

Joint Health Overview and Scrutiny Committee

**Tuesday 22 September, 2015 at 2.00 pm
in Committee Room 1, Sandwell Council House, Freeth Street, Oldbury**

Agenda

(Open to Public and Press)

1. Apologies for absence.
2. Members to declare:-
 - (a) any interest in matters to be discussed at the meeting;
 - (b) the existence and nature of any political Party Whip on any matter to be considered at the meeting.
3. To confirm the minutes of the meeting of the Joint Health Scrutiny Committee held on 1 July, 2015 as a correct record.
4. Primary Care.
5. Urgent Care.
6. End of Life Care.

Distribution:

Sandwell Metropolitan Borough Council:

Councillors Paul Sandars, David Hosell, Ann Jarvis, Bob Lloyd and Bob Piper.

Birmingham City Council:

Councillors Majid Mahmood, Sue Anderson, Andrew Hardie, Karen McCarthy and Sharon Thompson.

Agenda prepared by Rebecca Hill
Democratic Services Unit
Sandwell MBC
Tel No: 0121 569 3834
E-mail: Rebecca_hill@sandwell.gov.uk

Chairs Announcement

Please note that members of the public and the press are now allowed by law to film, audio record, take photographs, blog or tweet at this meeting. I would ask at this point if anyone is intending to film the meeting? I would ask anyone who is recording to avoid any disruption of the meeting and to avoid filming members of the public. If you do film members of the public there is the potential for civil action against you by anyone who has not given their permission to be filmed.

We are not expecting a fire drill, so in the event of the fire alarm sounding, please leave the building as quickly as possible. The Governance Services Officer will direct you to the appropriate exit and assembly point.

Apologies

To receive any apologies from members

Declarations of Interest

Members to declare any interests in matters to be discussed at the meeting.

BIRMINGHAM CITY COUNCIL AND SANDWELL MBC

**JOINT HEALTH OVERVIEW AND
SCRUTINY COMMITTEE (BIRMINGHAM
CITY COUNCIL AND SANDWELL
METROPOLITAN BOROUGH COUNCIL)
1 JULY 2015**

MINUTES OF A MEETING OF THE JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE (BIRMINGHAM CITY COUNCIL AND SANDWELL METROPOLITAN BOROUGH COUNCIL) HELD ON WEDNESDAY 1 JULY 2015 AT 1415 HOURS IN COMMITTEE ROOMS 3 AND 4, COUNCIL HOUSE, BIRMINGHAM

PRESENT: - Councillor Majid Mahmood (Chairperson); Councillors Sue Anderson, Andrew Hardie, David Hosell, Bob Piper, Paul Sandars and Sharon Thompson.

IN ATTENDANCE:-

Jayne Dunn – Change Team, Sandwell and West Birmingham NHS Hospitals Trust
Janet Foster – Healthwatch Sandwell
William Hodgetts – Healthwatch Sandwell
Paul Holden – Committee Manager
Nighat Hussain – Programme Director, Sandwell and West Birmingham Clinical Commissioning Group (CCG)
Rose Kiely – Group Overview and Scrutiny Manager
Therese McMahon – End of Life Care Project Lead, Sandwell and West Birmingham CCG
Jayne Salter-Scott – Head of Engagement, Sandwell and West Birmingham CCG
Dr Deva Situnayake - Associate Medical Director Innovation and Transformation, Sandwell and West Birmingham NHS Hospitals Trust
Sarah Sprung – Scrutiny Lead, Sandwell Metropolitan Borough Council

APOLOGIES

1/15 Apologies were submitted on behalf of Councillors Ann Jarvis, Bob Lloyd and Karen McCarthy for their inability to attend the meeting.

DECLARATIONS OF INTERESTS

2/15 Members were reminded that they must declare all relevant pecuniary and non-pecuniary interests relating to any items of business to be discussed at this meeting. If a pecuniary interest was declared a Member must not speak or take part in that agenda item. Any declarations would be recorded in the minutes of the meeting.

MINUTES OF PREVIOUS MEETING

3/15 The Minutes of the meeting held on 3 December, 2014 were confirmed.

(This item of business was brought forward on the agenda)

UPDATE ON THE URGENT CARDIOLOGY, EMERGENCY SURGERY AND TRAUMA ASSESSMENT PROPOSED RECONFIGURATIONS

The following report was submitted:-

(See document No. 1)

Nighat Hussain, Programme Director and Jayne Salter-Scott, Head of Engagement, Sandwell and West Birmingham Clinical Commissioning Group (CCG) together with Jayne Dunn, Change Team and Dr Deva Situnayake, Associate Medical Director, Innovation and Transformation, Sandwell and West Birmingham NHS Hospitals Trust were in attendance.

The following PowerPoint slides were presented to the Joint Health Scrutiny Committee:-

(See document No. 2)

During the discussion that ensued the following were amongst the issues raised and comments made further to questions:-

- a) It was asked that the representatives come back with information showing what they'd done working with transport providers to increase the bus network so that there was good accessibility to the hospitals from areas on the CCG boundary e.g. Cradley Heath, Tipton, Perry Barr.
- b) A Member voiced deep concern regarding the possibility of ambulances not being able to arrive at City Hospital quickly enough in life and death situations due to levels of traffic on Dudley Road.
- c) The Joint Health Scrutiny Committee was advised that an assurance had been received from the Ambulance Service that they could support the proposed new arrangements, subject to the additional funding that the CCG would provide.
- d) It was indicated that only a small number of the patients each day that transferred from the City Emergency Department to Sandwell Hospital for emergency surgery needed to be taken by ambulance.
- e) Members were informed that at present if the ageing equipment in one of the existing cardiac laboratories failed to function satisfactorily the patients would have to be transferred to the other hospital site; consequently continuing with the present arrangements was not without its risks. Furthermore, investing in two new laboratories on one site would help in attracting the best medical staff and patients that arrived at City Hospital by ambulance would on a 24/7 basis be able to go direct to the right team. The proposals were not about generating savings.
- f) Patient transfer from City Hospital to Sandwell Hospital for emergency surgery already happened and if needed an ambulance was used.

Joint Health Overview and Scrutiny Committee (Birmingham City Council and Sandwell Metropolitan Borough Council - 1 July 2015

- g) An apology was made for not showing New Cross Hospital on the sixth slide.
- h) A Member voiced concern that the word safety had not been mentioned and considered that as a few minutes could be crucial in terms of saving lives there was a need for specific figures on the transfer times between Sandwell and City Hospitals. In addition, there was a need for more reassurance to be provided further to concerns over traffic congestion around City Hospital.
- i) The Joint Health Scrutiny Committee was informed that self-presenting patients who arrived at City Hospital could in emergency situations be transferred by ambulance to Sandwell Hospital within fifteen minutes.
- j) In response to comments made, Members were advised that a review of patient transport being led by Birmingham CrossCity CCG was Birmingham-facing and did not cover the Sandwell and West Birmingham hospitals. However, the representatives indicated that they had not received any information on a Network West Midlands Bus Services Review that was referred to at the meeting.
- k) The meeting was advised by a Member that people had been informed that the ambulance service would be able to cope when maternity services moved to City Hospital; however he considered that this had not been the case.
- l) Members were notified that no problems were envisaged in terms of seeking approval to the allocation of the additional funding that the Ambulance Service would require.
- m) A Member considered that there was a need for direct feedback from the ambulance service on their proposed arrangements.
- n) The Joint Health Scrutiny Committee was advised that apart from the ambulance journeys the Sandwell and West Birmingham NHS Hospitals Trust provided patient transport between the hospitals.
- o) It was indicated that no definite assurances could be given in respect of the public transport arrangements that would be in place given that the service providers were separate from the NHS; however, Members were informed that it was important that the NHS worked with them and had conversations in respect of the bus services review mentioned in j) above.

