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PSNC Briefing 032/15: 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.

Manchester devolution plan includes seven-day GP service

Seven-day GP services will be rolled out across the whole of Greater Manchester by the end of 2015 after a pilot scheme was found to reduce A&E attendances by up to 8%.

Four demonstrator sites were involved in the pilot in central Manchester, Bury and Heywood and Middleton last year and a recently published evaluation report by the National Institute for Health Research has assessed the impact of the project. Health chiefs have deemed the results to be encouraging enough to roll out seven day access to GP appointments and other primary care services across the city by the end of the year.

The results of the evaluation were mixed, but the report found there was a statistically significant reduction in A&E activity of 3% within the project areas, including an 8% drop in minor attendances. About 65% of the extra GP appointments were taken up.

Dr Ivan Benett, clinical director for Central Manchester Clinical Commissioning Group (CCG), said the overall results had matched expectations.

He added: "Getting an 8% reduction in minor A&E activity is exceptionally good. Any future improvements will be a bit of a guesstimate, but I'd be disappointed going forward if we can't reduce overall activity by between 5-10%.

"It's not paying for itself at the moment, but it's not about savings because this is the right thing to do anyway, with the possibility of it being self-funded."

Care.data to restart this month

The [Care.data](#) project, which aims to link patients' GP and hospital records, is due to restart later this month.

The NHS England led project, initially planned to begin extracting data in autumn last year, but the programme has been hounded by concerns about patient confidentiality, causing delays in the start date.

The project is now being piloted in four areas; Blackburn with Darwen, Somerset, West Hampshire and Leeds. Blackburn with Darwen CCG has confirmed that it will starting sending letters out to patients at the end of June, with data extraction likely to take place between September and November. An update on Blackburn with Darwen's website also said Somerset and West Hampshire CCGs are expected to continue their work in September, with the Leeds CCGs - Leeds North, Leeds South and East, and Leeds West - also working to a similar timescale.

Hunt announces new ratings to make CCGs more accountable

Health Secretary Jeremy Hunt has announced that the performance of clinical commissioning groups will be measured by a new set of five metrics.

The health secretary said improving efficiency and productivity “doesn’t just stop at the front door of a hospital, it’s also about what happens outside a hospital”.

He has asked King’s Fund chief executive Chris Ham to help him and NHS England to develop transparent metrics to hold CCGs accountable for the way they deliver healthcare.

Mr Hunt stressed that no final proposals have been made but current plans are to focus on five patient groups:

- older people;
- people with long term conditions;
- people with mental health conditions;
- mothers and children; and
- the “generally healthy”.

CCGs will get a colour coded rating for each metric.

“It’s not just about the CCG – it’s about the mental health provider, the service offered through GPs, but in the end the CCG holds the cheque book so they are responsible for making it work and if we do this we will truly be one of the first countries in the world to try and understand the quality of whole patient care over a whole patient pathway, where it’s working and where it isn’t working.”

Mr Hunt continued: “The intention is that we are able to leave you alone if you’re getting lots of green ticks and lots of blue ‘OKs’, but on behalf of patients we have a responsibility to step in if we have persistent failure that is not being addressed.”

Mr Hunt said: “This is a way... that we can actually move beyond targets as a way of driving change in the NHS, to transparency, to peer review and to learning – becoming a truly learning organisation.”

Five Year Forward View: Time to Deliver

The seven principal national health bodies have published [Five Year Forward View: Time to Deliver](#).

The report looks at the progress made so far towards delivering the [Five Year Forward View](#), and sets out the next steps that need to be taken to achieve the shared ambitions within.

The paper kicks-starts a period of engagement with the NHS, patients and other partners on how we can respond to the long-term challenges and close the health and wellbeing gap; the care and quality gap; and the funding and efficiency gap.

Merger of NHS and social care budgets is the way forward, claim The King’s Fund

The King’s Fund has published a new report stating there should be a single pooled budget for all health and social care services in every area by 2020 at the latest, as well as recommending that the Department of Health be given control of the national budget for social care.

The report, [Options for Integrated Commissioning](#) follows on from last year’s Barker commission report, through which the think tank examined the financial viability of the healthcare system.

The new report concludes:

- there should be a fully pooled health and social care budget in every area by 2020;

- each area's NHS and council commissioners should agree who should be in charge of this budget by 2017;
- CCGs and councils should be allowed to take control of the single budget, but health and wellbeing boards are not fit for this role in their current form;
- the government should consider legislating to allow a new form of health and wellbeing board to take over health and social care commissioning;
- the national social care budget should be transferred from the Department for Communities and Local Government to the DH, to create a single fund for the entire service; and
- central government should establish a single "outcomes framework" setting out what an integrated health and social care system should aim to achieve.

£200m cut to public health budgets

Council controlled public health budgets may be slashed by £200m as the Department of Health (DH) are set to consult on an in-year cut, which NHS commissioners fear could have a knock-on impact on their services.

The cut has been announced by chancellor George Osborne, and was billed as a saving of £200m on non-NHS spending. The cut will affect spending this year and will be worth 7.4% of the £2.7bn annual budget devolved to councils from the DH via Public Health England.

Among the services funded by councils via their public health budgets are: screening programmes; drug and substance misuse programmes; smoking cessation services; sexual health schemes, including HIV prevention; obesity prevention and weight loss schemes.

