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**TRAFFORD
COUNCIL**

AGENDA PAPERS MARKED 'TO FOLLOW' FOR HEALTH SCRUTINY COMMITTEE

Date: Tuesday, 25 September 2018

Time: 6.30 p.m.

**Place: Committee Room 2 and 3, Trafford Town Hall, Talbot Road, Stretford
M32 0TH**

A G E N D A	PART I	Pages
7.	COMMUNITY SERVICE PATHWAYS	1 - 16
	To receive a presentation by Trafford CCG.	
10.	HEALTHWATCH TRAFFORD UPDATE	17 - 18
	In addition to the papers already circulated, to receive an update from HealthWatch Trafford in respect of Phlebotomy Services.	

JIM TAYLOR
Interim Chief Executive

Membership of the Committee

Councillors R. Chilton (Chair), S. Taylor (Vice-Chair), S.K. Anstee, J. Bennett, Mrs. J.E. Brophy, Mrs. A. Bruer-Morris, A. Duffield, Mrs. L. Evans, Mrs. D.L. Haddad, S. Longden, J. Slater, D. Acton (ex-Officio) and D. Western (ex-Officio).

Further Information

For help, advice and information about this meeting please contact:

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Health Scrutiny Committee - Tuesday, 25 September 2018

This agenda was issued on Thursday, 20 September 2018 by the Legal and Democratic Services Section, Trafford Council, Trafford Town Hall; Talbot Road, Stretford, Manchester, M32 0TH

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RIGHT CARE RIGHT TIME RIGHT PLACE

Trafford Health Scrutiny Committee

**Community Services
Update – commissioning
and service delivery
priorities**

Trafford Commissioning for People and Place

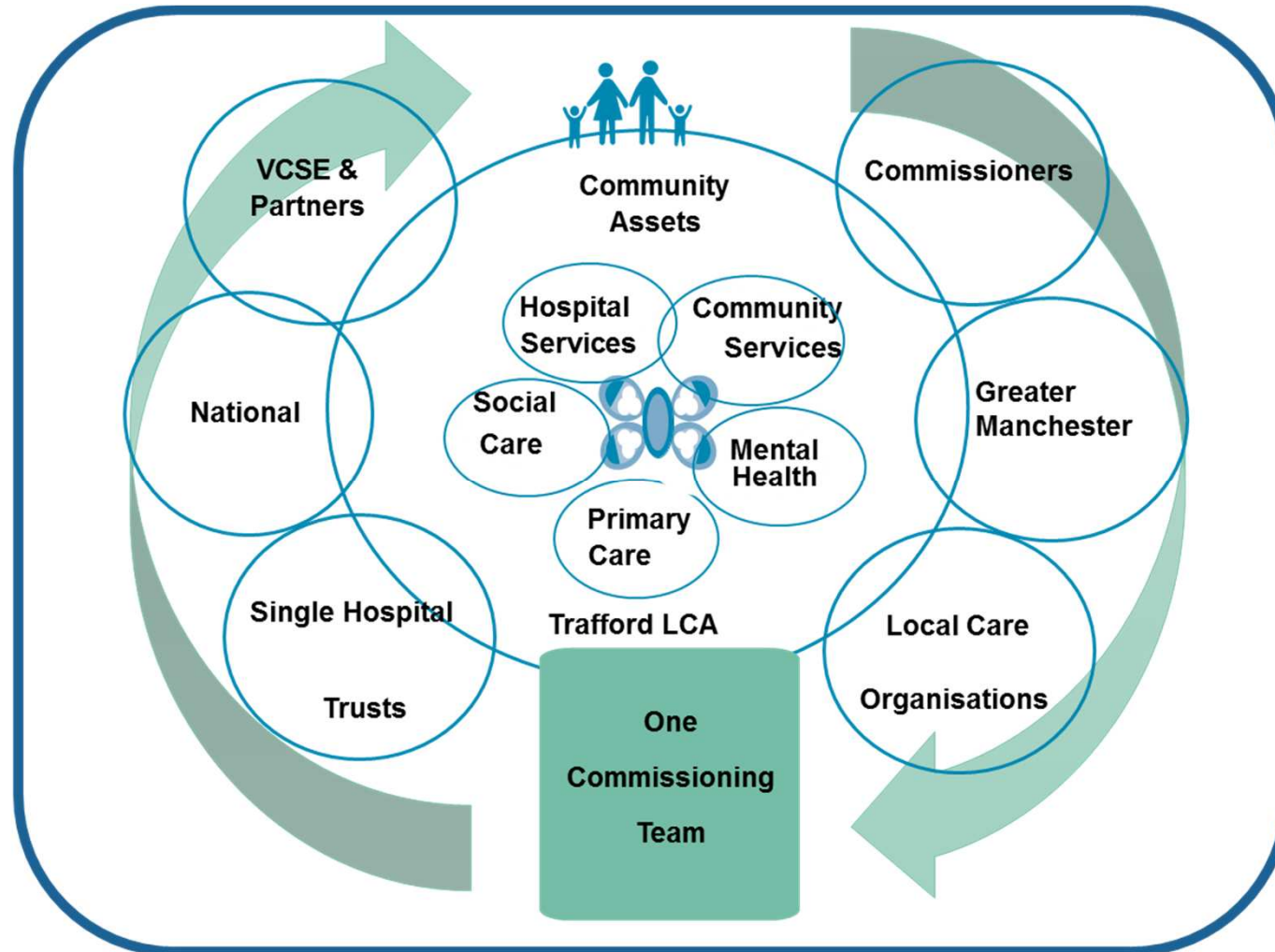
- **Commissioning strategically for outcome focused care models and systems**
- **Commissioning by co-designing place based delivery models**
- **Creating alliances for better health and care**

