

# Clinical Commissioning Group Update

## Adults Care, Adults Health and Housing

### Overview & Scrutiny Committee

Date: 28 March 2018

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Author:	Executive Nurse, Swindon CCG
Wards:	All Wards
Locality Affected:	All Locality Areas
Parishes Affected:	All Parish Areas

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#### 1. Purpose and Reasons

- 1.1 This report provides the Adults Care, Adults Health and Housing Overview and Scrutiny Committee with an update of performance and key issues relating to Swindon CCG.
- 1.2 A key purpose of the Adults Care, Adults Health and Housing Overview and Scrutiny Committee is to hold Commissioners of Health and Social Care Services to account.
- 1.3 Any Commissioner of Health and Social Care Services in Swindon is required to provide information on the planning and provision of health and social care services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

#### 2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.
- 2.2 Identify any areas of concern that require further investigation.

#### 3. Detail

##### Integrated Urgent Care

- 3.1 Medvivo has been awarded a five-year contract to provide integrated urgent care services across Bath and North-East Somerset (BaNES), Swindon and Wiltshire, from 1 May 2018. The healthcare provider, which is rated as 'Outstanding' by the Care Quality Commission will be the lead provider, working in collaboration with Vocare and BaNES Enhanced Medical Services (BEMS+).
- 3.2 Medvivo will be responsible for running the NHS111 service across BaNES, Swindon and Wiltshire and will develop the service model to include a new locally managed 'clinical hub.'

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- 3.3 The key objective is to deliver a more functionally Integrated Urgent Care Access, Treatment and Clinical Advice Service model by aligning existing service specifications for NHS 111
- 3.4 The GP out of hours service for Swindon is currently being provided by Medvivo for an interim period and will not be part of the new integrated care service. The CCG will be undertaking a procurement exercise for a provider of the service.
- 3.5 The new service launches on 1 May 2018 and a comprehensive communications plan has been developed to ensure all stakeholders are aware of the changes.
- 3.6 **Victoria Cross Surgery and Eldene Health Centre**
- 3.7 **Background**
- A merger between Victoria Cross Surgery and Eldene Health Centre has been agreed to take place from 31 March 2018.
- 3.8 One of the drivers behind this decision is that Dr Richard Guilding, senior and sole partner at Eldene Health Centre, is retiring at the end of March 2018. The merger will see Victoria Cross Surgery take over the management of the practice previously run by Dr Guilding and his team. There will be no material changes for Dr Guilding's patients and they will continue to be seen in the same premises by the same staff, with the exception of Dr Guilding, and they will also have access to full services provided by the Victoria Cross team.
- 3.9 In order to facilitate this merger there are planned changes to the Victoria Cross branch site. The main site of Victoria Cross Surgery is, and will remain, on Victoria Road in the centre of town, towards Old Town. Victoria Cross currently have a branch site, in Nythe. The merger will see the Nythe branch close and services for patients transfer to Eldene Health Centre. This change will ensure that patients currently registered with both practices, will be able to continue to access and receive high quality primary medical services.
- 3.10 The Nythe Surgery is currently open on a part-time basis (two full days and three half days per week). Following the relocation to Eldene Health Centre, services will be available five days per week.
- 3.11 The distance from the Victoria Cross main site to both Nythe and Eldene Health Centre is circa 3 miles. The distance for patient moving from Nythe to Eldene Health Centre is circa 1.2 miles.
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- 3.12 At present Victoria Cross have a total patient list size of 7,510, of these circa 1,950 patients usually attend Nythe but can also attend the main site. Eldene Health Centre current have 2,348 registered patients.
- 3.13 Eldene Health Centre is a purpose-built health care facility, on ground level with good access for patients, ample free parking and is accessible on bus routes. This is an improvement on the current premises at Nythe for both patient access and parking. This is good news for patients who will be accessing these services.
- 3.14 Victoria Cross and Eldene Health Centre teams are working closely together on the implementation plans and will engage with all of their patients as plans are implemented.
- 3.15 Current situation
- 3.16 Arrangements for the merger between Victoria Cross Surgery and Eldene Health Centre are progressing well towards this taking place from 31 March 2018.

