

Community Sleep Studies “Hub” and “Spoke” service 2019-2020

Community first attends (schedule 1) and Community follow-ups (schedule 2)

1. Purpose of Agreement

This local service agreement is for patients with a sleep related illness who require an assessment and to undertake a sleep study. The aim is to deliver a new community pathway that shifts screening tests activity from Papworth Hospital to primary care. This agreement outlines the expectations and obligations of clinical practice, on practices that choose to undertake the Sleep Study screening.

2. Duration of Agreement

This agreement is for a period of twelve months, commencing from **1st April 2019** and ending on the **30th September 2019**.

3. Background

There are an increasing number of patients presenting to their GP practice with a sleep related illness such as severe daytime sleepiness and sleep related breathing disorders.

Conducting a sleep study is the primary diagnostic for Obstructive Sleep Apnoea (OSA). OSA is a condition that causes interrupted breathing during sleep. The repeated interruptions to sleep caused by OSA can make the person very sleepy during the day. OSA is a treatable condition and there are a variety of treatment options based on the severity of the condition (mild, moderate, severe) used to reduce the symptoms. Mild cases can be managed within primary care and treated through lifestyle advice/information especially through weight loss, position therapy and a reduction in alcohol consumption. Moderate to severe sleep apnoea is best managed in a specialist sleep clinic with access to mechanical treatments especially continuous positive airway pressure (CPAP).

The aim is to implement an integrated Sleep Study service between Primary & Secondary Care (i.e. Papworth) that facilitates the shift of the bulk of screening test activity into the community. The aim will be to focus on an outreach service, Papworth Hospital being the “hub”, the and the GP practices being “spokes”. All the other GP practices (referred to as satellite GP Surgeries) will refer their patients to one of the “spoke” practices.

In addition to the cost savings of this option, the benefits are improved patient experience, more skilled practitioners in primary care, reduced activity to Papworth.

4. Aims of the Service

Using the C&P Clinical Threshold policy (inserted below), GP’s can refer patients they suspect of having OSA to undergo an initial assessment at their local community ‘spoke’ service. This will remove the need for travel to

Papworth NHSFT in the first instance, and thus create a better patient experience and use of a service delivered locally.

The service will assess patients for possible OSA using the following process –

1. GP obtains patient consent to share and record data with “spoke”, refers via C&B to “spoke” surgery and sends letter to patient with appointment. GP sends referral letter to “spoke” with patient history inc. height, weight, neck size if known
2. The ‘Spoke’ will complete an assessment with the patient, using a questionnaire which includes symptoms, risk factors, and Epworth Sleepiness Scale and Biometrics (including BMI)
3. The patient will carry out an overnight sleep study at home using a Pulse oximetry machine to record oxygen levels.
4. These tests will establish whether a further test or treatment is needed in the acute provider setting.
5. The test results are send to Papworth for analysis /interpretation, and depending on the outcome the patient may be -
 - Discharged with no need for further investigation at the Sleep Study Service at Papworth NHSFT
 - Or be onward referred into the Sleep Studies service for further assessment/treatment

5.1 Exclusion criteria

- Two week waits which are referred directly to the acute Trusts.
- Patients not meeting the criteria set out in the C&P CCG’s Clinical Threshold policy on OSA.
- Patients under the age of 18 years old.

SCHEDULE 1 (Community Sleep Study first attend)

5. Scope of service to be provided (please refer to Appendices A(1))

This local service agreement will fund ‘Spoke’ Practices to undertake the following procedure when a patient presents to registered GP practice (satellite surgery) with troublesome sleep problem/daytime sleepiness and GP suspects OSA.

A suitably qualified health professional will:

- Take patient height, weight and neck size measurements (if information has not been forwarded on from the referring GP practice).

Complete questionnaires with the patient:

- Complete an Epworth Sleepiness Scoring questionnaire of every patient who is referred to their practice for a sleep study and complete the proforma loaded on Papworth’s electronic reporting system.

Demonstrate to the patient how to use the Pulse Oximeter

- Please refer to the instructions provided by Papworth.