(At 1520 hours the Chair announced that the Joint Health Overview and Scrutiny Committee meeting would be adjourned for five minutes)

The meeting upon re-convening was informed that the Sandwell Members would be prepared to endorse the recommendations subject to a further report being submitted their Health Scrutiny Committee meeting on 6 August 2015 providing transport information; details of the outcome of conversations in respect the bus services review that had been raised; and also clarifying the ambulance service arrangements associated with the service reconfigurations.

At this juncture, a Member informed the meeting that the Birmingham and Solihull Joint Health Overview and Scrutiny Committee was scheduled to consider the issue of non-emergency patient transport at its next meeting. A brief discussion then ensued during which it was felt that consideration should

Joint Health Overview and Scrutiny Committee (Birmingham City Council and Sandwell Metropolitan Borough Council - 1 July 2015

be given going forward to also holding a meeting in the future involving Members from both this and the Birmingham and Solihull Joint Health Overview and Scrutiny Committee to look at the transport arrangements and to identify where there might be gaps in provision.

It was also stressed to the representatives that in relation to secondary care, travel arrangements were always an issue. Consequently, hospitals needed to guarantee that there were the crews on hand to take patients to and from acute facilities and that there was a good bus network in place without which any proposed service arrangements would not work.

4/15

RESOLVED:-

- (a) That, subject to information being provided to the Sandwell Members, this Joint Health Overview and Scrutiny Committee endorses the recommendations to reconfigure:-
- Single site interventional cardiology service at City Hospital with an implementation date of early August, 2015
 - Single site emergency surgery and trauma assessment service at Sandwell Hospital with a likely implementation date in the autumn of 2015
- (b) that a further report be submitted to the Sandwell Health Scrutiny Committee meeting on 6 August 2015 providing transport information for patients and visitors including projected patient transport journey times for transfers between the two hospital sites; details of the outcome of conversations in respect the bus services review raised; and also clarifying the ambulance service arrangements associated with the service reconfigurations.

URGENT AND EMERGENCY CARE PROGRAMME UPDATE

5/15

The following report was received:-

(See document No. 3)

Nighat Hussain, Programme Director and Jayne Salter-Scott, Head of Engagement, Sandwell and West Birmingham Clinical Commissioning Group were in attendance.

The following PowerPoint slides were presented to the Joint Health Scrutiny Committee:-

(See document No. 4)

Joint Health Overview and Scrutiny Committee (Birmingham City Council and Sandwell Metropolitan Borough Council - 1 July 2015

During the discussion that ensued the following were amongst the issues raised and comments made further to questions:-

- a) In referring to an event held the previous day a Member indicated that he would welcome the creation of a Hub covering Rowley Regis, Wednesbury etc in respect of which there was great support.
- b) Further to comments the Members were advised that a lot of work was carried out aimed at encouraging greater use of NHS 111 by citizens.
- c) The Head of Engagement undertook to provide feedback via the Group Overview and Scrutiny Manager in response to a view expressed that not all the information listed as bullet points on the sixth slide were effective measures of the extent of consultation that had taken place.
- d) In response to a question, Members were advised that it was considered that people often visited Walk-in centres because they could not book a GP appointment and that more work needed to be done to address this issue.
- e) Mention was made of the need for greater use to be made of pharmacies to free-up GP appointments for more serious cases and for there to be appropriate two-way communication between pharmacies and GP practices.
- f) The Joint Health Scrutiny Committee was informed that there was close work with the voluntary sector in terms of targeting people who were not registered with a GP.
- g) A Member highlighted the need for GP surgery opening hours in some local areas to coincide with the times when, dependent on their working hours / shift patterns, the patients required appointments.

The Chair asked that when the representatives next reported to the Joint Health Overview and Scrutiny Committee information also be provided on what was being done to promote greater use of NHS 111 by citizens.

UPDATE ON THE PROCUREMENT OF END OF LIFE CARE SERVICES ACROSS SANDWELL AND WEST BIRMINGHAM CLINICAL COMMISSIONING GROUP (CCG)

6/15 The following report was received:-

(See document No. 5)

Therese McMahon, End of Life Care Project Lead, Sandwell and West Birmingham Clinical Commissioning Group (CCG) introduced the information contained in the report.

In the course of the discussion that ensued the following were amongst the issues raised and comments made further to questions:-

- a) The End of Life Care Project Lead advised Members that there had been huge stakeholder involvement and that she would be surprised if there was not a viable bid arising from the latest tendering process.
- b) A Member considered that the Social Impact Bond (SIB) procurement process had been a disaster and voiced concern that it had resulted in money being wasted.

Joint Health Overview and Scrutiny Committee (Birmingham City Council and Sandwell Metropolitan Borough Council - 1 July 2015

- c) It was highlighted that with an open procurement process it was not possible to restrict who could submit a bid.
- d) The Joint Health Scrutiny Committee was advised that most of the costs associated with the discontinued process to secure a SIB had been met by the Department of Health; however this time around NHS costs were being incurred locally.
- e) Members were advised that services at present continued to be provided by a range of hospital and charitable organisations albeit not in an integrated way.

In response to a question from the Chair, Members were advised that it would not be known until mid-August whether the representative would be in a position to report back to the Joint Health Scrutiny Committee in September 2015.

DATE OF NEXT MEETING

7/15

The Chair advised the meeting that he and Councillor Paul Sandars would agree a date and time for the next meeting in due course.

The meeting ended at 1615 hours.

.....
CHAIRPERSON

Delivering better care for Sandwell and West Birmingham

General practice (GP) listening exercise

September 2015



healthcare
without boundaries

Background

In April 2015, we were one of 64 CCGs to take on responsibility for commissioning (buying) GP services.

Previously this was managed by NHS England.

This means we:

- Decide how many GP surgeries are needed and where they should be located
- Check the quality of care provided
- Respond to patient concerns and complaints.

This is our opportunity to review GP services



GP surgeries in
Sandwell and West
Birmingham

What is general practice?

Core GP services

All patients have the right to:



Additional services

Some GP surgeries also choose to provide additional services for patients,



Out-of-hours GP services

You can get urgent GP advice when your practice is closed in the evening or during weekends through the out-of-hours GP service.



Our vision

We want to ensure GP services:

- Offer consistent, high quality care with fair access for all patients
- Deliver joined-up services for patients, working with other services
- Support patients to make informed choices about self-care and prevent ill health
- Seek continuous improvement, looking at best practice and technology
- Listen to patients to create a better patient experience.

Fact:

53% of all GP appointments are offered on the same day, which is above the national average



Why are we reviewing services?

Locally we know that:

- Surgeries are facing increasing demand
- There is variation between surgeries e.g. different opening times
- Every day there are wasted appointments
- Fewer medical students are choosing to work in GP services
- People are going to GP services with minor ailments
- 1 in 5 people go to A&E, without considering GP services first

Did you know:

Pharmacies offer much more than prescriptions.

They can help with:

- Coughs and colds
- Emergency contraception
- Head lice
- Stopping smoking and much more...