The following actions have taken place:

- Information is being displayed in the practices and on their websites. This includes a question and answer document.
- A press release has been issued by the CCG.
- Patient Participation Group members have been updated at their regular meetings.

### 3.17 Patient Transport Eligibility Survey results

#### 3.18 Background

A patient transport eligibility survey was commissioned by a number of CCGs across the South West. The survey took place from 11 October to 10 November 2017 for electronic responses and 16 October to 17 November for hard copy responses.

- 3.19 The survey was conducted to inform CCGs on the public's views regarding how best to provide fair access, for NHS funded non-emergency patient transport. Patient transport is an NHS-funded non-emergency service offered to people who cannot get to hospital appointments because their health condition impacts on their ability to use routine transport (car/bus/taxi/wheelchair taxi, etc).
- 3.20 CCGs across the South West spend in excess of £31M per year (Swindon CCG c.£1.9M) on non-emergency patient transport. Initially 11 CCGs across the SW

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decided to work together to review their policies and try to align to ensure equality of access so that the limited resources available were used to support those who truly needed support with their travel arrangements to and from hospital appointments.

- 3.21 All CCGs recognised that the extant national guidance is somewhat general and non-specific, and is now over 10 years old. In the period since it was published, this has resulted in differences of interpretation in different CCG areas, resulting in variation and inequality between different patient groups, based either on their clinical diagnosis and/or the CCG to which their GP practice belongs.
- 3.22 Hard copies (380, together with 36 A4 posters, including the weblink address for e copy):
- 25 GP surgeries,
  - Outpatient clinics at GWH (10 OP Clinics)
  - Renal dialysis unit (Churchill Hospital Oxford)
  - Arriva Vehicles for distribution to users of the service
- 3.23 Soft copy: electronic alert with e-address for the questionnaire, on CCG website, and to all the above, plus:
- SBC
  - Parish councils
  - Voluntary Action Swindon for onward sharing
  - Carers organisations
  - Healthwatch Swindon – for their newsletter, website and volunteers
  - NHS partners
  - All renal PTS users
  - PPGs
  - LMC
  - MPs
  - Community Transport
  - Any renal support groups
  - Oncology groups
  - MP
  - HOSCs
  - PALs
- 3.24 Findings  
The Findings of the survey for Swindon CCG are shown at Appendix 1. Also shown, where there is any notable variance between the Swindon and the South

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West results, are the results from across the South West. Of note, the Swindon results are generally very similar to those of the other CCGs and all the overall South West results.

#### 3.25 Next Steps

The findings are being used to inform discussions between and action by, the CCGs regarding equity of access to PTS services, for all patient groups, and for patients across the South West. This includes determining eligibility based on a patient's need for NHS-funded transport, not their diagnosed condition.

3.26 To this end a targeted communications approach will be taken for those patient groups most likely to be impacted by this change, and appropriate support provided during transition for any patients thus affected.

3.27 For Swindon and the other CCGs currently using Arriva as their PTS provider, the findings are also being used to inform a new service specification for the replacement PTS contract in 2019.

## 4. **Alternative Options**

4.1 None

## 5. **Implications, Diversity Impact Assessment and Risk Management**

### 5.1 Legal and Human Rights Implications

N/A

### 5.2 All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

N/A

### 5.3 Diversity Impact Assessment

A DIA has not been completed for the purposes of this update.

### 5.4 Risk Management

N/A

## 6. **Consultees**

The Director of Finance (Section 151 Officer) and the Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

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## **7. Background Papers**

7.1 None.

## **8. Appendices**

8.1 Appendix 1 - Patient Transport Eligibility Survey results.