

**Gloucestershire Health and Care Overview and
Scrutiny Committee (HCOSC)
15 January 2019**

**NHS Gloucestershire Clinical Commissioning Group
(GCCG)
Clinical Chair and Accountable Officer's Report**

1. Introduction

Section A provides a general NHS Gloucestershire Clinical Commissioning Group (GCCG) commissioner update, incorporating a national consultation section.

Section B provides a CCG commissioner update focussing on primary medical care.

Section C provides Trusts' updates from: Together NHS Foundation Trust (2GNHSFT); Gloucestershire Care Services NHS Trust (GCSNHST) and Gloucestershire Hospitals NHS Foundation Trust (GHNHSFT).

Integrated Care System (ICS)

ICS Lead Report is provided as a separate agenda item.

**2. Section A: Local NHS Commissioner Update,
Gloucestershire Clinical Commissioning Group
(GCCG)**

These are items are for information and noting.

Please note some of the items reported below may also feature in more detail in other reports prepared for HCOSC e.g. ICS Lead Report, wherever possible we seek to avoid too much duplication.

2.1 Winter (Sustainability) Planning

The CCG has been working with system partners to ensure we are prepared and resourced for the winter period and the predicted pressure upon health and social care services. The ICS sustainability plan has been reviewed by NHS England and deemed best in class with delivery plans stress tested in a workshop with regulator colleagues. The CCG has worked with the Deputy Chief Operating officers from all providers to plan specific workforce adjustments to meet the variable demand patterns expected post-Christmas and into the new-year. In addition the CCG's

urgent care team have reviewed all providers internal escalation plans to ensure consistency with the system plan and between provider responses.

2.2 **Stop! Think... Keep Accident and Emergency clear for real emergencies**

A new powerful county-wide campaign was launched in December 2018 highlighting the need to keep Gloucestershire's two Accident and Emergency Departments clear for real emergencies.

A&E is extremely busy at this time of year, and the doctors and nurses there need to focus on people with life threatening conditions or serious injuries.

The campaign also highlights the different healthcare options available across Gloucestershire so people can access the right care for them and ease the pressure on A&E.

If you are unwell, *Stop! Think...* before you head to A&E and, if it's not an emergency, you can:

- Visit your pharmacy for minor ailments and health advice
- Call your GP surgery if it's an illness that won't go away or an urgent medical need
- Phone NHS 111 when your GP surgery is closed
- Try the ASAP Glos NHS App or visit asapglos.nhs.uk – the App and website guide you through your healthcare options. You can find information on how to look after yourself and which service to call on when needed, including the Gloucester GP Health Access Centre and Community Minor Injury and Illness Units.

Last year, there were more than 29,000 visits to A&E in Gloucestershire for ailments which could have been safely treated elsewhere.

"Stop! Think....." is a strong campaign that is both highly engaging and memorable. At the same time it has a positive message about the advice and support that is available countywide.

Advice and Support

When we fall ill, we just want to get the help we need as soon as possible. If people are not seriously injured or have a life-threatening condition, there are a range of healthcare options which often mean quicker and more convenient advice and care.

If you have a minor ailment, such as a bad cough or cold, why not pop down to your local pharmacy for advice and treatment. They are highly qualified medical professionals and can also advise you on whether you need to call or visit another service. No appointment is needed.

If you have an illness that won't go away or have a more urgent medical need, then call your GP surgery.

Thousands more GP surgery appointments are being made available this year in Gloucestershire, including in the daytime, evening and weekends to help patients

get seen quicker, but if you need urgent advice or care when the surgery is closed, call NHS 111.

For treatment 7 days a week (8am to 8pm), you can visit the Gloucester GP Health Access Centre which is open from 8am to 8pm. The doctors there provide a wide range of GP care and also treat minor injuries. It provides a walk in service, but patients are seen on an appointment basis and so it's best to call in advance on 01452 336290.

There are minor injury and illness units at each of our seven community hospitals across the county, which treat adults and children. You don't need an appointment and the opening times are available at asapglos.nhs.uk or via the ASAP app.

If you have a vomiting bug, please be sensible – stay at home, stay hydrated, stay warm and rest. The symptoms are unpleasant, but usually only last a couple of days. However, norovirus is highly infectious so please stay off work, and away from hospitals or GP surgeries, until you have been free of the symptoms for 48 hours. If you need health advice, call NHS 111.

2.3 **'No Show' campaign to tackle missed appointments in Gloucestershire**

How would you feel if someone didn't show up in your life? Every year in Gloucestershire, thousands of people do not turn up to their medical appointments when these vital slots could be filled by another patient in need.

There were 187,000 missed appointments in our GP surgeries and hospitals last year which is 30,000 hours of NHS time.

The NHS works hard to ensure any appointments which become free are given to someone else but, if none of them were filled, it would cost the NHS in Gloucestershire £13m a year.

The 'No Show' campaign launched in December 2018 encourages people to remember to call to cancel when they cannot make it.

