

# PRIORITY SETTING

## 2018

# YOU SAID WE DID

## December 2018



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## 1. Background

Bromley CCG uses feedback from patients to inform the priorities it will focus on to improve health in Bromley. This intelligence, together with a range of other factors is also used when developing commissioning intentions. Commissioning intentions are used by the CCG to inform contracts with local providers such as King’s College Hospital NHS Foundation Trust, Oxleas NHS Foundation Trust and Bromley Healthcare. The factors that inform commissioning intentions include:

- Patient experience data.
- Feedback from patients on service redesigns and developments.
- Health needs as set out in the Joint Strategic Needs Assessment
- Local and national targets and drivers to improve care as set out in the NHS Constitution and other NHS guidance.

As well as our local commissioning intentions, we also work collectively with other CCGs in south east London to secure arrangements with our providers that will support us to meet financial, quality and performance challenges and a shift to integrated care and systems. These collective intentions cover:



- Borough based integrated care systems.
- Prevention
- Primary care
- Urgent and emergency care
- Planned care
- Cancer
- Mental health
- Children’s services
- Community based care

This report provides a summary of how we have responded to feedback received for a number of our local and south east London wide priority areas which have been then used to help inform commissioning intentions with local providers.

## 2. Patient feedback

Feedback from patients is captured in a number of ways. This intelligence is shared with commissioners in the CCG to inform our priority areas and future commissioning intentions. It includes:

- From patient experience reports from local providers and Healthwatch Bromley which are routinely considered by our Clinical Quality Review Groups.
- From complaints and quality alerts.
- Outcomes of direct engagement on specific service areas and new procurements.
- Priority setting discussions – for example the patient workshop held in February 2018.

This report provides information on what we heard and what we have done with that feedback..

## 3. You said we did

### 3.1 Mental health care

YOU SAID	WE DID	WE CONSIDERED
What is the evidence for a single point of access model for	Patients have told us that they find it difficult to navigate the health care system. By having one single point of access to all mental health services, we can be more confident that patients know where	



mental health care and how would it benefit patients?

to go and are getting the right care at the right time. It will ensure there is no 'wrong door' for accessing care and will also enable more sharing of appropriate information which reduces patients having to tell their story over and over to different staff who are caring for them. We also expect a single point of access to reduce waiting times for treatment by ensuring that people are accessing the most appropriate care for their individual needs.

The CCG is currently working with Oxleas and other providers in the health care system to develop the single point of access and work with all providers, including the smaller community organisations that are providing care and support for people with mental health conditions.

Children and young people have extended access to a single point of access which triages all referrals in 48 hours.

A successful diagnosis is needed first before using this system.

This is not always possible as some patients will use the single point of access for the first time after seeking advice from their GP. When accessing care in this way, they will be assessed to see which is the most appropriate service to both diagnose and treat them.

GPs need to be

The health and care system in Bromley is developing



made aware of what mental health services are available.

an adult mental health strategy which advocates the need for GP and community services to work closer with hospital services. This will be launched shortly. The single point of access will make it much easier for GPs, as following referral; their patient will be assessed and cared for by the most appropriate mental health service.

GPs have access to information on current mental health services available to Bromley residents. This subject is also covered at GP education events as a way of raising awareness about services. Oxleas NHS Foundation Trust has also held a masterclass for GPs.

The CCG is developing a service directory of young people's mental health services and what support is available.

More information available on prevention and early intervention

This will be a key feature of the new adult mental health strategy which identifies the need to focus on prevention and early intervention. There will also be work streams that address this. The CCG is currently looking at the models of mental health provision to see what resources can be invested into early intervention and prevention of mental health conditions. The CCG is committed to making this happen but is not yet in a position to confirm what funding will be made available to do it.

In children's services we know, through our extensive engagement with young people, that there needs to be more focus on early intervention and prevention. The children and young people's emotional and mental wellbeing programme is currently working with partners across Bromley to consider what model of care for young people will meet the needs that have been identified. More information on this programme of work is available on [the CCG's website](#).

Children and young people have told the CCG, through the extensive coproduction programme on



CYP emotional and mental wellbeing that they want more prevention and early intervention services. Further support in this area is being considered as part of the transformation of service provision for CYP. Currently Bromley Y is delivering a single point of access where psychological therapy interventions are delivered.

