

Commissioning Intentions 2016/17

In the autumn of 2016, we asked patients and the public for views on local services and the improvements we want to see in 2016/17.

This is part of our annual process to help inform our 'commissioning intentions'.

We shared our priority areas, the progress we had made so far and what we were planning to do in the future. We asked the following questions:

- Are these the right priority areas?
- What do you think of the progress so far?
- What is missing that should be a priority for 2017/18?

We gathered views over a two week period in the following ways:

- A survey which was available on our website and promoted through social media, direct email to patient groups, partnership networks and an advert in the local newspaper.
- At our Annual General Meeting on Monday 26 September 2016.
- At the Bromley Parent Voice Conference on Friday 7 October 2016.

All the comments received have been considered by the CCG's senior management team and programme and shared with clinical leads who are responsible for each of our priority areas. Some of the feedback related to improvements we are already putting in place.

84% of people who responded to the survey agreed with our key priority areas. The feedback has been split between the priority areas and comments raised about other areas of work.

Area	Questions	Response
1. CHILDREN AND YOUNG PEOPLE		
School Nursing	<p>Concern over the impact of the decommissioning of school nurses on the health of young people including their sexual health and increase in teenage pregnancy.</p> <p>Mental health in children who are vulnerable or who are subjected to domestic violence, school counselling and school nursing services help to monitor these children/young people and increasing these services will ease adult mental health in the future.</p>	<p>Bromley Council are responsible for commissioning the school nursing service in Bromley. The council has reviewed its commissioning of Public Health children's services, including support to schools, following a detailed assessment of need for this service. The CCG has supported this process. The results of the needs assessment and the review have informed the new commissioning approach. The Council is currently in the process of commissioning a new service to begin in April.</p> <p>The CCG has received additional in-year non-recurrent funding to be allocated to services that support the emotional wellbeing and mental health of young offenders. The non-recurrent investment (2016/2017) has been allocated to:</p> <ul style="list-style-type: none"> • Mapping of health services offered to young offenders • Trauma training for YOS and allied children services staff • AIM (sexually harmful behaviour) training to YOS and allied children services staff • Co-location of an early intervention emotional wellbeing practitioner in YOS <p>Additional recurrent investments by the Health in Justice team (NHS England) will follow from 2017/2018. There is an expectation that an element of the additional resource will be allocated to Liaison and Diversion services. The CCG will be working with partners to co-design and co-produce YOS health service transformation.</p>
Transition to adult services	<p>There needs to be good transition to adult services – particularly for young people with ADHD.</p>	<p>The CCG has developed a five year transformation plan for children and young people's mental health services. There is a full commitment to ensuring the smooth transition of young people to adult services. This includes:</p> <ul style="list-style-type: none"> • Make sure transition to adult services follows best practice.

Area	Questions	Response
		<ul style="list-style-type: none"> • Have seamless transition in mental health services. • To review the way referrals are made to services and how we commission them. <p>There is additional funding over the five years which will be used to transform these services and improve outcomes.</p>
CAMHS funding and access	<p>More funding is needed for children and adolescent mental health (CAMHS).</p> <p>Make sure young people can access CAMHS very early and provide one point of contact.</p>	<p>Delivery of our five year CAMHS transformation plan has seen an increase in capacity and reduced waiting times for these services delivered through the additional funding available over the five years which will be used to transform these services and improve outcomes. Building on the implementation of the Single Point of Access service in 2014, further work is ongoing with children and young people to co-design services that will improve their emotional health and wellbeing.</p> <p>The Transformation Plan sets a vision to transform the access to and quality of local emotional wellbeing and mental health services. Local transformation is aligned to SE London Sustainability and Transformation Plans and NHS England Specialised Commissioning guidance on commissioning of crisis care pathways.</p> <p>One of the main themes emerging from this work is the need to build up resilience in young people and meet their needs much sooner. We will be taking this work forward in 2017 as we implement the national Five Year Forward View for Mental Health.</p>
2. ADULT MENTAL HEALTH SERVICES		
Mental health support in A&E	<p>There needs to be better support for people with mental health conditions in the Accident and Emergency Department.</p>	<p>There is some provision for people with mental health conditions in A&E and we are working to ensure there is 24 hour provision. We are also:</p> <ul style="list-style-type: none"> • Providing more care for patients in crisis • Reviewing capacity and provision of mental health support for people in A&E with Oxleas NHS Foundation NHS Trust.