More than 60,000 hospital appointments were missed last year in Gloucestershire along with 125,000 GP surgery appointments.

You can follow the campaign using the #NoShow on twitter and visit the website: <https://www.gloucestershireccg.nhs.uk/no-show-campaign-to-tackle-missed-appointments/>

2.4 **Non-emergency patient transport provider confirmed**

Following a thorough procurement process, a new provider has been selected to provide non-emergency patient transport services in Gloucestershire.

Subject to contract, patients who have a non-emergency medical need and require help with transport to reach their hospital appointment will benefit from a dedicated service run by E-zec Medical Transport Services.

During 2018, organisations were invited to tender for a seven year contract to provide a planned non-emergency patient transport service from June 2019.

E-zec has now been selected to run services in Gloucestershire, Bath and North East Somerset, Swindon and Wiltshire.

E-zec is an experienced and specialist patient transport provider (it is all they do). They already carry out around 750,000 patient journeys a year in other areas of the country, including neighbouring areas to Gloucestershire.

Through the use of modern technology and systems, the service will be able to manage demand for patient transport efficiently and will co-ordinate and provide journeys in and out of the county.

E-zec will be supported by The Patient Transport Advice Centre (PTAC), which provides a convenient booking and enquiries service for patients.

PTAC also provides information and advice for those patients who do not meet the current Department of Health eligibility criteria. This will include signposting to alternative transport options, including voluntary and community providers.

2.5 **Support for high users of services**

The CCG's urgent care and joint commissioning teams have been working closely together and with partners to develop a programme specifically to support high users of services. When the programme looked at the patient data there were around 700 people who accounted for a significant number of ED attendances and emergency admissions in Gloucestershire.

A delivery plan has now been developed, which will see locality multidisciplinary teams (MDT) working with people identified in the programme to develop personalised care and wellbeing plans. Through a health coaching approach, their aim will be to support people to develop new coping strategies and reduce the need to use urgent and emergency care services. Phase 1 of the programme will run from January to June 2019, with monitored impact and MDT/patient learning informing a county wide rollout later in the year.

2.6 **Community Offer**

The **Integrated Personalised Care Programme (IPC)** has funded an End of Life (EoL) General Practitioner (GP) who is leading on a work stream within the EoL Clinical Programme Group (CPG) that aims to improve the identification of those at EoL within Primary Care and support people to experience a more personalised EoL experience.

A county-wide electronic survey of GPs has been undertaken to identify areas of best practice, areas of concern in order to support GPs to improve the care received by patients in their last year of life. Further evaluation of the data is planned but initial themes include:

- Regular palliative care meetings/communication between GPs and District Nurse (DN)/palliative care nurses considered a strength and considered key improvement by practices who don't have this;
- Wanting to deliver the best care but lack of available GP time being a concern; Underuse of already available resources and difficulties in identifying non-cancer patients in their last 12 months of life;
- The desire to have a network of GP End of Life Care champions for each of the GP localities/clusters.

The **Complex Care at Home Service** has been operational since April 2018 and has received over 270 referrals to date. It has become firmly established as an

important community service with close working relationships with colleagues in primary care and the Older People's Advice and Liaison Service at Gloucestershire Hospitals NHS Foundation Trust (GHNHSFT).

The Risk Stratification Model identifies the appropriate cohort of people for this service and will be rolled out to relevant GP surgeries over the next few months. People accessing the service will benefit from the holistic approach, which includes support from colleagues in Adult Social Care. The team will also shortly include therapists and a dietician.

Quality audits evidence the positive impact of the service on individuals' health and wellbeing. Early indications show that the service is successful in maintaining people at home and is improving their motivation to managing their own conditions as measured by the Patient Activation Measure (PAM).

Remote Monitoring – Telehealth in Gloucestershire,

Existing cohorts Respiratory, Heart Failure Specialist teams and General Practices have been updated and training provided as required. Existing patients have been transferred on to the new platform.

New cohorts – South Cotswolds frailty service and Complex Care at Home have received training on the new platform, and further training is planned. Following training, take up will be monitored closely.

New cohorts interested – Care homes in South Cotswolds, Stroud Cluster and Cheltenham Care home project – ongoing work continues to set up individual projects.

New cohort – Learning Disabilities – the CCG is working with GP lead Dr Lawrence Fielder and Commissioning Manager, Gareth Hooper to set up a project within two learning disability homes using telehealth to identify the early onset of Sepsis. The Academic Health Science Network and National Learning Disabilities Group and NHS England have expressed an interest in working with us on this project. An outline project plan is being drawn up and will be shared with the remote monitoring operational group

The Better Care Fund: Housing, Health and Care

The Joint Housing Action Plan has generated a number of initiatives across the county. There are six overarching themes in the plan and over recent months progress has been made across numerous projects sitting under them and the wider housing and health agenda including:

- A Housing Advisor has been appointed for winter, working with the Care Navigators and supporting hospital discharge at both Gloucestershire Royal and Cheltenham General Hospitals.
- Recruitment process for an Intergenerational Homesharing Coordinator. This post will facilitate matches between older people and younger people who will live in their house in return for ten hours of support each week. University of Gloucestershire are involved with this project and are keen to support students who may wish to join the scheme.
- As representative for the UK in the EU project Build2LowCarbon, Gloucestershire has presented on the link between fuel poverty and poor health outcomes in Malaga, Spain in September 2018.