Need to be considering mental health first aid

We agree that mental health first aid can help with early intervention and prevention and this is featured in our Adult mental health strategy. We need to review the resources to enable us to do this alongside all the other priority areas.

For CYP we are extending mental health facilitators from two to six and further training will be rolled out for healthcare professionals in the New Year.

Out of borough access is important

Patients registered with a Bromley GP access services in Bromley. As part of our Patient Choice policy, patients also have the opportunity to choose the consultant and service that they wish to use for mental health care. More information is available on the [CCG website](#).

This will be addressed for CYP in our system transformation plans.

Think through the transition between CAMHS and transfer to adult services

We are undertaking an extensive co-production approach on the transformation of emotional and mental wellbeing services for CYP. Young people have told us how difficult it is when transitioning between children and adult services. We are working towards changing the transition age from 18 to 25.

What support is available to CYP including those who are severely mentally ill

A range of support services are available to children and we are working on a directory of services to explain the range of support that is available. Services for children who are severely mentally ill are commissioned from Oxleas NHS Foundation Trust.

Community based care is important to

We agree and this has been included as a focus within the Adult Mental Health Strategy and within our commissioning plans.



avoid admission to hospital and to support after discharge

In November 2018, we put in place positive behaviour support training for parents with children with autistic spectrum disorders/ learning disabilities / mental health.

### 3.2 Integrated Urgent Care

YOU SAID	WE DID	WE CONSIDERED
Provide the public with clear information about urgent care services including pharmacists and out of hours care. NHS 111 needs to triage patients to where they need to go.	<p>We are supporting the national winter campaigns to help people stay well this winter. This includes a specific focus on NHS 111, Flu Vaccinations, GP Access Hubs and a pharmacy focus in January-February 2019.</p> <p>The NHS 111 service has recently been reprocured for the whole of south east London and will provide a comprehensive service which includes triaging patients and providing them with the information they need.</p>	
<p>Improve discharge arrangements and communications between providers.</p> <p>All providers should have access to patient information so informed decisions can be made</p>	<p>We continue to encourage all healthcare professionals to use the Local Care Record, which allows appropriate patient information to be viewed by professionals caring for patients. This should allow ward staff to view district nursing and some aspects of the GP records for example.</p> <p>We continue to work with community and hospital providers to improve the discharge information and ensure a person's information follows them through the health and care system.</p>	<p>There are limitations to the IT systems for some of our provider services. We are working on this so that providers can share patient information in an easier way. We also have to be careful as to what information is shared to which part of the system, and</p>
	<p>We are holding workshops in the hospital to understand what has worked well and what hasn't with regards to communications from</p>	



hospital and community services.

Our Red Bag initiative in Bromley is supporting care homes, the London Ambulance Service and hospitals to improve the transition of information and communications between the hospital and care homes.

The Red Bag contains standardised paperwork, medication and personal belongings and it stays with the care home resident from the time they leave the home to go to hospital until the time they return to their care home.

consent is received from the patient as some do decline sharing of their record.

Prevention is important and proactive targeting of particular conditions

We agree and this is a priority in Bromley. We all have to take responsibility for keeping well. There is lots of information available nationally about keeping well, having a healthy diet, not smoking, limit alcohol intake and exercise.

We have put in place a number of new initiatives to proactively target patients with particular conditions so that they can be supported and avoid emergency hospital admissions. This includes our new Integrated Heart Failure service and the proactive care we are providing to frail and elderly patients through a multi-disciplinary team who put in place the care they need and support them to live more independently and avoid a health crisis.

Technology is a key enabler. How will NHS 111 across six boroughs hold together an integrated care system in Bromley?

The SEL Integrated Urgent Care System is underpinned by technology. The new integrated 111 service we have procured will go live in February 2019 and will enable NHS 111 staff to access a wide range of services across the six boroughs and have information on where service pressures are.





NHS 111 will provide easy access for all patients in SEL to urgent care services. NHS 111 has call routing in place so that wherever in SEL the call originated from, this information will be delivered to the appropriate provider.

