



Reference: FOI.ICB-2425/179

Subject: Bronchiectasis Services

I can confirm that the ICB does hold some of the information requested; please see responses below:

QUESTION		RESPONSE	
 1. Community Respiratory Service Mapping a. Does the ICB commission community-based bronchiectasis services? b. Does the ICB commission services dedicated to complex bronchiectasis e.g. those with frequent exacerbations, or comorbidities? c. Does the ICB commission community-based services treat complex respiratory conditions such as COPD, interstitial lung disease? If yes, please 		 a. Details for all bronchiectasis services within the BNSSG area can be found here - https://remedy.bnssg.icb.nhs.uk/adults/respiratory/bronchiectasis/ b. Details for community based services for respiratory conditions can be found here - https://remedy.bnssg.icb.nhs.uk/adults/respiratory/community-respiratory-service/ δ: Name of provider Sirona Care and Health	
complete the table below:		Number of patients contracted/treated in the	This information is owned by Sirona. Please contact them at
Name of provider		past year	sirona.hello@nhs.net
Number of patients contracted/treated		Address of provider	Sirona Care and Health,
in the past year			2 nd Floor, Kingswood Civic Centre
Address of provider			High Street
			Bristol, BS15 9TR





Prescribing within BNSSG is in line with the BNSSG Joint Formulary https://remedy.bnssg.icb.nhs.uk/formulary-adult/

And the Traffic Light System which defines who is responsible for prescribing and monitoring medicines.

https://remedy.bnssg.icb.nhs.uk/formulary-adult/formulary-process-and-paperwork/the-traffic-light-system-and-classification-of-medicines/

2. High-cost drug propensity

- a. Are the community service providers authorised to treat patients with any of the following drug types?
- Monoclonal antibodies
- Nebulised or infusion polymyxins / aminoglycosides antibiotics e.g. Colomycin or Gentamicin
- Other high-cost drugs

- Monoclonal antibodies
 - These are all listed as RED traffic light status in the BNSSG Joint Formulary and should be prescribed and monitored by a specialist. This is currently undertaken by hospital specialists.
- Nebulised or infusion polymyxins / aminoglycosides antibiotics
 e.g. Colomycin or Gentamicin

Treatment is determined through local guidelines and may be RED or AMBER traffic light status, that is, specialist only or specialist initiation and after a specified period prescribing and monitoring transferred to primary care as per the BNSSG Joint Formulary. https://remedy.bnssg.icb.nhs.uk/formulary-adult/chapters/5-infections/52-bacterial-infection/

There may be times, through our emerging integrated service pathways, particularly hospital at home (virtual wards) that appropriately trained respiratory personnel employed by community provider will prescribe amber medication.





	Other high-cost drugs
	These would need to be specifically stated and may be found
	within the BNSSG Joint Formulary https://remedy.bnssg.icb.nhs.uk/formulary-adult/
	a. The ICB does not hold this information. Please contact the
	relevant local authority:
3. Resource utilisation	Bristol City Council - https://www.bristol.gov.uk/data-protection-foi/freedom-of-information-foi/
 a. What is the total resource funding utilisation in social care for exacerbating bronchiectasis, in the last financial year? b. What/how much is funded from NHS budgets? 	North Somerset Council - https://www.n-somerset.gov.uk/council-democracy/data-protection-freedom-information/freedom-information/freedom-information-foi
c. What/how much is funded by social care budgets?	South Gloucestershire Council -

The information provided in this response is accurate as of 29 August 2024 and has been approved for release by Sarah Truelove, Deputy Chief Executive and Chief Finance Officer for NHS Bristol, North Somerset and South Gloucestershire ICB.