- The National Energy Action report ' Under One Roof – Health and Housing sectors tackling fuel poverty and cold related ill-health together' was launched at a conference at Westminster in October 2018. Gloucestershire was featured as an example of good practice in joint work and health involvement in reducing fuel poverty.
- Sir Michael Marmot, author of a report into the social determinants of health and chair of a Review of Health Inequalities in England, visited Gloucestershire and received a presentation about the joint health and housing work which is happening in the county.
- South West Ambulance Service Trust has introduced a Community First Responder scheme to provide a pick-up service for non – injurious fallers in certain areas of Gloucestershire. This has provided a more prompt service for fallers and meant a 68% reduction in use of ambulances to attend non-injurious fallers in these areas. The aim is to increase the coverage of this service during the second half of 2018-19.
- Mapping of park homes in Gloucestershire and analysis of health service data has suggested increased admissions and poorer health outcomes from these properties compared to the county overall. The aim is to work with Public Health to improve wellbeing and also with Severn Wye Energy Agency to look at potential to improve fuel efficiency of the park homes.

Community Offer - Personalised Care Programme

Gloucestershire is one of the 22 areas around the country involved in the renamed Personalised Care Programme, building on the previous Integrated Personalised Commissioning Programme.

Nationally, there are six main areas of focus, including Personalised Care and Support Planning, Shared Decision Making, Enabling Choice, Social Prescribing, Personal Health Budgets and Supported Self-Management.

The programme aims to embed personalised approaches to helping people manage their health and wellbeing needs, across the health and care system.

In addition, Gloucestershire is one of three areas (alongside Nottinghamshire and Lincolnshire) who are piloting joint assessments between health and social care for people eligible for a care act assessment. The initial cohort is people within 2gether who have serious mental illness. The team is working with between eight and ten people to understand opportunities for working differently and capture learning.

The Programme Manager recently presented Gloucestershire's work at the NHSE Personalised Care Advisory Board in London, which was well received by the Board.

Community Offer – Wheatridge Court Reablement Unit

We are currently running a small pilot project to provide slow stream specialist rehab for up to six people with Acquired Brain Injury (ABI) in Wheatridge Court Reablement Unit in Gloucester. The project is funded through the Improved Better Care Fund and is based on emerging national evidence that co-ordinated rehabilitation and discharge planning for ABI survivors contributing to reducing the frequency of GP visits, social care dependency, and homelessness and reduces contact with statutory authorities in respect of anti-social behaviour and offending.

The cohort of persons for the unit is being identified by close collaborative working between the ABI team, Wheatridge Court, Complex Person Team and Frenchay Brain Injury Rehabilitation Unit. Initial findings are favourable, producing both improved outcomes for individuals and their families and some system savings.

In October 2018 it was agreed to extend the pilot by a further 6 months, making 18 months in total, to explore the potential fully and look at future sustainable commissioning options.

Facts4Life

The University of the West of England has evaluated the Facts4Life programme in Gloucestershire schools and has found that the county's young people are becoming more responsible for looking after their own health.

The programme helps children and young people to understand why doing certain things will lead to better health and that good health and wellbeing is very much linked to their environment and the choices they make.

So far, Facts4Life has worked with more than 160 schools and trained more than 1,000 teachers in the county.

The study involved more than 400 primary and secondary aged school children over a three year period. It identified a significant improvement in resilience after six months among pupils in years 5 and 6. Younger pupils in years 3 and 4 reported improvements a decreased need for medication when feeling unwell, new strategies for promoting mental health, and the usefulness of learning about illness. Teachers indicated a change in philosophy around the teaching of health and illness, high levels of engagement and an impact on the way children behaved.

Facts4Life is funded by the CCG and the evaluation was funded by GCC.

Full Evaluation Report –<http://eprints.uwe.ac.uk/36934/>

Executive Summary - <http://eprints.uwe.ac.uk/36935/>

Musculo-Skeletal (MSK) Self-Management and Self-Referral into physiotherapy

Most MSK conditions are self-limiting and will get better over time. As part of the MSK programme the CCG has established a project to encourage people in Gloucestershire, with MSK conditions, to make use of self-management materials, or to refer themselves to the physiotherapy service if they need additional advice or support. With input from Patient Participation Groups, the project team have designed and distributed promotional materials to GP surgeries; posters and business cards have encouraged patients to access informative websites where self-management advice is available also explain how they can self-refer to local physiotherapy services. The team have recently designed a promotional video to be shown in practice waiting rooms which reiterates these messages.

British Heart Foundation (BHF) Blood Pressure Award

New funding from the BHF has been awarded to the CCG which will be used to fund a community based approach to detect high blood pressure. The grant, worth just under £100,000 over two years, will be used to recruit and train local blood pressure champions.