However, a DH spokeswoman said the cuts would not affect "frontline services".

"The NHS budget will remain protected but difficult decisions need to be made right across government to reduce the deficit.

"Local authorities have already set an excellent example of how more can be done for less to provide the best value for the taxpayer. A consultation will now be held with them to decide the best way of delivering the savings that need to be made."

Public Health England chief executive Duncan Selbie said "Local government took on public health in 2013 and has since made improving the public's health core business. Today's announcement is a difficult ask of them and we will support them through this as best we can.

"The details are clearly important and need to be worked through, and the consultation process announced by the chancellor will assist in this."

Carter's review shows NHS could save £5bn a year

Lord Carter's interim report [Review of Operational Productivity in NHS providers](#) has made recommendations, which could save the NHS up to £5bn a year by 2019-2020.

The report says hospitals could deliver £2 billion a year by improving workflow, having a stronger management grip on non-productive time, better management of rosters and improved guidance on appropriate staffing levels and skill range.

A further £3 billion could be released from improved hospital pharmacy and medicines optimisation, and better estates and procurement management, according to the review.

The findings are based on work with a cohort of 22 hospitals across the country, led by Labour peer Lord Carter over the last ten months. The final report is expected to be published in the autumn.

More than one in 10 babies born to mothers who smoke

[New figures](#) published by the Health and Social Care Information Centre (HSCIC) show that 11.4% of pregnant women were recorded as smokers at the time of giving birth in 2014-15, representing 70,880 out of 622,640 maternities. This latest figure is lower than in 2013-14 (12%), continuing the steady decline from 2006-07 (15.1%) to become the lowest on record.

Smoking in pregnancy remains a target area of action, with it featuring on the list priorities for the National Prevention Board.

New vaccination programmes to protect against meningitis and septicaemia announced

Public Health Minister, Jane Ellison, has announced the introduction of two new vaccination programmes in England - MenACWY and MenB vaccines.

From August 2015 all 17 and 18 year olds in school year 13 will be offered a combined vaccine that protects against the A, C, W and Y strains of meningococcal disease. The vaccine is particularly important for those who are heading off to university, as they are at greater risk. The vaccine will also be available to older students aged 19 to 25 who are starting university this year.

From spring 2016 there will also be a school-based vaccination programme for MenACWY, which will replace the MenC-only vaccine that is currently offered to school Years 9 and 10. There will also be a catch-up programme for those in Year 11.

From September, babies aged 2 months will be offered the MenB vaccine, which protects against meningococcal B disease, followed by a second dose at 4 months and a booster at 12 months. There will also be a limited catch-up programme for infants who are due their 3 and 4 month vaccinations in September, to protect them when they are most at risk.

The MenB programme means that England is the first country in the world to begin national and publicly funded Men B immunisation. This will be offered alongside other routine infant vaccines through the NHS Childhood Immunisation Programme.

Hunt describes 'new deal' for general practice

In a speech on Friday 19th June, Jeremy Hunt, Secretary of State for Health has set out the first steps in the 'new deal' for general practice, promised before the general election. He described the pressures that GP practice teams are facing as a result of population growth and the burden of long term conditions. He also made it clear that part of the deal would require GP practices to improve the quality and continuity of care for vulnerable patients and delivering better access, 7 days a week, for everyone.

He reiterated the election commitment to increase the primary and community care workforce by at least 10,000, including an estimated 5,000 more doctors working in general practice, as well as more practice nurses, district nurses, physicians' associates and pharmacists. More effort is being focussed on recruiting new GP trainees and ensuring all medical students have experience in general practice. The previously announced programme to recruit physicians' associates will aim to have 1000 in place in GP practices by September 2020.

He went on to describe the importance of 7 day primary care to ensuring hospital capacity is kept for those people who really need that care, referencing the work of various [Prime Minister's Challenge Fund](#) sites, including the EPIC project in Brighton:

"Other practices are helping to deliver 7 day care by better use of pharmacies. In Brighton 16 GP practices are working with local pharmacies to create 4 'primary care clusters', offering evening and weekend appointments with a GP or pharmacist and giving the pharmacist equal access to GP records. Dr Jonathan Serjeant from Brighton said the pilot has been a "fantastic opportunity for practices to learn to work together...reaching out into their

community to work with pharmacists to design, and provide care for people” and “help us understand how to offer more for people in more locations with a different skill mix.”

So as we roll out the Prime Minister’s Challenge Fund to the whole country, I can today announce that £7.5 million of the primary care infrastructure fund for this year will be used to support community pharmacists with training and appropriate tools.”

Mr Hunt also referenced the investment in general practice buildings that is being made via previously announced funding and a stocktake of data and metrics to assess the quality of general practice that the Health Foundation has been asked to undertake.

Health Select Committee chair re-elected

Dr Sarah Wollaston has been elected as Chair of parliament’s Health Committee. The remaining members of the Committee will be nominated by the House in the coming weeks.

Dr Wollaston was chair of the Committee in the last parliament. Prior to election to parliament, representing Totnes, she was a GP in Devon.

If you have any queries on this PSNC Briefing or you require more information, please contact [Rosie Taylor, Pharmacy and NHS Policy Officer](#).