

Somerset Clinical Commissioning Group

Clinical Leadership to Improve Health

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Editorial - Another Challenging Year Ahead - a Time for Change

I make no apology for repeating the theme of system change from last year but it seems appropriate considering what is happening in health and social care at the present time. Both systems are under unprecedented pressure and the recent call by the CCG for an escalation of strategic coordination arrangements across the Somerset health community is a reflection of these difficult and unusual times.

In both health and social care, many individual workers will be feeling the pressure with stresses in their professional day to day work that they have never experienced before. Providing additional funding to support organisations seems to be essential now but throwing money at the problem is not, and never has been, an effective solution to these situations. Just as history has shown over the years, when under extreme stress, not only is the resilience of individuals tested, but it also can stimulate the creativity of mankind to come up with innovation and solutions that can alter the future of society. Rather than continue with the same ways of delivering care that were set up at the creation of the NHS, the time is right to change organisational boundaries and remove barriers to effective care delivery, in particular, for the benefit of the most frail and needy in our society.

With this end in mind, the CCG is actively exploring how to commission services differently for person-centred care for patients with long term conditions. The three 'Test & Learn' pilots that have been set up will be real-time projects to explore new models of care provision to those in most need in Somerset. These pilots are currently under development and aim to commence from 1st April this year and involve the South Somerset, Taunton and Mendip areas. They are not there to dismantle but to challenge existing service models and to explore new and better ways of working between the key providers of health and social care.

Much has been written and said about the causes of the current pressure in our health and social care systems and of course there is no one single explanation for this. Inevitably it has been a combination of factors coming together at the most difficult season of the year. Of concern is how much worse it could have been with a flu epidemic (and we are not clear of this possibility yet) or a colder winter. But what is becoming increasingly apparent is the issue of the manpower gap between the personnel working in the system now and what is needed for future safe and effective care. This applies just as much to nurses as to doctors but in primary care, the dwindling numbers of doctors coming into general practice has been apparent for a few years and there should be more than a few red faces in Health Education England for allowing the current manpower crisis (as many are describing the situation) to have developed. Improving this situation will be essential whatever organisational changes are to take place in the future, but the time lag to correct the position is a major cause for concern and will need some major creative innovation in workforce planning and delivery.

Dr Geoff Sharp - Editor

Better Outcomes through Integrated Care

Somerset CCG is exploring how a fundamental change in the way we commission could help us improve services for people with long term conditions by focusing on outcomes based commissioning within a capitation budget. The CCG is passionate about improving patient outcomes and wants to develop better co-ordination of services to deliver better quality care.

Outcomes based commissioning is becoming well established within the NHS and the approach is advocated in NHS England's recent Five Year Forward View. There needs to be a move from activity 'bean counts' to more meaningful outcomes that directly measure patient experience and outcomes, and contracts that reward providers for their improvement.

We are working with [COBIC](#) who have supported a number of CCGs to implement outcomes based contracts for different populations including, for example, older people in Oxfordshire, Croydon, Cambridgeshire and Peterborough, and urgent care in Hertfordshire.

Work in Somerset started in November 2014 and COBIC representatives have been talking to key people in Somerset involved in the development and implementation of the CCG's strategy for person-centred care. A final report with recommendations will be delivered to the CCG early in 2015.

For more information contact [Ann Anderson](#)

Somerset CCG ACE Lung Cancer Project

NHS England, Cancer Research UK (CRUK) and Macmillan Cancer Support have collaborated to lead a national taskforce aimed at developing new ways to diagnose cancer faster and improve outcomes for patients. The ACE Programme (Accelerate, Co-ordinate, Evaluate) is a specialised taskforce with 60 projects in several organisations across England. Somerset is leading one of the projects aimed at redesigning the lung cancer pathway and improving awareness and diagnostic times. Successful initiatives tested during spring 2015 will be shared nationally in a forthcoming five year strategy that aims to save an additional 10,000 more lives from cancer each year.

Around 400 people are diagnosed with lung cancer each year in Somerset. The Lung Cancer project involved clinicians and patients in auditing the diagnostic pathway for lung cancer to identify opportunities to change. The pathway will be redesigned using evidence from the review and will also consider direct referral to specialist testing. Findings will be shared locally and nationally. To-date over 70 Somerset GPs have taken part and 16 patients.

