

Appendix C – Contracts Summary

Acute Contracts

The main areas of spend in acute activity for 2009/10 will be as follows (these figures do not include the 0.5% uplift for CQUIN, see below):

Provider	2008/09 Projected OT (£1,000)	2009/10 Spend (£1,000)
Brighton and Sussex University Hospitals Trust	£148,163 ¹	£142,711
Sussex Orthopaedic Treatment Centre	£10,713	£10,863
Worthing and Southlands Hospital Trust	£3,344	£3,405
Queen Victoria Hospitals Trust	£901	£852
Other 'SACS Contracts'	£1,231	£1,563
Specialist Contracts (including risk share)	£13,479	£16,062 (TBC)
South East Coast Ambulance Trust (including risk share)	£8,860	£9,894

Brighton and Sussex University Hospitals Trust

Brighton and Sussex University Hospitals Trust (BSUH), comprising Royal Sussex County Hospital, Princess Royal Hospital, Sussex Eye Hospital and Royal Alexander Children's Hospital, remains by far the largest area of spend and the chosen provider for the majority of acute care. Since 2008/09 we have used the national standard contract with BSUH and in 2009/10 we will be adopting any updates mandated by the Department of Health. This will include the new sections on Commissioning for Quality and Innovation (CQUIN) and Patient Reported Outcome Measures (PROMS).

The proposed spend at BSUH breaks down as follows:

Area	2008/09 Projected OT (£1,000)	2009/10 Spend (£1,000)
Outpatients	£29,683	£28,380
Elective and day-case inpatients	£22,483	£22,535
Non-elective inpatients	£48,719	£46,819
A&E	£4,740	£3,986
Other areas	£42,538	£42,618

This includes money earmarked to continue the core valve cardiac surgery procedure initiated in 2008/09, head and neck reconstructive surgery, increased levels of PET scans and chemo and radiotherapy and lucentis for age-related macular degeneration. The achievement of the 18 week target will need to be maintained with the same level of activity as in 2008/09 (i.e. any growth will need to be offset against carried out last year to reduce backlogs). The level of the demand plan is currently being reviewed against new commissioning intentions and technical issues relating to HRG version 4.

¹ This is the projected outturn at month 9. This does not include the £6.4M transitional funding agreed, or any adjustment for over-performance to be paid at a marginal rate.

The planned overall contract value for BSUH from BHCPCT is slightly smaller in comparison to the outturn value for 2009/10. This is due to the impact of a number of demand management schemes and pathway changes. These include the new elderly diagnostic clinic, community provision of anti-coagulant services, phase 4 of the Urgent Care Centre and a proposed one stop clinic for Musculoskeletal patients. In all cases these schemes will be taken forward in discussion with BSUH and in some cases BSUH may be considered as provider for the new service thereby causing an increase in the overall contract envelope. Brighton Integrated Care Service will continue to triage or redirect referrals resulting in a 5% reduction in GP referrals in comparison to April to September 2008.

Performance will continue to be measured against Key Performance Indicators (KPIs) set out in the contract. Several additional ones have been added for 2009/10 focussing on areas identified as priority outcomes in the Strategic Commissioning Plan, including KPIs addressing priorities identified in the Maternity Matters document.

In addition to the KPIs 5 CQUIN measures have been identified. These are as follows:

- Improving GP Communications and Discharge summaries.
- Race Equality and Access
- Implementation and monitoring of the Liverpool Care Pathway for End of Life Care.
- Maternity Patient Experience and Patient Reported Outcomes
- Stroke Pathway

0.5% of the total contract value (£723K for BHCPCT, but £1.2M for BSUHT in total) has been identified and will be paid only on delivery of these quality targets. A further area of Nutritional Assessment has been identified as a possible additional one, although without specific money attached currently.

Unlike previous years, non-urgent patient transport services (PTS) are no longer paid for in national tariff. The PTS service, however, will continue to be contracted through BSUHT as a block contract.

Sussex Orthopaedic Treatment Centre

The Sussex Orthopaedic Treatment Centre (SOTC) will remain the chosen provider for most elective Orthopaedic surgery in 2009/10 and 2010/11. The contract is due to come to an end on 31 May 2011. During 2009/10 the PCT will explore the options for provision of elective Orthopaedic surgery. This will include discussions between the Commissioners, SHA, the current provider and the Central Contract Management Unit and cover not only the future of the service, but also the premises. As of 1st April 2009, the SOTC contract will be measured using new ('phase 2') key performance indicators which include patient reported outcomes and have financial penalties attached.

Worthing and Southlands Hospital Trust (WASH)

The services from this Trust are managed by the standard national contract. Areas for CQuins are being developed with the co-ordinating Commissioner (West Sussex

PCT). From April 1st 2009 WASH will merge with the Royal West Sussex NHS Trust to form Western Sussex NHS Trust.

Queen Victoria Hospital NHS Foundation Trust

As with BSUH this is managed by the standard national contract. Areas for CQuins are being developed with the co-ordinating Commissioner (West Sussex PCT).