Transfer the results from the Pulse Oximeter to Papworth’s electronic reporting system

- When the patient returns to the practice, having completed the overnight sleep study, the results/data from the pulse oximeter will be transferred to Papworth Hospital’s electronic reporting system. (Mondays, Tuesdays and Thursdays are the agreed days for the return of the Pulse Oximeter)

Transfer the data and patient records to Papworth Hospital

- The data, along with patient history (weight etc.), the ESS questionnaire and the Papworth Hospital proforma completed with the patient, are to be sent to Papworth's nhs.net account email address as follows: phn-tr.papworthsleepstudies@nhs.net

Keep records

- The practice will maintain accurate and up to date records of the service provided. Electronic records should be retained on the practice clinical system and maintained as per the Records Management Policy and Procedures.

Ensure adequate cover for service

- Each practice is to ensure there is a policy in place for annual leave/sick leave – see training below.

Train staff

- It is the responsibility of each practice to ensure that all staff involved in providing any aspect of care under this scheme has the necessary training and skills to do so. This includes annual Information Governance training. Practices should be able to demonstrate that they have in place a policy to cover staff training and maintenance of skills.

Report incidents/significant events

- It is the responsibility of each practice to report any incidents or significant events associated with this service to Cambridgeshire and Peterborough CCG's Governance team.

Equipment and Software Licence

- Papworth NHSFT will supply on a loan basis, the Spoke practices with the Pulse Oximeters required to deliver this service.
- Papworth NHSFT will cover the financial cost of the Pulse Oximeters and probes, and for the repair or replacement of this equipment as and when they come to their 'natural' life span or require maintenance for general wear and tear.
- Papworth NHSFT will not cover the repair costs for breakdown or equipment failure in instances such as misuse, e.g. if the equipment is broken frequently due to improper use etc. The Spoke practices will be liable for the cost of repair or replacement in these circumstances.
- The spoke practices will ask patients to sign a 3rd party liability agreement for damage of the equipment. In a case of damage to the equipment by the patient it is the responsibility of the Spoke practice who loaned the equipment to obtain payment for the equipment from the patient.
- C&P CCG have purchased from Stowood the Visi-upload software and dongles for all spoke practices, including 5 years support.

Inform Papworth Hospital of patients who cancel or DNA

- Contact/inform Papworth Hospital if the patient does not arrive so that records can be updated accordingly.
- Contact/inform Papworth Hospital if the patient cancels an appointment so that records can be updated accordingly. The above will be in line with Papworth's Trust Access Policy that fits in with the DoH's Referral to treatment consultant led waiting-times. See http://www.dh.gov.uk/en/Publicationsandstatistics/Statistics/Perfomancedataandstatistics/Referralt oTreatmentstatistics/DH_089757 for more.
- Change to routine: A simple patient information leaflet is now available as an attachment on C&B when making the C&B appointment, for the GP to hand to the patient.

6. Activity Reporting

Practices are required to submit the number of sleep studies undertaken on a quarterly basis via the Practice Commissioning Statement to capccg.enhancedservices@nhs.net by the 15th day of the following month, following Quarter end.

7. Pricing

Practices will receive **£24.24** per eligible patient who undertakes a sleep study.

If a patient is shown how to use the kit, takes the kit away overnight, and subsequently does not use the kit therefore there are no results from the pulse oximeter, the practice will still receive **£24.24**.

There will be no payment for DNA's.

8. Payment Verification

Practices entering into this contract agree to participate fully in the post payment verification/validation process determined by the Commissioner and LMC.

Practices should ensure that they keep accurate records to ensure a full and proper audit trail is available and Practices are encouraged to utilise Practice computer systems to enable this condition to be met.

LES activity will be validated against the Papworth Community Clinic data at year end by the CCG. Any discrepancies identified by Papworth, who will liaise directly with spoke practices during this process.

9. Performance

The CCG reserves the right to suspend the commissioning of this service where there are concerns around compliance and patient safety.

10. Safeguarding Adults

It is important that practices protect adults from avoidable harm (as defined in Safeguarding Adults guidelines) including safeguarding training, training on the Mental Capacity Act and Deprivation of Liberty. A Safeguarding lead should be identified in each practice.

11. Care Quality Commission (CQC)

The provider must meet CQC standards and where appropriate be registered with the Care Quality Commission (CQC). The standards and the relevant services are contained in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and the Care Quality Commission (Registration) Regulations 2014.

12. Termination

Should either party wish to terminate this agreement, a minimum period of 3 months notice must be provided in writing.

