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PSNC Briefing 014/14: Update on the Health and Care Landscape

This briefing is part of a series issued regularly by PSNC to inform pharmacy contractors and LPCs of developments in the wider health and care landscape beyond community pharmacy. It builds on the Health & Care Review articles which are published on the PSNC website every week.

Secretary of State launches new patient safety initiative

A new ambition to reduce avoidable harm in the NHS by half over the next three years, cut costs and save up to 6,000 lives has been outlined by Jeremy Hunt. In a speech at Virginia Mason Hospital in Seattle, the Secretary of State announced details of how NHS organisations can work together to improve patient safety and save money.

Each NHS organisation will be invited to 'Sign up to Safety' and set out publicly their ambitious plans for reducing avoidable harm, such as medication errors, blood clots and bed sores over the next three years. The NHS Litigation Authority, which indemnifies trusts against law suits, has agreed to review the plans and, when approved, reduce the premiums paid by all hospitals successfully implementing them.

Other plans to improve patient safety as part of the package include:

- Consulting on the threshold for the duty of candour to include significant harm, as part of the Care Quality Commission's (CQC) registration requirements;
- Recruiting 5,000 safety champions as local change agents, identifying where there is unsafe care and developing solutions to fix it;
- Creating a new Safety Action for England (SAFE) team that will consist of senior clinicians, managers and patients with a proven track record in tackling unsafe care;
- Launching a dedicated section of the NHS Choices website in June called 'How Safe is my Hospital'. The online tool will give everyone the ability to compare hospitals in England across a range of patient safety indicators; and
- Developing new reliable measures of avoidable hospital death rates and severe harm.

CMO publishes annual report on state of the public's health

Being overweight is becoming normal as the majority of our adult population is overweight or obese, Chief Medical Officer Professor Dame Sally Davies said in her [latest annual report on the state of the public's health](#). Her concern is based on data showing that – taking into account average height and weight – the average man and woman in England is overweight. The report highlights studies that show some people who are overweight believe they are 'about the right weight'.

The Chief Medical Officer's Surveillance report is the first of two volumes of her annual report and is a compendium of data covering a number of public health areas. Key areas of concern for the CMO featuring in this year's report are:

- Obesity – According to estimates, almost two thirds of adults and one third of children under 18 are overweight or obese. She highlights that, in one study, 77% of parents of overweight children did not recognise that their child was overweight.

- Deafness and blindness and dementia – The GP patient survey shows a greater prevalence of dementia, including Alzheimer’s disease, in those with severe vision loss or severe hearing impairment. The CMO highlights the lack of robust data which hampers our understanding of this possible association. The CMO says that investigating this potential link could tell us more about the causes of dementia.
- Alcohol – In popular culture, drinking alcohol to excess is sometimes portrayed as normal behaviour. An analysis of six weeks of soap operas in the UK in 2010 found 162 instances of characters drinking to excess, with negative consequences rarely shown. In fact, 75% of the population does not consume excessive quantities of alcohol, and the proportion of the population which abstains from alcohol is increasing.
- Walking and cycling – Safety for pedestrians and cyclists must be improved if we are to encourage people to walk and cycle more and reap the associated health benefits. The risk of serious injury for each kilometre travelled on a bike is 21 times higher than by car. The CMO says that the relative risks of walking and cycling are unacceptably high and must be reduced and that an integrated approach to improving safety for all road users must be taken.

Engage primary care in Better Care Fund planning

Norman Lamb, Minister for Care and Support at the Department of Health has [written a joint letter](#) with Brandon Lewis, minister at the Department for Communities and Local Government, to local authority leaders and chairs of Health and Wellbeing Boards highlighting the importance of them involving local primary care leaders in discussions on the use of the Better Care Fund at a local level. LPCs wishing to get involved in local discussions may want to highlight the letter to colleagues in local government and Area Teams.

£10 a month NHS membership fee proposed

In a report published by the Reform think tank this week, Lord Warner, former Labour health minister has said a £10 per month NHS membership charge and other contributions by patients are needed if the NHS is to survive the next five years of austerity.

Right to ‘ask’ for personal health budgets begins

From 1st April people with complex health care needs have the ‘right to ask’ for [a personal health budget](#). The scheme is being rolled out across the country after the budgets were trialled in [a national pilot programme](#) between 2009 and 2012 at sites all over the country.

A personal health budget is an amount of NHS money available to some people with long term conditions to meet their healthcare and wellbeing needs. People design and agree a plan with their healthcare team that shows how they will use the budget to meet their goals, which could include therapies, personal care and equipment. The budgets can be managed in the form of a notional budget, direct payments or a third party arrangement.