Once recruited, the champions will be trained on how to take blood pressure and interpret the readings, when to refer to other services, what lifestyle advice to give and the risks of high blood pressure. They will then create, advertise and run local blood pressure events, with the support of the CCG, within their own communities.

Their main aim will be to provide 5,000 tests each year to the people of Gloucestershire. It is hoped that this will identify some of the estimated 65,000 people who are currently living with undiagnosed high blood pressure in the county.

The project will firstly target the more deprived and BaME communities in Gloucester city. Service specifications are currently being developed and the programme is planned to go live in April 2019.

The CCG will collaborate with Healthy Living Pharmacies, the Voluntary Sector, Healthy Lifestyles Service, the Friendship Cafe and locally run groups in Gloucester for the project.

Better Conversations Programme

The Better Conversations programme is an ICS workforce development programme which aims to develop a coherent approach to building coaching skills across the whole ICS workforce. These skills support the embedding of personalised care and the development of a culture across the system which empowers people and is orientated to supporting patients to self-manage.

Berkeley Vale cluster 1 joined the Better Conversations programme as a flagship test and learn site. The aim was to test an integrated, cross-organisation, implementation approach that was in line with ICS approaches and dovetailed with initiatives to develop multidisciplinary working practices.

As at the end of November 2018, 150 cluster staff, from a variety of backgrounds and organisations have received the coaching training. Feedback from the session has been very positive, revealing how staff value the opportunity to reflect on their practice and to do this with colleagues from different organisations. It has also revealed the scale of the challenge to shift professional mind-set from “fixing problems” to enabling people. There is enthusiasm in the cluster to harness this momentum and team leaders across the organisations have established a “Coaching champions” group. This group of team leaders are working together and supporting each other to coach their staff in these techniques.

Follow-up coaching support is being provided by the training delivery organisation. Over the longer term this champions group will become a support network for other staff across the system.

The evaluation of the Berkeley Vale implementation is being supported by the Institute of Employment Studies who are experts in this field. The learning will be presented at an event for participants and system leaders in March 2019, informing the recommendations of the Better Conversations subgroup on the strategy for roll-out of a coaching programme in 2019/20.

3. Department of Health and Social Care and NHS England Consultations

- 3.1 Information regarding Department of Health and Social Care consultations is available via the GOV.UK website:

https://www.gov.uk/government/publications?publication_filter_option=consultations

Information regarding NHS England consultations is available via the NHS England website: <https://www.engage.england.nhs.uk/>

These websites also include responses to closed consultations.

- 3.2 **Items which should not routinely be prescribed in primary care: an update and a consultation on further guidance for CCGs**

<https://www.engage.england.nhs.uk/consultation/items-routinely-prescribed-update/>

Set out in the consultation document are proposals for a review and update of items which should not routinely be prescribed in primary care: *Guidance for CCGs, published in Nov 2017*. The commissioning guidance, upon which we are consulting, will be addressed to CCGs to support them to fulfil their duties around appropriate use of prescribing resources. This will need to be taken into account by CCGs in adopting or amending their own local guidance to their clinicians in primary care. The aim of this consultation is to provide information about the proposed national guidance and to seek views about the proposals.

Consultation closes: 28 Feb 2019

- 3.3 **Department of Health and Social Care Policies**

The following web link provides access to Department of Health and Social Care Policies:

<https://www.gov.uk/government/policies?keywords=&organisations%5B%5D=department-of-health>

4. Section B: Gloucestershire Clinical Commissioning Group (GCCG) primary medical care commissioning update

These items are for information and noting.

An update on the Gloucestershire Primary Care Strategy is a separate agenda item for this Committee in January 2019.

- 4.1 **New £3.8m Kingsway Health Centre**

A brand new £3.8 million health centre on Rudloe Drive, Kingsway, Gloucester, welcomed its first patients in December 2018. The new premises will significantly improve health care services for the local population in Kingsway and the surrounding area and has capacity to cater for around 13,000 patients.

The new health centre is run by Rosebank Health, which already operates Rosebank Surgery, Stroud Road and Severnvale Surgery, Quedgeley.

The new building has ten consulting rooms and another four rooms which can be used flexibly for various treatments and minor operations together with modern facilities for reception and administration staff.

In addition, there are training and meeting rooms, which will facilitate education and shared learning. These facilities will also be available to other health and social care professionals and specialists to provide services for the local people. An on-site pharmacy makes it easy for patients to pick up their prescriptions.

A small ceremony to mark the health centre's opening was held on 15 December for invited guests including representatives from the Patient Participation Group.