The new SEL 111 service also includes the development of a Clinical Assessment Service (CAS) offering patients access to clinicians, both experienced generalists and specialists (such as Dental Nurses, Mental Health Nurses and Palliative Care Nurses). These clinicians will also be available to health professional colleagues who work with patients in the community, such as paramedics and nurses in nursing homes.

Out of hours GP and 111 services will be combined, and multidisciplinary clinicians added to the integrated working model. In addition, the new integrated NHS 111 service will book people into urgent face-to-face appointments where needed.

Need simpler ways to enable patients to be treated across borough boundaries

We are currently working across SEL to improve the transfer of patient care across borough boundaries. We have in place a borough based service map which lists the discharge pathways and referral processes for patients discharged in and out of borough.

Make the current system simpler for patients to navigate

Enabling and empowering patients to navigate the urgent care system and making it as simple as possible for patients and their families and or carers is essential for the system to work as it should. We are working with health care professionals in and out of hospital to improve their patient and family or carer communication.

We are encouraging all care homes in Bromley to adopt the Red Bag Scheme to ensure the patient's information and needs follow them



when admitted to hospital.

We are positive that the new 111 service across SEL will help patients access the right services at the right time dependent on their medical need.

Patient and staff feedback is a fundamental part of understanding the performance of integrated care services and whether it is meeting patients' needs. This feedback will be used to monitor the service once it is launched in early 2019.

### 3.3 Outpatient Transformation

YOU SAID	WE DID	WE CONSIDERED
<p>Feedback and patient experiences need to be monitored. Some bad experiences are down to miscommunication leading to delays in treatment.</p>	<p>Patient experience information is collected by all providers commissioned by the CCG. Outcomes of this experience (including formal complaints) are reviewed by the Clinical Quality Review Groups. This intelligence is fed into the development and commissioning of services.</p> <p>Improvements have been introduced in a range of services (through re-procurements) including direct access to diagnostics and self-referrals (MSK), improved access to services (Diabetes, Headache clinics, anti-coagulation, ophthalmology, bookable phlebotomy appointments and dermatology).</p>	
<p>Some patients might feel that using technology makes their experience of care too remote</p>	<p>We have engaged with many patients on improving access to services through use of digital technology. This includes booking appointments on line through to virtual appointments. There has been much enthusiasm but also an appreciation that using technology is not for every patient. It is only</p>	



one small part of how patients can access care.

We will always continue to commission services that are accessed face to face.

Use technology to improve care.

We have introduced a number of new ways that patients can use digital technology to improve their care. This includes online booking of GP appointments, virtual consultations in some practices and in some outpatient clinics, a patient MSK portal to follow treatment exercise plans.

Diagnostic outcomes are emailed to community providers, to reduce waiting times.

All referrals for secondary care are sent to an electronic single point of access for consultants to triage/ access all patients regardless of where they are seen and live in Bromley.

GPs have a direct interface via 'Consultant Connect' to seek specialist advice.

Local Care records enable primary care services and other providers to share appropriate information on the patients they are caring for through shared care records. This provides better continuity and reduces repetitions. This also ensures that the needs of the patient, identified through care planning, are recorded and can be accessed by anyone looking after them.

How will pharmacies link in with the transformation of outpatients?

When developing patient pathways of care, the involvement of pharmacy services are always considered. Although we are not directly commissioning additional services from pharmacists to support the transformation of outpatients, they already have an important role in managing the medication of patients following their outpatient appointment.



Do patients want seven day services?	Feedback from our patients is mixed although many have welcomed the weekend access to primary care services. Evidence shows that there is a lower uptake of the Sunday appointments at the primary care access hubs. More promotion of these services via practices is underway.
Need to reduce do not attends and wasted appointments	Do not attends is a major problem for the NHS. It wastes so many resources. The CCG is planning a campaign to highlight the cost to the NHS of patients who do not turn up for an appointment. We are also trying to solve this through the use of text message reminders which are sent by many health providers.
Need to measure compliance and outcomes	This is a priority and undertaken through our Quality Framework and contract performance monitoring with all commissioned service providers.
People with learning disabilities may have difficulties using technology to communicate	There is an information standard which all providers need to comply with. This includes meeting the needs of people with learning disabilities. We appreciate that different technology to interact with services is not suitable for all. Face to face appointments are available in all our services.
Patients should have a choice of how to have their appointment	We expect this to be the case once we have rolled out further the opportunity for virtual appointments.  Patients can also choose which consultant and provider they want to be seen by and have their treatment. Information on patient choice is available in the CCG policy on the website. Patients who do not wish to use the local provider may experience longer waiting times in some cases.