For more information visit the [CCG website](#) or the [Cancer Change Movement website](#) or email:

Clinical Lead - [Dr Amelia Randle](#), Project Manager - [Rachael Rowe](#)

Coeliac Disease Consultation and Public Event

Somerset Clinical Commissioning Group carried out a consultation during late 2013 to seek the views of patients with coeliac disease on service improvements and new services. The consultation was distributed to 2,441 people and 359 people completed and returned it.

There were three proposed services which the respondents were asked to put in order of preference. An annual assessment with a specialist coeliac community dietician was selected as their first option, Somerset based group education sessions twice a year was chosen as their second option and to continue with the current model of care was chosen as their third option. When asked who should carry out the annual review; first was a specialist coeliac dietitian based in the community, second was a consultant based in the hospital, with a GP coming third.

341 people said they experienced other symptoms before being diagnosed of which 77 people were initially diagnosed with IBS. It took between one and six months for 120 people to be diagnosed, with 56 people saying it took more than 12 years. Upon diagnosis 272 people were happy with the information they received. 105 people said other family members have coeliac disease and 311 people confirmed they were members of Coeliac UK.

There were some questions were also asked about the availability of gluten-free food and prescription products. Everyone was asked to list the top six food products they use, which resulted in a comprehensive list of over 1500 items. The top five products were bread, pasta, flour, breakfast cereals, and savoury biscuits. From the top 15 items a shopping list was drawn up comparing the price of gluten-free foods from three major supermarkets against the cost of the gluten equivalent. The highest bill for gluten-free list was £23.39 compared with the gluten equivalent of £12.66.

The recommendations from the report included improved training for healthcare professionals, an annual assessment with community dieticians and more information for people newly diagnosed.

Somerset Clinical Commissioning Group is planning a Coeliac Event on Tuesday 24 February 2015 at Woodlands Castle, Taunton, TA3 5LU, from 4.30 to 7.30 pm. There will be a range of speakers which will include consultants from Musgrove Park and Yeovil District hospitals and local dieticians who will provide the latest information on coeliac disease. There will also be cookery demonstrations and a range of stalls from gluten free suppliers.

If you would like to attend this conference or receive a copy of the full report please email [Christine Lincoln](mailto:Christine.Lincoln@somersetccg.nhs.uk) or phone her on 01935 385020.

Somerset Clinician Support Service

Somerset Clinician Support Service (SCSS) is alive and well! Created by a group of GPs supported by the former Somerset Primary Care Trust in 2008, it is now operated by the LMC and supports GPs, dentists and practice managers.

The service's creators believe that struggling is normal for GPs and if resources, information and support are provided in an appropriate and confidential manner, difficult scenarios can be avoided by early action.

GPs can have a fully confidential 1:1 with a SCSS 'Advocate' (GP pastoral supporter) of their choice: Dr Harry Yoxall, Dr Roger Crabtree and Dr Ulrike Naumann at the LMC; Dr Andrew Tresidder and Dr Michael Staunton at the CCG.

In addition to this 1:1 provision, SCSS also provides the Somerset GP Safe House website where five virtual Rooms contain a wealth of information:

- **Personal Health** – many support organisations, plus how to contact Staff Occupational Health locally
- **Burnout** – How do you score? What can you do?
- **Professional Relationships** – How healthy is your partnership? What can you do?
- **Meeting non-clinical GP challenges** – Use of time, forms of words, solutions
- **Career Advice** – including access to a Career Coach if you wish

Content development is currently around actions GPs can safely take if being overwhelmed by work.

If you wish to contact an advocate for personal support their contact details are at www.somersetshouse.co.uk/ or via the LMC on 01823 331428.

Confidentiality is assured and a lost personal password can be retrieved from [Jill Hellens](#) at the LMC.

Infection Prevention and Control

Somerset has championed a cross county approach to infection prevention and control and all providers work together to develop strategies aimed at reducing healthcare associated infections.

The decline in numbers of MRSA blood stream infections (BSI) and Clostridium difficile infection occurring within local hospitals has been a positive development following a targeted period of prevention strategies brought in by infection control teams. These strategies have included:

- Targeted hand hygiene training and audit
- Alcohol gel placement at the point of care
- Aseptic Non Touch Technique for indwelling devices
- Root cause analysis (RCA) investigation when cases occur with shared learning
- Making infection control everyone's responsibility
- Including cases that occur within primary care in all RCA investigations
- Good antibiotic stewardship and feedback on cases where prescribing was sub optimal

Somerset now has one of the lowest rates in the region for both MRSA BSI and Clostridium difficile infections.