4.2 **Phoenix Surgery (Cirencester) and Romney House Surgery (Tetbury)**

An application for merger from two practices in South Cotswolds locality: Phoenix Surgery and Romney House Surgery, was considered and approved by the NHS Gloucestershire Clinical Commissioning Group Primary Care Commissioning Committee (PCCC) at its meeting in December 2018

Discussions around collaboration and closer working between the Practices started in December 2016. At that time Romney House Surgery was going through a period of transformation and experiencing difficulty in GP recruitment. The Partners from

Phoenix Surgery subsequently became Partners at Romney House Surgery in February 2017. Since then the Partners have been running Phoenix Surgery and Romney House Surgery as two separate General Medical Service (GMS) contracts.

The practices staff are expecting the merger to deliver benefits across the combined organisation in terms of enabling efficiencies, enhancing resilience and being able to improve the patient experience.

4.3 **Marybrook Medical Centre, Berkeley**

Following the dissolution of the partnership at Marybrook Medical Centre at the end of September 2018 an interim contract was awarded to Church Street Medical Practice with effect from 1.10.2018, thus ensuring the continuation of primary medical care to the people of the Berkeley area.

4.4 **Care Quality Commission (CQC) inspections**

The Royal Crescent Surgery, Cheltenham and Mitcheldean Surgery, Forest of Dean have recently both retained a 'good' overall rating. In total 70 Gloucestershire Practices are rated "good", 4 are rated "outstanding" and one "requires improvement".

4.5 **Awards**

The CCG was delighted that its work on the GP Health Inequalities Fellowship and Newly Qualified GP schemes were shortlisted for a Health Service Journal (HSJ) Award in the workforce category.

The GP Health Inequalities Fellowship scheme which aims to ensure that there are sufficient GPs in Gloucester City, also won the Futures Award at Gloucestershire's

NHS 70 Awards. The award was presented to Dr Andy Hamilton, from Churchdown Surgery.

The Exemplary Service in Primary Care Award was presented to Dr Charles Buckley from The Surgery in Frampton upon Severn. Dr Buckley has served the county as a GP since 1986 and does everything he can to make sure his patients get the best possible care.

5. Section C: Local Providers' updates

This Section includes updates from 2gether NHS Foundation Trust (2GNHSFT), Gloucestershire Care Services NHS Trust (GCSNHST) and Gloucestershire Hospitals NHS Foundation Trust (GHNHSFT),

These items are for information and noting.

5.0 Trusts Merger update

Over the past few months, the Trusts have continued to work with the regulator, NHS Improvement (NHSI), on proposals to integrate community physical, mental health and learning disability services in Gloucestershire.

The strategic case has been submitted to NHSI and members of the respective Boards have been formally interviewed on the detail within it. NHSI has been very supportive of the plans informally and formal feedback is awaited with interest. In the meantime, the Trusts continue to prepare the full business case with a target date for formal merger of July 2019.

The transformation of services, which is at the heart of why the Trusts are coming together, will bring benefits to the people served in the months and years ahead.

Co-location of a number of corporate services is already underway. This will allow corporate teams to work more effectively and efficiently side by side in support of clinical services. The process of recruiting to the Shadow Board is underway.

The Shadow Board will oversee the merger (in conjunction with the two current Boards) and then become the full Board when the merger transaction is complete. Finally, engagement with colleagues from both Trusts and 2gether's public members is underway about the name of the new organisation. Engagement with a wider group of stakeholders on the suggested shortlist of names will commence over the next few weeks.

5.1 2gether NHS Foundation Trust (2GNHSFT)

5.1.1 CQC National Community Patient Survey – Mental Health Results

The Care Quality Commission's National Community Mental Health Patient Survey Results (Adults) 2018 for 2gether's services in Herefordshire and Gloucestershire were published recently.

Once again, service users have rated the care provided through 2gether's services in the top 20% of mental health services in England. In 5 out of the 11 sections of the survey the Trust scores 'Better' than 80% of other Trusts who took part. These results represent a further improvement when compared to the results from last year's patient feedback in the same survey. The results are a testament to the expert and dedicated effort that colleagues are making to understand need, involve and respond well to people who use the Trust's services and their carers. The Trust will, of course, want to continue with developments so and strive for outstanding care in all that it does.

5.1.2 Letter of Hope

A 'letter of hope' is to be given to anyone arriving at Gloucestershire's hospitals who has attempted suicide or is experiencing suicidal feelings. The letter has been written by people who have also made attempts to take their own life, or who have supported family members who have made such an attempt. From their unique, personal perspective they are offering words of encouragement and sources of support.

The initiative is being introduced by 2gether, as well as both Gloucestershire Hospitals NHS Foundation Trust and Gloucestershire Care Services NHS Trust. The hope is that the people reading it will take comfort from knowing that others have experienced similar feelings and will have an opportunity to see things in a different light as a result. The letter is being launched at a time of year when things can be particularly difficult for people in the hope that it will have a positive impact on saving people's lives.

5.1.3 Britain in Bloom Award

Following the success of winning a gold, and an Outstanding Achievement Award, in Cheltenham in Bloom 2017, Mulberry Ward, at Charlton Lane Hospital, has gone on to secure a 'Thriving Level 4' Award at the Heart of England Awards, in association with Britain in Bloom 2018.

