



Planned Care

Our vision

We want high quality, efficient and integrated care (services and treatments not carried out in an emergency and often follow a GP referral) that meet the needs of local people, represent value for money and provide a better experience for patients as they will receive care in the best setting and fastest possible time. We will work with clinicians from primary, community and secondary care to develop services where we know there is scope for better patient care.

Our achievements

- We linked IT systems across the borough and launched a new Choose and Book system to allow GPs and patients to directly book appointments for services that referrals are made to.
- We commissioned GP facilitators for our networks of primary care professionals to help ensure patients are referred effectively and safely, and to identify any further support that GPs need to treat patients within a primary care setting wherever possible.
- We improved links between local GP and hospital services, including work undertaken by our urology, ear, nose and throat (ENT), dermatology, trauma and orthopaedic teams.

Our current priorities

- We will test a new tele-dermatology tool to give GPs quick and easy access to a dermatology specialist for advice on a patient's condition, without the need for a face-to-face consultation.
- We will introduce a new test that can be undertaken at the GP surgeries to distinguish between people with Irritable Bowel Syndrome and Irritable Bowel Disease, avoiding the need for patients to have invasive tests at hospital, leading to a better experience for the patient.
- We will expand the role of our GP Facilitators, so that they build effective links with the community, provide support and information about our services and encourage healthy lifestyle options for local people.

Our priorities for 2014 - 16

1. **To develop our dermatology services, taking into account the results of the tele-dermatology pilot, and working with hospital clinicians to ensure that people are seen and treated as quickly as possible**
2. **To improve access to gastroenterology services, in particular ensuring that people only receive invasive procedures where necessary, and that our clinics in hospital are prioritised for those that need them most**
3. **To take the learning from our back pain pilot, and implement improvements across the musculo-skeletal pathway, in particular focusing on management of symptoms and timely referral to specialists when needed, and community management when not.**
4. **Work with Barts Health to make sure that they provide an efficient and productive outpatients service that focuses on swift diagnosis, treatment and discharge, ensuring that people are only seen in hospital as clinically required.**
5. **Use the CCG's learning from Integrated Care to look at how we can provide a more personalised service in planned care for those with multiple needs**



**Tower Hamlets
Clinical Commissioning Group**

