# SCHEDULE 2 – THE SERVICES

1. **Service Specifications**

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| **Service Specification No.** |  |
| **Service** | Minor Injuries in Primary Care |
| **Commissioner Lead** | Head of Primary Care Telford & Wrekin CCG |
| **Provider Lead** | Telford and Wrekin GP Practice s |
| **Period** | 1st April 2020 to 31st March 2021 |
| **Date of Review** | October 2020 |

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| **1. Population Needs** |
| * 1. **National/local context and evidence base**   This service specification provides details of more specialised or additional minor injury services within primary care which are considered to be beyond the scope of essential or additional services provided by GP practices. No part of this specification by commission, omission or implication redefines essential or additional services.  A range of procedures and management of some conditions can be delivered within the community to avoid unnecessary attendances in secondary care. The provision of minor injury services within the community will improve access and convenience, deliver care closer to home and reduce pressure on secondary care. |
| **2. Outcomes** |
| **2.1 NHS Outcomes Framework Domains & Indicators**   | **Domain 1** | **Preventing people from dying prematurely** |  | | --- | --- | --- | | **Domain 2** | **Enhancing quality of life for people with long-term conditions** |  | | **Domain 3** | **Helping people to recover from episodes of ill-health or following injury** | **X** | | **Domain 4** | **Ensuring people have a positive experience of care** | **X** | | **Domain 5** | **Treating and caring for people in safe environment and protecting them from avoidable harm** | **X** |   **2.2 Local defined outcomes**  To provide access to minor injury services within the local community and:   * Provide safe and effective access to timely health interventions; * To increase the availability of care closer to home; * To provide responsive access * improve patient experience; * Avoid unnecessary delays * Provide consistency of care * Improve patient experience * Reduce A&E attendances |
| **3. Scope** |
| **3.1 Aims and objectives of service**  Providers will see and treat or refer where clinically appropriate minor injuries and provide follow up as required.  The objectives of this service are to:   * To provide a safe, effective, quality service * Provide more services in the community * Equity of Care * Cost effective service * Reduce the pressure on secondary care A&E departments   **3.2 Service description/care pathway**  **3.2.1 Service Delivery**  The service outline includes:   * Initial triage including immediately necessary clinical action to staunch haemorrhage and prevent further exacerbation of the injury. * History taking, relevant clinical examination, documentation. * Wound assessment for suitability for locally based treatment or onward referral as appropriate. * Appropriate and timely referral and/or follow up arrangements * Adequate facilities including premises and equipment, as are necessary to enable the proper provision of minor injury services including facilities for cardiopulmonary resuscitation * Maintenance of infection control standards * The patient should give consent for the procedure to be carried out and the consent should be recorded in the patient record. * Maintenance of records of all procedures   The following list gives guidance on the types of injuries and circumstances that lead to the use of Minor Injury Services and is not comprehensive:   * guidance * wound care including cleaning * lacerations capable of closure by simple techniques (stripping, gluing, suturing) * splints * minor dislocations of phalanges * foreign bodies * non-penetrating superficial ocular foreign bodies * following recent injury of a severity not amenable to simple domestic first aid * following recent injury where it is suspected stitches may be required * following blows to the head where there has been no loss of consciousness * recent eye injury * Prescribing/Medication * Observation * foreign bodies superficially embedded in tissues * partial thickness thermal burns or scalds involving broken skin: * not over 1 inch diameter * not involving the hands, feet, face, neck, genital areas   **3.2.2 Facilities**  The provision of adequate clinical space, equipment and sterile dressings.  **3.2.3 Clinical qualifications**  Staff involved in the delivery of this service will be appropriately trained and competent in the provision of the services offered.  The services provided and scope of these minor injury services will be reviewed with staff as part of the annual appraisal process.  The service provider must provide evidence to the CCG that their healthcare professionals have the appropriate knowledge, skills, experience, qualifications and competency to provide the service. This must include but would not be limited to the following requirements:   * Enhanced Disclosure and Barring Service (DBS formally Criminal Records Bureau CRB) checks have been completed; * Where applicable staff will be fully registered with the appropriate Professional Body; * All staff will be able to provide evidence of their continuing professional development post qualification that is relevant to the area of intervention delivered by the Treatment Room Service provided.   The service provider must comply with all relevant policy and procedure as contained in the NHS Standard Contract including but not limited to; safeguarding of vulnerable patients (including children), health and safety, marketing and branding and insurance requirements (professional, public and product and employers liability).  The service provider must also comply with all relevant guidance and referral protocols produced by the CCG. The aim of these protocols will be to ensure that patients are treated by the most appropriate professional, in the most appropriate location with the most effective treatment.  Patient transport arrangements do not form part of this service specification. Patients will be expected to make their own transport arrangements. Those patients who are entitled to assistance with transport under existing NHS arrangements will be able to access this through their GP Practice as per local arrangements.  **3.2.4 Clinical Governance**  The service provider will be responsible for their own system of clinical governance. This will include but not be limited to the following:   An appointed Clinical Governance Lead;   Development and implementation of Clinical Governance policies;   Adherence to the Serious Untoward Incident reporting and investigation process;   Compliance with Infection Control policies;   Compliance with NHS complaints procedure and processes.  