

## **TELFORD & WREKIN COUNCIL**

### **ACTIVE LIFESTYLES, LEISURE AND CULTURE SCRUTINY COMMITTEE– 8 SEPTEMBER 2010**

#### **PROVISION OF OPHTHALMOLOGY AND MUSCULOSKELETAL SERVICES AT EUSTON HOUSE, EUSTON WAY, TELFORD – STAKEHOLDER INVOLVEMENT**

#### **REPORT OF NHS TELFORD and WREKIN COMMISSIONING GROUP**

### **1.0 PURPOSE**

- 1.1 This report outlines the proposed provision of Ophthalmology and Musculoskeletal services at Euston House, Euston Way, Telford, TF3 4LY. It gives an account of the consultation which has taken place to assure that the involvement and views of stakeholders have adequately been taken into account during the service redesign process. The services are due to commence spring 2011 and be delivered at new purposely designed premises at Euston House, Euston Way, Town Centre, Telford, TF3 4LY
- 1.2 Confirmation is sought from the Active Lifestyles, Leisure and Culture Scrutiny Committee that the stakeholder involvement is sufficient to meet requirements.

### **2.0 RECOMMENDATIONS**

- 2.1 **Active Lifestyles, Leisure and Culture Scrutiny Committee are asked to agree that the current scheduled stakeholder engagement is sufficient to meet requirements.**

### **3.0 PREVIOUS MINUTES**

- 3.1 This is the first paper to be submitted to the Committee regarding stakeholder engagement for the provision of Ophthalmology and Musculo-skeletal services at Euston House, Euston Way, Telford – no previous correspondence

### **4.0 BACKGROUND TO PROJECTS**

#### **4.1 Ophthalmology**

NHS Telford and Wrekin is committed to the provision of high quality, dedicated and professional Ophthalmology Services for patients with

Ophthalmic conditions, centred on clinical assessment and treatment by ensuring the patient is placed onto the appropriate clinical pathway. The Service Provider has been struggling to meet the 18 week target for referral to treatment time (RTT). The demand for eye care is set to increase as the population of Telford and Wrekin ages.

To allow for additional capacity, a Practice Based Commissioning (PBC) project was developed. The outcome of this project was to commission a Community Based Cataract Surgery service for the patients of Telford and Wrekin. The service will provide treatment for patients being referred by Telford and Wrekin General Practitioners and Optometrists for Cataracts. The service will include assessment, management (including surgery) and treatment of Cataracts.

The Cataract service will deliver a high quality patient centred service providing an alternative to hospital based outpatient care, therefore reducing demand on secondary care services. Patients will only be referred into Secondary Care when there is a need for General Anaesthetic or complex treatments which can only be provided within hospital based Ophthalmology services.

The new community cataract provision will support the patients, General practitioners and Optometrists of Telford and Wrekin by making available a new and effective cataract service; reduce waiting times and increase access for patients whilst providing value for money.

The aims of the service are :

- To provide a PBC-led Community Cataract Service that is responsive to the needs of the local patient population of Telford and Wrekin.
- To assess, diagnose, treat and manage patients in need of cataract care by providing a high quality ophthalmology cataract service within a community setting that is led by a Consultant.
- To provide (where appropriate) a “one stop” service that can incorporate diagnostic testing and treatment during a single visit.
- To improve health outcomes through earlier diagnosis and treatment of common ophthalmology conditions.
- To improve the patient experience and journey through locally agreed pathways that will reduce waiting times and improve access for patients whilst meeting the 18 week standard
- To improve patient satisfaction through the commissioning of a redesigned service that responds to patient feedback.
- To reduce “Did Not Attends” (DNAs) for outpatient appointments and surgical procedures.
- To improve cost effectiveness of ophthalmology / cataract care.
- To reduce Health Inequalities by improving access to the service.

## 4.2 Musculo-skeletal (MSK)

The Department of Health highlighted a review of the Musculo-skeletal pathway as one of six priority areas to address the demand on Secondary Care Services and 18 week pathway by streamlining and improving patient care and clinical outcomes. NHS Telford and Wrekin, working with the Telford and Wrekin Practice Based Commissioning Consortium, developed an MSK Service model which is centred on clinical assessment and treatment by getting the patient onto the appropriate management pathway.

The MSK Clinical Assessment and Treatment Service (CATS) will deliver a high quality patient centred service providing an alternative to hospital based care for Telford and Wrekin patients referred by General Practitioners and other Health Care professionals. The Service will assess and treat patients with appropriate musculoskeletal conditions. It will support the development of skills within a Primary Care team and significantly reduce the demand on secondary care thus increasing the numbers of patients being followed up in Primary Care. This service will also include the management of chronic pain.

