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Yorkshire and the Humber

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Dear

Thank you for your letter dated 21 October 2010 in which you ask a number of questions relating to 'High Quality Care for All'. I will answer each of your points in turn;

- Have PCTs commissioned comprehensive wellbeing and prevention services in partnership with local authorities to meet specific needs of their population?

PCTs in our region have outlined comprehensive plans to commission well-being and prevention services. The recommendations for action across the region are set out publicly in the document Healthy Ambitions "Staying Healthy".

Each year, since the publication of Healthy Ambitions, the SHA has looked at PCT plans to assess how well they are doing in delivering these recommendations. PCTs have been required to submit their strategic plans to the SHA – and have also been assessed as part of the World Class Commissioning process for how well they are performing in respect of their partnership arrangements with local government.

All plans are also assessed for their alignment with the local Joint Strategic Needs Assessment – this is the document which sets out in detail what the needs of the local population are.

There are many examples of specific services commissioned for well-being and prevention – such as weight management services – including surgical interventions, support and advice for people with alcohol problems, screening for cancers, stop smoking services, sexual health advice and screening services. There are also a wide range of services aimed at preventing health problems in the first place, working with local government on housing quality including warmth and insulation, working with communities to increase levels of activity and have access to good food locally, working with a range of agencies to tackle tobacco smuggling. Each local area has commissioned from a range of services to meet local needs.

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- If they have not, why not?

PCT plans have been assessed by the SHA to ensure that they have commissioned services according to local needs. The SHA is regularly monitoring their progress to ensure that outcomes are improved.

- Support GPs to help families stay healthy?

Many primary care services are focused on keeping local people healthy – right from baby clinics and child immunisation through to dental examinations and screening for cancers. This is one of the main jobs of primary care.

Many locally commissioned health and well-being services are available for local people to access themselves. PCTs have also worked with local GPs to ensure that they know how to refer people into specific services - such as stop smoking services, obesity surgery. NICE guidelines are widely used to guide local work and protocols between services.

There is also a range of local primary care services which have been set up – again according to local need – under a programme called Locally Enhanced Services – and Direct Enhanced Services. These have been developed by local GPs to tackle particular local issues – such as services for people with alcohol problems. Many GPs also run practice based activity such as Well Men clinics –aimed at increasing awareness and health.

There has also been a programme of work called “Making Every Contact Count” which has aimed to increase the health prevention and health promotion aspects of every encounter between NHS staff and local people. This includes GPs but also the full range of other staff – including those who work in NHS Trusts. The aim is to use every NHS contact to encourage people to stay healthy – not just GPs.

Work is ongoing across Yorkshire and Humber to take this forward.

- Is the Quality and Outcomes Framework (QOF) providing the incentives envisaged in primary care?

The QOF has been a part of the new GP contract since 2004 and has made a significant contribution to the standardisation of primary care interventions, especially with regard to the quality of care for people with Long Term Conditions. It has provided one set of incentives alongside the introduction of ‘enhanced services’ for improving the quality of care and has been regularly re-negotiated to ensure that there is continuous improvement of core general medical services.

- Do patients have greater choice of GP Practice?

The practicalities of the policy to extend choice of GP Practice by eliminating Practice Boundaries are still being worked through. There are significant issues to do with capacity, home visiting and continuity of care that require careful consideration but there is still an expectation that patients will have that choice from 2012.

Significantly, all PCTs in the region have commissioned 'GP-led Health Centres' which have extended opening times (8am to 8pm daily), all of which are open for registrations from within the PCT area. In addition, some areas have already developed local arrangements to extend choice of Practice and the experience of patients and providers in these areas have contributed to national thinking. Finally those PCTs who had the greatest shortage of GPs have also commissioned new services in the areas of greatest need.

- What information do PCTs provide to help the public choose a GP?

All primary care services and contact details are available on the internet via NHS choices (www.nhs.uk). General Medical and General Dental Practices etc are also encouraged to ensure that they update the details held on the website. In addition, whilst these vary, PCTs also have information on their own PCT websites.

Most PCTs also have a helpline to help patients to find a GP near them with an open list which will include the offer of registration at the 'GP-led Health Centre'. Additionally, PCTs have a duty to 'assign' patients to a GP if anyone is struggling to register personally.

- Do patients with long term conditions have a personalised care plan?

PCTs are working to meet the target in "High Quality Care for all" that all patients with a long term condition should have a personal care plan by December 2010. Progress against this target is being monitored nationally by the Department of Health through the GP patient survey. The SHA will receive the results of this in 2011. PCTs have been reminded of the importance of meeting the target.

The SHA's IT programme has also developed a care planning template for use in GP consultations with a supporting programme of work with PCTs to help promote its adoption.

- Are you piloting personal health budgets within your region?

Seven of our fourteen PCTs are piloting personal health budgets. Two PCTs have been given permission by the Department of Health to offer direct payments to the patients enrolled in the pilots.

- Have all your PCTs delivered on their strategic plans?

All Yorkshire and the Humber PCTs have strategic plans in place which take account of the regional strategic service framework "Healthy Ambitions". These are refreshed annually and set out key local initiatives put in place as a result of local health needs assessment. As such the initiatives vary from PCT to PCT dependent on local needs and priorities.

Through our single assurance and accountability process we track delivery against these strategic plans, using a range of performance indicators such as national vital signs and a set of "Healthy Ambitions" metrics. Whilst a lot of these indicators are long term, the SHA reviews performance on a quarterly

basis, taking action with local organisations to prompt improvements where necessary.

- How is the Yorkshire and the Humber SHA promoting innovation?

An overview of the SHA's approach to promoting innovation in the region is set out in the Annual Innovation Report which was presented to the Public Board meeting in July 2010. A copy is attached for your reference.

Strategic examples of work undertaken to promote innovation within the region include partnership work with the Chief Executive community to develop a region wide Health Innovation and Education Cluster, engaging all NHS organisations and Higher Educational Institutions in the region in "turning best practice into common practice" and the introduction of a Regional Innovation Fund programme to promote the adoption and spread of best practice across the region.

Following the recent publication of the NHS White Paper, the SHA will be working with local partners to refresh the regional approach to promoting innovation in the light of the changing NHS landscape.

- Do you have a Quality Observatory for your region?

Yes, the area covered by Yorkshire and Humber SHA does have a Quality Observatory.

- Have any of your PCTs set up social enterprise organisations?

NHS Hull has established a Social Enterprise "City Health Care Partnership" to deliver all of its provider community services which began trading on 1 June 2010.

In addition, under the Staff "Right to Request" Social Enterprise, a number of other PCTs and services have made submissions but are yet to be established.

I trust we have responded to your request appropriately and apologise once again for the original confusion. However, if you are unhappy with this response please contact me in the first instance.

If you have any further concerns about our response you may wish to contact the Information Commissioner at www.informationcommissioner.gov.uk.

Yours sincerely

Karl Milner
Director of Communications and Public Relations

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