The aim of personal health budgets is to give people more independence over how their healthcare money is spent, be that on carers to provide intensive help at home, equipment to improve quality of life or therapies like counselling. The budgets cannot be spent on accessing core services already provided to patients by GPs and community pharmacies, such as dispensing prescriptions.

‘Putting Patients First’ – NHS England’s Business Plan 2014/15 – 2016/17

NHS England has published [a refreshed business plan](#), describing its role in delivering high quality care for all, now and for future generations. Putting Patients First: the NHS England business plan for 2014/15 – 2016/17 describes everything NHS England does as an organisation, both as a direct commissioner and as a leader, partner and enabler of the NHS commissioning system. It describes a strong focus on maintaining and improving present NHS performance and looking to the future to secure a sustainable NHS.

This business plan builds on [Everyone Counts: Planning for Patients 2014/15 to 2018/19](#), NHS England’s earlier planning guidance for the system, which was published in December 2013. Within the business plan long-term ambitions are described, medium-term objectives and the specific deliverables NHS England expects to achieve over the next year. The business plan outlines how NHS England will work as an organisation and how it will work

with others; setting out the key intentions it will carry out as part of its role to improve outcomes for patients and how it will measure the impact of this. These are set out in 'business areas' – those pieces of work that must be focused on to have maximum benefit for patients, fulfil NHS England's statutory obligations and help the NHS change for the future. [PSNC Briefing 011/14](#) summarises the elements of the plan which are of most relevance to community pharmacy.

PHE launches new sexual and reproductive health tool

Public Health England (PHE) launched a new online data resource, the [Sexual and Reproductive Health Profiles](#), on 1st April 2014. The tool is designed to support local authorities, public health leads and other parties with an interest in this area to monitor the sexual and reproductive health (SRH) of their population and the contribution of local public health related systems.

The profiles provide data as interactive maps, charts and tables, across a range of topics, such as teenage pregnancy, abortion, contraception, HIV, sexually transmitted infections and sexual offences. Wider influences on SRH are also included, such as alcohol use, education and deprivation levels.

Accompanying the profiles tool, PHE also published:

- [Under 18 conception rate forecast](#): updated PHE spreadsheet updated with local authority level annual data on under 18 conception rates: observed (1998-2010) and forecasted (to 2020)
- [A guide to national and local SRH data](#): providing a summary of key data sources from PHE and other organisations, with details on how these can be accessed and used

New NHS chief vows to listen to patients

The NHS needs to tap into the energy of patients, carers and staff to "catalyse change", Simon Stevens said on 1st April. Making his [first speech](#) in his new role as NHS England's chief executive, Mr Stevens added: "At a time when resources are tight, we're going to have to find new ways of tapping into three incredible sources of 'renewable energy'."

Speaking at the International Centre For Life in Newcastle to an audience of around 300 NHS staff, health professionals and researchers, local public service leaders and educationalists, Mr Stevens explained these sources included:

- "Boosting the critical role that patients play in their own health and care;
- "Supporting the amazing commitment of carers and volunteers and communities to sustain their health and social care services; and
- "Unleashing the passion and drive of the million plus frontline NHS staff who are devoting their professional lives to caring."

Mr Stevens speech marked the end of his first day in his new job on a visit to the north east where he started his NHS career more than 26 years ago.

Plain packaging for tobacco back on the agenda

The Government has announced that it is minded to introduce regulations to provide for standardised packaging of tobacco products, subject to a short consultation. The announcement follows Sir Cyril Chantler presenting the report of his independent review into whether or not the introduction of standardised packaging is likely to have an effect on public health, particularly for children, to the Government.

The report makes a compelling case that if standardised packaging were introduced it would be very likely to have a positive impact on public health and that would include health benefits for children. The report states that branded packaging plays an important role in encouraging young people to smoke and that it is highly likely that standardised packaging would serve to reduce the rate of children taking up smoking. It also concludes that standardised packaging is likely to contribute to a modest but important reduction in smoking and therefore have a positive impact on public health.

Department of Health publishes plans on ‘transforming primary care’

In mid-April the Department of Health and NHS England published a policy document [Transforming Primary Care](#) which sets out plans for more proactive, personalised and joined up primary care. This includes the *Proactive Care Programme*, which has been championed by Jeremy Hunt, Secretary of State for Health, in order to provide better care to the 800,000 patients with the most complex health and care needs.

The programme is being implemented through changes to the GP contract which will result in patients with the most complex health and care needs, particularly those over 75 years, having:

- a personal care and support plan;
- a named accountable GP;
- a professional to coordinate their care; and
- access to same-day telephone consultations with their GP practice.