Why are we reviewing services?

The national picture:

In 2014 the Five Year Forward View was launched, which outlines the national direction for the NHS:

The document recommends:

- GPs should be working in partnerships to offer additional services
- GPs should work with other services e.g. social care to deliver joint care plans
- GPs could take on more responsibility for planning a patient's care, by organising contracts
- Recruiting more GPs and nurses



How you can support GP services

The NHS Constitution sets out the values of the NHS. It outlines what patients can expect their NHS to deliver e.g. high quality and safe services

The Constitution also guides patients on how they can support their NHS, by:

- Registering with a GP
- Following their treatment plan
- Looking after their health and wellbeing
- Treating NHS staff with respect
- Keeping appointments, or cancelling them in good time
- Sharing feedback on their care

We have a world leading healthcare system. However, it is under pressure. By taking care of our health we can help reduce demand on the future NHS



What we have heard so far

Patients have told us:

- They are generally happy with GP services- but access remains the biggest issue
- They prefer to see a regular GP rather than a locum
- It can be difficult to get an urgent appointment
- They are generally confident in the services.

Did you know:

GP surgeries have patient participation groups?

Patients meet regularly to discuss:

- Any concerns
- Improvements that can be made

Speak to your practice manager to find out more

Every six months the NHS carries out a national patient survey. In July 2015, over 9,000 patients responded in Sandwell and West Birmingham and said:

77%



described their experience of GP services as good

77%



said they were able to get an appointment to see or speak to a GP or nurse

89%



of patients said this appointment was at a convenient time for them

72%



were satisfied with the hours their GP surgery is open

88%



had confidence and trust in the GP they saw or spoke to

68%



of patients described the out-of-hours GP service as good.

Opportunities for change

There are a number of opportunities we can consider:

- Using new technologies
- Providing additional services in GP surgeries
- Encouraging everyone to register with a GP
- Improving access to GP appointments, by reducing missed appointments

There is a lot for us to consider, which is why we want to hear your suggestions

We are investing £20million into GP services over the next three years:

We want GP services to sign up to a new scheme to:

- Improve access
- Reduce variation
- Improve patients' wellbeing
- Improve patient experience

We hope to launch this scheme later this year

Ways to get involved

Listening exercise closes Friday, 9 October 2015

- **Events:**

- **Thursday 24 September**, 6pm at Elim Church, Victoria Street, West Bromwich, B70 8EX
- **Wednesday 30 September**, 10am in the main meeting room, Tower Hill Surgery, 433 Walsall Road, Perry Barr, Birmingham, B42 1BT

- **Online survey:**

www.sandwellandwestbhamccg.nhs.uk

- **Paper survey:**

Please collect one of our booklets and send back the survey to our freepost address



What happens next?

- We are speaking to patients, clinicians and the public
- Survey closes 9 October 2015
- We will listen to your feedback in developing our Five Year Strategy
- A report will be produced and taken to our Governing Body and Primary Care Committee
- The report will also be published on our website

Contact us

- **Phone:**
0121 612 1447
- **Email:**
Swbccg.engagement@nhs.net
- **Write to us:**
Freepost
RTHG-KAKC-RTBZ,
Engagement,
Sandwell and West Birmingham
Clinical Commissioning Group,
Kingston House,
438 High Street,
West Bromwich,
B70 9LD

Listening to your views on GP services

- Is our vision right?
- What are your experiences of these services?
- What works well?
- How can we improve services?



The background is a solid teal color. On the left side, there are several overlapping, curved shapes in a lighter shade of teal. These shapes are abstract and resemble stylized, overlapping petals or segments of a circle. They are arranged in a way that creates a sense of depth and movement.

Questions?

Improving general practice (GP) services



Delivering better care in Sandwell
and West Birmingham

Listening exercise closes 9 October 2015

Welcome

In April 2015, we took on responsibility for commissioning (buying) GP services, which gives us the opportunity to review services and look at how we can improve care for you.



Dr Nick Harding
Chair

GP services are at the heart of the health and social care system. They are often the first point of contact when you are feeling unwell. They are also best placed to co-ordinate your care, linking with other health and social care colleagues. GPs are able to identify patients at risk of becoming unwell, and help support them to maintain their health and wellbeing.

Our aim is to bring care closer to home and we are now offering more services in GP practices than ever before. We hope this will help improve the patient experience and reduce unnecessary visits to hospital.

We want to hear your views on GP services in Sandwell and West Birmingham, including what works well and what could be further improved. Your feedback will help us design and build a better service for the future.

A stylized, handwritten signature in black ink, consisting of several overlapping loops and a long horizontal stroke extending to the right.

Dr Nick Harding OBE
Chair
NHS Sandwell and West Birmingham CCG

The Smethwick Medical Centre



Glossary

You can find an explanation of the terms used in this document in the glossary on page 26.

Background

In April 2015, NHS England gave 64 Clinical Commissioning Groups (CCGs) responsibility for general practice (GP) services. This means CCGs:

- Decide how many GP surgeries are needed and where they should be located
- Check the quality of care provided
- Respond to patient concerns and complaints.

NHS Sandwell and West Birmingham Clinical Commissioning Group is responsible for buying and monitoring local health services such as doctors, hospitals and mental health services.

There are 100 GP surgeries in Sandwell and West Birmingham.

GP surgeries are independent businesses, and the CCG holds contracts with the surgeries to deliver quality patient care.





What are GP services?

Doctors have a nationally agreed contract with their CCG to provide consistent and high quality care to patients.

Core GP services

All patients have the right to:



Additional services

Some GP surgeries also choose to provide additional services for patients, these could include:

Longer opening hours, including weekend appointments

Booking appointments online

Extra clinics, for example, diabetes clinics

Diagnostic tests, for example, blood tests.

Out-of-hours GP services

You can get urgent GP advice when your practice is closed in the evening or during weekends through the out-of-hours GP service. Depending on your condition, you will be given:

Advice from a GP and told where you can go for medication

Be seen by a GP either at your home, or in an out-of-hours GP clinic.

To contact the out-of-hours GP service, phone NHS 111.

Smaller surgeries may work in partnership with other surgeries to provide these additional services. Part of our challenge is how we ensure that patients across the area have equal access to quality care.



Did you know...

On average 9,000 patients are offered a same day GP and nurse appointment each week.

53% of all GP appointments are offered on the same day, which is above the national average.

Why are we launching a listening exercise?

In 2014, Simon Stevens, NHS England's Chief Executive launched the Five Year Forward View. This outlines the national direction for the NHS. Across the country, CCGs are working with GPs and patients to look at how we respond to this national strategy.

The Five Year Forward View recognises how important GP services are to a patient's care and makes a number of recommendations:

- GP surgeries should be working in partnerships to offer additional services for patients
- GP surgeries should be working closely with other services, for example district nursing and social care to develop joint care plans for patients
- GP surgeries could take on more responsibility for planning a patient's care, by organising contracts with other services such as hospitals. This is traditionally the role of a CCG
- Recruiting more GPs and nurses to work in surgeries, to help reduce the need for locum GPs/ nurses.

Locally we know that:

- Surgeries are facing increasing demand for services from patients
- There is variation between different GP surgeries, for example, different opening times, leading to inequity for patients
- Every day there are wasted appointments, which could have been given to other patients
- There are fewer medical students and nurses choosing to work in GP services than other parts of the health system, this could lead to a future shortage
- 1 in 5 people decide to go to A&E, without considering GP services first. Many patients could have been treated in GP services, which would reduce demand on A&E services.

