

## **Briefing update for Cheshire East Health and Adult Social Care Communities Overview and Scrutiny Committee 16 January 2020.**

### **Orthodontic and Oral Surgery/Medicine services**

#### **Introduction**

This report provides the Health and Adult Social Care Communities Overview and Scrutiny Committee with an update on the commissioning of Oral Surgery/Medicine and Orthodontic services for the residents of East Cheshire.

#### **Background**

As previously reported notice on the Orthodontic and Oral Surgery services was served to NHS England/NHS Improvement North West (Cheshire and Merseyside) by East Cheshire NHS Trust (ECT) in 2019. Interim arrangements were put in place to minimise as much as possible any negative impact on patients.

#### **Interim Level 2 oral medicine service Weston Clinic Earlsway Macclesfield**

Commissioners devised alternative provision for the Oral Surgery / Oral Medicine patients who were being reviewed at ECT on a 'follow-up' basis. Both ECT and commissioners considered it appropriate for their continued care to be delivered under a novel, Level 2 complexity service within the local area. Level 2 services are defined as procedural and/or patient complexity requiring a clinician with enhanced skills and experience who may or may not be on a specialist register. This care may require additional equipment or environment standards but can usually be provided in primary care. As with other Level 2 services, it was anticipated that perhaps the most significant advantage of this would be the reduction in turnaround time for treatment - 6 weeks compared to the 18 weeks turnaround time for treatment within the hospital services.

At the Weston Clinic there are two experienced clinicians leading the interim service, one of whom also has contractual employment with an Oral and Maxillofacial Surgery Unit within a tertiary care setting. This has allowed for the successful completion of biopsy treatment on the same day as consultation. This has been reported, by the clinicians, as being very favourable with patients. In addition, the location of the service has caused minimal disruption to patients, after transfer of care from ECT. Only one known patient has requested to be treated in a different location. There are also numerous free parking spaces for patients to use during their visit to the clinic.

The wealth of different cases treated effectively under this service demonstrates the ability to deliver Oral Medicine services within a Level 2 structure and it appears that

the management of such patients under a Level 2 service is appropriate. Perhaps one of the success stories of the interim service lies within the identification of active Basal Cell Carcinomas detected on more than one occasion. Subsequent onward referral to a tertiary care setting for treatment, resulted in a successful outcome for the patients.

In light of the initial service review and findings commissioners are now considering the implications for the future service model including:

- a) Consideration by commissioners should be given to the continuation of this interim, Level 2 service or a similar procured service. Obtaining patient feedback will form part of any further considerations.
- b) Consideration should be given to the reduction in turnaround treatment time for this interim Level 2 service in comparison to hospital services. This is clearly benefitting patients who are being seen in a primary care setting.
- c) Commissioners would welcome any additional comments or observations from the OSC with regard to the service at Weston Clinic Macclesfield.

### **Orthodontic services update**

A national procurement of local specialist primary care orthodontic services is currently underway within the North West of England including Cheshire and Merseyside and the contracts need to be successfully mobilised so that primary care orthodontic provision is in place and up and running before the commissioning focus shifts to the implementation of the new national secondary care contract. Commissioners are currently awaiting national guidance and any patients with complex needs are being referred to the nearest secondary care provider.

Commissioners have not received any adverse reports relating to the interim arrangements and are working with other NHSE/I locality commissioning teams where appropriate.

### **Proposed next steps and updated commissioning timeline**

Oral Surgery/Medicine interim service provision:

- January 2020: Commissioners will review findings from interim service and commence period of patient/public engagement to inform development of proposal and options. This could be in the form of focus groups and surveys and involve stakeholders including local Healthwatch.
- Commissioners will continue to work with the Cheshire and Merseyside Managed Clinical Network and Public Health England.
- March 2020: Complete analysis of patient/public engagement feedback.
- April 2020: draft proposal or set of options to be considered and the views of the OSC sought prior to any commissioning decision being made.

#### Orthodontic service provision:

- Once national guidance on secondary care provision is available commissioners will commence a period of patient/public engagement to inform development of proposal and options. This could be in the form of focus groups and surveys and involve local stakeholders.
- Dependant on the primary care orthodontic procurement completion timescales undertake analysis of patient/public engagement feedback of how primary care and secondary care pathways could be designed.
- Draft proposal or set of options to be considered and report back to OSC prior to any commissioning decision being made regarding potential future service model.

Commissioners will ensure that following a decision on any future service models any procurement of services will be in line with the Procurement Regulations 2015; and that the service specifications relating to this comply with national commissioning guides and are based on up to date needs assessment information.

As has been stated in previous reports commissioners recognise we have an obligation to ensure that the OSC is part of the future process in line with respective statutory responsibilities and commissioners will ensure that the commissioning process is compliant and reported via the NHS England Service Change Assurance policy.

#### **Report ends**

**Tom Knight**

**Head of Primary Care**

**NHS England/NHS Improvement Northwest (Cheshire and Merseyside)**