Other 'SACS Contracts'

There are seven further acute contracts (decreasing to six once the Royal West / WASH merger has occurred) co-ordinated by SACS which the PCT holds as an associate PCT. These have a total value for 2009/10 of £1,563K.

Specialist Commissioning

The Specialist Commissioning agenda is managed by the Specialist Commissioning Team. The portfolio of contracts (predominately in London) includes Guys and St Thomas', University College London Hospital, Kings College Hospital and Great Ormond Street.

South East Coast Ambulance Service

South East Coast Ambulance Service (SECAMB) continues to provide the emergency ambulance service to the PCT. This will now be contracted using the national standard contract for ambulance services.

Community Contracts

Southdowns Healthcare NHS Trust

The contract with SDH has been agreed and signed. The value of the contract for all services across five PCTs is £ 46,928k.

The following services are specified under this contract:

- 1 District Nursing
- 2 Community Matrons
- 3 Specialist Community Respiratory Service
- 4 Care Home Support Team
- 5 Heart Failure Service
- 6 Community Urology Service (Continence and Erectile Dysfunction)
- 7 Phlebotomy and phlebotomy outpatients
- 8 IV Antibiotics
- 9 Occupational Therapy (Community Services)
- 10 Community Beds BGH
- 11 Integrated Discharge Team
- 12 Falls Service
- 13 Intermediate Care Service
- 14 Foot Health (Outpatient Clinics)
- 15 Community Rehabilitation Team
- 16 Speech and Language Therapy (Adult)
- 17 Dental services
- 18 Stop Smoking Service
- 19 Macmillan Community Care Team
- 20 Sexual Health Services
- 21 Community Specialist HIV Team
- 22 Tissue Viability Service
- 23 Chailey Heritage
- 24 Sussex Rehabilitation Centre (PRH)
- 25 Integrated Community Equipment Services
- Specifications of The Children and Young People's Trust
– to be developed in year
- 27 SRC- Prosthetics
- 28 SRC- Neurorehabilitation
- 29 SRC -Wheelchair Services

Improving the Quality of Community Services

Service Specification Work:

All ratified service specifications have been formatted in line with the requirements of the new national community contract. Through this process we have also identified a number of service lines where specifications need to be reviewed and updated in year to reflect changes that have been under taken or improvements that need to be made.

CQUIN

Three CQUIN measures have been identified and 0.5% of the contract value will be paid only on delivery of these quality targets:

- data quality and completeness
- care planning and assessment
- carers assessment

Value for Money Review:

We have proposed to SDH that an independent consultant undertake a value for money review within the contract year 0910. The purpose of this review is to ascertain value around individual service line and provide the basis of work for moving us towards the generation of a local currency. This information will support us in developing a more detailed cost and volume contract.

Mental Health Contract

Sussex Partnership Foundation Trust

The PCT currently has a three year contract with SPFT. A deed of variation to the contract is being negotiated between the lead commissioner (West Sussex PCT) and SPFT to ensure that the contract reflects the commissioning plan of the PCTs. It is anticipated that this would be in place by April 2009.

Financial and Activity Summary

	2009/10 £'000
Block Contract Value	40,461
Discreet Services under Block contract:	
PCMHW	430
Counselling Service (GP)	320
Assessment and Care Management Services - Non-Contract Income	219
IAPTs	1,582
OPMH - Dementia (Value included in SCP)	97

CQUIN

Nine CQUIN measures have been identified and 0.5% of the contract value will be paid only on delivery of these quality targets:

- Care Planning - All Service Users to have a care plan in line with their needs that is reviewed and updated as appropriate.
- Improvement in the safety and therapeutic environment of inpatient settings.
 - Men and women should not share Bedrooms or Bed-bays.
 - Men and women should have separate bathroom and toilet facilities.
- Improvement in the safety and therapeutic environment of inpatient settings
 - The Provider should have a plan for widening the availability of women-only day areas
- Improvement in the safety and therapeutic environment of inpatient settings
 - By 2010 no 16/17 year olds should be admitted to an adult psychiatric ward (unless such an admission is in accordance with their needs).

- Improved access and provision of mental health care for people with learning disabilities
 - Services provided are accessible for people with learning disabilities as appropriate
- Improvement in the provision of physical healthcare for mental health and learning disability service users
 - All long-term (greater than one year) inpatients to have a physical health check at least annually
- Early intervention in dementia
- Comprehensive coverage of in-reach services from community mental health teams for older people into all care homes.
- Dual Diagnosis - Service users with dual diagnosis to have an assessment of their needs for both substance misuse problems and mental ill health and to have an appropriate management plan developed.

General points across all contracts

- We are working towards including robust and workable emergency preparedness and response clauses in their contracts and service level agreements with NHS organisations and other healthcare service providers, to ensure they be able to affect an appropriate response, in line with the requirements of the Civil Contingencies Act (2004).
- We will work with providers towards reducing the carbon footprint in line with the NHS Carbon Reduction Strategy.
- We will assure ourselves that SPFT and BSUH are implementing improvement plans with regard to mixed sex accommodation via the Quality Review Board.