Trafford Commissioning Outcomes

- I will have a long healthy life
- I will have support if I need it
- I will have a peaceful end to life
- I have my independence
- I take charge of my own life
- I belong
- I feel safe
- I am part of a family
- My children will have the best start in life

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Commissioning a Local Care Alliance



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Commissioning a neighborhood model through the LCA

- **LCA is a fundamental building block for transforming the system and delivery of co-ordinated care closer to home**
- **Transformation is translated and delivered through a neighbourhood based model of care**
- **Working with the LCA will help create a sustainable system**

Commissioning a neighborhood model through the LCA

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Commissioning the LCA

2018

2031

Commission:
 Eg: urgent care system
 -respiratory system
 -injury/frailty system

Encompass:
 sustainability areas for 18/19
 transformation fund
 All providers

Change
 Fragmentation to system
 Inputs to outcomes

Urgent
 Supporting people in and through a crisis

Prevention
 Enabling people to support themselves

Scheduled,
 Supporting people to build a good life

Commission:
 Adding life
 Saving lives
 Reducing inequality

Encompass
 System wide LCA
 Totality of resource £,
 people, risk

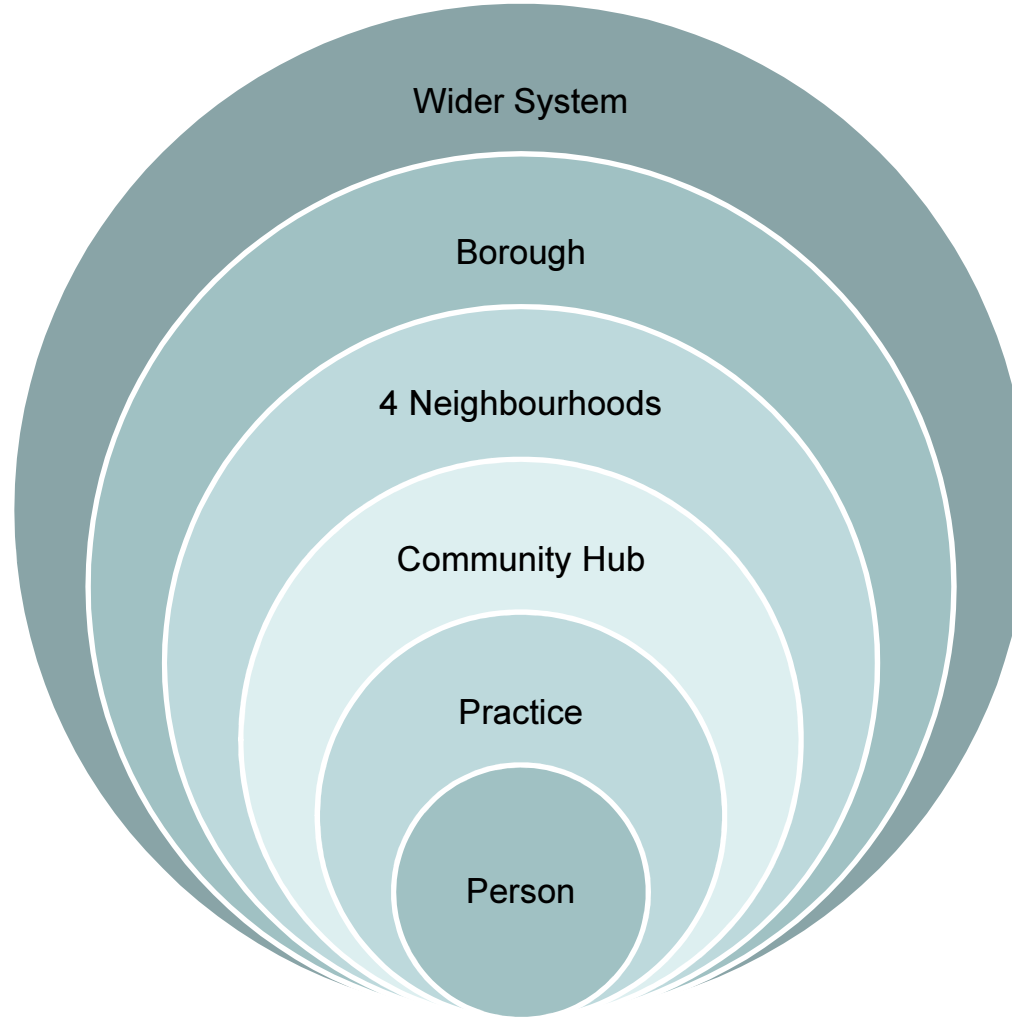
Change
 activity to commissioned
 programmes
 One contract through
 the Alliance

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Commissioning a place based model

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Trafford Place Based Model



Design Principles

- **People not patients**
- **Community assets - what I have around me is important**
- **Shared workforce**
- **System interconnectivity - accountable together for owned outcomes, benefits and set backs**
