

SPECIALISED SERVICES IN ESSEX: AN UPDATE

November 2016

1.0 Introduction

In June 2016, NHS England's Midlands and East Specialised Commissioning team set out an overview of the role and function of specialised commissioning in the region and the local and national priorities for service reviews. This paper aims to provide the committee with an update on the key national and local service reviews that are taking place. There is currently not expected to be any significant service change proposal within Essex within the next twelve months that is not already subject to scrutiny by the three Health Overview and Scrutiny Committees within Essex.

2.0 Background

Specialised services are complex, rare, high cost services, which are often a catalyst for innovation and pioneering clinical practice. Over 140 specialised services are commissioned by NHS England to national standards, each service providing a service for populations of more than one million. Specialised services account for approximately £15 billion per year – 14% of the entire NHS budget.

In the Midlands and East of England, the budget for specialised services is £3.7billion - £1.1 billion of which is spent in the East of England. The largest providers of specialised services in the East of England are Cambridge University Hospitals, Norfolk and Norwich Hospital, Papworth Hospital and Partners in Care.

A new, national strategy is being developed for specialised services to help deliver the Five Year Forward View. This will mean fewer, larger providers for some elements of care to ensure services can meet the standards and be sustainable. It will mean an increase of hub and spoke networks, new commissioning models and increased emphasis on performance and quality monitoring and managed entrance of new drugs and interventions.

3.0 Service reviews

Local service reviews are normally conducted where the local service is consistently not meeting agreed national standards. This could be due to a number of reasons, such as the size of the service resulting in insufficient numbers of patients per surgeon, a longstanding inability to recruit the necessary levels of qualified staff, or poor patient. Service reviews could also be conducted across a geographical area where there is evidence that services could be more efficiently coordinated to benefit patients.

National reviews are determined and prioritised by the national team and the six programmes of care. All services need to be reviewed regularly to ensure standards are maintained. National reviews can lead to recommendations for a reconfiguration of local services.

4.0 Service change in Essex during 2016/17

4.1 Specialised Urological Surgery

In Essex, specialised urological surgery does not meet the national service specification and has been subject to a review. Following a lengthy process of engagement and clinical evaluation of bids from providers, a decision has been made to bring the two existing services together into one service which will be based at Southend. This has been previously discussed with the Joint Health Overview and Scrutiny Committee and the existing providers are working together to implement changes to the service by April 2017.

4.2 PET-CT in South Essex

The PET-CT service in South Essex has been reviewed following a request by the provider to move the service. Following engagement with a joint Essex and Southend Health Overview and Scrutiny Committee which supported the recommendation and a separate Thurrock Committee which has subsequently referred the matter to the Secretary of State, a decision by NHS England is pending. There has been an unexpectedly large increase in demand which may necessitate an interim solution before a decision is made on a permanent resolution.

4.3 Specialised Vascular Services

Specialised vascular services are currently the subject of a regional review. Essex has had a number of vascular surgical reviews in recent years but for a number of reasons, recommendations to make changes to the service have not been enacted. The vision for vascular care in Mid and South Essex is now being developed through the Essex Success Regime with the vascular clinical leads at Basildon and Thurrock University Hospitals NHS Foundation Trust, Mid Essex Hospital Services NHS Trust and Southend University Hospital NHS Foundation Trust working closely together to discuss and develop future options for the delivery of specialist vascular care in mid and south Essex. This will form part of the Essex Success Regime proposals.

4.4 HIV services in Essex

NHS England commissions the HIV care and treatment element of the sexual health pathway. Following changes to the responsibilities for commissioning sexual health services to local authorities, Essex County Council has awarded a new contract for sexual health services to Provide as the lead provider in a consortium which includes South Essex Partnership NHS Foundation Trust, Colchester Hospital University NHS Foundation Trust and Basildon and Thurrock University Hospitals NHS Foundation Trust. The contract began on 1st April 2016, following which time, Princess Alexandra Hospital NHS Trust has formally given notice to NHS England for the HIV Care and Treatment Service that they will cease to provide the service from 1st April 2017. Since the start of the new contract, patient pathways have become fragmented across the area. The HIV services were the smaller part of the integrated service and this has resulted in staffing and premises issues now that the supporting infrastructure and staffing has been transferred to new providers. This experience is replicated in other areas of the Midlands and East of England. The Specialised Commissioning Team is working with the trust to ensure that services are continued in the short term, whilst a sustainable long term solution is identified. The team has undertaken an

option appraisal and sought procurement advice. As a result, an Intention to Tender Notice has been advertised with the award of a new contract planned for January 2017 to ensure robust and sustainable HIV services delivered in the area from 1st April 2017. Once the procurement process has identified suitable providers, the Overview and Scrutiny Committee will be updated on the options and engaged in any changes to the service that may be necessary.

