

Report of the Director of Environment & Sport to the Meeting of Bradford South Area Committee to be held on Thursday, 28th January 2016.

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Subject:

Bradford Districts Clinical Commissioning Group

Summary statement:

This report provides an update on progress to date on achieving the six key strategic objectives set out in the Bradford Districts Clinical Commissioning Group's two-year operational plans.

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Portfolio:

Adult Social Care and Health

Overview & Scrutiny Area:

Health and Social Care



1. SUMMARY

This report provides an update on progress to date on achieving the six key strategic objectives set out in the Bradford Districts Clinical Commissioning Group's two-year operational plans.

2. BACKGROUND

2.1 In line with the Health and Social Care Act 2012, groups of GP practices based in Bradford Districts, Bradford City and Airedale, Wharfedale and Craven have formed Clinical Commissioning Groups (CCGs) and, from April 2013, are responsible for planning, designing and buying health services for local people. They are statutory organisations and have taken over many of the responsibilities of the former Primary Care Trust (PCT).

2.1.1 There are a number of detailed documents which give more detailed information on a number of CCG responsibilities which are available from communications@bradford.nhs.uk. These include:

1. The Anti-coagulation service - Patient and public engagement survey report – May 2014.
2. Every Baby Matters Awareness Week 2013 – Summary Report. Bradford Districts CCG GP Access Review Final DRAFT Report Version 1.0 - May 2014.
3. Grass Roots Insight and feedback for better commissioning.
4. Grass Roots monthly report for APRIL 2014 Bradford Districts Clinical Commissioning Group 30 April 2014.

2.1.2 Appendix 1 provides an update on progress to date on achieving the six key strategic objectives set out in the CCGs' two-year operational plans.

3. OTHER CONSIDERATIONS

3.1 There are no Other Considerations.

4. FINANCIAL & RESOURCE APPRAISAL

4.1 Financial

There are no significant financial implications for Bradford Council arising from this report.

4.2 Staffing

There are no significant staffing implications for Bradford Council arising from this report.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

5.1 There are no significant risks and governance issues arising from the proposed recommendations in this report.



6. LEGAL APPRAISAL

- 6.1** This work relates directly to the Local Government Act 2000 and to the Duty of Wellbeing placed upon the Council to promote and improve the well-being of the District.

6. OTHER IMPLICATIONS

7.1 EQUALITY & DIVERSITY

The Equality Act 2010 sets out the new public sector Equality Duty replacing the three previous duties for race, disability and gender. In engaging with our stakeholders, the CCGs will have regard to our Equality and Diversity Policy.

We will consider our duties under the Act when designing, delivering and reviewing our business priorities – in business planning, commissioning and decommissioning services.

We will communicate and engage in ways that are accessible to people in our community, ensuring that people who do not have a voice, or may not have equal access to information or opportunities to engage, are not disadvantaged.

7.2 SUSTAINABILITY IMPLICATIONS

The development of Clinical Commissioning Groups will assist in enabling community health issues and solutions to inform the Service planning process.

7.3 GREENHOUSE GAS EMISSIONS IMPACTS

Greenhouse gas emissions and wider environmental impacts are a consideration.

7.4 COMMUNITY SAFETY IMPLICATIONS

- 7.4.1** Community safety issues are acknowledged as a key contributor to the quality of health in neighbourhoods. It is anticipated that improvements to health will have a positive impact on community safety issues across Bradford South.

7.5 HUMAN RIGHTS ACT

- 7.5.1** No direct implications arising from the Human Rights Act.

7.6 TRADE UNION

- 7.6.1** No direct Trade Union implications arise from this report.

7.7 WARD IMPLICATIONS

- 7.7.1** The development of Clinical Commissioning Groups will support a more tailored approach to Service delivery in Wards across Bradford South.



7.8 AREA COMMITTEE ACTION PLAN IMPLICATIONS (for reports to Area Committees only)

- 7.8.1 The development of Clinical Commissioning Groups will help strengthen the Health contribution to the development of priorities for the Bradford South Area Committee Action Plan 2014-17.