This was the ward's first entry in to Britain in Bloom so the organisation is very proud of achieving the level 4 award, with level 5 being the highest. The achievements continue due to the ongoing dedication of the staff, patients and their families to be involved in the Gardening for Recovery initiative. Feedback from patients is very positive and suggests that the gardening activity is supporting them in their wellbeing and recovery through a socially inclusive and engaging activity.

5.1.4 One Gloucestershire AHPs into Action Conference

A conference held to showcase the work of Allied Health Professionals across Gloucestershire attracted more than 120 delegates. The event was organised by the One Gloucestershire Integrated Care System, to acknowledge all that Allied Health Professionals are doing to transform health, care and wellbeing across the county. There are 14 Allied Health Professional groups which include art therapists, drama therapists, music therapists, chiropodists/podiatrists, dietitians, occupational therapists, operating department practitioners, orthoptists, osteopaths, prosthetists and orthotists, paramedics, physiotherapists, diagnostic radiographers, therapeutic radiographers, speech and language therapists.

The event was opened by the CCG's Clinical Chair, Dr Andy Seymour, followed by Professor Jane Melton, Director of Engagement and Integration for 2gether and Mary Hutton, Gloucestershire Integrated Care System (ICS) Lead.

The keynote speaker was Suzanne Rastrick, Chief Allied Health Professions Officer, for NHS England, who said she was delighted to see the energy, enthusiasm and commitment of AHPs in the county and the difference they are making every day.

Topics of focus included stroke rehabilitation, dementia care mapping, musculo-skeletal care, therapy led wards, and improving the health and wellbeing of populations.

5.1.5 Co-Production Highlighted at National Launch

2gether's work on co-production was highlighted during the launch of a new report from the National Development Team for Inclusion. The event, in London in November 2018, was an opportunity for commissioners, local authorities and forums to learn from organisations such as the Trust. It also marked the publication of a new guide called 'Co-production in mental health', which was produced by NDTi for Skills for Care, and features the work on social inclusion at 2gether as an exemplar of best practice.

The Trust was represented at the event by members of our Social Inclusion Team, alongside Experts by Experience, who use their personal experience of receiving services to influence the Trust's development.

Co-production is about the inclusion of people with lived experience of mental illness, as well as their partners, family and friends (who all have expertise by experience of using our services) in the commissioning, planning and delivery of services as equal partners with service providers and professionals.

5.1.6 Nursing Times Awards

Colleagues from 2gether's Research Team attended the Nursing Times Awards in London in October 2018. The team was shortlisted for the Clinical Research category for their work in involving service users and carers in dementia research, in partnership with Cobalt. Being finalists for such a prestigious national awards reflects very highly upon the exemplary performance seen in their involvement of people with dementia and their families in research. The Trust is very proud of their achievement, ongoing work and partnership activity with Cobalt.

5.1.7 RePAIR

2gether has been involved in the production of Health Education England's RePAIR toolkit. RePAIR stands for Reducing Pre-Registration Attrition and Improving Retention. 2gether worked in partnership with the University of the West of England and our main focus was learning disability nursing – a branch of nursing that is facing significant recruitment issues nationally. Findings from the RePAIR study are now available through the HEE Website.

5.2 Gloucestershire Care Services NHS Trust (GCSNHST)

5.2.1 A clear commitment to research and innovation

The Trust is offering the opportunity for patients, public and staff to take part in health research studies more so than ever, which will ultimately contribute to improving healthcare services for local people.

The latest Research Activity League Table data from the National Institute for Health Research (NIHR) has confirmed this, with the Trust seeing a significant increase in recruitment to studies during 2017-2018; which according to the NIHR makes us the best performing NHS Trust in England by this measure.

The Trust now has a Research and Innovation Forum consisting of key clinical colleagues, leaders and managers with support and attendance from the Gloucestershire Research Support Service and colleagues from the Clinical Research Network. There is considerable enthusiasm from colleagues who are leading on or are involved in these studies. The forum has also become an effective way to overview activity while also seeking new research opportunities. Research meetings are planned to be joint with 2gether NHS Foundation Trust from December 2018, with the intention of having a joint research strategy by 2019.

The level of research activity and investment that has been achieved has ensured that the Trust is now a full member of the West of England Clinical Research Network. The Trust is also a member of the Research4Gloucestershire partnership; a new collaboration of providers and education, which has a vision for increasing the level of research and development in the county for the benefit of the population's health and wellbeing.

The Trust will be hosting a joint GCS/2getherNHSFT Research and Innovation Workshop at the National Star College on Thursday 24 January 2019 to shape the vision and strategy for research and development going forward in the newly merged Trust.

5.2.2 Complex Care at Home commissioned by Forest of Dean Integrated Locality Board

Following on from the early success of the Complex Care at Home Service in Cheltenham and Gloucester, the Integrated Locality Partnership in the Forest of Dean has commissioned the Trust to set up a service in their locality, using the same model.

