

Questions to the Clinical Commissioning Group from Scrutiny Committee Mid Devon District Council

Communication (and silo working?)

How effective is liaison between A&E other departments e.g. orthopaedics at the RD&E or other hospitals?

Prevention

How will the CCG address the issue of preventive medicine?

How much of the budget is devoted to education to maintain good health rather than treating ill health? What form does that take and which age groups are being targeted? Are you working with local GP surgeries?

Dietary Provision

There is evidence that good quality nutrition not only prevents ill health, but after illness or surgery aids recovery times and outcomes.

What is the procurement policy for food served in our hospitals?

What is the daily budget per patient?

And what is the policy re refined sugar, refined carbohydrates, hydrogenated/trans fats and food additives in hospital food?

Antibiotic Prescription

There is huge concern about antibiotic resistance in the future. In Belgium in the 1970's it was routine practice before prescribing, to test not only to see if an antibiotic was appropriate but for the appropriate antibiotic for that microbe.

There is at last, in the UK a suggestion that Pharmacies and GP surgeries should test to see if patients have a virus or a bacterial infection before prescribing antibiotics.

Will this be promoted throughout the CCG and when in future are we likely to have a quick test which will identify the appropriate antibiotic as well?

Health and Social Care

We face an unprecedented demand for health and social care over the next 4 years.

What does it mean for our locality in terms of health provision and social care? How will health and social care be integrated?

You state that you aim to improve future care and services to ensure people have the maximum opportunity to retain their wellbeing and independence, avoiding hospital admissions where possible and providing more care in people homes. It is apparent that at the moment this is inadequate.

Why is Social Care not part of the NHS remit? It would appear that the most efficient use of resources would be for GPs, acute and social care to be under one organisation, sharing good communication with patients moving seamlessly from one to the other, rather than being dealt with by separate agencies as at present.

Your Future care

Your Future Care” proposes 3 interventions in an integrated model for the frail and elderly- comprehensive assessment; single point of access; rapid response. How will this work, and who will be responsible for implementation?

The NHS is at tipping point with a desperate shortage of beds leading to cancelled operations. How will the removal of beds from community hospitals/closures help to provide a solution? Their retention would free up acute hospital beds, build strength and confidence in patients during the transition between hospital and home or care home. It could potentially reduce the amount of re-admissions due to patients being discharged too soon on occasions. By the very nature of the very rural areas in Devon providing post hospital care in the home is fraught with challenges, particularly during winter and bad weather.

People Management

The proposals in "Your Future Care" propose radical reform. Turning proposals into practice will make many demands. How will the staff be practically and culturally prepared for the changes? What is the time scale?

Nurse education will now be costed as a normal HE course. Will the model of cross functioning involving both hospital and community commitment be seen as a suitable career, bearing in mind the upfront costs?

Governance

Who commands the budget?

How will governance be organised so that there is clarity of direction and accountability? (NB recent experience of Tiverton Hospital).

Finance

In advance of the meeting may we please have a diagram of the structure of the CCG and the NHS/Social Services care services?

What is the current state of the finances of the CCG and the Health Trusts operating in this part of Devon?

“Your Future Care” proposes a new model of care in people's homes saving between £2.8m and £ 5.6m. How will that address the current shortfall of £85m?

What is the total cost of the Health and Wellbeing board?

What is the value of the Healthwatch contract?

Discharge

How many discharges from hospital are held up because the person's home is unsuitable?

How many discharges are held up because there is no care package available?

How will the needs for those with mental health issues be addressed?

Health in Rural Areas

What % of the Local Authority residents have to travel more than 5 miles to access their local GP?

What % of the Local Authority residents have to travel more than 10 miles to access their local GP?

Are you aware of any GP Practices that have vacant posts (Doctors or Nurses) within your area?

Have any of your GP practices had posts that have been vacant for more than 2 months / 4 months / 6 months+?

Have recruitment or retention difficulties been experienced in rural GP Practices in the last 1 or 2 years?

How do you support your residents to access more specialised healthcare which may only be available outside your local authority area?

Are there community transport schemes which are specifically available for accessing healthcare services, and is it envisaged that these will continue in future years?

Are the ambulance response time targets set greater for rural areas than urban and if so what are those targets? Also what percentage of actual response times to rural areas are within the set target?

Have any GP practices closed in your local area in the last year?

Are you aware of any GP practices due to close within the next year in your local area?

Do you know the reason for closure and the impact on patients?

Have you had any difficulty in recruiting clinical pharmacists to GP practices in rural areas?

If so, how are you dealing with the issue of recruitment?

Please up-date the committee on the plans being formulated to create a Crediton Health and Wellbeing Hub