

**NHS DORSET CLINICAL COMMISSIONING GROUP
PRIMARY CARE COMMISSIONING COMMITTEE
MAIL TRANSPORT SERVICE UPDATE REPORT**

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| Date of the meeting | 05/04/2017 |
| Author | R Payne, Head of Primary Care |
| Purpose of Report | The purpose of this report is to update the Committee on progress with the Mail Transport Service following approval of the Options Paper in October 2016. |
| Recommendation | The Committee is asked to note the report. |
| Stakeholder Engagement | Engagement via PCOG, PCRG and Task and Finish Group which includes Practice Manager Representatives, LMC and Clinical Leads. |
| Previous GB / Committee/s, Dates | Primary Care Reference Group on 7.9.16 and 22 03 17 Primary Care Operational Group 14.9.16 Options Paper approved by PCCC 5.10.16 |

Monitoring and Assurance Summary

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| This report links to the following Strategic Principles | <ul style="list-style-type: none"> • Services designed around people • Preventing ill health and reducing inequalities • Sustainable healthcare services • Care closer to home | | |
| | Yes [e.g. ✓] | Any action required? | |
| | | Yes Detail in report | No |
| All three Domains of Quality (Safety, Quality, Patient Experience) | ✓ | | ✓ |
| Board Assurance Framework Risk Register | ✓ | | ✓ |
| Budgetary Impact | ✓ | | ✓ |
| Legal/Regulatory | ✓ | | ✓ |
| People/Staff | ✓ | | ✓ |
| Financial/Value for Money/Sustainability | ✓ | | ✓ |
| Information Management & Technology | ✓ | | ✓ |
| Equality Impact Assessment | ✓ | | ✓ |
| Freedom of Information | ✓ | | ✓ |
| I confirm that I have considered the implications of this report on each of the matters above, as indicated | ✓ | | |

Initials : RP

1. Introduction

- 1.1 The purpose of this report is to provide an update on progress made by the primary care team with regards to implementing recommendations for the Mail Transport Service following approval of an options paper by the Primary Care Commissioning Committee (PCCC) in October 2016.
- 1.2 The report outlines work that has been completed by a Task and Finish Group to engage Member practices in reviewing the current service to inform future commissioning intentions.

2. Report

Background

- 2.1 The Mail Transport Service (MTS) distributes mail, bloods and limited medical supplies between NHS organisations across Dorset. It is operated by two contractors; Southwest Ambulance Services NHS Foundation Trust (SWAST) and Dorset County Hospital NHS Foundation Trust (DCH). It is jointly commissioned and funded by Bournemouth, Poole and Dorset Health Care Foundation Trusts and the CCG on behalf of Dorset practices.
- 2.2 Full delegation brought to light issues regarding the payment of this service by practices in Dorset. The total cost of the MTS for primary care in 2106-17 is £402k. In 2015-16 £90k was collected from Practices leaving a shortfall which was being paid by NHS England and has since been passed over to the CCG.
- 2.3 A Task and Finish Group was formed to look at funding options going forward.
- 2.4 In October 2016, the PCCC approved recommendations to:
 - split the funding of this service so that:
 - * practices pay for the mail delivery element of the MTS as well as the total cost of the mail sorting office;
 - * CCG fund the blood pick up element of the service;
 - undertake a further review of the existing MTS service with a view to redesigning /improving the service for the future.

Progress

- 2.5 The MTS Task and Finish Group reconvened in November 2016 to oversee the implementation of the recommendations approved by the PCCC.

- 2.6 Budgetary Impact: From January 2017 all Dorset Practices now contribute towards the mail delivery element of the MTS service. In total this comes to £148.7K for 16/17. It should be noted that a payment break had previously been agreed by the Director of Finance from March 2106 – December 2016 (inclusive), therefore the new payment commenced in January 2017 and was not backdated.
- 2.7 From January 2017 the CCG is funding the blood pick up element of the service, which equates to £230.4K for 16/17.

Survey of Member Practices

- 2.8 In December 2016 a detailed survey regarding the MTS was circulated to all practices to complete. The aim of the survey was to undertake a review of the existing MTS service with a view to using the responses to inform redesigning /improving the service for the future.
- 2.9 The survey asked practices to evaluate and comment on several areas including; the quality of the service, how much this service is used by practices (activity), and who uses the mail service (GPs, Practice staff, Community Nurses).
- 2.10 In January results of the survey were shared with the MTS Task and Finish Group. 38 Practices completed the detailed survey. Highlights included:
- over 90% practices rated the service as either good/excellent;
 - in addition to collecting and dropping off mail, the service picked up various medical supplies / service including bloods and urine samples;
 - the average pick up of mail ranged between 11-25 items per day, per practice;
 - average drop off of mail between was 25-50 items per day, per practice;
 - practices reported that approximately 30% of mail collected was not generated by their practice staff, but from other organisations/professionals based at the surgery, for example DHUFT nurses;
 - 45% of practices felt the service represented value for money;
 - reasons why practices reported the service was not good value for money included:
 - * less items generated by practice staff;
 - * prices had increased whilst usage by practice staff had decreased.

7.11

- 2.11 Additional Feedback: The Primary Care team received 20 phone calls / emails and four letters regarding this service. The majority of these were from practices in West Dorset where practices have not been contributing to the cost of the MTS since 2012/13. The common theme reported regarded the amount that practices are being asked to contribute and concern that this does not represent good value for money for practices. Several practices have asked to be removed from this contract.
- 2.12 An initial review of the MTS Contract split between providers does indicate that the historical split between providers may not fully reflect changes in the volume of activity by provider.
- 2.13 Considering the survey results and additional feedback received, the Task and Finish Group recommended the Primary Care team renegotiate the contract(s), in particular the financial split between providers.
- 2.14 Meeting with South West Ambulance Services NHS Trust (SWAST): A meeting between the CCG and SWAST took place in February 2017 to discuss the outcome of the review. It was agreed that there is a need to review the current splits with all commissioners of this service.
- 2.15 The current contract with SWAST runs 1 April 2015 – 31 March 2018. The team expect to start negotiations immediately with commissioners of the SWAST contract regarding the financial split of the contract and to conclude contract renegotiations to enable an in-year contract variation.
- 2.16 Communication: A number of General Practices have indicated that they do not want to be part of the new contract arrangement. The primary care team will continue to work with practices to renegotiate with current providers and improve value for money for practices.

Next Steps

- 2.17 To meet with all commissioners of the SWAST contract to review the current financial splits. To hold similar meeting(s) with Dorset County Hospital NHS Foundation Trust. To keep practices fully up to date regarding progress.

3. Conclusion

- 3.1 The Primary Care team are implementing the recommendations approved by the Primary Care Commissioning Committee.
- 3.2 The Committee is asked to note the progress that the Primary Care team have made since the approval of the Options Paper in October 2017.

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Date : 9 March 2017

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