### 3.4 Care Homes

YOU SAID	WE DID	WE CONSIDERED
<p>Ensure patients in care homes can get vaccinations</p>	<p>Flu vaccinations are offered to all residents and staff in care homes across south east London.</p>	
<p>Regular reviews of patients so that conditions are treated in a timely way</p>	<p>A Joint Care Homes Programme is in place between the London Borough of Bromley and NHS Bromley CCG to review the health and care 'offer' to residents of care homes to improve access and outcomes to proactive and coordinated care. Part of this work includes the development of a dedicated Care Homes Support Team which will include primary care medical services, nursing, therapies and other community services. Regular reviews of patients' care and medicines will form part of the work performed by the integrated Care Homes Support Team.</p>	
<p>What plans are there to improve rehabilitation units managed by the NHS?</p>	<p>In 2017, the CCG reprocured rehabilitation services to ensure that these would meet the needs of patients. Feedback from national benchmarking indicators show that Bromley rehabilitation services are within the top cohort of units in the country. Patients can always feedback their experiences of these services through the local providers.</p>	
<p>How are you identifying the needs of patients in care homes?</p>	<p>Collectively, the London Borough of Bromley together with commissioner and provider health colleagues, hold regular forums with Care Home providers to monitor trends in needs of residents. Individually, patients will be registered with a Bromley GP to give them access to a range of services including the integrated proactive care pathway that reviews the most complex cases. This will be further enhanced with the development of the dedicated Care Homes Support Team.</p>	



Patients in care homes need easy access to GPs

Residents of Care Homes will be registered with a Bromley GP. A new procurement is underway to implement a dedicated General Practice for residents of Care Homes that will include enhanced services and be at the heart of the new Care Homes Support Team.

More beds are required and costs are escalating

Together with the London Borough of Bromley, we are reviewing placements and spend across Continuing Healthcare and Social Care with an ambition to better manage the market. This review is currently being finalised and looking at a range of options.

With Care Homes being a private sector industry, providers will continue to invest and market their offer to self-funders.

### 3.5 End of Life Care

#### YOU SAID

#### WE DID

#### WE CONSIDERED

Patient involvement in end of life care planning is important

We are encouraging the usage in GP practices, the hospital and London Ambulance Service of Coordinate My Care (CMC) which is an NHS clinical service that supports patients to be involved in the planning of their care. This care plan can be shared electronically with all legitimate providers of urgent care, especially in an emergency situation.

More training for hospital staff around end of life care

The Princess Royal University Hospital's Palliative Care Team has expanded which will enable them to focus more time on educational programmes in the hospital.

The CCG also commissions and end of life care in reach nurse from St Christopher's to work with the staff to identify patients with palliative care needs. This mix of community



and hospital staff collaboration helps with having difficult end of life care conversations with patients and families.

Social care packages need to be in place before discharge from hospital

The Transfer of Care Bureau at the PRUH have a dedicated and mixed skilled team of social care workers, discharge coordinators, social care workers, therapists, physios and more. Their roles is to ensure that packages of care are in place for a person once they are medically fit to leave the hospital.

We also have a Discharge to Assess team that also works with patients to have the social care assessment that day or the next in their own home so the person does not have to stay in hospital just because they are waiting for an assessment.

More assessments need to be in the care home so there are less visits to hospital.

Over winter we are commissioning extra nursing support to extra care housing to ensure residents have better access to healthcare and the staff are supported so they don't have to ring the emergency services when not appropriate. This will be further supported by the new Care Home Support Team.

Improve communication and co-ordination

The main benefit of a co-ordinate my care (CMC) plan is that it can be shared electronically with all legitimate providers of urgent care, especially in an emergency situation.

All the organisations involved have signed formal agreements that govern how care plan information is used and protected, and they undertake to provide CMC with updated lists of staff that are trained and authorised to access the system.