4.5 Child and Adolescent Mental Health inpatient services (CAMHS Tier 4), Adult Medium and Low Secure Services and Perinatal inpatient mother and baby units and linked outreach services

In March 2016, NHS England set up a national Mental Health Service Review Programme to support a detailed and comprehensive service review of these services. The aim is to offer care in certain specialised services closer to home, more effective care pathways that facilitate discharge from inpatient care at the earliest opportunity and enabling where possible people to be cared for in their local communities. A needs assessment has been taking place to ensure capacity is balanced geographically, looking at access to services closer to home, integration of health and care services and sustainability of the services.

- This assessment process is due to report this autumn and any requirements for local changes are then expected to be planned over the next two years.
- New money has been identified for additional mother and baby beds for existing units serving the Essex and Hertfordshire population. Procurement of these beds begins in November 2016 with the aim of announcing contract awards at the end of March 2017.
- A national 60 day consultation is taking place this autumn, ending December 2016 on a number of CAMHS service specifications, including specifications dealing with the required Psychiatric Intensive Care, Forensic Outreach, and Low and Medium Secure standards. Once agreed, these specifications will become the standards for commissioning and assessing CAMHS services in future. This will need to be completed, along with the needs assessment before any consideration of the configuration of regional services can begin..

4.6 Transforming Care Partnerships (Learning Disabilities)

The national Building the Right Support Programme has 48 local Transforming Care Partnerships working on plans to change services in a way that will make a real difference to the lives of children, young people and adults with a learning disability and/or autism who display behaviour that challenges, including those with a mental health condition. Southend, Essex and Thurrock Transforming Care Partnership's (TCP) plan will begin by investing in community roles and resources to help people with a learning disability and/or autism settle into the community, and improve how it plans to discharge people from hospital. This will include new housing schemes and a community based service for people who are at risk of getting into trouble with the law. Moving on, the focus will be more transformation and prevention work for both children and adults. To do this the TCP will improve access to housing, leisure and health support. At the same time, it will make sure that specialist services for people with a learning disability and/or autism shift from hospitals and into the community. In Essex in December 2015, there were 28 people in NHS England commissioned inpatient beds, seven of whom had been in hospital for more than five years.

National modelling shows that there should be 20-25 inpatients per million in NHS England funded Secure beds which would be 29-36 placements in Essex. Numbers of NHS England funded secure beds, including CAMHS are broadly in line with national expectations so there is unlikely to be significant change affecting the Essex population.

4.7 Congenital Heart Disease (CHD)

CHD services have been reviewed nationally and a public consultation is due to launch before the end of 2016 on proposed changes to the configuration of the service to ensure it meets agreed clinical standards. There is no CHD centre in Essex but we are supporting the national team to understand whether Essex patients may be affected by the proposed changes to centres within the Midlands and East of England and London. Once this work is complete, we will keep local Scrutiny Committees informed of any expected impact.

4.8 Intestinal Failure

A national exercise to re-procure Type 2 and 3 specialised Intestinal Failure services has been paused following an audit of current activity and to enable further work on the tariff for the service. Type 2 services are surgical and medical services provided in specialist centres, type 3 services are medical services and oversight of parenteral nutrition services which are coordinated by a hospital but delivered at home. There are two highly specialised centres in England – one in Salford and one in London. The whole of the Midlands and East region treats just over 60 patients per year for Type 2 services and just over 280 patients per year for Type 3 services. A very small proportion of these are Essex patients, some of whom have their care coordinated by Basildon and Thurrock University Hospitals NHS Foundation Trust. To meet national standards, a centre needs to treat a minimum of ten patients per year for Type 2 services and 20 patients for Type 3 as daily specialist input is required from GI clinicians, along with adequate nursing specialty and pharmacy availability. Engagement will take place with all existing providers and patient groups over the future provision and configuration of services to ensure patients are able to access the specialist care they need, prior to a procurement exercise. The timescale for this work is pending.

5.0 CONCLUSION

This document provides an update on a number of areas of potential service change within specialised services. Three of these are being dealt with separately by Oversight and Scrutiny Committees in Essex and are only mentioned briefly here. The remaining services covered in this paper are subject to national reviews but not expected to undergo significant change within Essex. They are included here for briefing purposes and further information can be provided on request or presented at a later date when any potential impact on Essex patients is clearer.

Paper prepared by:

Jessamy Kinghorn, Head of Communications and Engagement, and

Ruth Ashmore, Assistant Director of Specialised Commissioning for the East of England.