

Briefing for Leeds City Council Outer East Community Committee

1. Background

NHS Leeds South and East CCG is responsible for planning and buying health services for 250,000 people who live in our area, we have a budget of £416million and work closely with the two other Leeds CCGs to commission services across the city.

We lead on Children's & Maternity Services, Continuing Care and Adult Community Services (for example the Leeds Community Healthcare contract) on behalf of the three CCGs.

There are 42 GP practices, with four in Cross Gates and Whinmoor, three in Garforth and Swillington four in Kippax and two in Temple Newsam (Methley is not in our area). These practices range in size from those with 2000 patients to practices with a number of GPs and other healthcare professionals serving 13,500 patients.

2. Our challenges

The CCG, along with most other NHS organisations nationally, is facing a number of challenges in relation to finance and capacity. These are being addressed through the STP (Sustainability and Transformation Plan) process, which is led by the Health and Wellbeing Board.

In addition, we have a number of issues specific to Leeds South and East. These include:

- Recruitment and retention of GPs and other clinical staff
- Ensuring patients have access to primary care premises which are fit for purpose
- Addressing health inequalities

Specifically in the outer east, while this area doesn't have the high levels of deprivation of the inner city, there is growing older population, which means there are likely to be more people living with one or more long-term conditions and needing support.

3. Local plans

From April, the CCG has taken over the role of co-commissioning primary care services from NHS England. GP practices continue to be independent contractors, we monitor and work with them to ensure they provide an appropriate primary care service.

3.1 Supporting practices

Leeds South and East has a number of single-handed practices, with some GPs approaching retirement age. At Whinmoor, where the retiring GP was unable to find a replacement, we

worked with other local providers to find a solution. This resulted in the service being delivered from alternative premises by two Practices; Dr Eastwood and Partners (Ashfield and Grange M/C) and Park Edge Practice. Some patients also chose to register with other practices.

In relation to estates, three practices have submitted applications to the national Estates and Technology Transformation fund (ETTF), we supported these applications and expect initial feedback in August. We do know that the number and value of the applications has exceeded the total fund available.

We have encouraged practices to collaborate for the benefit of patients, for example many of the local practices worked together to provide additional opening hours and appointments between November and March. Patients were able to access Saturday surgeries delivered by both GPs and nurses. A number of schemes are still being developed, we can report back on these at a future meeting.

3.2 New Models of Care/Proactive Care Model

Cross Gates is one of two early implementer sites (the other is Beeston) for our Proactive Care Model. This is a way of helping people with complex care needs, who may access a range of health and social care services. The project will identify a number of patients and will develop an integrated, proactive patient-centred care model, focusing on improving well-being and personal resilience, streamlining care and developing responsive services in time of pending crisis. Cross Gates was chosen because it has a greater number of older people with complex conditions.

3.3 Social prescribing

We commissioned a consortium of third sector organisations to deliver Connect Health across our area. The service has continued to develop relationships with key community organisations such as Garforth NET and local children centres to ensure that community organisations are aware of the service as well as open up referral routes.

Since November 2015, 618 people from across our area have been referred into the service. A marketing plan is currently being delivered by the provider to increase awareness of the scheme not only through primary care but other professionals and the third sector.

3.4 Third sector grants

Following the second round of the Third Sector Grant Scheme where a further 46 applications were approved, the evaluation has begun for those schemes already established and operational (see appendix).

3.5 Welfare advice

We have continued to fund weekly Welfare Advice clinics based in Halton Library and Garforth Library delivered by Citizens Advice Leeds. Clinics are well attended, however

further work is required to maximise use of clinic capacity. Enquiries about benefits, debt and employment are the biggest categories of advice sought.

3.6 Warmth for wellbeing

We committed additional non-recurrent funding to supplement public health funding for the warmth for wellbeing service. The service provides tailored solutions to needs identified by/for vulnerable people living in cold homes, incorporating face-to-face advice, low-cost heating or energy saving improvements, and referrals to relevant support. The service is provided year-round, with increased help between 1 October and 31 March and increased advice and preventative support between 1 April and 30 September.

3.6. Health trainer service

We fund an enhanced health trainer service which provides support around healthy lifestyles for patients living in outer East. They can access at local GP Practices.