The purpose of the community based Musculoskeletal CATS service is to support people with managing their musculoskeletal (joint, muscle and bone) conditions and to improve the quality of patient care and clinical outcome. This is to ensure that they can maintain function in the activities of daily living and employment. The specific aims of the MSK ICATS will be to:

- Provide the patient and the referrer with an accurate diagnosis of their musculoskeletal condition;
- Provide clinical assessment, treatment and clinical leadership within a comprehensive community service.
- Improve access to specialised MSK clinical services and ensure patients are offered the most appropriate treatment or management in the shortest possible time.
- To provide an appropriate and timely referral to treatment, be that in Primary Care or Secondary Care, or completed episode of care.
- Enhance the management of patients within the community, and actively manage the demand for secondary care services ensuring patients have speedy access to appropriate treatment.
- Achieve a reduction in orthopaedic referrals to acute hospital providers.
- Increase conversion rates from outpatient attendances to surgery through more appropriate referrals to acute hospital providers.
- Improve patient experience and satisfaction.
- Limit the physical and associated disabilities that are caused by musculoskeletal conditions.
- Ensure patients are seen and treated closer to home in an environment most appropriate to their needs.
- Develop agreed models of care and pathways for common musculoskeletal conditions.

- Develop a service that dovetails with and compliments existing local services
- Offer self referral facility for patients previously seen within the service to a physiotherapy service, where physiotherapists can access ESP advice if needed.

## **5.0 STAKEHOLDER ENGAGEMENT**

5.1 The service redesign projects have been ongoing and discussions with local clinicians have ensured that a service specification has been developed. There has been engagement with patients and the public to determine their views on the services.

5.2 Clinical engagement has been received from:-

- Gary Caton – Pathways Development Manager
- Mike Innes – GP Stirchley Medical Practice
- Quentin Shaw – GP Stirchley Medical Practice
- Nick Tindall – GP Wellington Road Medical Practice
- Shailendra Allen – GP and member of Local Medical Committee
- Louise Warburton – GP and PCT provider service
- Ewan Craig – Consultant Ophthalmologist
- James Wiggin – Optometrist and Chair of Local Optometry Committee
- Heidi Smith – Specialist Pain Nurse - SaTH
- Debbie Jones - Superintendent Radiographer
- Richard Fallows – Extended Scope Physiotherapist

5.3 Patient and Public Engagement has been undertaken via:-

- Engagement through LINKs who are undertaking focus groups and a questionnaire
- Two patients are currently involved in the Ophthalmology redesign
- One patient was involved in the Tender for the Rheumatology element of the Musculo-skeletal project which was a significant change and went to formal consultation earlier in the year.
- A press release is being prepared to allow for public views on Euston House
- Active Lifestyles, Leisure and Culture Scrutiny Committee
- Patient views will be reflected in the final service specification
- Patient questionnaires have been completed at the current Ophthalmology Outreach Clinic at Donnington Medical Practice.
- GP Practices have completed questionnaires based on feedback they have received from their patients on the service redesign. Feedback has been incorporated in the service specifications
- Senior Citizens Forum have received information regarding the service redesign at one of their recent meetings

## **6.0 EQUALITY AND DIVERSITY IMPLICATIONS**

- 6.1 The facility at Euston House is being purposely redesigned to meet physical needs of equality and diversity, ensuring that easy access is maintained for all. The facility will be Disability Discrimination Compliant.
- 6.2 The providers of the services will have to demonstrate that services have been assessed for the impact of equality and diversity and will be monitored on this as part of the regular review process.

## **7.0 FINANCIAL IMPLICATIONS**

- 7.1 The redesign of Euston House has been funded through Practice Based Commissioning freed up resources generated by General Practice.
- 7.2 The providers of the services will have to demonstrate value for money and it is anticipated that the services will be provided at a reduced rate, generating a saving compared to current costs.
- 7.3 Any savings generated from these cost effective services will be reinvested into patient care for the residents of Telford and Wrekin.
- 7.4 Full costings are currently being compiled based on the latest assumptions and information available.

## **8.0 LEGAL IMPLICATIONS**

- 8.1 There is an requirement to ensure that there is patient and public involvement in service change and to ensure that NHS Procurement guide is followed if a new service provider is required to deliver the service. New guidance was published on 30 July which sets out current government policy on procuring healthcare services and supersedes the previous (March 2010) guidance, the 'Procurement Guide for Commissioners of NHS-funded services' and the 'Principles and Rules for Co-operation and Competition.
- 8.2 The PCT was following the NHS process of Preferred Provider and was working with the local Acute Provider to deliver this service. This process is no longer mentioned in the new guidance and the PCT is currently seeking advice with regards to the tendering of these services.
- 8.3 The provider of the services will be required to follow all relevant and up to date clinical and national requirements in terms of governance.

## **9.0 ENVIRONMENTAL IMPLICATIONS**

- 9.1 The combination of one-stop type facilities which are provided in the community together with the location being at an existing transportation

hub (Euston House being next to the train station, which has easy access via public buses and car park spaces), will result in good access for patients limiting the carbon emissions.

- 9.2 Use of an existing building therefore omitting the need to source bricks, mortar and other building products for the construction thus less of an impact on natural resources.
- 9.3 Use of building materials for the fit out that are non-harmful to the natural environment.
- 9.4 Layout of the building is strategically designed to minimise the reliance on air conditioning thus saving on energy as well as reducing harmful gases release
- 9.5 The facility is centrally located ensuring it is in a convenient and accessible location for the majority of the users, furthermore it is at the heart of the public transportation links thus reducing the reliance on private car resulting in lower carbon emissions.

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