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3. Urgent and emergency care		
Sharing information across urgent care and social services	There should be further integration of IT systems across health and social care and borders to avoid repetition, duplication and waste.	We are introducing new shared care electronic records across Bromley. This is a new secure electronic record which allows GPs, hospitals and community healthcare staff to see relevant information about their patients which informs decisions about their treatment. It is hoped that the new system will help reduce the number of repeat appointments and duplicate tests for patients. Discussions are ongoing with Bromley Council about extending this shared record into social care services.
Joint working between urgent care and social care services	There needs to be more reliable joint working between council and health services and health/mental health – in particular for the more vulnerable patients.	The Transfer of Care Bureau at the Princess Royal University Hospital includes social care with nursing staff and medics to ensure a comprehensive assessment is done and a joint decision made about ongoing treatment before discharge. A discharge plan is developed for patients leaving hospital.
4. Cancer		
Waiting times	Waiting times may be improved for referral to specialist, but this does not help patients unless there are adequate resources for diagnostic tests in a timely manner. This is a source of considerable anxiety for patients, particularly when delays in confirmed diagnosis	<p>We have introduced 'cancer cards' which has been developed for patients referred on the two week cancer waiting time. It provides information on who to call or chase if the patient has not been given an appointment with two weeks of the referral. Information is also available for patients to explain why they have been put on this urgent referral pathway.</p> <p>We are also implementing electronic referrals so that patients referred under the cancer two week wait can have their appointments with the hospital booked before they leave their practice.</p> <p>We are working with the hospital to ensure we use technology and resources to improve</p>

Area	Questions	Response
	and then treatment delays can significantly alter the outcome.	access to diagnostic testing. Hospitals are using virtual clinics and work closely in a multidisciplinary team. Our GPs have access to a range of diagnostic procedures which can help get patients diagnosed sooner.
Improvements to cancer care and outcomes	More care needs to be provided locally where basic chemotherapy and radiotherapy can be delivered.	<p>Across south east London, CCGs are focusing on improvements in screening, early detection and prevention of common cancers such as bowel. There are several initiatives on the horizon which will encourage participation from patients and doctors to screen and detect earlier.</p> <p>For patients at higher risk of cancers, we are looking at ways in which to remind them to return for follow up appointments to ensure that cancers are not left undetected.</p> <p>We are focused on delivering the best quality of care for our patients and we are committed to improving patient satisfaction around how we treat cancer patients. We will be working with patients to explore how we can improve our services.</p>
5. End of life (EOL) care		
Dementia patients	Provision of EOL for dementia patients to include specialist knowledge, treatment and support for carers.	<p>The new Dementia Hub has been established which aims to support people diagnosed with dementia and their families. End of life care services have been strengthened for advanced dementia provision and support.</p> <p>We are also working with Bromley Council to improve carers support services. Additional end of life care support and provision is available to patients with heart failure.</p>
End of life care pathways	What is happening to the Liverpool Care Pathway?	The Liverpool Care Pathway was phased out following a national review and has been replaced by personalised care planning for people nearing the end of their life.
6. Primary Care		

Area	Questions	Response
Access to GP services	Improving access to GP services is important – some people have difficulty getting an appointment.	<p>Improving access to primary care and out of hours services is supported nationally and a priority for Bromley. Two primary care hubs were set up in the last 12 months to accommodate the increasing numbers of people who need to be seen by a GP. On 31 January 2017, extended primary care access from 8am to 8pm, 7 days a week will be provided from three GP hubs.</p> <p>Further technological improvements are being advanced also to provide patients with online access to support online consultations for patients. NHS 111 is also providing services to triage patients and refer them appropriately to ensure greater access.</p>
	Conditions in practices	There is still much to be done to improve the conditions and environment for some practices. We have successfully bid for additional resources to support new facilities for a Bromley Health and Wellbeing Centre. Further bids will be made through London improvement grants to improve buildings and estates for practices.
Quality of services	General comment about quality of primary care services	As part of the national strategy 'The GP Forward View', focus is being put on improving the resilience of primary care for patients. Key focus areas include ensuring staff are qualified to meet the needs of their patients, improved training and better technology for diagnosis, consultation and improving workloads.
Prevention and early intervention	Prevention and planning for population health needs plus joining up physical and mental health in primary care as standard.	<p>There is much more focus on ensuring mental health and physical health are considered as equal and linked up particularly for those people with long term conditions.</p> <p>Most people with long term conditions are on a pathway of care which includes early intervention. There will be specific focus on the following areas:</p> <ul style="list-style-type: none"> • Cancer- particularly Bowel • Improving access to diagnostics • Diabetes • Frailty • Proactive pathway and case management