8. NOT FOR PUBLICATION DOCUMENTS

None.

9. OPTIONS

- 9.1 That Bradford South Area Committee adopts the recommendations outlined in this report.
- 9.2 That Bradford South Area Committee adopts the recommendations outlined in this report, with amendments.
- 9.3 That Bradford South Area Committee decides not to accept the recommendations outlined in this report.

10. RECOMMENDATIONS

- 10.1 The views and comments of the Bradford South Area Committee are requested.

11. APPENDICES

Appendix 1 provides an update on progress to date on achieving the six key strategic objectives set out in the CCGs' two-year operational plans.

12. BACKGROUND DOCUMENTS

"Bradford Districts Clinical Commissioning Group" (Document AW), Report to Bradford South Area Committee, 28 March 2013.

"Bradford Districts Clinical Commissioning Group" (Document Y), Report to Bradford South Area Committee, 26 September 2013.

"Bradford Districts Clinical Commissioning Group"(Document S), Report to Bradford South Area Committee, 25 November 2014.



Report to Bradford South Area Committee – 28 January 2016

1 Progress on achieving strategic objectives

The following provides an update on progress to date on achieving the six key strategic objectives set out in the CCGs' two-year operational plans:

1.1 Bradford's Healthy Hearts (BHH)

This programme – launched in 2014 - aims to reduce cardiovascular disease (CVD), such as coronary heart disease, angina, heart attack, congenital heart disease and stroke.

BHH is already well established in the area covered by Bradford Districts CCG and is being rolled out in Bradford City CCG over the coming months. Its overall objective is to reduce cardiovascular disease (CVD) related deaths by a minimum of 10%, and prevent 150 strokes and 340 heart attacks by 2020. This is being done by:

- helping people to lower, and control, their cholesterol levels;
- managing high risk patients in primary care;
- reducing the risk of CVD events (such as heart failure, atrial fibrillation and stroke) in specific cohorts of patients;
- improving CVD patient pathways across primary and secondary care;
- taking a large-scale preventative approach to determining risk factors in the population.

Widespread activity is taking place with patients in GP practices to support the programme. A bespoke website – www.bradfordshealthyhearts.co.uk - has been launched to support patients and professionals, using a wide range of information and resources about CVD. In addition, education events are being held for patients on a range of topics including hypertension (high blood pressure) and stroke prevention in atrial fibrillation.

Successes so far have included:

- switching over 5000 patients to more appropriate statin (cholesterol lowering) medication;
- starting over 1200 patients with CVD risk above 20% on a statin.
- starting over 400 patients with CVD risk between 10-20% on a statin
- treating an additional 800 patients with oral anticoagulants such as Warfarin
- increasing hypertension prevalence by one per cent, with over 1000 patients added to the register.

In the last few months BHH has become a multi-award winning campaign. In November it won GP practice of the year and GP practice of the year – cardiovascular in the General Practice Awards, 2015 and was highly commended in the best website category of the Association of Healthcare Communications and Marketing awards. Previously it was shortlisted in the primary care innovation category of the Health Service Journal awards 2015.



1.2 Bradford Beating Diabetes (BBD)

BBD is a programme that identifies people at risk of type 2 diabetes, offers advice on its prevention and ensures that those who have diabetes are diagnosed and provided with appropriate care. Now entering its third year, BBD was recently chosen as one of seven national demonstrator sites for the National Diabetes Prevention Programme. And, following the submission of a business case to NHS England, £890,000 has been awarded to the programme to support its development and expansion. Like Bradford's Healthy Hearts, BBD started in one CCG area – Bradford City – and is now being expanded to incorporate people living in the area covered by Bradford Districts CCG.

To increase the number of people with access to the Intensive Lifestyle Change Programme (ILCP), and to improve the uptake and retention into the programme, future development of BBD in Bradford Districts CCG will focus on:

- identifying those people at highest risk of type 2 diabetes;
- workforce development, including recruiting 'ILCP supporters' to work with the health trainer service hosted by Bradford District Care NHS Foundation Trust;
- a text messaging reminder/support service and telephone coaching;
- community engagement; and
- expansion of communications.

