

**REPORT TO THE PBC GOVERNANCE COMMITTEE  
TO BE HELD ON: 8<sup>th</sup> July 2009**

<b>Enclosure:</b>					
<b>Subject:</b>	Featherstone 2009-10 PBC Plan				
<b>Lead Director:</b>	Geraint Griffiths				
<b>Lead Officer:</b>	Liz McCourt				
<b>Recommendation:</b>	<b>For Approval</b>	x	<b>For Discussion</b>		<b>For Information</b>

**PURPOSE OF THE REPORT:**

The attached plan is submitted against the 2009-10 PBC LES part 1.

**KEY POINTS:**

The plan sets out Featherstone's work plan for 2009-10 to deliver benefits to their local population.

**IMPLICATIONS:**

<b>Legal and/or Risk</b>	None
<b>Standards for Better Health</b>	D2 (a) Patients receive effective treatment and care that conform to nationally agreed best practice D2 (d) delivered by health care professionals who make clinical decisions based on evidence based practice
<b>Financial</b>	Payment of part 1 of PBC 09/10 LES
<b>Training</b>	None
<b>PBC</b>	PBC LES
<b>Other</b>	

**RECOMMENDATIONS / ACTION REQUIRED:**

PBC Governance to consider and approve part 1 LES payment

## PRACTICE BASED COMMISSIONING PLAN

DES 09/10

This document sets out Featherstone's plan for implementing the Practice Based Commissioning DES in 2009/10

The clinical lead for this DES plan is: - Dr. E. Lee  
Management support will be provided by Mrs. Maureen Lee, Mrs Julie McCarthy and Miss Joanna Lee

The scope of activity to be undertaken is as follows:-

### **Featherstone Pride Locality Project:**

Featherstone is an isolated and deprived community with below average levels of educational achievement, below average levels of skill, high levels of teenage pregnancies, high level of lone pensioners with low income and often poor health. There is an urgent need to improve health provision locally.

Featherstone Health Centre has been actively involved in the above project and has made contributions and offered advice to developing a community engagement partnership for a better environment, and advised on community facility development as well as discussing improving opportunities for young people together with better access to health services.

The practice has had discussions with the Cultural Services Manager, Community Services at South Staffs Council Offices throughout 2008 and 2009.

The practice encouraged the leaders to take the partnership further and advise the community services to canvass opinion of local residents, the health care services they would like to see and to develop within their remit. We will continue to play an integral part in the development of this project in the future.

### **New Projects:**

#### **Hospital Follow-up Analysis – Dermatology and Plastic Surgery.**

We agree to analyse all hospital follow-ups for the dermatology and Plastic Surgery specialities to explore the possibility of reducing unnecessary hospital attendance.

The G.P's will meet monthly to discuss referral patterns and G.P. specific levels. Areas of educational need for individual G.P.'s will be identified, endeavouring to address this via individual professional development.

**CVD LES:**

Cardiovascular disease (CVD) is a term we use to cover all those diseases of the arteries that can lead to heart attacks, strokes and other circulatory diseases. CVD kills one in three people in the UK. It is the main cause of death and premature death (under 75) and is more common in deprived communities – and is the most important contributor to the inequality gap in life expectancy. This is why tackling premature CVD death is so important in addressing health inequalities.

The practice agrees to work with the PCT to identify high risk individuals with an aim to reduce risk factors such as physical activity, smoking, diet and nutrition, stroke, diabetes and obesity.

We will liaise with the Seisdon PBC Group on projects that they are leading on which have an impact on Featherstone:

**Expansion of Intermediate Care Team.**

With a view to them dealing with Chronic Disease Management in order to reduce the number of emergency hospital admissions and the lengths of stay for our elderly population

**Primary Care Mental Health services.**

This will be looking at mental health services in primary care in particular looking at reducing delays in care delivery.

**Information and Monitoring Requirements by PCT and Practice:**

The practice would expect to receive relevant up-to-date practice specific referral data from the PCT on a regular basis. We would also expect the PCT to provide information relating to practice specific use of health services and national-local priorities and commitments. We look upon the PCT lead to continue to provide support and guidance in order to achieve these objectives.

**General Principles:**

Featherstone Health Centre are committed to working towards improving the quality of care for their patients and where possible and appropriate, managing their care differently for the benefits of their patients. The practice is willing to engage and promote primary care and community services by using service alternatives to those provided by secondary care, where these are clinically appropriate and if such services are available locally.

The practice is willing to engage with the PCT, providers and locality arrangements in planning and redesigning care pathways. In doing so, we will work with other relevant stakeholders, especially community staff and social services in the development and implementation of their plans.