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1.	Meeting	Cabinet Member Adult Social Care & Health
2.	Date	20/10/2014
3.	Title	The Gate – New Registrations Screening Pilot
4.	Directorate	Public Health

5. Summary

A two-year pilot to provide an initial health assessment for vulnerable communities who have not yet registered with a GP. The Gate Surgery specialises in supporting those people who have difficulty accessing mainstream health and social care services. The service will work flexibly and proactively across a range of complex and interlinked issues affecting the adults and families at greater risk of or experiencing poor health, substance misuses or risk of neglect or sexual exploitation. People from some of our most deprived communities have higher levels of TB, blood borne viruses and STI's as well as low uptake of vaccinations and may not be registered with a GP. Drug alcohol and substance misuse as well as high levels of mental health problems pose further risks to these individuals and their families. It is therefore essential that we develop a clear health and safeguarding framework for assessment of this population group and have in place a strategy to limit the spread of these infections and protect the most vulnerable from harm.

Common health problems experienced by vulnerable communities include the following;

PHYSICAL HEALTH

<u>Communicable diseases</u> e.g. TB, HIV, Hepatitis B and C Measles Syphilis and Gonorrhoea <u>Chronic diseases</u> e.g. diabetes, coronary heart disease <u>Dental disorders</u> Disability

SAFEGUARDING & SEXUAL HEALTH Consequences of trafficking/prostitution Poor uptake of STI screening and contraception services MENTAL HEALTH

e.g. anxiety, depression

WOMEN'S HEALTH

e.g. poor antenatal care and pregnancy outcomes,

CHILDREN'S HEALTH

e.g. incomplete and uncertain immunisation, no routine screening

DRUG and ALCOHOL

Risk of exploitation and alcohol misuse

6. Recommendations

That the Cabinet Member:-

- Approve the establishment of a two-year screening pilot for people not registered with a GP who register at the Gate Surgery
- Approve funding of the pilot from non-recurrent savings in the ring fenced public health monies

7. Proposals and details

A detailed screening proforma has been developed by the Gate which includes aspects of nationally recommended disease screening. This will be held on SystmOne – the GP Computer system. A report will be collated at 12 months and at completion of the pilot.

The proposed assessment would cover:

- Identifying and reporting any safeguarding and social issues (including, but not limited to language and learning needs/disability, risk of domestic abuse)
- Collecting a general medical history
- Baseline observations (height, weight, waist circumference, blood pressure, baseline bloods as required, children's growth pattern initial observation)
- Identification and treatment of any existing long-term conditions requiring ongoing medication
- Bringing childhood immunisations/vaccinations up to UK schedule
- Risk assessment and testing as necessary for blood borne viruses (Hepatitis B, Hepatitis C, HIV), Syphilis and Gonorrhoea
- Tuberculosis testing as required
- Rubella susceptibility testing
- Identifying cervical cytology history/needs
- Contraception/LARC as required
- Onward referral to health services (e.g. health visiting and dental health services) and other support (English language lessons, living in the community training) as necessary
- Onward referral to Social services as appropriate
- Introducing the new arrival to the different health services in Rotherham and appropriate use of them

If the individual has not registered with a GP already, a list of practices near their home would be provided. Confirmation of the assessment and a report would be given to the individual to pass to the general practice where they want to register.

In addition for children screened cross checking with the local authority children's register.

8. Finance

<u>Non-recurrent</u> – (Set up costs) 9,500.00 – recruitment, additional equipment

Recurrent costs Pay - 49,592.84 Non-pay - 600.00

TOTAL COST	£
Year 1	59,692.84
Year 2	50,192.84

9. Risks and uncertainties

- Many people can carry a blood borne virus without symptoms, but the risk of transmission to others remains. *Early detection would reduce the risk of transmission and improve prognosis, reducing both morbidity and mortality as many of the blood borne viruses may result in long term liver disease.*
- Low immunisation coverage and increased mobility increases the risk of diseases being imported that have generally been eradicated in the UK. Failure to identify and correct gaps in the immunisation programme increases the risk of morbidity, disability and mortality. *Opportunity to bring immunisations/ vaccinations up to UK schedule for adults and children.*
- Not all eligible new entrants are currently screened for TB and all those requiring BCG may not be identified. Screening for TB from areas of high prevalence would detect latent TB which could be managed to reduce the likelihood of reactivation and onward transmission and vaccinate those who are eligible for BCG.

10. Policy and Performance Agenda Implications

Local intelligence collated from this pilot will provide useful local evidence on safeguarding and other health protection initiatives for people residing in Rotherham.

11. Background Papers and Consultation

JSNA

12. Keywords:

Officer: John Radford MRCGP GMC No. 2630063

Director of Public Health

Telephone: 01709 255845

Email: john.radford@rotherham.gov.uk

Web: www.rotherham.gov.uk/publichealth