

Peterborough Primary Care Trust are reviewing a number of existing community-based and secondary care services with a view to relocating service delivery to the new City Care Centre. The scope and specification of these services may be reviewed and subject to a new tendering process with the likely appointment of an external service provider. The Borderline Commissioning Group intends to participate in this process with the following intentions:-

- Audiology Services – Subject to its suitability, adoption of the new Peterborough PCT developed care pathway, with services for the Borderline patients delivered via outreach clinics in the locality.
- Dermatology Services – Due to increased referral and follow-up volumes, Peterborough PCT is understood to be considering establishing a Tier 2 service. This change is likely to coincide with the relocation of services to the new City Care Centre. Borderline would look to commission the Tier 2 service, but would also commission out-reach clinic appointments based at the New Queen Street Surgery for patients within the locality.
- Peterborough MATS – Borderline would like to retain access to the existing service at the Fitzwilliam Hospital (or an alternative venue should the service be relocated). In the event that the scope and specification of the MATS service is enhanced, Borderline would require inclusion in the commissioning process for the new service.
- Neurology Services – Borderline was also like to participate in the commissioning of proposed community-based neurophysiology investigation services, including a GP-led Head Ache clinic and DEXA scanning – with locality-based outreach services, where appropriate.

Borderline Commissioning Group requests that Cambridgeshire Primary Care Trust develops a co-ordinated commissioning approach with Peterborough Primary Care Trust when reviewing and renegotiating existing contractual relationships with Peterborough & Stamford Hospitals NHS Foundation Trust. This is particularly important when reviewing Outpatient Follow Up rates where a similar system to that piloted by Northamptonshire Primary Care Trust should be used. This involved using New : Follow-Up ratios as a management tool in re-engineering care pathways and in setting new limits on the number of follow-ups that will be funded.

Develop and commission an enhanced community-based DVT care pathway, using an extended service from Excell Ultrasound to provide a convenient local venogram service for patients within our locality. The pathway would also require near-patient D-Dimer testing and access to an appropriate community-based anti-coagulation service with provision of Tinzaparin.

To implement an enhanced Medicines Management role with the locality, aimed at improving patient compliance and concordance, reducing spend and optimising prescribing safety and budget management. Particular focus will be placed on patients

in residential and/or nursing care, patients on multiple medications and patients where a poor history of compliance has been identified and/or suspected.

To improve the shared care arrangements for patients on medication who suffer from memory problems or require disease modifying drugs due to Rheumatology. Existing secondary care service providers have signalled their intention to stop providing this service. Borderline will continue to provide blood testing facilities within the community for such patients but will be looking to commission and advisory service for support and guidance in maintaining or managing dosage levels.

To monitor and evaluate the transition of Health Visiting and School Nursing Services from Peterborough Community Services to the Provider Arm of Cambridgeshire and Northamptonshire Primary Care Trusts. To ensure that existing care and referral pathways are retained and that key communication routes and interaction points are not disrupted, prior to harmonising the scope and specification of service delivery within the locality to support the needs and requirements of our commissioning population.

To actively contract manage the scope and quality of community District Nursing service delivery within the locality, protecting established community staffing resource allocations and further aligning teams to the Borderline locality. To redesign the Service Level Agreement for community District Nursing and Community Matron services to reflect the needs and requirements of our commissioning population, the long-term service objectives of the commissioning group and to ensure equity throughout the locality.

To commission and/or retain access to locally-based drug and alcohol dependency support services which are easily accessible for patients based within our locality. Borderline intend to retain existing links with Drinksense and the Community Drug Teams.

To review and, where appropriate, redesign Diabetic care pathways within the Borderline locality. To work with Peterborough Primary Care Trust to ensure that services transferring to the new Healthy Living Centre are provided on an out-reach basis for Borderline patients within our locality. To commission an enhanced and equitable Diabetic Specialist Nurse and Diabetic Healthcare Assistant service for Practices throughout the Borderline locality and introduce a new community-based Consultant clinic. This will bring Diabetic services closer to the patient, reducing the need for patients to attend a hospital-based follow-up service. Borderline will work with Oberoi Consulting in analysing and optimising the management of Diabetic patients within the locality.

To ensure that a suitable and sustainable cardiac rehabilitation service is commissioned for patients based within the locality to coincide with the end of existing secondary care services. Proposed care pathways being developed within Peterborough and Fenland areas will be assessed prior to a commissioning decision based on a locally provided service.

To improve Cardiovascular Disease risk management by working with Oberoi Consulting to develop a CVD risk register and a primary prevention protocol including attention to exercise and obesity management programs. To commission locally-based support services, where appropriate.

To use Papworth Direct as an alternative to Peterborough and Stamford Hospitals' cardiology service for the investigation and management of patients with Cardiac problems.

To extend the Whittlesey Young People's Counselling Service to provide a free and easily accessible counselling service to young people aged 14 to 25 within the locality. To extend service provision to the Stanground and Yaxley based Practices working, where appropriate, with local secondary schools in Whittlesey and Yaxley.

To encourage Cambridgeshire and Northamptonshire Primary Care Trusts to provide data analysis support to enhance commissioning abilities of the Group. To assist with identifying referral trends and variances, out of area charges, unusual and/or high cost activity, coding errors and incorrect charging with a view to maintaining activity within agreed budgets and achieving savings, where possible.

To establish a joint commissioning approach between Borderline Commissioning Group, Cambridgeshire Primary Care Trust, Northamptonshire Primary Care Trust and Peterborough Primary Care Trust for services provided by Peterborough Community Services. To develop regular contract review meetings where service delivery can be analysed and discussed. To extend this approach to services being developed for the Peterborough City Care Centre prior to its opening in 2009.

To encourage Cambridgeshire and Northamptonshire Primary Care Trusts to increase investment in Intermediate Care Services and hospital-based admissions avoidance systems. Particular attention to be paid to strengthening the communication links between Peterborough and Stamford Hospitals, Intermediate Care Services and the relevant Social Services departments for Cambridgeshire and Northamptonshire. The commissioning of additional step-down beds may be required here.

To engage with local hospitals and work proactively to reduce inappropriate or unnecessary Out-Patient Follow Up consultations by transferring, where appropriate, routine review and assessment of stable patients to Primary Care. Additional resources may need to be commissioned to assist this.

To provide a structured and equitable Smoking Cessation service to patients wishing to stop smoking across the locality with pro-active targeting of those patients who would benefit most from this service.

To commission a locality-based vasectomy service, operating from the New Queen Street Surgery, utilising established care pathways and experienced clinicians.

To commission a structured obesity management service for patients within the locality. The service would utilise the existing MEND programme for young patients and CHIPS for adult patients.

To review the handover problems for patients admitted under Peterborough Crisis team being handed over to an out of area team.