Area	Questions	Response
		<ul style="list-style-type: none"> • Obesity and Weight management • Cardio vascular disease • Early intervention psychosis <p>There will be specific investment in pathways of care in the following areas:</p> <ul style="list-style-type: none"> • Proactive care for people with complex long term conditions • Frailty • End of Life • Children and Young People • Maternity
Co-ordinated care	GPs need to be involved in the co-ordination of care	A great deal of work is being done across Bromley health partners and the third sector to transform care for patients with long term complex conditions. The GP is at the heart of this process and will be co-ordinating care alongside the care professional most appropriate for their patient.
7. Maternity		
Mental health support	There needs to be more mother and baby beds for mothers with mental health conditions.	A new perinatal mental health service is now available which supports women and their families during their pregnancy and a year after birth. As part of the national strategy “The Maternity Review’ these services are being transformed focusing on improved access, quality and provision for women and their babies. This specialist community provision aims to reduce the risk of women needing to be hospitalised. Inpatient care is available for those women who need more intensive care.
Feeding	There is a lack of specialist feeding intervention in Bromley for children and young people.	Bromley Council has commissioned a new infant feeding support team that started at the PRUH in January. King’s College Hospital NHS Foundation Trust has also trained a number of breast feeding support workers.
Fertility	Information is needed on	Information on fertility services in Bromley is available on the CCG website at

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services	fertility services	www.bromleyccg.nhs.uk This includes a link to our Treatment Access Policy which sets out the funding arrangements for IVF.
8. Planned care		
Phlebotomy	<p>Long waiting times for patients – this has been going on for a long time.</p> <p>Blood testing should have more appointments outside office hours for people who work.</p>	<p>We are providing additional capacity into the phlebotomy service through additional clinics. These clinics are generally quieter in the afternoon with shorter waiting times. We will be looking to re-procure the service to provide a better service and shorter waiting times and more provision out of hours.</p>
Referrals	<p>Improve the waiting time to see a specialist and make sure they have access to the right tests.</p>	<p>We are constantly monitoring waiting times and working with the hospital to improve these. We accept that some waits are too long and further work will be undertaken to reduce these.</p> <p>We are making improvements to waiting times for diagnostic tests and have introduced processes which provide access to pathology results quickly for hospital staff.</p>
Neurology	<p>Need access to allied health and rehabilitation especially long term / complex neuro-rehab.</p>	<p>We have recently redesigned the way that specialist community rehabilitation services are provided for people with neurological conditions. There are now two services, one for stroke patients and another for non-stroke patients. This redesign:</p> <ul style="list-style-type: none"> • provides more community based rehabilitation capacity • maximises independence of patients, • will reduce long term dependency rates • improves management for individuals with long-term conditions such as those who have suffered a stroke or who have another long-term neurological condition

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Meeting the needs of the local population	Bromley has an ageing population and this needs to be reflected in your priority areas.	The needs of older people, who often have complex long term conditions are included in our priority areas and are the focus of our new proactive integrated care services.
Consultant cover	More physical presence of consultants is needed at the weekend.	There is a national 7/7 working initiative which Bromley is aiming for. Hospitals will need to ensure that there is sufficient consultant presence. However, there is always a consultant on call. King's College Hospital NHS Foundation Trust which runs the PRUH is focussing on ensuring consultancy cover in the Accident and Emergency department at all times, but this is proving challenging due to staffing numbers.
Diabetes care	Improve access to Walking Away from Diabetes to people with mental health problems.	There is a much greater focus now on giving mental health the same parity as physical health and accommodating patients with both mental and physical health conditions.
Chest Pain Clinics	Please open up the urgent chest pain clinic to women under the age of 30.	Access to this service is considered on a case by case basis and is available where patients meet the agreed criteria.
Managing long term conditions	<p>Help is needed for people managing long term conditions – including their mental health.</p> <p>Ensure all chronically ill patients are given support especially younger patients.</p>	The local authority commission a number of self-management support services for people with long term conditions. This includes courses to manage diabetes. The CCG has set up a heart support group for people with cardiology conditions. As part of our work to implement integrated care in Bromley, the local voluntary and community services will be providing services to support people to stay well and take care of their health – including their mental health. This greater focus on the prevention of ill-health and education of people to take better care of their health aims to enable more people living with a longer term condition to stay well.