At the heart of CMC is an urgent care plan that is developed with a patient by their nurse or doctor. The care plan contains information about the patient and their diagnosis, key contact details of their regular carers and



clinicians, and their wishes and preferences across a range of possible circumstances.

Although we haven't mandated the usage in Bromley, we are encouraging GP practices and the hospital to utilise this electronic care planning service

### 3.6 Primary care services

Each general practice is required to have a patient participation group (PPG) which enables the patient voice to influence practice based improvements. The CCG has worked with a number of PPGs as well as our Patient Advisory Group (PAG) members to inform improvements in primary care over the last year.

#### **Primary care access hubs**

The CCG engaged with patients to inform development of the primary care access hubs. This included 1:1 interviews with people using the service and a well-attended workshop earlier this year. We have also undertaken a communications campaign in the spring of this year at all of the main train stations in the borough, on Beckenham High Street and in the Glades shopping centre, Bromley, to raise awareness and speak with patients about the access hub service. The CCG requires the provider of the access hubs to also gather patient feedback from hub users on a monthly basis, which is then reviewed and acted upon.

#### **YOU SAID**

#### **WE DID**

**Can text message reminders be sent for weekend appointments to prompt patients to attend?**

This has now been introduced. Patients receive a reminder via text and are also able to cancel appointments in the same way.

**Weekend hub appointments at St Mary Cray need to be reinstated**

These were stopped due to premises arrangements. The CCG has reinstated them due to patient feedback.

#### **Patients who Did Not Attend (DNAs)**

Following a letter from a Bromley patient who had worked out the amount of time lost to his GP practice due to patients not attending and not cancelling their appointments, the CCG embarked upon an initiative to quantify the rates of DNAs by practice, speak with all GP practices about their DNA rates, gather best practice where practices have successfully kept





DNA rates down, and encourage those with high DNAs to proactively tackle these. As a result, we have developed a best practice guide for GP practices that has been shared, and we have worked with the practice with the highest DNA rate (at 15%) to address DNAs and increase the number of available appointments for patients to re-book. The DNA rate for Bromley has reduced over recent years, from 7% in 2015 to 5.5% in 2017, partly due to the CCG commissioning text message reminders for our GP practices to use to increase attendance or cancellation rates.

### **Delegated commissioning of primary care**

In April 2017, the CCG took over full responsibility for commissioning GP services. We have used patient feedback in making decisions relating to contracts with practices. For example, when GPs have retired from the practice, when premises have moved or when there have been performance concerns, we have met with patients to discuss a future way forward and find out what their experiences have been and what they value the most about a good GP service. We also use patient complaints to better understand and address poor performance in GP practices. We will continue to hear the patient voice and actively use feedback in future decisions about GP practice contracts and services.

### **GP Online Consultations**

As part of the GP Forward View, practices have been offered the opportunity to pilot online consultations (also known as e-consultations) for their patient population. The software used to provide this enables patients to seek self-help, find their local pharmacy or consult with their GP electronically, usually using the GP Practice website as a first point of contact. Registered patients can submit their non-urgent problems and usually get a response within 48 hours. Initial figures show around 30% of patients go on to require a face to face appointment after the online consultation, with the other 70% of online consultations being resolved in other ways such as through self-help, telephone call or a prescription sent to a pharmacy of their choice.

We are working with nine early adopter practices to pilot this way of working and a clear evaluation framework has been developed to identify the benefits of these systems but also any barriers or risks before rolling out to all practices across the borough.

### **Practice Websites**

To support the implementation of GP Online Consultations an internal audit of practice websites was undertaken. This identified inconsistency in content and quality and lack of relevant information for the registered patients. Feedback from patient participation groups and a report by Healthwatch Bromley also highlighted these issues. A further scoping exercise showed that only 62% of existing websites had basic compatibility with smartphones and 13% had no compatibility at all.



The CCG has worked with practices and patient representatives alongside a website provider to develop a consistent web template that can be used by all practices. It includes accurate information about local services and out of hours information.

## 4. Conclusion

Thanks to members of our PAG, PPGs and other public and patient representatives who have contributed their views over the last year. These views have informed our priorities and commissioning intentions.

We welcome anyone who uses health services in Bromley to join our PAG and get more involved in all aspects of our commissioning work. Details on how to join are on the [Bromley CCG website](#).

