



North East Locality Commissioning Meeting

Date of Meeting: 10.4.19		Paper No: 5				
Title of Paper: Planned Care – Project Summary						
Is this paper for	Discussion		Decision		Information	✓

Purpose of Paper:

Provide Summary of Planned Care projects to date and any actions requested from practices or localities.

Action Required:

Note contents, particularly service changes expected

Author: Paul Kettle	Clinical Lead: Dr Stephen Atwood & Dr Shelley Hayles
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Project	Update
<p>NB Projects requiring GP attention will be at the start of the listed projects shaded with this colour, others are for information only.</p>	
<p>NB Projects with no update this month will move to the end of the list and shaded in this colour.</p>	
<p>QIS (Quality Improvement Scheme) Improving uptake in Screening for Breast, Bowel and Cervical</p>	<p>Those involved in the targeted support scheme are progressing well. <i>The second progress report was due back at the end of February and a summary report will be sent out in April</i></p> <p>OCCG have now been able to extend this scheme out to a further 24 practices, all of which have been contacted. So far we have 12 responses with 11 sign ups.</p> <p>REMINDER PLEASE CAN THOSE PRACTICES WHO HAVE BEEN INVITED TO JOIN THE SCHEME RESPOND BY FRIDAY 29TH MARCH</p> <p>The Thames Valley Cancer Alliance has produced a Cancer Toolkit, to provide up to date and relevant data, recommended literature, best practice tools, evidenced interventions and useful guidance for all GPs to use in surgery. A link to the site can be found here: http://tvscn.nhs.uk/networks/cancer/quality-improvement-scheme-qis-toolkit-for-primary-care/</p> <p>TVCA are also asking all current participating practices to complete a feedback questionnaire around the toolkit. A link to the questionnaire has been sent to practice managers and cancer champions</p> <p>Clinical Lead: shelley.hayles@nhs.net Project Manager : zoe.kaveney@nhs.net</p>
<p>Cardiology To integrate primary and secondary cardiology care to manage increases in referrals, to provide care closer to home, reduce pressure on the JR and reduce cardiology patients' waiting times.</p>	<p>The Integrated Cardiology Service Evaluation and review continues. Roll out to the rest of the county (City and south) is currently blocked by the lack of availability of suitable clinic rooms.</p> <p>GPs, please email occg.plannedcare@nhs.net if rooms are available please – two are needed side by side, particularly in Oxford, and towns in the South - Abingdon, Didcot, Wallingford, Henley).</p> <p>Clinical Lead: Will O’Gorman Project Manager: Carole.rainsford@nhs.net 01865 (3)34641</p>

Project	Update
<p>Diabetes Integrated care between primary, community & secondary care with locality based diabetes clinical boards. Focus on population health outcomes. Year of Care planning enabling patient empowerment and self-management. Effective use of ICT and data sharing for a diabetes dashboard (enabling population health), screen sharing between primary and secondary care - enabling joint consultations and earlier specialist intervention, development of an integrated care record and appropriate use of digital technologies to aid patient education and self-management.</p>	<p>OUHFT and OHFT have developed a response to the diabetes transformation paper (Sept 2017), the final proposal was presented at a meeting of OCCG, OUHFT, OHFT, GP Feds, LMC and Diabetes UK on 7 Dec 2018. The proposal and high-level implementation plan was submitted to OCCG and reviewed by OCCG Executive on 18 Dec 2018. A primary care workshop on diabetes redesign has taken place on 14th March and details from this will follow.</p> <p>The NHS Diabetes Prevention Programme (NDPP) continues with a total of 3,195 referrals so far. Case studies of individuals who have completed the programme are being put together and will be shared shortly.</p> <p>A total of 3 LDR meetings have now taken place with our Diabetes Locality Coordinator, Consultant from OCDEM and several others to give updates and share best practice.</p> <p>Ongoing meetings at OCDEM to discuss the diabetic footcare pathway and improve working between Community Podiatry and the new Multi-Disciplinary Footcare Team in OCDEM.</p> <p>Clinical Lead: amar.latif-occg@nhs.net Project Manager: Paul.Swan1@nhs.net 01865 (3)37006</p>
<p>Gynaecology Develop a community based gynaecology service.</p>	<p>Project Board meetings with GP Federations and OUHFT began February 2019. The intention is for a Pilot approach to be taken with phased rollout across localities and for scope.</p> <p>Clinical Lead: shelley.hayles@nhs.net Project Manager: Clare.hewitt3@nhs.net</p>
<p>Respiratory Pilot of an Integrated Respiratory Team in the City and North localities until Jan 2020.</p> <p>Outcomes:</p> <ul style="list-style-type: none"> • Improved identification and diagnosis • Reduction in emergency admissions and readmissions • Reduction in ambulance call outs and ED attendances • Increased smoking cessation in the patient cohort • Better identification of end of life patients with increased advance care planning 	<p>Patient cohort:</p> <ul style="list-style-type: none"> • Asthma and COPD • Bronchiectasis patients not requiring intensive secondary care management • End-stage Interstitial lung disease patients including those with sarcoidosis • Patients with neuromuscular disease or on home non-invasive ventilation (NIV) requiring physiotherapy input to optimise airways clearance and manage home NIV. <p>Project update:</p> <ul style="list-style-type: none"> • Community respiratory clinics went live in Chipping Norton Community Hospital and St Bartholomews Medical Centre (Oxford City) in w/c 4th Feb – good team and patient feedback. • Horsefair Surgery has confirmed it will host the Community Respiratory Clinic in Banbury. Planned start date of Banbury community respiratory clinic is 16 April 2019. • Consultant, Senior Nurse Manager, Physio Team Leader, 2 x Respiratory GPs, Smoking

