

Harrow Community Gynaecology Services

Memorandum of Information (MOI)

**NHS Harrow
Clinical Commissioning Group (CCG)**

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Foreword

NHS Harrow CCG is seeking to commission a community Gynaecology service for its population and would like to engage with service providers of Gynaecology specialisms. The drivers underpinning this need to transform services include:

- The need to respond to the increased or changing demand for services as a result of a diverse society and an increased prevalence of gynaecological conditions;
- Ensuring that services are centred around the patient; and
- Achieving clinical and financial sustainability.

Harrow Demographic:

- 33 GP Practices
- 265,422 patients:
- 51% Female, 49% Male
- 71% UK, British, 29% BAME

Gynaecology Activity:

Based on 2017/18 activity, there were

- 4,505 first outpatient attendances ,
- 7,397 follow-up outpatient attendances &
- 4,759 procedures undertaken for Gynaecology services in Harrow

A detailed review of the activity indicates there is an opportunity to provide a more out of hospital model which would significantly reduce the number of outpatient appointments and procedures delivered within the acute setting. The review indicates that 65% of current activity can safely be delivered out of hospital. It is expected that 58% can be delivered in the community Pathway Management programme whilst the remaining 7.5% would be delivered through Demand Management. The new model would utilise the Harrow Electronic Referral Optimisation Service (HEROS) to facilitate better pathway management. HEROS will provide effective clinical triage for referrals from GPs, based upon evidence based clinical pathways to ensure patients are directed to the provider best skilled to manage their health issues. HEROS will be tasked with specific targets in terms of referral management and direction of patient activity, in line with clinical protocols, ensuring that the modelled re-direction of GP referrals actually do flow into the new Community Gynaecology Service.

Our service vision

The Service Vision is for the residents of Harrow to have local access to a community consultant led Gynaecology service, the main features of which are listed below. These are essential requirements of the Service:

- All patients will be provided with a high quality, safe and effective service.
- Patients will be referred by their GP through to a single point of access with improved communication between GPs and the service.
- Waiting times will be less than 6 weeks for non-urgent referrals without impediment to urgent referrals.
- Patients will have a reduced duplication of diagnostic activity and assessment visits with unnecessary patient visits to the service minimised.
- Patients will be able to book their appointments with clinicians of the same gender on request (although this may extend the waiting time).
- GP referrals will be assessed (at the point of referral) by a consultant-led clinical team.
- The clinical team will have direct access to specialist consultant support, diagnostic facilities and physiotherapy.

Gynaecology Conditions proposed for assessment/treatment in the Gynaecology Community Service:

- Menorrhagia
- Pre-menstrual symptoms /syndrome management
- Vaginal prolapse
- Difficult smears
- Complex contraceptive problems
- Menopause management
- Abnormal Uterine Bleeding
- Vulval problems
- Cervical Polyps- obvious and suspected
- Vaginal discharge
- Lower abdominal pain
- Dysmenorrhoea

The new service will be expected to deliver financial efficiencies for the CCG by providing first and follow up appointments at a locally agreed tariff anticipated to be around 80-90% of acute trust national PBR tariff. Our intention is to be live with the new service by 1st June 2019 with at least three months for mobilisation prior to then. We are considering the new contract will be let for an

initial period of three years with a potential for up to a further two year extension period, i.e. potentially up to 5 years.

The proposed contracting payment model will be agreed with the provider and commissioning CCG. There is an opportunity for this procurement to be jointly commissioned by Brent as well as Harrow CCG thereby increasing the scope and contract value delivering increased opportunity for economies of scale and provider income.

The location of the proposed service is not being prescribed; the CCG wants the service to be delivered in the best location to meet the specification outcomes. There are no mandated premises. It is imperative the provider can demonstrate care closer to home. The gynaecology clinical assessment and treatment service, including access to ultrasound and phlebotomy, will be delivered at location(s) which are convenient to patients, ensuring easy access. All locations/premises must meet statutory physical accessibility and DDA requirements.

The purpose of this Market Engagement is to get an understanding from providers as their interest in delivering this future new service and highlight a potential challenges this model of care might pose, and how quickly this new service could be mobilised to become operational.

The CCG invites providers to support increasing capacity of community based gynaecological services to facilitate on-going service improvement and innovation and to work with the CCG to identify additional conditions/clinics that can be carried out appropriately within the community setting.