The policy document builds on the role of primary care in keeping patients well and independent. It explains how professionals across the healthcare system, including community pharmacists, can work together to transform care to become more proactive and tailored to patients’ individual need.

Seven million patients to benefit from Challenge Fund

Alongside the publication of *Transforming Primary Care*, the Department jointly announced with NHS England the twenty areas that were successful in their bids to the £50m Prime Minister’s Challenge Fund and have been awarded investment to run pilots for a year.

In October 2013, the Prime Minister announced the Challenge Fund to improve access to general practice and test innovative ways of delivering GP services. NHS England was asked to lead on selecting and managing the pilot schemes. In December 2013, NHS England invited GP practices to submit their ‘expressions of interest’ to be one of the pilots, before selecting the final list of schemes; more than 250 expressions of interest were submitted to NHS England.

A wide variety of ideas are to be trialed including 8am-8pm working, better use of telecare and health apps, access to appointments through e-mail and video consultations and greater flexibility with face-to-face GP access. NHS England will now oversee the pilots that will be part of a 12-month national development and evaluation programme. It is also looking to establish a number of “associate networks” to the Challenge Fund to link a number of the other innovative bids within their region and nationally to share learning.

The 20 successful pilot schemes are:

London

- Better Access, Better Care, Better Standards (North, Central and East London) – £5,608,550
- Transforming Access to General Practice (North West London) – £5,000,000
- Extending Access to Primary Care (Southwark) – £975,278

North

- Moving Primary Care to a Population Wellbeing Approach (West Wakefield) – £1,436,663
- Opening Doors (Morecambe)- £1,137,132
- Easy GP Project (Bury) – £2,779,000
- Together as One Community (Hambleton, Richmondshire, Whitby) – £2,481,000
- Primary Care Home (Warrington)’ – £3,291,157
- Better Together (Workington) – £511,292
- Caring for Darlington Beyond Tomorrow – £448,400

South

- Extended Primary Integrated Care (Brighton and Hove) – £1,871,149
- Integrated South Kent Coast (Folkestone and Dover) – £1,894,267
- One Care Consortium (Bristol) – £2,900,000

- Steps to the Future (Slough) – £2,950,000
- Shaping Services to Meet Community Needs (Devon, Cornwall and Isles of Scilly) – £3,575,000

Midlands and East

- Improving Access, Supporting Primary Care Integration and Whole System Change (Herefordshire) – £2,663,206
- Transforming General Practice (Derbyshire and Nottinghamshire) – £5,252,463
- Transformational Innovations for Primary Care (Watford) – £794,620
- Health United (Birmingham) – £997,216

Multisite

- Transforming the Access Experience At Scale Across England (Care UK) – £960,000

PSNC alerted the LPCs that cover the pilot sites to this announcement, as community pharmacy may be able to assist the sites in improving access to GP practice services, through commissioned services such as Minor Ailments Schemes and emergency supplies at NHS expense.

Diabetes UK warns NHS Health Check roll-out is ineffective

Diabetes UK has found that only 6.4% of people aged 40 to 74 attended an NHS Health Check between April and December 2013. During this first period of commissioning of the service by local authorities, 11.25% of people in the age cohort should have received an NHS Health Check. The report, [NHS Health Checks in Local Authorities](#) shows that there is wide geographical variation in the provision of the service, with only 8 local authorities managing to provide checks to 11.25% or more of the cohort population.

NHS England considering pooled primary care budgets

The Health Service Journal has reported that NHS England has begun detailed work on how to pool its primary care budgets with other commissioners, such as CCGs and local authorities. Dr David Geddes, Head of Primary Care Commissioning told HSJ that the operations directorate had started to explore how far the organisation can develop co-commissioning and pooling of budgets.

Specialised commissioning overspend

A Health Service Journal investigation has found that at the end of December NHS England was forecasting a spend of £13.2bn on specialised services, which represented a £450m overspend on its budget. New NHS England CEO, Simon Stevens has already identified strengthening the commissioning of specialised services as a priority for the organisation.

GP practices to pilot care.data

NHS England's director of patients and information, Tim Kelsey, has announced in a [letter](#) sent to CCGs and ATs that there will be a phased roll out of the GP data extraction process for the care.data programme, beginning in the autumn. This will involve a cohort of between 100 and 500 GP practices to trial, test, evaluate and refine the collection process ahead of a national roll out.

The care.data programme, which has attracted significant controversy, aims to ensure more joined-up data is made available to clinicians, commissioners, researchers, charities and patients to improve the quality, safety and effectiveness of local care services. This involves extracting data from GP records into a central system managed by [the HSCIC](#).

If you have any queries on this PSNC Briefing or you require more information, please contact [Alastair Buxton, Head of NHS Services](#).