Agenda Item No: 6

OUTPATIENT SERVICES AT COMMUNITY HOSPITALS

To: HEALTH COMMITTEE

Meeting Date: 8th September 2016

From: Tracy Dowling, Chief Officer, Cambridgeshire and

Peterborough Clinical Commissioning Group

Electoral division(s): All

Forward Plan ref: Not applicable

Purpose: For comment and for information

Recommendation: The Committee is recommended to note the update on

Outpatient Services in Cambridgeshire and Peterborough

	Officer contact:		Member contact:
Name:	CCG Engagement Team	Name:	Councillor David Jenkins
Post:	Lockton House, Clarendon	Chairman:	Health Committee
	Road, Cambridge CB2 8FH		
Email:	capccg.contact@nhs.net	Email:	ccc@davidjenkins.org.uk
Tel:	01223 725304	Tel:	01223 699170

1. BACKGROUND

1.1 The purpose of this report is to provide the committee with an update on the East Cambridgeshire and Fenland review of some of the health care services delivered from the community hospitals.

2. MAIN ISSUES

- 2.1 There are three community hospitals located in the location of East Cambridgeshire and Fenland. These are Doddington Community Hospital (located in Doddington), Princess of Wales Community Hospital (POW) (located in Ely) and North Cambridgeshire Hospital (located in Wisbech).
- 2.2 The CCG is reviewing specific services that are provided from these sites in the context of the wider STP, current local assessed health needs and future population growth. Fenland and some parts of East Cambs have particular challenges associated with deprivation and rurality. The Sustainability Transformation Programme (STP) is looking at which services are best provided locally and which services require to be delivered from an acute setting. The draft STP plan that was submitted to NHS England end of June is setting out an ambitious programme to ensure high quality services are provided from the most appropriate care setting. The focus is to support 'home is best', keeping services local where this is clinically and economically appropriate. It also looks at ensuring that the NHS pound is spent as effectively as possible ensuring there isn't unnecessary duplication of services.
- 2.3 The CCG is looking at how local services can be integrated within a community hub type setting where benefits can be achieved through closer working. This could involve larger GP federations and community based services such as services for the elderly and long term conditions, and minor injury services.
- 2.4 Community outpatient clinics are delivered from all three community hospital sites. At the North Cambs site services are run by Queen Elizabeth Hospital (QEH). The Doddington and POW are currently run by Cambridgeshire Community Services however they have served notice which ends 31 March 2017. Radiography services are run by CPFT which has also served notice. The CCG is working with local providers to ensure a provider can take over both outpatient and x-ray services from April 2017. These conversations are near completion and a procurement process will take place if there isn't sufficient local interest.
- 2.5 A number of different clinics run from the different sites. These include a range of specialties such as ENT, Ophthalmology, Orthopaedics, paediatrics, gynaecology etc. Access to all sites is good with free parking too. Some of the clinics are not being used as much as we would expect. We are working to increase use of local services, and will be working with the new provider and local GPs to look at ways to enable greater numbers of people to access the clinics.
- 2.6 The three Minor Injury Units are part of a wider discussion about the provision of Urgent and Emergency Care services in Cambridgeshire and Peterborough through the Sustainability and Transformation Programme. The vision for urgent and emergency care in Cambridgeshire and Peterborough is for highly responsive and effective services for urgent but non-life threatening conditions to be provided away from an acute hospital setting. A Clinical Advisory Group has been set up to review potential models which have been developed in line with Professor Sir Bruce Keogh's

review of NHS urgent and emergency care system. The options which have been proposed are:

Option 1	Continue with existing MIU, Out of Hours (OOH), community and primary care arrangements (Do Nothing
Option 2	Close all MIUs and require primary care and local A&E departments to manage the activity previously managed within the MIUs
Option 3	Reconfiguration of services in the Fens and East Cambs and use local primary care, Out of Hours (OOH) GP services, Joint Emergency Team (JET) capability and capacity and MIU staff to create an integrated local urgent care service
Option 4	Close all but one of the MIUs in the Fens and East Cambs but develop this into an Urgent Care Centre and use local primary care, OOH, JET capability and capacity and MIU staff to create an integrated local urgent care service in the areas affected by the closures
Option 5	Close all but two of the MIUs and develop these into Urgent Care Centres and use local primary care, OOH, JET capability and capacity and MIU staff to create an integrated local urgent care service in the area affected by the closure
Option 6	Develop all MIUs into Urgent Care Centres

After significant media interest about our review of minor injury services in the early part of August we set up a number of meetings to explain the work we were doing. We wanted to hear views early before we went to full public consultation if the recommendations would mean significant change.

Over 400 local people attended public meetings in August to discuss minor injury and outpatient services across East Cambridgeshire and Fenland. An additional four meetings have been booked in September, to ensure that more local people have an opportunity to have their say and feed into the review of services, before we come back out to people with recommendations as part of any formal consultation.