In taking on responsibility for buying GP services, we want to carry out this listening exercise to ensure GP services are meeting patients' needs and are fit for the future.



Our vision

We want to ensure GP services:

- Offer consistent, high quality care with fair access for all patients
- Work with other health and social care teams to deliver joined-up services for patients
- Support patients to make informed choices about self-care and prevent ill health
- Seek continuous improvement, looking at best practice and technology
- Listen to patients to create a better patient experience.

NHS Constitution

The NHS Constitution is a national document, which sets out the values of the NHS. Under the Constitution every patient has the right to expect their NHS to deliver:

- A comprehensive service available to all
- Services based on clinical need, not on the ability to pay
- High quality and safe services
- Services that put the patient's needs first.

The NHS Constitution also guides patients on how they can support the NHS in return, by:

- Registering with a GP
- Following their treatment plan
- Looking after their health and wellbeing; for example by maintaining a healthy diet, stopping smoking, reducing alcohol intake and keeping up-to-date with vaccinations
- Treating NHS staff with respect
- Keeping appointments, or when unavoidable, cancelling them within good time
- Sharing feedback on their care.

Did you know...

Pharmacies offer much more than prescriptions, they can help you with:

- Managing minor ailments like a cough or cold
- Emergency contraception

By encouraging patients to use pharmacies for minor ailments, we can make more urgent GP appointments available.



Case study (head lice)

Head lice can be treated with medicines from the pharmacist instead of visiting your GP.

Pharmacists offer expert advice on a range of illnesses and injuries and will be able to tell you if you need to book a GP appointment, or seek more urgent care.

What have we heard so far?

Over the past few months we have spoken to patients who told us:

- They are generally happy with GP services – but access remains the biggest issue
- They prefer to see a regular GP rather than a locum
- It can be difficult to get an urgent appointment
- They are generally confident in the services.

Every six months the NHS carries out a national patient survey. In July 2015, over 9,000 patients responded in Sandwell and West Birmingham and said:

77%



described their experience of GP services as good

77%



said they were able to get an appointment to see or speak to a GP or nurse

89%



of patients said this appointment was at a convenient time for them

72%



were satisfied with the hours their GP surgery is open

88%



had confidence and trust in the GP they saw or spoke to

68%



of patients described the out-of-hours GP service as good.

If you receive a copy of the patient survey through the post, please take part. Your comments can help us to improve services.



Opportunities for change

There are a number of opportunities we can consider for our area:

- Explore using new technologies, for example, online appointments and bookings
- Providing additional services in GP surgeries, bringing care closer to home
- Raise awareness of GP surgeries to encourage everyone to register with a GP
- Improve access to urgent GP appointments by reducing the number of missed appointments and supporting those with less serious needs to plan appointments in advance.

Primary Care Commissioning Framework

Over the next three years we are investing £20 million into a primary care development scheme. Surgeries can sign up to take part and deliver additional services, which will deliver a number of improvements for patients:

- Improved and consistent access (for example, longer opening hours)
- Reduced variation amongst GP surgeries
- Improved wellbeing through health information and prevention services
- Improved patient experience (for example, support for carers).

There is a lot for us to consider, which is why we want to hear your suggestions for future services in Sandwell and West Birmingham. If you want to find out more and get involved contact your practice manager or local patient participation group.

How can you help?

We want to hear your suggestions on what works well in GP services and what could be improved. This will help us to create our five year Primary Care Strategy, which will set out our plans for delivering quality GP services in Sandwell and West Birmingham.



Ways to get involved

There are a number of ways you can get involved in our listening exercise:

- Attend our public events:
 - [Thursday 24 September 2015](#), 6pm at Elim Church, Victoria Street, West Bromwich, B70 8EX
 - [Wednesday 30 September 2015](#), 10am in the main meeting room, Tower Hill Surgery, 433 Walsall Road, Perry Barr, Birmingham, B42 1BT
- Attend your local patient participation group at your GP surgery
- We attend a number of neighbourhood-based meetings, if you would like us to speak to your group please contact us
- Complete our online survey at www.sandwellandwestbhamccg.nhs.uk
- Alternatively complete the survey in this booklet and return it to our freepost address [RTHG-KAKC-RTBZ, Engagement, Sandwell and West Birmingham, Clinical Commissioning Group, Kingston House, 438 High Street, West Bromwich, B70 9LD](#)

Listening to your views

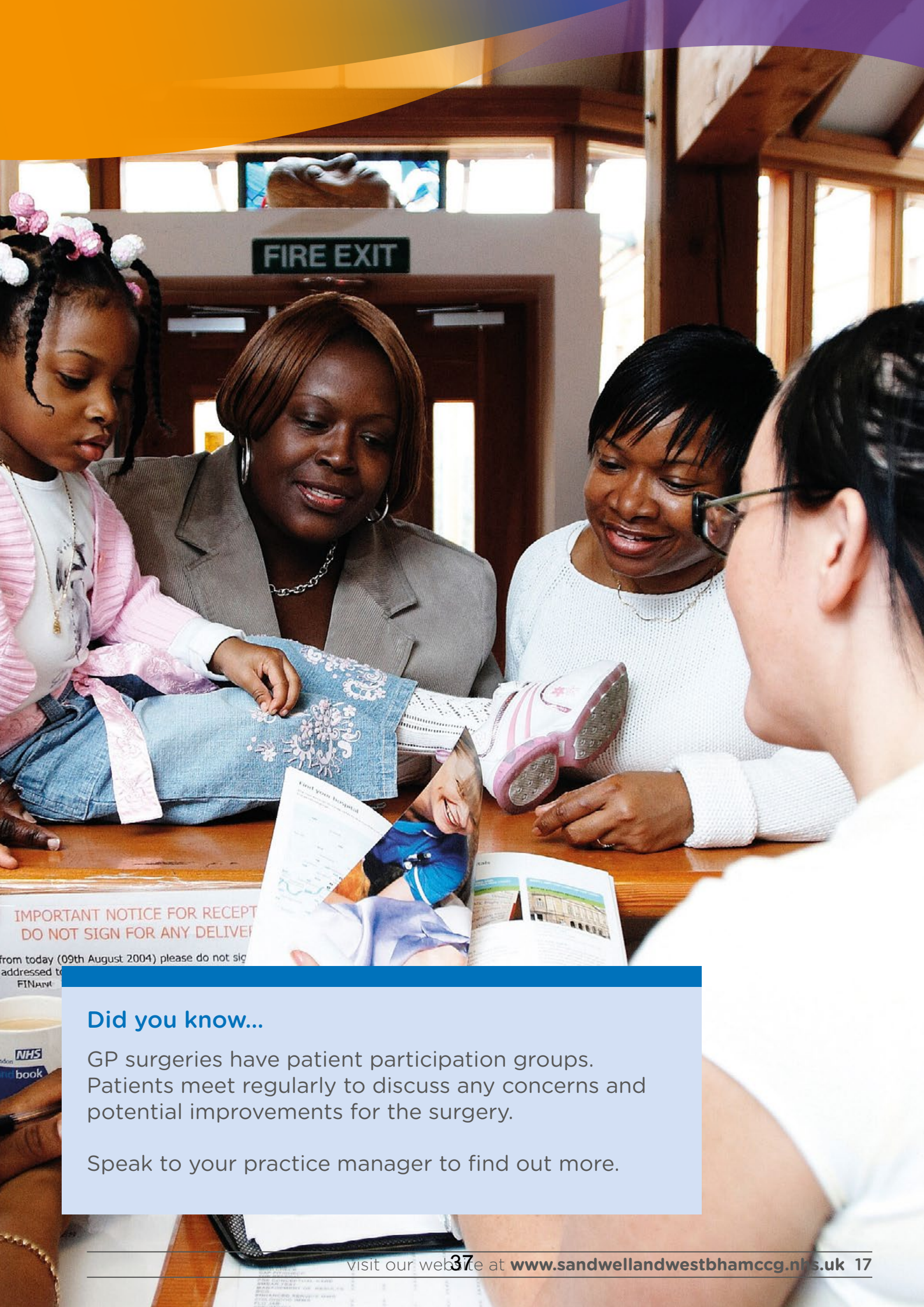
A listening exercise report will be taken to our Primary Care Co-Commissioning Committee and our Governing Body. We will also make this available on our website www.sandwellandwestbhamccg.nhs.uk. Your feedback will be used as we develop our five year Primary Care Strategy.