- **Engaging differently so that positive team behaviours are modelled across the system**
- **Partners that accept accountability for the cost and quality of care**
- **Coordination of care and care management across a network of all partners**
- **Cost savings as well as improved outcomes are more likely if partners work together**
- **Shared governance structure and decision making including empowerment of front line staff**
- **Shared accountability for quality and cost of care**

Community Service Provision

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Discussions are ongoing regarding where the best home for Trafford community services might be in terms of a provider organisation. Our challenge is to work together to ensure the service is delivered in the best possible way going forward. O

Our future commissioned model for care closer to home must be delivered and aligned to the commissioning outcomes, principles and approach described.

Any decision about where these services are provided needs to be based on what is best for the local population we serve.

Community Service Priorities - Phlebotomy

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Background

- Community phlebotomy services are provided by Pennine Care Foundation Trust (PCFT) and Manchester Foundation Trust (MFT) from a variety of locations in the community
- Clinics are currently delivered on a 'drop in' basis – no appointment system in place for routine, non-housebound patients
- Increasing activity and unpredictability of demand has led to:
 - long in-clinic waiting times (up to 2.5 hours)
 - high levels of patient dissatisfaction & complaints
 - excessive pressure placed on front line staff to manage demand
- CCG, PCFT and MFT agree that current service is unsustainable in current format
- Healthwatch Trafford's 'Phlebruary' Report indicated that 67% of patients would prefer to book an appointment for a blood test rather than turn up and wait