The service will be delivered in partnership with GPs, and will use a proactive, preventative enhanced community case management model, which will aim to prevent unnecessary admissions to hospital. This will identify and provide appropriate support to the cohort of adults with complex long-term conditions, and/or frailty, who may also have complex social situations. It is a planned, proactive service, not an urgent care model responding to those in crisis. Working closely with local GPs and a Gloucestershire Royal Hospital geriatrician, the service will comprise community matrons, well-being coordinators, with physiotherapy, occupational therapy and dietetic input. The Trust will also work in partnership with 2gether NHS Foundation Trust, Adult Social Care (GCC), the Forest of Dean District Council, as well as the community and voluntary sector.

Intended outcomes of the service include: people's health, well-being and self-management of conditions are improved; people being more effectively managed in the community; reduction and prevention of hospital admissions; reduction in the demand for primary care and in care home placements.

The Trust is currently in the process of recruiting clinicians and it is anticipated that the service will be commencing by February 2019.

5.2.3 Location for a new Community Hospital in the Forest of Dean

Following both the Trust Board and Gloucestershire Clinical Commissioning Group's decision to site the new community hospital in the Cinderford location, work is progressing in developing the Outline Business Case (OBC) for the Trust Board to consider in due course.

The Trust is reviewing the identified sites in the location, and an options appraisal will be undertaken which will include the site selection criteria identified in the Strategic Case for Change, as well as those criteria recommended by the Citizens' Jury.

To support the full business case development, the Trust is working with commissioners and system partners on designing further engagement sessions in the Forest in 2019, with a focus on services that will be offered in the new Community hospital.

5.2.4 Cashes Green Ward reopens at Stroud General Hospital, following major renovation project

Stroud General Hospital's Cashes Green Ward has reopened having undergone four months of major refurbishment. The ambitious renovation programme has seen the ward undergo a major upgrade including the introduction of additional ensuite bedrooms and bays, a day room and state-of-the-art facilities. This enhanced environment will support the Trust in delivering the excellent patient care the teams are so proud of.

The Trust would like to thank the Cashes Green Ward staff for their positive approach to continuing to deliver care while relocated some distance away in Cirencester, the Cirencester staff for how welcoming they have been to colleagues, the Stroud housekeeping team for all their hard work to get the ward spick and span in time to reopen the ward, and estates colleagues for leading the delivery of this significant project. The Trust is very grateful to The Stroud League of Friends, which has been hugely supportive in our investment in the hospital, and instrumental in bringing this major renovation project to fruition.

5.2.5 Awards success for Macmillan

The Trust's Macmillan Next Steps Cancer Rehabilitation (MNSCR) Team is celebrating again after picking up yet another prestigious award. The team scooped the Clinical Services – Rehabilitation prize at this year's LaingBuisson Awards, which took place at the Park Plaza hotel in Westminster, London, in November 2018.

The latest in a raft of awards scooped by the team this year, it recognises MNSCR's excellent work in helping those living with and beyond cancer to rebuild their lives.

Launched in 2016, the multidisciplinary team of cancer and healthy lifestyle specialists delivers a broad range of community clinics and programmes, before and after cancer treatment, to improve the overall health and wellbeing of those affected by breast, prostate and colorectal cancer living in Gloucestershire. The MNSCR Team also reached the finals of this year's Patient Safety Congress and Awards in Manchester. The team was nominated for its work to ensure people with cancer are supported to be more physically active in a way that's safe, scientifically backed and minimises risk.

5.2.6 Tree planting celebrates Cirencester Hospital's 30th anniversary and 70 years of the NHS

In November 2018, staff, volunteers and guests gathered at Cirencester Hospital to celebrate its 30th anniversary and the 70th birthday of the NHS with a ceremonial tree planting.

Matron Linda Edwards opened proceedings by thanking the Cirencester community as a whole for its continued support in helping the hospital not only to survive, but to thrive over the past 30 years. She also thanked the Cirencester Hospital League of Friends for its ongoing generosity and support, which has seen the community hospital benefit from vital equipment and funding, instrumental in its continued provision of first-class healthcare and outstanding service to the community of Cirencester.

5.3 Gloucestershire Hospitals NHS Foundation Trust (GHNHSFT)

5.3.1 Care Quality Commission (CQC) Inspection

At the time of writing this report GHNHSFT is awaiting the outcome following the recent inspection by the Care Quality Commission (CQC). The inspection process comprised three parts:

- Core Services (9/10/18 – 12/10/18): An unannounced visit by a team of inspectors and service experts who observed our services in action and talked to our staff (individually and/or in groups) to assess what it is like to be a patient or member of staff in our hospitals
- Use of Resources Inspection (18/10/18): Led by NHS Improvement, the team assessed us on how effectively we utilise our resources
- Well-led (13/11/18 – 15/11/18): Explored how our organisation is governed and the impact of the Board and senior leaders on the organisation. Inspectors held group and individual interviews as well as reviewing our documentation and processes.

Feedback to date has been encouraging; the final inspection rating will be published in the new year. The Trust was last inspected in January 2017 when 73% of our services were rated *Good* or *Outstanding* by the CQC (compared to 68% in 2015) though the overall rating was *Requires Improvement*.