Evaluation by Leeds Beckett University of the work done in the Bradford City area has shown that the ILCP does have a positive impact. Participants show increased awareness of diabetes - and the risk of developing it - and have had reductions in clinical readings such as blood pressure and average blood sugar levels of a period of weeks or months (HbA1c).

1.3 Maternal and child health

Our work to improve maternal and child health has included:

- working with the local authority to **design integrated services which improve support for transition** for young people aged 14 – 25.
- surveying local people on the **wheezy child and gastroenterology** pathways, the results of which we will share and discuss with member practices to help us implement service improvements. We have also designed a new **croup pathway** and are working with member practices to discuss and influence any further additions.
- working with service users, through the Maternity Partnership, to improve service provision for women with **mental health** concerns immediately prior to, or after, giving birth (perinatal).
- continuing to improve access to the **community paediatrics and child development service** for children and young people. We are also looking at the **autism assessment pathway** and the availability of support for children requiring education and healthcare (EHC) plans.
- working with the local authority - as part of their review of the school nursing service - to appraise the team providing **community nursing for children with special needs** in special schools.
- exploring proposals to improve **primary care access for children during core hours** across Bradford City CCG.
- continuing to oversee the **paediatric palliative care** review which commenced in February 2015.



1.4 Mental health

Mental health is a serious priority for us; we have been working with Bradford District Care NHS Foundation Trust (BDCFT), our main provider of specialist mental health services, to radically improve services for people with mental health problems:

- **Improving access to psychological therapies (IAPT) service review** – a new draft service specification is being developed and, through the commissioning of the IAPT intensive support team, BDCFT's has been supported to achieve 15% IAPT access target in the CCG's area. We are also currently working to implement the approved stepped care model which will result in a network of providers working within a framework to support governance, best practice and access to a whole range of provision.
- **The Crisis Care Concordat action plan** – which incorporates the first response service (FRS) - to ensure rapid response to anyone experiencing mental health crisis has been recognised nationally and is subject to specific interest from NHS England. The newly commissioned FRS service has been nominated for awards for the significant progress made between a number of agencies in addressing this national policy priority.
- **The Future in Mind (FiM) transformation plan** describes how the NHS, social care, voluntary and community sector, Public Health and Education will work together to develop mental health and wellbeing services for children and young people in Bradford district and Craven. Its priority areas include: improving access; early intervention; care of the most vulnerable; transparency and accountability; and development of the workforce. The plan sets out a five year strategy for service development and will give access to funding for identified areas.
- **Physical health (parity of esteem):** Our local physical health annual check template has attracted national interest and has put Bradford in the top 10 nationally for achievement of annual health checks for people with serious mental illness. There are two physical health care nurses now employed through mental health with a focus on community and inpatient provision.

1.5 Living longer, better

Living longer, better is Bradford Districts CCGs' focus on long term conditions and recently the emphasis has been on cancer:

- a cancer work plan has been jointly developed with the Cancer Locality Action Network (CLAN). This plan incorporates all national, regional and local priorities to deliver awareness, early diagnosis, better management, improved outcomes and cancer survivorship.
- Risk stratification – this work will start with colorectal cancer with the aim of delivering care closer to patients' homes to reduce the burden of follow up visits to hospital. It also forms part of the "living with and beyond cancer" initiative.
- *Be Clear on Cancer* campaign – over the summer the national and local awareness campaign featured breast cancer in women over 70.
- A *'so you think you know about cancer do you event'* was held in Bradford's Centenary Square in August.
- A patient information leaflet has been developed to use at the point of referral to explain why the patient is being referred and what to expect.
- Cancer of unknown primary - or CUP - is the term used when there is evidence of a cancer that has spread but that it is not possible to define in which part of the body it



originated. Our aim is to ensure that patients who have a malignancy of unknown primary receive timely and appropriate care.

