

Health Scrutiny Panel, 29 September 2010

Report of the Director of Community Engagement and Primary Care

Transforming Community Services (TCS)

Purpose of Report

1. Members will recall that a paper was presented to the Health Scrutiny Panel in July 2010 which gave details about the TCS programme. A further paper was requested by the meeting for September 2010.

Background

2. The PCT has been mandated to divest itself of Dudley Community Services by 1 April 2011. This is a directive for all PCTs in England.
3. The PCT has been working with stakeholders to ensure that the services are transferred to new providers without detriment to the users.
4. The services are going to the following providers:
 - **Learning Disabilities:** Sandwell Mental Health and LD Foundation Trust is receiving the LD services from Walsall PCT and Wolverhampton PCT as well as Dudley. In addition, Wolverhampton mental health services will be located with this provider. We have been working with Sandwell and the other Black Country PCTs to ensure a smooth transition. The staff are fully engaged in the whole process. Services will continue to be delivered from the same premises as they are currently, in particular Ridge Hill.
 - **Acute and long term conditions:** These include district nurse services, community ENT and sexual health services. These are being vertically integrated with Dudley Group of Hospitals (DGOH). Extensive work has been undertaken with DGOH to ensure that the services are safely transferred and DGOH has been extremely receptive to understanding the business of the services. Unfortunately we were informed in mid July that we were not able to proceed with the tender relating to an integrated sexual health service as we could not start a new service on 1 April 2011. This has meant that the community sexual health service will now be transferred to DGOH with a view to transforming and possibly tendering prior to April 2012.

- **Children and Families:** Members will be aware that the Director of Public Health has been working with the local authority to see whether an integrated service for children and families within Dudley was feasible. Work had progressed and was on track but legal advice obtained in late August 2010 meant that this work had to be put on hold. The legal advice was in relation to section 75 agreements under the health act 2006 and the relationship to TUPE. As a result, the PCT Board at its meeting on 16 September will make a decision about which provider the children's services will be transferred to, either DGOH or Sandwell Mental Health Foundation Trust. A verbal update will be given at the Health Scrutiny Panel meeting. Work relating to the integration of teams will continue.
- **Social Enterprise:** The Community Lymphodema service is proceeding with the right to request third wave.
- **Dental services:** Dental services are being transferred to South Birmingham Community on 1 December 2010. TUPE consultation has commenced with staff. A review of the clinics which are being used by the dental services has commenced as a number are only used for one session a week or month and then not fully utilised. The new premises at Brierley Hill, Stourbridge and Ladies' Walk have better facilities than the other clinics. It is therefore proposed to reduce the number of fixed sites from which clinics are delivered and increase the number of sites that the mobile clinics provide sessions from. In this way the staff time is being maximised and the clinics can be located exactly where the patients are. It is proposed to reduce the number of fixed sites from 9 to 6.

A consultation exercise has been carried out, the results of which are attached as a separate annexe to this report. In short the main concerns were that the quality of service would still be available and patients could see the same clinician. The three proposed sites for closure currently only offer one session a week and patients would have greater flexibility of appointment times. Rationalising the sites would also mean greater efficiencies through better use of resources. All 3 sites are not equipped to the same modern standards as the nearest alternative sites and therefore patients would benefit from better equipped facilities. Patients will be offered alternatives when booking appointments and the potential to utilise the mobile dental surgery will be monitored.

- 5 **Stakeholder engagement:** The TCS project is being overseen by a Programme Board. The Director of Adult, Community, and Housing Services is a member of that board, as is the staff partnership officer and local clinicians.

As services are remaining the same for users, there is no need for a formal consultation process. However the healthcare forum has been kept informed of the progress and the LINK chairman is on the overall programme board.

A survey of the last 50 people to attend the community dental service has also been undertaken and the results are shown below:


Equality Impact

- 6 Equality Impact Assessments: These are being undertaken concurrently with the transition plans which will be discussed by the PCT Board meeting on 16 September.

Recommendation

- 7 It is recommended that:-

- *This report is for information.*



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