The influenza season is now upon us and healthcare providers are seeing an increase in acute admissions related to respiratory infections and complications of influenza. Healthcare trusts were asked to aim for a 75% compliance rate for frontline healthcare workers to have received their flu immunisation in order to ensure business continuity and prevent cross transmission of cases. Somerset hospitals trained small teams of nurses to give immunisations to staff across the inpatient areas. Subsequently all providers have reported an increase in the numbers of healthcare workers receiving the vaccination with rates expected to increase from 38% achieved for last winter to 50-60% this year.

For more information contact [Wendy Grey](#), Quality Improvement Manager/Senior Nurse Infection Control.

Update on New Information and Advice Website

A new information and advice website for Somerset, outlined in the September

issue of this newsletter, is on track to go live in Spring 2015.

The new website will provide clear and useful information on local services, products and events. People will be able to search for services based on their needs, choose the care they want and purchase it directly from providers. They will also be able to complete a short self-assessment to see what tools and services are available in their area so they can support themselves and to find out if they are eligible for funding from the Council.

The website will initially focus on Adults Services but it is likely that Children's Services and other services will be included on the website subsequently. An experienced website development company has been appointed to build the website, called System Associates. Work is underway with them alongside partners, staff and customers to develop the content and design of the new website.

After collecting suggestions from customers, partners and Somerset County Council staff and after much deliberation we have decided the new website will be called '**Somerset Choices**'. We feel this name fits well and explains what it will offer people – more choice!

To find out more about 'Somerset Choices' and its development, go to: change.somerset.gov.uk/infoandadvicewebsite

Learning Disabilities Programme Update

In February 2014, Somerset County Council (SCC) and Somerset Clinical Commissioning Group, considered the options for the future management and ownership of the services that are currently run by the Council's Learning Disabilities Provider Service (LDPS). The decision reached was to create a new independent Social Enterprise Partnership, and transfer all or some of the services to it.

Progress so far

Last year we worked with customers and parents/carers to agree the outcomes and quality standards for the new service specifications. We concentrated on getting a more detailed understanding of what the LDPS provided and what this costs. This included PriceWaterhouseCoopers (PwC) working on a business model based on current service information and benchmarking data.

Shadow Board

We appointed three non-executive members in a voluntary capacity to a Shadow Board which will be chaired by David Dick (Director of LDPS). They now meet on a monthly basis and are responsible for guiding the transition of the LDPS into the new social enterprise partnership. The Shadow Board is helped by Somerset Advocacy and Compass Disability Services.

£1.5m investment for Learning Disabilities

The work on the programme has been recognised at a national level by a winning bid from the Government's Transformation Challenge Award for £1.5 million. The money will be used to cover costs of the transfer to the new social enterprise partnership.

Current work

For the next stage we will be working towards the procurement of a partner with the aim of establishing the social enterprise in March 2016. Parents/carers,

customers and staff will again work closely to co-produce the selection and evaluation criteria that will form part of the procurement strategy and ultimately select a partner. Somerset Advocacy's LD Programme, Speaking Up Groups, will continue to enable customers to attend and contribute to the programme's working groups.

Price Waterhouse Cooper has been commissioned to prepare a model to support the SCC and CCG in the assessment of value for money and viability of the Social Enterprise Partnership. They have developed a tool to enable testing of assumptions provided and agreed by the Council.

For further information or if you would like to be involved in the LD Programme further please email [Andrew Hedges](#) (Change Officer – Business Change), phone him on 01823 359136

Domiciliary Phlebotomy Services

It has recently been announced that following a competitive procurement process Somerset Partnership NHS Foundation Trust has been awarded the contract to provide a Domiciliary Phlebotomy Service across Somerset. This service will provide a blood sampling service for medical testing to patients who are housebound. The three year contract is due to start in March 2015.

For further details contact [Claire Higdon](#)

Life After Stroke Awards

Each year The Stroke Association celebrates Life after Stroke with their National Awards. The awards recognise the courage of stroke survivors and also the dedication shown by people working with stroke patients.

Thousands of people provide exceptional service in the field of stroke care and prevention. When a stroke strikes the survivor and their families put their faith in medical professionals, physiotherapists, occupational therapists and many others. A stroke can be devastating; it happens in an instant, yet the effects can last a lifetime.

Nominations are open now for the charity's Life after Stroke awards, including the Professional Excellence Award and eight other categories for stroke survivors, carers and fundraisers.

The closing date for nominations is 28 February 2015. To find out how to make a nomination or for more information, visit www.stroke.org.uk/lasa

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Contact Us

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