- Practice data information packs – Sharing data with our practices in relation to care, treatment and management of cancer which will allow them to compare themselves against their peers and nationally.

1.6 Improving patient experience

We have continued to strengthen and consolidate the ways that we involve patients and the public in our commissioning decisions. Recently we have linked in to the **MyNHS** website through which we are establishing a new database to map our patient engagement, tailor key messages and involvement, and promote better communication.

Some of the areas where we have engaged the public about the development of health services include:

- the relocation of hyperacute stroke services from Airedale General Hospital to Bradford Royal Infirmary;
- epilepsy enhanced services in primary care
- new models of care

Our mechanisms for engagement include:

- **Grass Rootsinsight** – this is a locally developed way of tracking and reporting patient feedback on health topics from a variety of sources, including the Patient Opinion website, the Patient Advice and Liaison Service (PALS), feedback from our websites and information that is collected during other engagement with local people.
- **Patient and community network** – a joint network event took place in June to share good practice. Patient groups delivered short presentations sharing the progress, challenges and achievements of their groups, whilst partner organisations – such as Healthwatch and the VCS forum – held stalls to promote patient involvement. Health topics are also discussed at network meetings, including primary care, self-care, nutrition and diabetes.
- **Patient engagement local incentive scheme (LIS)** – in 2015/16 all of Bradford City CCG's GP practices (including the Frizinghall practice, which is located within the Shipley Area Committee's boundaries) signed up for this scheme. The LIS encourages practices to work with patient engagement groups.
- **Women's network** – supporting better understanding of women's health issues;
- **Engagement with GP practices** – a joint project with Healthwatch and Barnardo's to look at ways of improving participation of vulnerable groups of young people within GP practices.
- **Community chest** – promoting partnership working with other practices and voluntary and community groups to ensure we are all working to achieve the CCGs' strategic priorities. Practices with good ideas to make the city a healthier place have the opportunity to bid for funding of up to £1000 to get their ideas off the ground.
- **Maternity Partnership** – working with providers and commissioners of maternity services to make sure that services meet the needs of local women, parents and families. Each year the Partnership conducts a series of focussed discussion groups throughout the district to listen to the views and experiences of new mums and pregnant women on topics chosen by people who use the service (such as planning for pregnancy, perinatal



mental health and safeguarding awareness). This year the Partnership looked at understanding the birthing experiences of women.

- **Young people's event** – a successful multi-partnership event held in October saw the CCGs promoting Bradford Beating Diabetes, Bradford's Healthy Hearts and patient groups. We will also tested out our "commissioning game" by running a workshop on commissioning intentions for young people, tailored to be interactive and fun for young people to take part.
- **Developing our community assets** – working with voluntary and community organisations to extend our engagement reach with local communities.

2 Other headlines

2.1 Bradford Breathing Better

Our new respiratory disease campaign will run as a joint venture between the two CCGs and will look at increasing prevalence, diagnosis, management planning, self-care and drug regimes and procuring a Bradford-wide pulmonary rehabilitation service. A programme board has been established to provide the governance and assurance that we have the correct projects and outcome measures and that these are being achieved. Work on the campaign will commence in Spring 2016.

2.2 Urgent and Emergency Care (UEC) vanguard

The West Yorkshire UEC Network submitted a successful bid for national UEC vanguard status. The bid is a collaboration of all of the ten CCGs in West Yorkshire, together with Harrogate and Rural District CCG, acute and mental health providers, NHS 111, GP out-of-hours service and Yorkshire Ambulance Service.

Vanguards – which aim to deliver urgent care across the system - will work with partners, including local system resilience groups, to build on progress already made in transforming primary, community and acute care services.

Yorkshire Ambulance Service will develop a stronger focus on becoming a mobile treatment service delivering care at patients' homes with conveyance to hospital for those who really need to go. Three mental health service providers will work with West Yorkshire Police to deliver major service change which will see rapid crisis response through emergency response control centres and 'street triage'. Other planned projects include creating an Integrated West Yorkshire care record and a system-wide information dashboard which reports in 'real-time'.

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