Turn out at the meetings has exceeded expectations, and regrettably the CCG did have to turn some people away as the venues were not large enough to accommodate everyone. As such additional meetings have been arranged for:

- Thursday 8 September, March Community Centre, PE15 8LE, 6.30-8.00pm
- Tuesday 20 September, Queen Mary Centre, Wisbech, PE13 2PE, 6.30-8.00pm
- Wednesday 21 September, Chatteris Parish Church, PE16 6BA, 6.30-8.00pm
- Tuesday 27 September, The Maltings, Ely, CB7 4BB, 6.30-8.00pm

Additional dates will be booked in autumn 2016 and publicised widely, and the CCG website has full details of upcoming public meetings, at

www.cambridgeshireandpeterboroughccg.nhs.uk. Presentation slides and notes from each meeting will also be available on our website shortly so people can see the

key themes from each meeting so far.

The CCG welcomes the contributions that have been made so far and will continue to listen to what people have to say over the coming months.

No decisions have been made about the future of the minor injury services in East Cambridgeshire and Fenland. The CCG is looking at how these services relate to recommendations from the national review of urgent care services and how we might deliver minor injury services locally, working alongside other services including GPs and community services.

The CCG is at an early stage of its review and if any significant changes are considered necessary as a result of these discussions then a formal public consultation will take place.

2.7 There has also been a temporary pause on admissions to the extra care unit at Doddington Court, on patient safety grounds. The CCG's priority is the safety of patients, and at the present time there are concerns around the levels of care which can be safely provided to support patients with more complex needs.

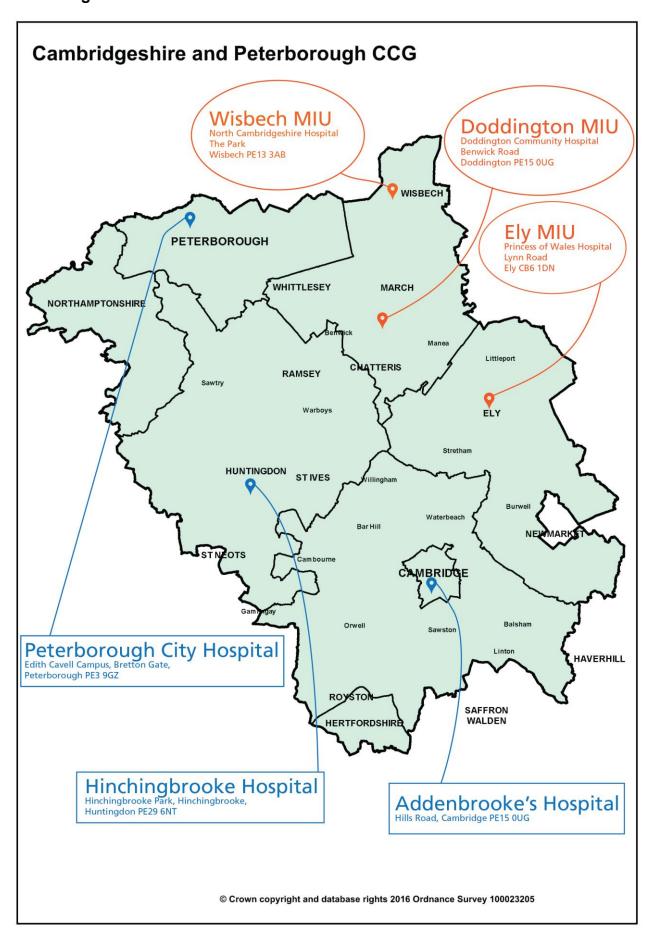
As we updated the Committee in July, we are also working to review and assess the current community bed provision across Cambridgeshire and Peterborough, and what types of beds are likely to be needed going forward. This work is almost completed but the CCG will engage on any future proposals and hopes to have a solution in place as soon as possible.

2.8 Continued work across the urgent care system is taking place as part of the Sustainability and Transformation Plan (STP). Further work on considering the options outlined above will take place between now and October 2016, as well as an NHS senate and clinical gateway review.

If any options are supported then a public consultation could take place from November/December 2016 until February 2017. The CCG would then make a decision following this process and after reviewing all the options and feedback.

A future service will provide a local service for minor injuries and illnesses, but this may be in a different way to the current model of services.

2.9 Location of hospitals and Community hospitals in Cambridgeshire and Peterborough:



3. SIGNIFICANT IMPLICATIONS

3.1 Resource Implications

The work being done is testing value for money and that the services are sustainable.

3.2 Equality and Diversity Implications

This review takes account of other key pieces of work in particular:

Project	Lead Organisation	
Urgent Care Vanguard	Cambridgeshire and Peterborough	
	CCG	
Sustainability and	Clinical Advisory Group	
Transformation Programme		
Migrant & Refugee JSNA	Cambridgeshire County Council	

3.3 Engagement and Consultation Implications

See wording under 2.6

3.4 Public Health Implications

The population of East Cambs and Fenland have high levels of deprivation therefore the work being undertaken will factor this issue into the options going forward.

Source Documents	Location
Cambridgeshire and Peterborough CCG website	www.cambridgeshireandpet erboroughccg.nhs.uk