If you would like us to present the findings of this report to your group or would like a copy of the final report contact our Engagement Team.

Contact us

For more information contact our **Engagement Team** on **0121 612 1447** or email swbccg.engagement@nhs.net

To request the information in alternative formats, including other languages, braille, audio and easy read, please call us on **0121 612 1447**.



FIRE EXIT

IMPORTANT NOTICE FOR RECEIPT
DO NOT SIGN FOR ANY DELIVER

from today (09th August 2004) please do not sign
addressed to
FINANCIAL

Did you know...

GP surgeries have patient participation groups. Patients meet regularly to discuss any concerns and potential improvements for the surgery.

Speak to your practice manager to find out more.

Survey

NHS Sandwell and West Birmingham Clinical Commissioning Group (CCG) is responsible for commissioning (buying) healthcare services for our local population. We want to hear your views and experiences so we can understand what works well, what doesn't and what improvements could be made for patients and their carers. Please let us know your views and experiences by taking the time to complete the survey. This will help us understand how we can improve GP services in Sandwell and West Birmingham. The deadline for all responses is Friday 9 October.

Section one

1. How would you describe yourself? (tick all that apply).

I am a patient	<input type="checkbox"/>
I am a carer or relative of someone using these services	<input type="checkbox"/>
I work for a voluntary or community sector organisation	<input type="checkbox"/>
I work within GP services	<input type="checkbox"/>
I work within the wider NHS	<input type="checkbox"/>
I work for a local authority	<input type="checkbox"/>
Other - please state	

2. On page 10 we outline our vision for GP services. How far do you agree with our vision for GP services? (1 is strongly agree and 5 is strongly disagree).

Please give your reasons	<input type="checkbox"/> 1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5.
.....	
.....	
.....	

Survey

Section two: using GP services

Please complete this section if you are a patient or carer of a patient registered with a GP surgery in Sandwell and West Birmingham. If this does not apply to you, please move to section three.

3. How long have you been registered with your GP surgery?

Under six months	<input type="checkbox"/>
From six months up to a year	<input type="checkbox"/>
Between one and three years	<input type="checkbox"/>
Over three years	<input type="checkbox"/>

I am not registered with a GP surgery - please give your reasons for this:

Other - please state

4. In the last six months how many appointments have you had at your GP surgery?

None	<input type="checkbox"/>
One	<input type="checkbox"/>
Two	<input type="checkbox"/>
Three	<input type="checkbox"/>
Four	<input type="checkbox"/>
Five	<input type="checkbox"/>
Over five	<input type="checkbox"/>
Not sure	<input type="checkbox"/>

Survey

5. Please rate your general experience of your GP surgery according to the following criteria (1 is very good 5 is very poor)

I am usually able to get an appointment at a convenient time for me	<input type="checkbox"/> 1.	<input type="checkbox"/> 2.	<input type="checkbox"/> 3.	<input type="checkbox"/> 4.	<input type="checkbox"/> 5.
It is easy to get through to the practice	<input type="checkbox"/> 1.	<input type="checkbox"/> 2.	<input type="checkbox"/> 3.	<input type="checkbox"/> 4.	<input type="checkbox"/> 5.
Practice staff are helpful	<input type="checkbox"/> 1.	<input type="checkbox"/> 2.	<input type="checkbox"/> 3.	<input type="checkbox"/> 4.	<input type="checkbox"/> 5.
The surgery is clean	<input type="checkbox"/> 1.	<input type="checkbox"/> 2.	<input type="checkbox"/> 3.	<input type="checkbox"/> 4.	<input type="checkbox"/> 5.
I am treated with dignity and respect	<input type="checkbox"/> 1.	<input type="checkbox"/> 2.	<input type="checkbox"/> 3.	<input type="checkbox"/> 4.	<input type="checkbox"/> 5.
I am involved in decisions about my care	<input type="checkbox"/> 1.	<input type="checkbox"/> 2.	<input type="checkbox"/> 3.	<input type="checkbox"/> 4.	<input type="checkbox"/> 5.
I am able to see the GP/nurse I want to	<input type="checkbox"/> 1.	<input type="checkbox"/> 2.	<input type="checkbox"/> 3.	<input type="checkbox"/> 4.	<input type="checkbox"/> 5.
I am given enough information to support me to manage my health	<input type="checkbox"/> 1.	<input type="checkbox"/> 2.	<input type="checkbox"/> 3.	<input type="checkbox"/> 4.	<input type="checkbox"/> 5.

6. How can we help you to look after yourself, when you are feeling unwell? Please list up to three ways:

1.
2.
3.

Survey

Section three: working in a GP surgery

Please complete this section **if you work** in a GP surgery in Sandwell and West Birmingham. If you don't work in a GP surgery, please go to section four

7. Please rate your overall experience of working in the GP surgery? (1 is very good and 5 is very poor):

Please give your reasons 1. 2. 3. 4. 5.

.....

.....

.....

8. List the three biggest challenges to your GP surgery at the moment:

1.

2.

3.

Survey

Section four: future services

9. How do you think we could improve GP services?
Please list up to three ways:

1.

2.

3.

10. We are considering some ideas to make it easier for you to access NHS services. These would not replace being able to see a GP or nurse in person. Which of the following would you support where 1 is very supportive and 5 is very unsupportive (please tick)

Booking appointments over the internet 1. 2. 3. 4. 5.

Downloading a mobile phone app, with real-time information on waiting times 1. 2. 3. 4. 5.

Booking appointments with NHS 111 1. 2. 3. 4. 5.

Speaking to a GP or nurse over the internet 1. 2. 3. 4. 5.

Getting advice from a GP or nurse over the phone 1. 2. 3. 4. 5.

A mobile phone app, which you can use to search for information on where to access different types of health services 1. 2. 3. 4. 5.

Other... (Please state)

.....

.....

.....

