

DacCom PbC Ltd

Summary of Commissioning Plan for 2008/09

→ Hemel Hempstead Urgent Care Centre

- Continue commissioning involvement in the procurement and implementation of the new stand-alone UCC on the Hemel site

→ Community COPD Service

- Joint commissioning and procurement of the new service together with WatCom PBC and StahCom PBC

→ Counselling

- Implement a more standardised (and patient-approved) approach across Dacorum from 1 April 2008, via a Local Enhanced Service, to which all GP practices will sign up

→ Diabetes

- Engage in the newly launched retinal eye screening service, at sites which are more accessible for Dacorum patients
- Continue commissioning involvement in the West Herts-wide redesigned diabetic service with the shift to primary care
- Diabetes Study Day for Dacorum GP practices

→ Enhanced Primary Mental Health Service

- Work with Hertfordshire Partnership Foundation Trust and the Joint Commissioning Team on the Enhanced Primary Mental Health Service proposal
- Mental Health Study Day for Dacorum GP practices

→ Physiotherapy

- Redesign of the community physiotherapy service to ensure a more equitable and rationalised service to patients from 1 April 2009

→ Prescribing

- Achieve remaining outstanding EoE prescribing metrics
- Develop Prescribing Incentive Scheme
- Communicate changes in prescribing costs by means of regular "Good Buy" bulletins sent to all GPs
- Resume joint prescribing initiatives with Dacorum community pharmacists, e.g. DAFI (Dacorum anti-flu initiative)
- Involvement in Prescribing Waste Campaign

→ New Dacorum Hospital

- Continue involvement in, and input into, the discussions and negotiations on the services to be retained on the Hemel Hospital site or nearby on a new site (these will be influenced by the UCC development)

→ Enhanced Services

- Use of the PCT's assessment of Enhanced Services inequities across Hertfordshire, and its guidance to inform the 2008/9 programme, to define the Enhanced Services to be commissioned
- Involvement in the joint PCT and LMC discussions on Enhanced Services

→ Referral Management

- Revisit data collection and patient activity recording
- Continue the programme of targeted data validation
- Continue provision of the "Referral Tsar"
- Continue programme of DacCom Executive individual GP practice visits
- Encourage management of patient referrals within and between GP practices
- Continue reporting and feedback of information to GPs and practice managers
- Continue engagement in SLA review meetings and joint working with West Herts Healthcare Trust and other primary and secondary care providers

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→ Maternity Services

- Input into the implementation team for the investment plan to deliver Maternity Matters
- Improve access to maternity services
- Maintain GP shared care

→ Community Nursing

- Define the role of the community matrons
- Case finding for the community matrons from data validation work
- Resume and strengthen Health Visitor and District Nurse roles in GP practices

→ Intermediate Care

- Input into PCT Provider Services review of the service
- Increase use of IC to prevent hospital admissions
- Improve patient access to IC

→ Heart Failure

- Populate Map of Medicine with locally commissioned patient care pathway
- Develop Business Plan for community service

→ CATS

- Support the Watford MSK CATS

→ Choice

- Ensure patients are aware of choice
- Ensure patients are offered choice
- Continue use of Choose & Book

→ Access

- Better access to GP and primary care services
- Achieve 18 week referral to treatment target

→ Stakeholder Involvement and Partnership Working

- Patient involvement and feedback by a multiplicity of means
- Joint working with partnership agencies, e.g. Social Services
- Improve the patient experience
- Improve staff satisfaction and engagement
- Improve support and care for carers
- Preparedness to respond to emergencies

→ Health Improvement

- Keep people well, improve overall health and reduce health inequalities
- Improve cleanliness and reduce healthcare-associated infections
- Involvement in Cancer Reform Strategy and End of Life Care
- Improve standards of care for stroke and TIA
- Improve care for patients with Long term Conditions