

Local Care in west Kent



Summary

This paper provides a briefing for the Kent Health Overview and Scrutiny Committee (HOSC) on the progress made by NHS West Kent Clinical Commissioning Group (CCG) to design and implement Local Care.

This is where GPs, nurses, therapists, social care workers, mental health staff and urgent care staff will work together across towns and rural areas so that people can get the care they need at home and in their community wherever possible, reducing the need to go to hospital.

The aim is for people to be supported by a single team, with GP leadership, which treats their physical and mental health needs, seven days a week. By working together more effectively, this team will free up GPs, nurses, therapists and others to spend more time on frail older patients, people with complex needs including mental health needs, and patients at the end of their lives.

Recommendation

Members of the HOSC are asked to note the contents of this report.

Background

In line with its strategic vision, Mapping the Future and with national guidance, NHS West Kent CCG has been designing its response to Local Care. In west Kent this includes providing services on a hub and cluster model, which will enable groups of GP practices to be linked geographically. They will then be able work together and share resources to deliver viable and sustainable services for appropriately sized groups of population, in buildings suitable to support this new way of working.

Overview

The delivery of Local Care in west Kent will be undertaken in two phases. Phase one is the development of the service specification for a core cluster level team focussing on prevention and planned care covering four main areas: frailty, end-of-life, dementia and mental health. Phase two will be the development of an additional service specification including pharmacy, paramedics and therapy services.

This overall specification has been developed through the establishment of **West Kent's Cluster Commissioning Project Group** which has started to define a service specification focusing on what is best for the patient and for primary care and what is needed to evolve into the new model of delivery. GPs from federations in west Kent and frontline staff from community and mental health services, who are the key parties involved in the commission

and delivery of primary care, have already given support to this model and are involved in its development. The project group is comprised of four work streams:

- 1. Community Nursing Services
- 2. Complex Care Nurses and Health and Social Care Coordinators
- 3. Mental Health Services
- 4. Social Care

A new model of primary care will begin to take effect for services commissioned in 2017/18 through alterations to existing contracts. It is expected that during year two, NHS West Kent CCG will move towards the multi-speciality community provider (MCP) model, as set out in the NHS Five year Forward View.

An outline service specification developed by the project group was presented and discussed at a specially convened **meeting on 19 July, 2016 for frontline Primary care and community staff** where further feedback was taken to incorporate into the draft specification

Public engagement is being undertaken to ensure the service specification requirements meet the needs of patients and carers.

Federations have been working on defining the 'clusters' within their respective federation areas.

Public health is undertaking population stratification at each cluster level, which will assign the densities of specific personnel as per the needs of the cluster population.

Our current providers have been key in contributing to the work which defines the way Local Care will work in the future and the CCG is now in the process of discussing with them how the system can move the way it is structured, its governance and accountability and the practical ways in which services are delivered to align with this new way of working over the next 18 months. It is the CCG's and local providers' intention that the new model of care is fully established and embedded in west Kent by March 2019.

GP federations

West Kent GPs have formed into Federations in preparation for the move to Local Care. In turn west Kent practices will be grouped into clusters of local delivery. There will be eight clusters of delivery (Sevenoaks, Tunbridge Wells, Tonbridge, Weald and four clusters covering the Maidstone district). These will range in the size of population they cover from 45,000 patients to 80,000 patients approximately, depending upon demographic make-up of the population in each cluster and the geographical distances involved. GP Federations are active partners now in the move to establish the new Local Care landscape in west Kent and they include setting up a provider arm of their business which will evolve over the next

18 months to be in a position to bid for the full range of services alongside other providers in future tenders.

Creating local hubs of care

The model for Local Care includes the development of hubs of care within west Kent. It is anticipated that, depending upon the exact services which are delivered from each hub, these will need to be serving a population of around 100,000 people. This is to ensure that a critical mass of services, with interdependency, can be co-located and that services can be delivered on a cost effective and sustainable basis. The CCG is currently in discussion with local providers, including west Kent GP Federations, to determine the most suitable place for hubs to be sited and the clinical service construction of each of these. This will include determining the range of models which will apply and the degree to which these are enhanced by having a GP surgery within the hub. This work is ongoing.

However, due to other issues which have formed the catalyst for discussion, two specific locations in west Kent are continuing ahead of the remainder – in Edenbridge and Sevenoaks.

In Edenbridge, local people have been engaged to help shape future services in Edenbridge which are likely to combine the current GP surgery (which can no longer be delivered within the constraints of a building which is at the end of its life) and many of the services provided from Edenbridge Hospital. The strategic outline case is in the final stage of development and this needs to be signed off by NHS England. We will then formally move to a consultation phase on this work which will include the Health Overview and Scrutiny Committee and local people.

In Sevenoaks discussions have started with local GPs and other providers of services on the Sevenoaks hospital site (including Darent House) to explore whether it will be possible and sensible to locate a hub at the hospital and whether there is an appetite within the local GP group to co-locate a GP surgery on the site. Recently the first meeting was held, in conjunction with providers, Sevenoaks District Council, GP practice representatives and their PPG Chairs to look at the wider opportunities and to identify the key workstreams which will need to be established to take this work forward. This includes the involvement of NHS Propco, the owners of the hospital site, to assist in considering options going forward and particularly the suitability and sustainability of the current stock of buildings and services.

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