Survey

Section five

11. What is your postcode? This will help us assess whether we are receiving responses from across Sandwell and West Birmingham

□ □ □ □ □ □ □ □ □ □

12. What is your ethnic group?

White			
English, Welsh, Scottish, Northern Irish, British	<input type="checkbox"/>	Irish	<input type="checkbox"/>
Gypsy / Irish Traveller	<input type="checkbox"/>	Any other White background, please describe	<input type="checkbox"/>
Eastern European	<input type="checkbox"/>		
Asian / Asian British:			
Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Any other Asian background, please describe			<input type="checkbox"/>
Black / African / Caribbean / Black British:			
African	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
Any other Black / African / Caribbean background, please describe			<input type="checkbox"/>
Mixed / Multiple Ethnic:			
White and Black Caribbean	<input type="checkbox"/>	White and Black African	<input type="checkbox"/>
White and Asian	<input type="checkbox"/>	Any other Mixed / Multiple ethnic background, please describe	<input type="checkbox"/>
Any other ethnic group			
Arab	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
Any other ethnic group, please describe			

13. What is your gender?

Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Transgender	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
Other - please state			

14. Are your day-to-day activities limited by a health problem or disability which has lasted or is expected to last over 12 months?

Yes, limited a little	<input type="checkbox"/>
Yes, limited a lot	<input type="checkbox"/>
No	<input type="checkbox"/>

15. Which of the following age categories do you fit into?

17 or under	<input type="checkbox"/>
18 - 24	<input type="checkbox"/>
25 - 34	<input type="checkbox"/>
35 - 44	<input type="checkbox"/>
45 - 54	<input type="checkbox"/>
55 - 64	<input type="checkbox"/>
65 - 74	<input type="checkbox"/>
75+	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

16. What is your religion/faith?

No religion	<input type="checkbox"/>
Christian	<input type="checkbox"/>
Buddhist	<input type="checkbox"/>
Hindu	<input type="checkbox"/>
Jewish	<input type="checkbox"/>
Muslim	<input type="checkbox"/>
Sikh	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>
Other - please state	

17. Which of the following options best describes how you think of yourself?

Heterosexual or straight	<input type="checkbox"/>
Gay or Lesbian	<input type="checkbox"/>
Bisexual	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>
Other - please state	

Thank you for taking part in our survey. We will publish the results on our website in the next few months.

If you would like to be added to our membership list and be kept informed of this work and other projects within the CCG, please email us at swbccg.engagement@nhs.net, or call us on **0121 612 1447**.

Glossary

Clinical Commissioning Group

Clinical Commissioning Groups are responsible for buying and monitoring local health services such as hospitals, district nursing teams and mental health services.

NHS England

This is a national NHS organisation that is responsible for the overall health care service provided across England. NHS England monitors clinical commissioning groups; it also directly buys and manages a number of specialist services including prison healthcare and armed forces healthcare. In April 2015, NHS England agreed that 64 clinical commissioning groups could take on delegated responsibility for managing GP services.

NHS providers

NHS organisations that deliver healthcare services, for example, hospital trusts.

Locums

Surgeries will often pay for agency or independent GPs and nurses to treat patients when their usual GPs or nurses are away, potentially on annual leave or sick leave. These locums are qualified GPs and nurses, who are able to deliver quality care to the expected standards.

Concerned about your care ?



If you have any concerns about the care or treatment you've received from a hospital, community service or GP practice we're here to help.

Contact the Customer Care Team

Tel: 0121 612 4110 or E-mail: swbccg.time2talk@nhs.net

Contact us

If you require this information in alternative formats including other languages, braille, audio and easy read, please contact the engagement team on: 0121 612 1447 or email us at **swbccg.engagement@nhs.net**

Freepost

RTHG-KAKC-RTBZ

Engagement, Sandwell and West Birmingham
Clinical Commissioning Group

Kingston House, 438 High Street, West Bromwich
West Midlands B70 9LD

0121 612 1447

Visit our website at **www.sandwellandwestbhamccg.nhs.uk**

Follow us on **Twitter** @swbccg

We want to hear your views on GP services



...in Sandwell and West Birmingham

- What works well?
- How could we improve services?
- How can we support you to choose the best health service when you're feeling unwell?

Have your say before the listening exercise closes on Friday 9 October 2015

You can get involved in our listening exercise, by:

- Attending one of our events:
Thursday 24 September 2015, 6pm at Elim Church, Victoria Street, West Bromwich, B70 8EX
Wednesday 30 September 2015, 10am in the main meeting room, Tower Hill Surgery, 433 Walsall Road, Perry Barr, Birmingham, B42 1BT
- Responding to our online survey at www.sandwellandwestbhamccg.nhs.uk

We are also holding a range of local community events, to find out more please contact our Engagement Team.

To find out more or to request a paper copy of the survey contact our Engagement Team: phone 0121 612 1447, email swbccg.engagement@nhs.net or visit www.sandwellandwestbhamccg.nhs.uk

2 September 2015

Letter RE: Listening Exercise in Sandwell and West Birmingham

Dear colleague,

I am writing to inform you of our listening exercise on general practice (GP) services.

In April 2015, we took on delegated responsibility for commissioning (buying) GP services. We want to take this opportunity to listen to local people's views on what is working well and what can be improved. This feedback will help us to develop our Five Year Primary Care Strategy.

I have attached the information booklet, which gives further detail around the listening exercise and how you can take part.

We hope as many people as possible will get involved by completing our online survey at www.sandwellandwestbhamccg.nhs.uk between 1 September and 9 October or by coming along to one of our events:

- **Thursday 24 September 2015**, 6pm at Elim Church, Victoria Street, West Bromwich, B70 8EX
- **Wednesday 30 September 2015**, 10am in the main meeting room, Tower Hill Surgery, 433 Walsall Road, Perry Barr, Birmingham, B42 1BT

You can also complete the survey included in the attached booklet and return it to:
RTHG-KAKC-RTBZ,
Engagement,
Sandwell and West Birmingham
Clinical Commissioning Group,
Kingston House,
438 High Street,
West Bromwich,
B70 9LD

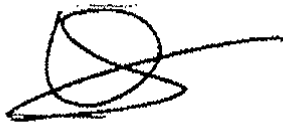
For more information visit our website at www.sandwellandwestbhamccg.nhs.uk

If you or your organisation would like a specific opportunity to discuss the proposed changes we will try to support this, so please contact our Engagement Team on 0121 612 1447 or via email on swbccg.engagement@nhs.net

Our aim is to bring care closer to home and we are now offering more services in GP practices than ever before. We hope this will help improve the patient experience and reduce unnecessary visits to hospital.

We want to hear your views on GP services in Sandwell and West Birmingham, including what works well and what could be further improved. Your feedback will help us design and build a better service for the future.

Yours faithfully



Dr Nick Harding OBE
Chair

Agenda Item 5

Joint Health Overview and Scrutiny Committee

22 September 2015

Urgent and emergency care programme update

1. Summary

Sandwell and West Birmingham Clinical Commissioning Group's urgent and emergency care programme has been established to oversee the development of a sustainable system-wide approach to urgent and emergency care. This involves supporting patients to access the most appropriate care, wherever possible within the community instead of A&E.

In December 2014, the CCG's Governing Body and the Joint Health Overview and Scrutiny Committee endorsed the approach to engage with patients to shape the future urgent care system. As a result, a listening exercise was launched on 9 February 2015 to seek views from the public and stakeholders on what works well and what could be improved in the future.

Following feedback from partners the programme approach has been amended to extend the period of engagement, to support the co-design of a future model with providers.

This paper aims to update the Joint Health Overview and Scrutiny Committee on the urgent and emergency co-design event held on the 30 June 2015. This paper provides a high level programme framework, which is currently under discussion with Right Care Right Here partners.