Area	Questions	Response
9. FINANCES		
Privatisation	Stop privatising services	The CCG is not privatising services. Under the NHS contract rules, when we are commissioning services, private providers can bid. Our priority is to commission care from the best provider that can meet local needs and provide high quality, sustainable services.
10. ENGAGING PATIENTS		
Engaging patients	Retain your focus on public and patient involvement to influence service development. Involve people in service redesign and in delivery and evaluation. Take into account who can or aren't accessing services and why.	The CCG is committed to public engagement and has a patient advisory group (PAG) established which anyone who lives, works or learns in Bromley can join. PAG members are involved in detailed service redesigns and are part of procurement panels making decisions on providers of care. Members provide valuable insight into the experiences of patients. The CCG also undertakes Equality Impact Assessments when redesigning services to identify which population groups and communities use services the most and would be more impacted than others by any changes. The CCG recently received an 'outstanding' rating for delivering our statutory obligations on public and patient involvement.
11. INFORMATION SHARING		
Shared care records	There should be further integration of IT systems across health and social care and borders to avoid repetition, duplication and waste.	We have introduced new shared care electronic records. This is a new secure electronic record which allows GPs, hospitals and community healthcare staff to see relevant information about their patients which informs decisions about their treatment. It is hoped that the new system will help reduce the number of repeat appointments and duplicate tests for patients. Discussions are ongoing with Bromley Council about extending this shared record into social care services.
	On EMIS (medical information system) the system needs to be able to clearly store that the patient is unable to walk	There is this functionality on the EMIS system, in which a patient is deemed housebound or not and consequently whether home visits are needed. The patient can mention to the practice staff that they may need additional help or explain that their physical capacity may have changed and the system needs updating.

Area	Questions	Response
	and therefore may need home visiting or help with their appointment.	
12. ORPINGTON HOSPITAL		
Orpington Hospital	What about the closure of Orpington Hospital? I went there recently and there were no consultants.	There are no plans to close Orpington Hospital. King's College Hospital NHS Foundation Trust manages this site which has become a centre of excellence for orthopaedic services. There is a range of clinical staff working from the hospital including consultant staff.
13. DO NOT ATTENDS		
DNA	Patients should be penalised or charged for missing appointments.	Do not attend rates cost the NHS a great deal. As set out in the NHS Constitution, NHS services are free at the point of use and patients are asked to attend their appointments otherwise it could compromise the completion of their treatment within waiting time targets. It is not a decision for the CCG to make regarding the introduction of charges for DNAs.
	There should be a debate over charging a fee for appointments.	

14. INTEGRATED WORKING		
Integrated working	<p>There needs to be more reliable joint working between council and health services and health/mental health – in particular for the more vulnerable patients.</p> <p>There needs to be co-ordination of care for patients and more flexible services.</p>	<p>In October 2016 we launched our new Integrated Care Network model in Bromley. This model of providing joined up care identifies patients with complex long term conditions who use services from a number of organisations. Care providers from health, social care and mental health are working together to review and co-ordinate their care in order to keep them well and avoid hospital admissions.</p>
15. SUPPORT FOR CARERS		
Support for carers	<p>Think of parents and carers especially where travel to hospital is required.</p>	<p>There is patient transport available to transfer patients that need additional support.</p>
	<p>Respite care for carers has ceased and only sitting services are now available. Carers should have a place to leave their loved one where they feel secure and can have faith in.</p>	<p>This is the responsibility of Bromley council. There is a new joint strategy for Carers which is being implemented which will consider the needs of carers.</p>
16. LEARNING DISABILITIES		
	<p>Consider people with learning disabilities who live</p>	<p>The CCG has invested in a new commissioning role which will focus on the needs of people with learning disabilities. Work is also being done within the Bromley Strategy for Carers to</p>

	independently and don't have a carer and don't think of going to the doctor.	support carers.
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