Manchester City Council Report for Information

Report to:	Health Scrutiny Committee – 1 October 2015
Subject:	Health and Wellbeing Update – Part 2
Report of:	Head of Corporate Services – North, Central and South Manchester Clinical Commissioning Groups

Summary

This report provides Members of the Committee with an overview of developments in the local NHS.

Recommendations

The Health Scrutiny Committee is asked to note the contents of this report.

Wards Affected:

All

Contact Officers:

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

1. Introduction

1.1 This is a health update paper produced by North, Central and South Manchester Clinical Commissioning Groups (CCGs) for the Health and Wellbeing Overview and Scrutiny Committee. It provides a brief summary of issues or news items that may be of interest to the Committee.

1.2 If Committee members of the Committee have any specific questions about the contents of this paper, please email them to <u>n.gomm@nhs.net</u>.

2. Launch of North Manchester MacMillan Palliative Care Support Service

2.1 A new palliative care service for North Manchester, which seeks to reduce hospital deaths and A&E admissions, was publicly launched on 21 September 2015. The North Manchester MacMillan Palliative Care Support Service (NMPCSS) is for all patients with life-limiting illnesses – including cancer.

2.2 The NMMPCSS brings together professionals and trained volunteers, working together as one team. This provides a 'bridge' between GP practices, hospitals and hospices to those being cared for at home, or in residential care. A weekly multi-disciplinary team meeting involving a palliative care Consultant; and a daily team handover meeting have improved communication and enabled Assistant Health Practitioners to get quick expert advice on how to help patients they see on their daily calls.

2.3 The NMMPCSS team provides:

- Round-the-clock telephone advice, as well as visits and care in the home
- Dedicated professionals working together with patients and carers seven days a week from 8am to 8pm
- An open referral system for patients, carers and professionals. (Patients can refer themselves to the service through the telephone helpline on is 0161 202 8920 or email pah-tr.Community-Macmillan-Service@nhs.net)
- Help with managing troublesome problems such as pain, sickness, breathlessness, and psychological and emotional support
- Ways for people to talk about what is important to them in their care. (We want to work with them to fulfil those choices and decisions as far as we can. This may include staying at home rather than having to go into hospital at the end of life)
- Extra help at home when things are difficult, bringing support to carers

2.4 Since the service - delivered by Pennine Acute Hospitals Trust (PAHT) - began operating in April, there has been a 25 per cent increase in the number of patients who have been identified as requiring palliative care. They have been placed on the Palliative Care Register in their GP practice. This ensures that patients with life-limiting illnesses can access the care and support they need.

3. GM Devolution update

3.1 Leaders across healthcare research, academia and industry in Greater Manchester have created a new programme of work called 'Health Innovation Manchester'.

3.2 Health Innovation Manchester will speed up the discovery, development and delivery of innovative solutions to help improve the health of the almost three million people in Greater Manchester, and beyond. The new approach builds on the existing expertise and assets in the area to address a nationwide issue of delays between research innovation and health and economic benefits being realised on the ground.

It will harness the partner organisations' collective expertise to develop the infrastructure needed for clinical trials and health informatics.

The early priorities identified for Health Innovation Manchester are:

- Build on ground-breaking work on integrated health data systems to extend it to the whole of Greater Manchester. This will enable better care (by providing more joined-up information to GPs and hospitals) and potentially help identify new ways of treating diseases.
- Improve the ability to use personalised medicine, with more targeted treatments for those who will benefit most from them. For example, this could involve developing new medicines to treat specific groups of patients or targeting existing treatments more effectively.
- Enhance the testing of new medicines or treatments to enable those with the biggest positive impact to be identified and introduced into routine clinical practice across the whole of Greater Manchester as quickly as possible, maximising the patient benefits.

3.3 In Greater Manchester, life expectancy for people with poor mental health is 10 to 15 years below where it should be and costs to the health and care system arising from our current approaches are significant. Poor mental health makes physical illness worse and raises total health care costs by at least 45 per cent for each person with both a long-term physical condition and mental health problem. This suggests that between 12 per cent and 18 per cent of all NHS expenditure on long-term conditions is linked to poor mental health and wellbeing – between £8bn and 13bn in England each year and for GM, between £420m and £1.08bn.

3.4 In August, health and social care leaders attended a vision and action event designed to assess all aspects of mental health in Greater Manchester. The GM Devolution mental health workstream event aimed to:

- Develop a vision to drive improvements in mental health care, support and outcomes across Greater Manchester;
- Identify mental health priorities to influence the production of the GM Strategic Plan and Locality Plans;
- Strengthen and support partnership work across GM;
- Share knowledge, expertise and best practice from within and beyond GM;
- Solve shared problems and common challenges to implementation;
- Agree further support required.

As a result of the event, a programme of work is now being scoped with some proposals due to emerge before the end of the year

4. Update on the current Cancer Drugs Fund list

4.1 The Cancer Drugs Fund (CDF) has completed a further review of the effectiveness of treatments it funds to ensure it delivers the best outcomes for patients. In carrying out the prioritisation, all decisions on drugs to be maintained in the CDF were based on the advice of clinicians, the best available evidence, and the cost of the treatment. Details are available here:

http://www.england.nhs.uk/2015/09/04/update-on-the-current-cancer-drugs-fund-list/

5. The Sanctuary 24 hour helpline

5.1 A new 24 hour helpline for people suffering panic attacks, depression and anxiety has been launched. The Sanctuary phone line is staffed by trained people who have previously suffered mental health difficulties themselves. The service is open to anyone from Manchester, <u>Salford</u>, Trafford and <u>Tameside</u> and is free to use. The 24-hour phone line is an extension of The Sanctuary which is run by mental health charity Self Help Services and based at the Kath Locke Centre on Moss Lane East in Hulme.

6. CCGs' engagement programmes

6.1 The three Manchester CCGs are always running a range of programmes seeking patient and public input into the development of their plans. Current topics include:

- Wheelchair services: survey available here <u>https://www.surveymonkey.com/r/2XWQT6T</u>
- Gynaecology services: survey available here https://www.surveymonkey.com/r/9DL826Y
- Maternity services: a Maternity Services Liaison Committee has been formed and there will be a series of workshops over the next few months to better understand local people's experience of maternity services. For further information, please contact <u>n.gomm@nhs.net</u>