 'Whole System Planning Workshop' involving over 100 patients, staff, voluntary sector representatives, commissioners, and other services in Medway. Participants tested the emerging model using a series of case studies and worked with other stakeholders to suggest solutions to any problems identified within the model.

- 2.5. The CCG used the feedback from the Whole System event to create a document detailing seven key changes that will improve patients' experience of adult community services. These are detailed below:
1. The most common services will be provided locally in each Medway town, with specialist services provided centrally.
 2. More multi-skilled community nurses and therapists supported by specialist teams.
 3. Extending the hours and days of larger services in each of the six localities.
 4. A central booking and co-ordination function.
 5. Senior Community Clinicians will case manage the care of all patients with complex or three or more long-term conditions.
 6. Speedier response within two hours for people with complex or three or more long-term conditions when they need urgent treatment or support.
 7. More opportunities and support for people who use community health services to lead healthier lifestyles and to manage their own conditions.

- 2.6. Since the last report to the HASC in August 2018 there have been a number of changes to the scope of the review. These are as follows:

- An element of GP Phlebotomy activity is now to be included, this is approximately 16,000 contacts
- Swale CCG are now joining the procurement for - Specialist palliative and Wisdom Hospice, clinical assessment services including MSK triage, nutrition and dietetics, and hand therapy
- Learning disabilities services are now not included within scope
- The Community stroke service is now confirmed to be out of the scope of this procurement.

The updated within scope list is now:

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| • Anti-Coagulation | • Lymphoedema |
| • Cardiology and Arrhythmia | • MSK Physiotherapy |
| • Cellulitis | • Neuro physiotherapy |
| • Clinical Assessment Service | • Nutrition & Dietetics |
| • Community Nursing | • Phlebotomy (including an element of GP phlebotomy) |
| • Community rehabilitation | • Podiatry |
| • Continence Care | • Respiratory (including Medway Asthma Self Help- MASH) |
| • Dementia Crisis Support Team | • Specialist Palliative Care (Including bereavement support and The Wisdom Hospice) |
| • Diabetes | • Speech and Language Therapy |
| • Epilepsy | • Tissue Viability and Wound Therapy |
| • Hand Therapy | |

- 2.7. The CCG has provided regular updates to the Committee to outline progress with the Community Services Re-Procurement Programme with reports presented in June 2107, October 2017 and January 2018.

2.8. In August 2018 HASC was consulted on the proposed seven key changes to Adult Community Services in Medway.

2.9. The programme will progress through the following stages:

- Service redesign including public engagement (autumn and winter 2017) - completed
- Public engagement (September – October 2018) – completed
- Procurement process (Late January 2019 to September 2019)
- New service go-live (April 2020)

3. Public Engagement September – October 2018

3.1. The approach

The focus at this stage was on sharing and gaining feedback on the proposed model, particularly around the seven key changes that are considered key to improving people's experiences of adult community health care in Medway.

Engagement consisted of:

- A public facing document summarising the seven key changes
- A survey – aimed at clinicians, staff, patients & local residents which received 276 responses
- An extensive information campaign - social media, press advertising & printed posters
- Distribution of the key changes document to patients in their homes through community nurses
- A discussion with 75 GPs and practice managers
- Four public listening events – attended by 195 people
- 18 focus group discussions in local community groups through the community engagement programme, Involving Medway – reaching 226 residents
- 18 interviews with care users conducted by community health researchers
- Community nurses also helped to target feedback from housebound patients by distributing surveys to patients on their caseloads

3.2. Key findings

PEA analysed the findings and supported the engagement. The full report is included as an appendix.

3.3. The majority of people who gave us their views broadly support the seven key changes proposed. 93% of those who responded to the survey agreed the changes will 'improve to some extent' or 'improve significantly' the experience of those using adult community health services in Medway.

3.4. People in events told us these proposals would mostly be an improvement as current services are fragmented and, for many, difficult to access. They welcomed the focus on multi-skilled teams, better co-ordination, improved access & prevention and education.

- 3.5. However, a number of issues were consistently raised throughout the engagement. The most common concerns related to:
- Staffing and workforce – current staff shortages and problems with recruitment are a barrier to implementing changes. Also whether upskilling will dilute specialist skills and whether staff will be overstretched
 - Funding – whether there will be enough funding to improve frontline services
 - Mental health not being mentioned in the model – the connection to physical health and the role that community nurses may have in being the first to detect mental health problems (particularly for the housebound)
 - Travel and transport – whether location changes will have a negative impact on older people or people with mobility problems, also concerns about the location of the Healthy Living Centres (HLC) not being accessible from some areas, also parking
 - Inadequate services for rural areas especially the Hoo Peninsula (a requirement for an HLC on the peninsula)
- 3.6. GPs and practice managers told us they would like to see additional changes to the model including:
- Simplifying the referral process
 - Better integration, better closer working relationships between GPs and community services (practice nursing teams)
 - More nurse prescribers
- 3.7. Some participants had been involved in the earlier engagement and commented on the importance of being involved throughout the process. One person commented that:

'It's really good to see that a lot of the things that people said is being implemented. I was at the first event at the St George Hotel. I can now see this being built on'.

4. The CCG's response to the public engagement

- 4.1. The CCG recognises the feedback received over the last two years which has helped us build the model. It is reassuring that people are broadly supportive of the proposed seven key changes.
- 4.2. We have produced a document setting out a response to the key themes from the engagement. In some areas we are already implementing the changes for instance:
- Working with current providers to identify training needs and ensuring we are addressing current gaps; we have recruited a local workforce lead to support this.
 - Working with NHS Property Services and Community Health Partnerships, the landlords of the premises, to gradually change the services that are offered locally. This includes reviewing rooms in the Healthy Living Centres to make sure we get the most out of the buildings; making sure that the space is suitable and that rooms are more fully utilised.

- 4.3. The findings from the public engagement will be published on the CCG website together with the CCG's response to the engagement.
- 4.4. The CCG will continue to use the views of patients, staff, GPs and other clinicians to develop a revised way of delivering adult community health services in Medway.
- 4.5. The procurement of the revised model is taking place during 2019 and will go live in 2020. The CCG's patient panel is involved in the assessment process over the coming year. The CCG will publish updates on the website during the procurement and make sure that we continue to engage with local residents and stakeholders over the coming years to find out how people think the revised model is progressing.

5. Risk management

- 5.1. The CSR Programme has a risk register which is managed in line with the CCG's Integrated Risk Management Strategy. Risks are reviewed by the CSR Programme Steering Group every month and form part of the risk register reviewed monthly by the CCGs Commissioning Committee.

6. Financial implications

- 6.1. There are no financial implications to Medway Council directly arising from this report.

7. Legal implications

- 7.1. Regulation 23 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 requires relevant NHS bodies and health service providers ("responsible persons") to consult a local authority about any proposal which they have under consideration for a substantial development of or variation in the provision of health services in the local authority's area.
- 7.2. In January 2018, the Committee reached the following decision: *"To protect the Overview and Scrutiny statutory right to comment and with no intention of slowing down the recommissioning process, the Committee determined that the revised model presented was a substantial development of or variation in the provision of health services in Medway."*

8. Recommendations

- 8.1. The Committee is asked to note the findings from the public engagement during September and October 2018 and the CCG's responses and actions taken as a result.

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Appendices

Appendix 1 – Public Engagement Report, Public Engagement Agency (PEA)

Appendix 2 - You Said, We Did – Response to the Public Engagement