The service provider will have secure IT systems in place which enable the capturing of patient information and activity reporting. They will ensure that all information relating to patients is safeguarded and complies with the Data Protection Act (1998), the Access to Health Records Act (1990), the Freedom of Information Act (2000) and the Caldicott Principles. Activity reporting will be submitted by the service provider through a secure nhs.net email address.  Waiting areas should have sufficient seating to accommodate the number of service users and their partners. Such areas should take into account the comfort of those waiting for others as they may experience an extended wait during a consultation or procedure.  **3.2.5 Tariffs and Codes**  Patients included and being claimed as part of this service shall be coded appropriately.  The CCG will collect information centrally from Primary Care clinical systems.  In signing up to this service the practice agrees to recording patient activity using the codes below, and agrees for the CCG to reconcile quarterly activity returns to central reports run based on these codes, for payment and audit purposes.   * **Minor injury enhanced service completed. Concept ID: 166431000000108** * Consultation for minor injury. Concept ID: 113011000000100   Please see Schedule 3 Part A for the Local Prices.  Claims are limited to one claim per patient episode (i.e. follow up appointments are considered to fall within essential services). If follow up care falls within the definition of another locally commissioned service (e.g. complex wound care or post-op wound care), this should be coded appropriately in order for relevant activity to be recorded and reimbursed as part of the appropriate LCS.  Please also refer to the Schedule 6 Part A for the Reporting Requirements.  **3.2.6 Annual review**  All practices providing this service shall conduct an annual review of the register of patients receiving minor injury services to include;   * type of injury * length of appointment * onward referral and follow-up * complications   **3.2.7 Key Performance Indicators**  Please see Schedule 4 Part C and Schedule 6 Part A for details of these requirements.  **3.2.8 Equal Opportunities**  The service provider must demonstrate how they meet equal opportunity requirements in the following areas:   * They must be committed to equal opportunities and must not discriminate in performance of the service towards service users or members of staff in any way; * The service provider must be able to provide chaperones at the patient’s request; * The service provider must also be able to provide premises, facilities and treatment rooms that are compliant with disability legislation; * The service provider must be able to provide access to foreign language interpreter if necessary.   **3.3 Population covered**  The scope of the service includes all patients registered, whether permanently or temporarily in Telford & Wrekin.  **3.4 Any acceptance and exclusion criteria and thresholds**  The patients in the following category are appropriate for treatment by the minor injury service during normal opening times of the delivering medical practice, where the patient would otherwise need to attend A&E or a local Minor Injuries Unit:   * lacerations capable of closure by simple techniques (stripping, gluing, suturing) * bruises * minor dislocations of phalanges * foreign bodies * non-penetrating superficial ocular foreign bodies * following recent injury of a severity not amenable to simple domestic first aid * following recent injury where it is suspected stitches may be required * following blows to the head where there has been no loss of consciousness * recent eye injury * partial thickness thermal burns or scalds involving broken skin: * not over 1 inch diameter * not involving the hands, feet, face, neck, genital areas * foreign bodies superficially embedded in tissues   Patients in the following categories are not appropriate for treatment by the Minor Injury Service but the enhanced service covers the appropriate referral of these patients elsewhere:   * 999 call (unless attending crew speak directly to the doctor) * any patient who cannot be discharged home after treatment * any patient with airway, breathing, circulatory or neurological compromise * actual or suspected overdose * accidental ingestion, poisoning, fume or smoke inhalation * blows to the head with loss of consciousness or extremes of age * sudden collapse or fall in a public place * penetrating eye injury * chemical, biological, or radioactive contamination injured patients * full thickness burns * burns caused by electric shock * partial thickness burns over 3cm diameter or involving: * injuries to organs of special sense * injuries to the face, neck, hands, feet or genitalia * new or unexpected bleeding from any bodily orifice if profuse * foreign bodies impacted in bodily orifices, especially in children * foreign bodies deeply embedded in tissues * trauma to hands, limbs or feet substantially affecting function * penetrating injuries to the head, torso, abdomen * lacerating/penetrating injuries involving nerve, artery or tendon damage   **3.5 Interdependence with other services/providers**   * Secondary Care Services * Community Services |
| **4. Applicable Service Standards** |
| **4.1 Applicable national standards (eg NICE)**  **Compliance with relevant guidance and policy**  The service must comply with the guidelines produced by the following organisations (where applicable):   * + Rules of Professional Conduct   <http://www.gmc-uk.org/guidance/index.asp>   * + NICE Guidelines and recommended pathway <http://guidance.nice.org.uk/>   + Care Quality Commission registration requirements.   **4.2 Applicable standards set out in Guidance and/or issued by a competent body (eg Royal Colleges)**  None identified.  **4.3 Applicable local standards**  See Section 3.2.2 to 3.2.5 of the Service Specification.  Patients included and being claimed as part of this service shall be coded appropriately. Codes for use will be identified.  Frequency of data extraction shall be completed on a quarterly basis. |
| **5. Applicable quality requirements and CQUIN goals** |
| * 1. **Applicable Quality Requirements (See Schedule 4A-C)**   2. **Applicable CQUIN goals (See Schedule 4D)**   Not applicable. |
| **6. Location of Provider Premises** |
| **The Provider’s Premises are located at:** |