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<ul style="list-style-type: none"> • Identification and treatment of mental health problems in patient cohort • Improved quality of life, mental health, and self-care for patients and their carers 	<p>Cessation Advisor are all in post - however backfill is not in place for some of these posts so staff are not yet fully released for IRT.</p> <ul style="list-style-type: none"> • Referral form 99% complete - awaiting IRT nhs.net email • Consultant completed inhaler review with City practices • Inhaler primary care search completed. • Full spec of systems required in Community Respiratory Clinic has been provided • IRT Confidentiality Agreement to get primary care record access has been drafted • First draft proposal for integrated clinical governance and incident investigation has been produced by OCCG Quality Team - currently being discussed/agreed with OUHFT/OHFT quality leads. <p>Clinical Lead: karen.kearley@nhs.net Project Manager: paul.swan1@nhs.net 01865 (3)37006</p>

Project	Update
<p>SCAN (Suspected Cancer) To pilot a primary-care led Multidisciplinary Diagnostic Centre (MDC) pathway for patients with “low-risk but not no-risk” symptoms of cancer falling outside of 2-week-wait pathways.</p>	<p>We have now scanned around 1010 patients, with a cancer conversion rate remaining at around 10%</p> <p>On average we are still receiving 20 referrals a week</p> <p>Most common cancers diagnosed continue to be Lung, Bowel and Pancreatic cancers</p> <p>The MDC appointment delays have now been cleared and we have a more sustainable set-up for the MDC clinics from April which will also give patients more choice of appointment times, with slots available across Mon-Fri.</p> <p>Clinical Lead: shelley.hayles@nhs.net Project Manager : zoe.kaveney@nhs.net</p>
<p>Visual Information Systems in GP waiting Rooms A pilot driven by improving cancer screening & survivorship through better patient education.</p> <p>Introduce equipment into GP waiting rooms to deliver key health messages drawn from a web based library of multiple sources, at a frequency agreed with practices.</p> <p>Initially this will be about cancer care but other health care campaigns may follow.</p>	<p>The system used in the pilot is Envisage, provided by Numed. 15 of the practices in the North and West localities are using the system. All City Locality practices have agreed to join the programme and installation is expected in the next two months.</p> <p>All remaining practices have been invited to join the programme; the installation process should be complete by the end of June.</p> <p>Clinical Lead: Shelley Hayles shelley.hayles@nhs.net Project Manager: paul.kettle1@nhs.net 01865 (3)36726</p>
<p>Ophthalmology To provide a community based Ophthalmology service to patients registered with an Oxfordshire general practitioner.</p>	<p>A useful ‘how to’ guide for referrals has been produced with the Eye Hospital, aimed at Optom referrers; this guide may help GPs when reviewing / giving feedback on GOS18s. http://occg.info/optomreferrals</p> <p>Educational and signposting materials for eye care can be found at occg.info/eyes.</p> <p>Pressures on the eye hospital are still significant, and a review is being conducted of capacity and demand with NHS England. This is near completion.</p> <p>Funding to support with staffing to pilot telephone triage at Eye Casualty was decided against by the CCG, with an aim to negotiate provision in next years’ contract.</p> <p>We are developing plans to create an ‘Ophthalmic Decision Unit’ as a joint venture between</p>

Project	Update
	<p>the organisation responsible for delivering the Minor Eye Care Service (PECS Ltd) and OUHFT to deliver a single hub for managing Optom and GP urgent and routine eye referrals, as well as organising pre-hospital eye examinations and follow up work by Optometrists in the community.</p> <p>Clinical Lead: shelley.hayles@nhs.net Project Manager: t.stocker@nhs.net 01865 (3)37026</p>
<p>Cancer Care Reviews Implementation Support Scheme Improving frequency and quality of reviews in Primary Care through a standardised template</p>	<p>We currently have 39 practices who have signed up to the scheme from across Oxfordshire.</p> <p>CCR training is also being developed with the aim that this will be available in June. We are looking to hold Two 1 day training sessions available to those who will be completing the CCRs. In addition there is also motivational interviewing training available to practice staff which will be delivered within the practice and tailored to your needs,</p> <p>If you would like to know more about the motivational interviewing training please get in touch</p> <p>The CCR template is currently undergoing some tweaks and a new one will be circulated soon.</p> <p>If you would like to sign up to the scheme please contact Zoe Kaveney ASAP.</p> <p>Clinical Lead: shelley.hayles@nhs.net Project Manager : zoe.kaveney@nhs.net</p>

Project	Update
<p>MSK Integrating MSK Services</p>	<p>In the last 2 months we have achieved:</p> <ul style="list-style-type: none"> - Patient self-referral has been live since 8th February - Self referral can be made by the patient online only, patients who are unable to access online or unsuitable to self refer can be referred as previously via e-referral - Early work is underway to provide MSK services to Wantage, supporting increased capacity in the service to secure further reductions in waiting times - Work continues with OUH Rheumatology for a review of Rheumatology referrals and pain pathways <p>Clinical Lead: Rob Russ Project Manager: carole.rainsford@nhs.net 01865 (3)34641</p>