Community Service Priorities - Phlebotomy

Additional Capacity

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Improving Access to General Practice

- **Trafford Extended Access Service has been operational since July 2018 across four GP practice hubs.**
- **Hubs provide weekend and evening appointments for all registered patients from Monday to Friday 6.30pm – 8.00pm and Saturday and Sunday between 9.00am and 1.00pm.**
- **The hubs are situated in each neighbourhood.**
- **Appointments are available through GP's, nurses and health care assistants who are trained phlebotomists.**
- **Patients can book an appointment to have their routine blood tests at a time and place that is more convenient for them.**
- **All appointments are booked through the patient's own practice**

Proposed Solution

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- CCG, PCFT and MFT have agreed to introduce an appointment booking system from 1st November 2018; which will:
 - Reduce current pressures on staff to manageable levels
 - Eliminate long waiting times when patients arrive at clinic
- The CCG will also commission additional phlebotomy capacity from GP practices in future on a neighbourhood basis.
- Various technical delivery options are being explored for implementation.
- Options appraisal is being undertaken in conjunction with all partners to ensure that transition to appointments booking is as smooth as possible, and that any risks and potential adverse consequences are identified and appropriately mitigated
- A communications plan will be developed and implemented by partners to ensure that all stakeholders are fully briefed on the changes within the service and that any disruption is minimal

Next Steps

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- **CCG (including GP leads), PCFT MFT to develop robust implementation plan for implementation of appointments booking system – by 28/9/18**
- **Communications plan to be developed to ensure all stakeholders are fully notified of changes – roll out from 1/10/18**
- **Commencement of appointments booking by 1/11/2018**

Community Service Priorities - Rehabilitation

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Community Neuro Rehab Team (CNRT)

- A waiting list initiative has been developed to address immediate waiting time issues within Trafford's CNRT.
- In addition to providing additional capacity in the short- medium term, this will also include reviewing access criteria for all community rehabilitation services to ensure patients are seen by the most clinically appropriate service to meet their needs.
- This initiative will stabilise the current service and enable longer term development in line with the emerging GM model of Neuro-rehabilitation, which is being driven through Theme 3.
- The initiative will be delivered over a 30 week period, during which time a business case outlining the longer term commissioning model will be developed.
- The review of wider criteria of community rehabilitation and equipment services will also be initiated during this period to ensure sufficient capacity to meet any changes in volume of activity.
- Local pathways will be developed in line with timeframe of LCA development.

Community Service Priorities - Rehabilitation

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Community Rehabilitation

- A Joint review of services is being undertaken with the community provider to ensure Trafford has responsive community rehab and equipment service to avoid excess length of stay.
- A responsive equipment services will ensure improved patient flow through other community services and release clinical capacity in services such as CNRT.

Rehabilitation of Frail patients

- Development of local pathways to ensure advances in intermediate care services support the timely rehabilitation of patients outside of hospital.
- Local pathways are to be developed in partnership with the Local Care Alliance.

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Any questions?

HEALTHWATCH UPDATE - PHLEBOTOMY

A sub group of the HOSC Committee met to discuss the way forward after receiving the Healthwatch Trafford Report on Phlebotomy.

At the meeting the following points were raised with Healthwatch Trafford for clarification.

1. Have any other Healthwatch completed similar exercises re phlebotomy services in their area to enable a comparison of services?

After a search no other Healthwatch has completed similar work.

2. A query was raised re the evidence to back up the figure of 70% [Page 3 of report] who lived outside Trafford accessing blood tests at their GP surgery.

The 70% figure is accurate to the responses given. The numbers of people in this group is small. The 70% refers to 7 out of 10 people who responded to the question as they either lived outside Trafford or were not registered with a Trafford GP. Further work is required in this area.

3. The Hospital Trust has responded to Healthwatch Trafford re the Phlebotomy report.

The chair of HOSC has received a copy of the letter.

Jean Rose

Director Health watch Trafford

September 19 2018

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