13. Signatories to the Agreement

Practices wishing to provide this service are required to complete and sign the application form, and return to the Commissioner for consideration

SCHEDULE 2 (Community Sleep Study Follow-Ups)

1. Scope of service to be provided (please refer to Appendix A (2))

This Local Commissioned Service will fund Practices to undertake the following (by a suitably qualified health professional):

Appointments:

Inform Papworth Hospital of patients who cancel or DNA

- Please note: *appointments for follow-ups cannot be made via Choose & Book.*
- Papworth guidelines for follow-up appointments are that professional drivers are reviewed annually with an 18 month review for all others.
- Papworth will prompt the patient at the right time, that they need to make an appointment themselves directly with one of the Spokes – patient to then make their own appointment directly with Spoke practice.
- **Important: The Patient's preferred Spoke practice to advise Papworth of patient and appointment made, via the following email address: phn-tr.RSSCOutpatient@nhs.net**
- Papworth will respond electronically for practice patient record purposes.
- It is up to individual Spoke practices as to what appointment slots are made when, as no slots need to be kept clear (as practices do for C&B purposes) for follow-up appointments.
- Spoke practice must contact/inform Papworth Hospital if the patient does not arrive or cancels an appointment so that records can be updated accordingly. The above will be in line with Papworth's Trust Access Policy that fits in with the DoH's Referral to treatment consultant led waiting-times. The following link will provide more information:
http://www.dh.gov.uk/en/Publicationsandstatistics/Statistics/Perfomancedataandstatistics/ReferraltoTreatmentstatistics/DH_089757
- Follow-up appointments will be **alternated** between Spoke and Papworth so that:
 - 1) So that the patient's machinery can be checked and serviced periodically (at Papworth).
 - 2) So that Papworth can provide/review the right level of clinical advice to the patient.Papworth will initiate the appropriate appointment directly with the patient, when required.
- The CPAP Practitioner will contact the patient to discuss results and then contact the satellite practice directly. The patient can contact the CPAP Practitioner directly, should they feel the need to do so.

Take height, weight and neck size

If this information has not been forwarded on from the referring GP practice, take height, weight and neck size measurements

Complete questionnaires with the patient:

- Complete an Epworth Sleepiness Scoring questionnaire of every patient who is referred to their practice for a sleep study follow-up appointment and complete the proforma loaded on Papworth's electronic reporting system.

Demonstrate to the patient how to use the Pulse Oximeter

- Please refer to the guidelines provided by Papworth.

Transfer the results from the Pulse Oximeter to Papworth's electronic reporting system

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Ensure adequate cover for service

- Each practice is to ensure there is a policy in place for annual leave/sick leave – see training below.

Train staff

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Report incidents/significant events

- It is the responsibility of each practice to report any incidents or significant events associated with this service to Cambridgeshire and Peterborough's CCG Governance team.

2. Activity Reporting

Practices are required to submit the number of sleep studies follow ups undertaken on a quarterly basis via the Practice Commissioning Statement to capccg.enhancedservices@nhs.net by the 15th day of the following month, following Quarter end.

The practice is commissioned for up to 12 Sleep Study follow-ups per month. If this threshold is reached, the practice must inform the CCG capccg.enhancedservices@nhs.net as soon as possible.

3. Pricing

Practices will receive **£24.24** per eligible patient who undertakes a sleep study.

If a patient is shown how to use the kit, takes the kit away overnight, and subsequently does not use the kit therefore there are no results from the pulse oximeter, the practice will still receive **£24.24**.

There will be no payment for DNA's.

4. Payment Verification

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8. Termination

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9. Signatories to the Agreement

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Appendix A (1): Community Sleep Study “Hub” and “Spoke” pathway

Patient presents to registered GP practice (satellite surgery) with troublesome sleep problem/daytime sleepiness. GP suspects OSA.

1. Patient is provided with advice on lifestyle management/modifications and self-management advice.
2. A reasonable period of time is agreed with the patient for monitoring of effect of lifestyle changes agreed and patient offered treatment with mandibular device, or medication as appropriate.
3. If sleep problems are significant and affect short term function, patient referred to “spoke” under the OSA Clinical Threshold criteria.
4. Proforma completed (the proforma **must** meet the criteria of the clinical threshold policy)
5. If patient does not meet Oximetry criteria but have significant sleep disturbance they should be referred via other pathways

GP obtains patient consent to share and record data with “spoke”, refers via C&B to “spoke” surgery and sends letter to patient with appointment. GP also sends referral letter to “spoke” with patient history inc. height, weight, neck size if known *

