

Report of Head of Scrutiny and Member Development

Report to Scrutiny Board (Health and Well-being and Adult Social Care)

Date: 31 July 2013

Subject: Urgent and Emergency Care Review

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

1 Purpose of this report

- 1.1 The purpose of this report is to present a range of information relevant to the 'Urgent and Emergency Care' identified by the Scrutiny Board as one of the general themes for its work over the course of the municipal year, 2013/14.

2 Background

- 2.1 In its planning guidance, published in December 2012, the NHS Commissioning Board (NHS England) outlined its intentions to review the model of urgent and emergency care as part of plans for more seven-day services. The review was confirmed in January 2013, when NHS England announced that the review, led by Medical Director Sir Bruce Keogh, would set out proposals for the best way of organising care to meet the needs of patients.
- 2.2 NHS England has stated that it wants to improve public understanding of the best place to go for care. By helping the public to go to the right place first, both they – and those who have very serious illnesses and injuries – will be seen more quickly by specialist clinical teams with the right qualifications and facilities. The announcement in January 2013 also detailed that:
- Local commissioning will be at the heart of the review, which follows the commitment in the recent planning guidance.
 - The review will aim to enable CCGs to shape services for the future and put in place arrangements that meet the needs of patients.
 - The review team would work closely with clinical commissioning groups (CCGs) to ensure the views of all those with an interest are taken into account in

developing a national framework offer to help ensure high-quality, consistent standards of care across the country.

- As well as seven-day working, the review would aim to help CCGs find the right balance between providing excellent clinical care in serious complex emergencies and maintaining or improving local access to services for less serious problems.
- The review will set out the different levels and definitions of emergency care – ranging from top-level trauma centres at major hospitals to local accident and emergency departments and facilities providing access to expert nurses and GPs for the treatment of more routine but urgent health problems.
- The review will also assess transfer processes between these levels of emergency care.
- The review will take account of the way that emergency care in England works with other areas of the NHS, such as GP surgeries, community care, and the 24-hour NHS 111 advice line.

2.3 At its meeting on 21 June 2013, the Scrutiny Board (Health and Wellbeing and Adult Social Care) identified Urgent and Emergency Care as a specific theme for its work over the course of the municipal year, 2013/14.

3 Main issues

Review of Urgent and Emergency Care in England

3.1 As part of the launch of the Urgent and Emergency Care Review, the first stage of engagement (with both patients and healthcare professionals) commenced on 17 June 2013, running to 11 August 2013. At the same time, NHS England also published the following documents related to the Urgent and Emergency Care Review:

- The Evidence Base (Appendix 1);
- Emerging Principles (Appendix 2); and
- The feedback questionnaire (Appendix 3)

3.2 Should the Scrutiny Board wish to make a collective response during the current period of engagement, this must be submitted no later than 11 August 2013.

3.3 However, it should be noted that NHS England has confirmed that, following analysis of the feedback received during the current period of engagement and consideration by the Urgent and Emergency Care Review Steering Group (terms of reference and membership details are attached at Appendix 4), the evidence base and emerging principles will be refined and published in Autumn 2013, along with outline proposals for stage 2 of the review. Stage 2 of the review is likely to commence in October 2013, with a further opportunity for public engagement.

Information from Clinical Commissioning Groups

3.4 From recent CCG Governing Body meetings (Leeds West CCG on 3 July 2013 and Leeds South and East CCG on 4 July 2013), it has been reported that NHS England has published an A&E Improvement Plan setting out a tripartite agreement between NHS England, Monitor and the National Trust Development Agency (NTDA) to ensure improvement plans are in place for each A&E.

- 3.5 Local CCGs are leading the development of the plans with local providers and services to ensure the following:
- a) A Strategic Urgent Care Board is in place by 31st May 2013;
 - b) Agreed recovery and improvement plans;
 - c) Agreed the use of the 70% funding retained from the excess urgent care tariff by 30 June 2013; and
 - d) Preparation of winter plans for completion by November 2013.
- 3.6 Leeds North CCG is the lead for Urgent Care for the City and will be chairing the Urgent Care Board with representation from the other CCGs. The Urgent Care Board will be responsible for ensuring the needs and qualitative requirements of patient flows within Leeds are being met in a timely, efficient and where possible planned way, i.e. the development and implementation of a comprehensive Urgent Care Strategy for Leeds.
- 3.7 In addition the Board will ensure the implementation of the recommendations and key deliverables as set out from the national Urgent and Emergency Care Review. The National Review will develop a national framework and associated guidance for CCGs in 2015/16 to help them commission consistent, high-quality and safe urgent and emergency care services across the country within the resources available
- 3.8 It is intended that business intelligence and best practice evidence will form the basis of the Urgent Care Strategy for Leeds, which will focus on responding to need and delivering improvements to the overall patient experience.
- 3.9 The first meeting of the Urgent Care Board is scheduled for 19 July 2013, where the Terms of Reference and scope of the work will begin to be formulated. Any available information and/or feedback from that initial meeting will be provided at the meeting.
- 3.10 Given that the Scrutiny Board identified urgent and emergency care as part of its work programme for 2013/14, the work of the Urgent Care Board is likely to be of particular interest to the Scrutiny Board – particularly in the context of the Urgent and Emergency Care Review being led by NHS England.

Future consideration by the Scrutiny Board

- 3.11 Given the on-going national profile of the Urgent and Emergency Care Review and the establishment of an Urgent Care Board for Leeds, it might be more appropriate and help avoid any unnecessary duplication to consider the work and output from the local Urgent Care Board before considering any specific terms of reference that may be necessary for this aspect of the Scrutiny Board's work programme.
- 3.12 To help in this process, it might be useful to invite the Chair of the Urgent Care Board (or nominated representative) to outline its work (and associated timescales) to a future meeting of the Scrutiny Board. Subject to the agreement with the Scrutiny Board, it might be useful to consider progress of Leeds Urgent Care Board alongside proposals for Stage 2 of NHS England's Urgent and Emergency Care Review – likely to be announced/ launched in October 2013.

4 Recommendations

4.1 Members of the Scrutiny Board are asked to:

4.1.1 Note and consider the content of this report and its appendices;

4.1.2 Consider any response to the current public engagement work around the NHS England's Urgent and Emergency Care Review – specifically the feedback questionnaire (Appendix 3) and the appropriate mechanism for completion by 11 August 2013;

4.1.3 Consider inviting the Chair of the Urgent Care Board (or nominated representative) to outline its work (and associated timescales) to a future meeting of the Scrutiny Board – to coincide with the Scrutiny Board's consideration for Stage 2 of NHS England's Urgent and Emergency Care Review (subject to the announcement / launch being made in October 2013);

4.1.4 Agree to consider any terms of reference that may be necessary for this aspect of the Scrutiny Board's work programme at a future meeting.

5 Background papers¹

5.1 None used

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.