2. Programme overview

The CCG believes that urgent and emergency care services will be more effective and easier to access if they are provided closer to home where appropriate, are accessible to patients and delivered in clinically- appropriate settings. The future model of urgent and emergency care will ensure that the system is simple to use, efficient and brings together services to improve quality, patient experience and outcomes.

The programme has been developed to review the existing urgent and emergency care system, to bring together existing workstreams and to determine the future model of urgent and emergency care for the local health system in light of the co-design event feedback. The views of patients and stakeholders are fundamental in shaping the development of a future five year Urgent and Emergency Care Strategy. The programme will ensure that any future proposals work seamlessly and enhance the patient pathway.

The programme is clinically led by the CCG's urgent and emergency care GP leads, Dr Manir Aslam and Dr Sirjit Bath.

3. Co-design approach

As part of the listening exercise, an urgent care provider stakeholder forum was held on 25 March 2015. Providers highlighted an appetite for greater involvement in the co-design of the future system. The Right Care Right Here Board in March 2015 supported the collaborative approach.

We believe that a collaborative co-designed model will be the best way forward to deliver more effective and sustainable outcomes and an improved experience for all involved. If the co-design events do not result in a satisfactory outcome, the programme will revert to the original programme plan of developing an options appraisal.

4. Co-design events

As part of the urgent and emergency care listening exercise, a provider stakeholder forum was held on 25 March 2015. Providers highlighted an appetite for greater involvement in the co-design of the future system. This collaborative approach was approved by the Right Care Right Here programme partners in April 2015.

The objectives of the day were to ensure that the discussion and outputs were person-centred and outcome focused:

- Develop the definition of urgent and emergency care
- Identify a level of ambition e.g. how willing are people to change things
- Describe the system – where are the fixed points, what are the consequences of moving/removing these
- Explore through discussion what the system should look like
- Introduce challenges into the thinking through system testing
- Explore to which extent there are preferred options.

The co-design event brought together 80 representatives from health, social and voluntary sector organisations. An external facilitator led delegates through a series of challenging workshops discussing these topics.

Key themes

The following key themes came strongly throughout the co-design event:

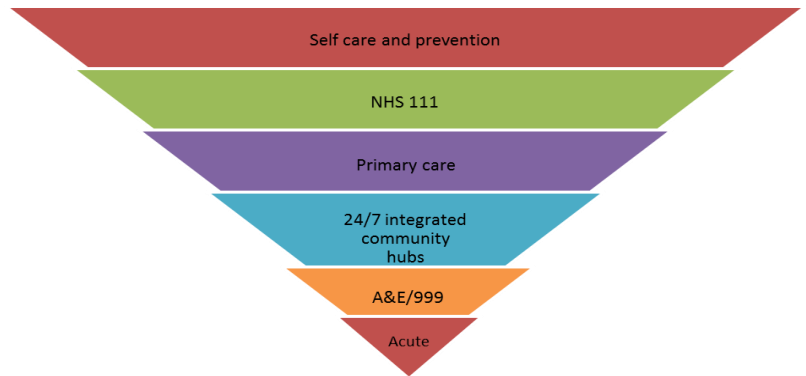
- Self-care/prevention/education (empowering patients to take greater responsibility, supported by effective communications)
- Workforce (scale of challenge and skillset)
- Robust IT systems required
- Refocusing NHS 111
- Hub and spoke model (integrated multi-disciplinary approach between primary care, community services, social care and mental health)
- Resources
- Commissioning differently.

Opportunities

Feedback from delegates has been positive, and there are a number of opportunities that need to be considered in the near future, including the potential for becoming a vanguard. It was agreed that an urgent RCRH executive meeting would be convened to agree the appetite going forward.

Draft vision of the new urgent and emergency care system

The discussion at the co-design event highlighted the need to have a clear vision and model, this diagram attempts to capture the essence of the discussion.



Draft framework to support the way forward

The co-design event highlighted the scale of challenge and opportunity ahead, and it is recognised that to deliver this whole system transformation a structured and robust programme is required.

The next section outlines a potential programme approach and framework to deliver the necessary scale and pace of change. It is important to note that the change will need to support the introduction of the Midland Met Hospital in autumn 2018 and build the supporting urgent and emergency care structure to ensure sustainability and resilience.

The following projects have been identified in the first phase of scoping:

- **Re-procurement of NHS 111**- supporting a greater range of dispositions with defined outcomes
- **24/7 community integrated urgent care hubs**- providing prevention, primary care access, same day GP appointments, out-of-hours, walk-in centres, GP front end, pharmacy, social care, integrated care services (iCARES Sandwell) and single point of access (SPA Birmingham), rapid access intervention and discharge (RAID), crisis mental health and in-reach and outreach to intermediate care and care homes
- **Transition of the current A&E departments to the Midland Met Hospital A&E** from City and Sandwell hospitals and the development and delivery of the **urgent care centre at Sandwell**
- **Re-commissioning ambulance pathways** to deliver improved pathways and triage to appropriate emergency/urgent care settings
- **Recovery and secondary prevention**- re-design and procurement of improved access and support in intermediate care facilities with integration with social care, care homes and the voluntary sector
- **Mental Health Crisis Care Concordat** – to ensure people who need immediate mental health support at a time of crisis get the right services when they need them, and get the help they need to move on and stay well.

Three cross cutting enablers have been identified to support the workstreams:

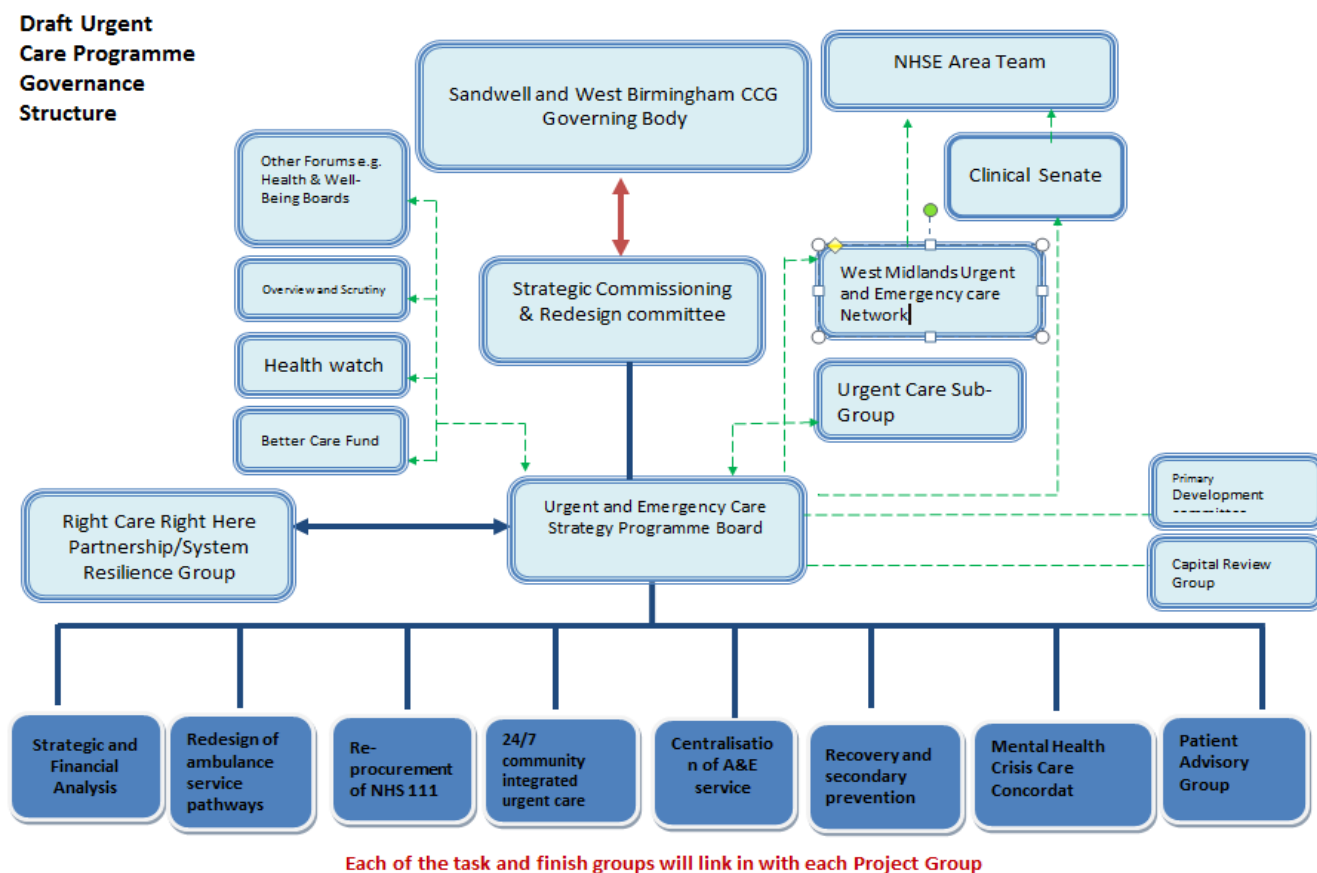
- **Workforce** across the whole patient pathway, primary and secondary care, mental health, social care, West Midlands Ambulance Service etc.
- **Information technology and systems** to ensure we are in good position to deliver integrated seamless care with certainty