The CQC always ask the following five questions of services:

- Are they safe? People are protected from abuse and avoidable harm.
- Are they effective? People's care, treatment and support achieves good outcomes, promotes a good quality of life and is based on the best evidence.
- Are they caring? Staff involved in treating people with compassion, kindness, dignity and respect.
- Are they responsive to people's needs? Services are organised so they meet people's needs.
- Are they well-led? The leadership, management and governance of the organisation makes sure the delivery of high quality person-centred care, supports learning and innovation and promotes an open and fair culture.

5.3.2 Cheltenham and Gloucester Hospitals' Charity CT scanner appeal boost

The Hospitals Charity recently launched an appeal to raise a further £1.2Million to fully fund three new CT Scanners and two digital mobile x-ray machines for the hospitals.

This equipment will make a huge impact for patients through faster diagnosis and state of the art imaging. The appeal has taken a significant step forward thanks to an incredible £400,000 donation earlier this month.

The generosity of the donor, who has chosen to remain anonymous, is extraordinary. This gift really shows how highly the work of our staff is valued, and the growing momentum behind Cheltenham and Gloucester Hospitals Charity.

With £1.6Million now raised, the Trust now has less than £800,000 left to go. The charity team have valued the input and support they have had from staff across the hospitals for this appeal.

Background

Almost 80,000 people have a scan or mobile X-ray taken at Cheltenham General (CGH) and Gloucestershire Royal Hospitals (GRH) every year, and the existing scanner provision is at full capacity. Scanners are vital for early detection, diagnosis and treatment and can help save lives in an emergency when every second counts.

New state-of-the-art scanning technology will make a huge difference for people with a wide range of conditions, including those fighting cancer or heart disease, and emergency patients with head injuries. Everyone will benefit, from older people with dementia to premature babies who need urgent medical treatment.

5.3.3 100,000 genomes

In December 2018 the NHS achieved what might just become one of its greatest legacies – the sequencing of the 100,000th genome as part of the 100,000 Genomes Project. This achievement places the NHS at the forefront of global genomic medicine and research. The project has sequenced 100,000 genomes from around 85,000 people. Participants are NHS patients with a rare disease, plus

their families, and patients with cancer. The aim is to create a new genomic medicine service for the NHS – transforming the way people are cared for. Patients may be offered a diagnosis where there wasn't one before. In time, there is the potential of new and more effective treatments. The project will also enable new medical research. Combining genomic sequence data with medical records is a ground-breaking resource. Researchers will study how best to use genomics in healthcare and how best to interpret the data to help patients. The causes, diagnosis and treatment of disease will also be investigated. We also aim to kick-start a UK genomics industry.

The Trust can be rightly proud of the contribution Gloucestershire Hospitals has played in the national and regional success. In Gloucestershire the Trust played its part through patient recruitment. The programme has now entered a transition phase until project close down on 31.03.19 and is hopeful that it will be considered as part of a new genomic medicine service going forward, although it is still awaiting the national specification and funding news.

This work is currently the largest national sequencing project of its kind in the world.

5.3.4 Annual staff awards

The Trust staged its annual Staff Awards ceremony at Hatherley Manor in November 2018. There were 18 awards, almost 500 nominations and in the Patient's Choice category the Trust received more than 100 entries. For the Trust, the awards are a celebration of the hard work, loyalty and dedication of individuals and teams across all hospitals (Cheltenham General, Gloucestershire Royal and Stroud Maternity Unit).

5.3.5 MBE for Consultant

Acute Care Consultant Pippa Medcalf has received an MBE for her services and continued dedication to homelessness in Gloucestershire. Pippa received the accolade from Prince Charles at a special event in London in December 2018. Pippa has worked tirelessly for homeless people while working at GHNHSFT, arranging for clothes collections and distribution to patients who come into the Trust's care.

5.3.6 Radiology

A Radiology Briefing Paper has been prepared for a separate Agenda Item

The temporary revision of X-ray services across the county were implemented almost two months ago (19 November 2018) and early clinical feedback has been encouraging. Services have transitioned into the new arrangements, new staff rotas have been implemented to support the changes and provision of interventional radiology (IR) services (around the clock, seven days a week) at Cheltenham General (CGH) and Gloucestershire Royal Hospitals (GRH) are now in place.

While the service revision was regrettable it was unavoidable in order to ensure all of our diagnostic services were safe. As part of the revised service provision GHNHSFT worked hard with partners to ensure that every locality retains access to X-ray and in a way that minimised impact on other services such as outpatients and minor injury services. Additional provision of X-ray services in the community

meant that the total number of hours now being delivered is 193 hours compared to 252 hours.

6. Recommendations

This report is provided for information and HCOSC Members are invited to note the contents.

Dr Andrew Seymour
Clinical Chair
NHS Gloucestershire CCG

Mary Hutton
Accountable Officer
NHS Gloucestershire CCG

24 December 2018