- **Communication and engagement** including behavioural changes, across the system including partners, providers and patients.

4. Programme governance

It is proposed that the governance and reporting of the future urgent and emergency care programme interfaces with RCRH partnership board and is accountable to Sandwell and West Birmingham CCG's Governing Body. To support this effectively there is a need for partners to agree the structure and resource to move this forward. Consideration has been given to existing structures within RCRH and partner organisations to ensure that there is no duplication of work to maximise the resource usage. An invitation to partners has been sent to ensure appropriate and robust representation on the programme board and within the workstreams

Proposed governance structure:



Milestones

There are a number of important milestones that need to be delivered including:

- November 2015- requirement to ensure out-of hours services offer is clear to support the NHS 111 procurement
- 1 October 2016 –go-live of the NHS 111 service
- Late 2015 and early 2016 – procurement of intermediate care beds
- October 2018 introduction of Midland Met Hospital and opening of the Sandwell urgent care centre.

Proposed milestones to deliver the new system:

[ILO: UNCLASSIFIED]

- Introduction of 24/7 urgent care community hubs in 2016, allowing an implementation period of two years to test the system before the new hospital opens.



High-level milestones:

Task	2015					2016												
	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Agree Programme TOR	█																	
Deliver workstreams	█	█	█															
Sensitivity test new model				█														
Seek Assurance					█													
Consult on New Model						█	█	█										
Sign off the new urgent and emergency care system									█									
Initiate the mobilisation of the new urgent and emergency care system										█	█	█	█	█	█	█		
Phased delivery of the new Urgent and emergency care system																	█	█

Programme timescales have been mapped to ensure that a new system is in place by the winter of 2016 so that the new system is tested and well established prior to the introduction of the Midland Met Hospital. It is recognised that these are ambitious timescales and will require the full support from partners to shape and deliver the new urgent and emergency care system. The programme board has extended its membership and respective workstreams to include Right Care Right Here partners and key stakeholders, to ensure that the programme has robust representation and capability to deliver this fast paced work programme.

5. Future communications and engagement

Over the next few months we will be continuing to work with our Patient Advisory Group to share the feedback from the listening exercise and keep patients, public and partners informed of the programme.

The co-design approach will identify the future model for urgent and emergency care in Sandwell and West Birmingham. This will inform the CCG’s approach to future engagement or consultation. If significant change is planned, the CCG will want to undertake further engagement activity or formal consultation to seek views on any proposed changes.

6. Summary

The co-design event highlighted the fantastic opportunities available to make a difference and the appetite amongst partners to co-design a sustainable and effective urgent and emergency care system.

There is a clear need to deliver urgent and emergency care differently, if we are able to meet pace of change required to deliver the new Midland Met Hospital and ensure that we design services to meet the needs of our population. This will require careful planning to ensure that the system has sufficient capacity and resilience to continue to support patients with confidence and certainty.

There is recognition of the investment of both time and resource required, however the 'do nothing' or continuing to do the same option may/will not support the scale of change required, to not only deliver high quality care across health and social care but also to release resources that can be re-directed to the areas of most need.

The timing also supports the system wide approach, as we are at the juncture where key procurements are needed. This is an opportunity to come together and design the different components under one programme umbrella and partnership board.

This work will inform the future model and approach to engagement. If significant change is identified, the CCG is committed to undertaking further engagement with the local population.

7. Recommendations

Members of the Joint Overview and Scrutiny Committee are asked to:

- Note the contents of the report
- Advise on the membership of the programme board and respective workstreams
- Indicate any timescales for future updates to be presented to the committee.

8. Paper presented by:

- Nighat Hussain, Urgent and Emergency care Programme Director SWB CCG
- Dr Manir Aslam, Sandwell and West Birmingham CCG's urgent care clinical lead

For further information contact:

- Nighat Hussain, nighathussain@nhs.net, Tel: 0121 612 1705

Agenda Item 6

Joint Health Overview and Scrutiny Committee

22nd September 2015

**End of Life Care Update
Sandwell and West Birmingham CCG**

1. Summary Statement

- 1.1 The End of Life procurement process was discussed at the July Health Overview and Scrutiny Board.
- 1.2 Two viable bids were received. The bids underwent evaluation, moderation and presentation and were scored appropriately. The panel consisted of representatives from Procurement, Finance, HR, Primary Care, Information Governance, Equality and Diversity and it also include a patient representative and a Non- Executive Director.
- 1.3 The outcome of the tender process was presented at the CCGs Strategic Commissioning and Redesign Committee on 27th August 2015, where a recommendation to award contract was made. The recommendation was formally approved at the CCGs Governing Body meeting on 2nd September 2015.
- 1.4 The offer letter was sent on 2nd September and this is followed by a 10-day standstill period to allow for any challenges. The standstill was due to end on 14th September, however, as a challenge has been submitted, this standstill period will now be extended.
- 1.5 It is not yet known when the contract will be awarded, however, it is hoped that the new service will commence in January 2016, following mobilisation.

2. Background information

- 2.1 At the July meeting, Members were informed that an open procurement process for End of Life Care had commenced in March 2015.

A market engagement event was held, where stakeholders raised concern about the time made available to prepare their bids. In response to this, an additional 6 weeks was made available.

The Invitation to Tender was published in March and closed on July 1st.

Jon Dicken
Chief Operating Officer – Operations

Contact details

Sally Sandel – Senior Commissioning Officer

Email: sally.sandel1@nhs.net or telephone 0121 612 2835

Source Documents

End of Life Care Update – July 2015 HOSC