Healthier **Together**

Improving health and care in Bristol, North Somerset and South Gloucestershire



Healthy Weston Update for the North Somerset HOSP

September 2018



Purpose

- To provide an update on the Programme and seek feedback to support next steps focusing on the
 - Case for change
 - Vision
 - Building on the Co-Design work
 - Clinical Service Options Development
 - Development of the Pre-Consultation Business Case
- To share the Evaluation Criteria developed to enable the transparent evaluation of any options, and seek support for these from the HOSP

The Case for Change – Building on the Commissioning Context¹ and Co-Design Work

The population in and around Weston is both aging and growing – we need to increase our focus on prevention .

The Trust has been in financial deficit since 2010/11 and this is increasing year on year.

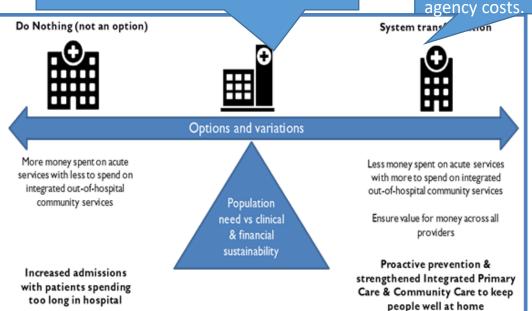
The CCG is making a number of premium payments to support services – this is funding that is not available for other services.

The A&E service temporarily closed overnight in July 2017 due to the inability to provide safe staffing levels.

The vacancy level for Doctors and nurses in Weston Area Health Trust is high, impacting on the ability to provide continuity of care and high

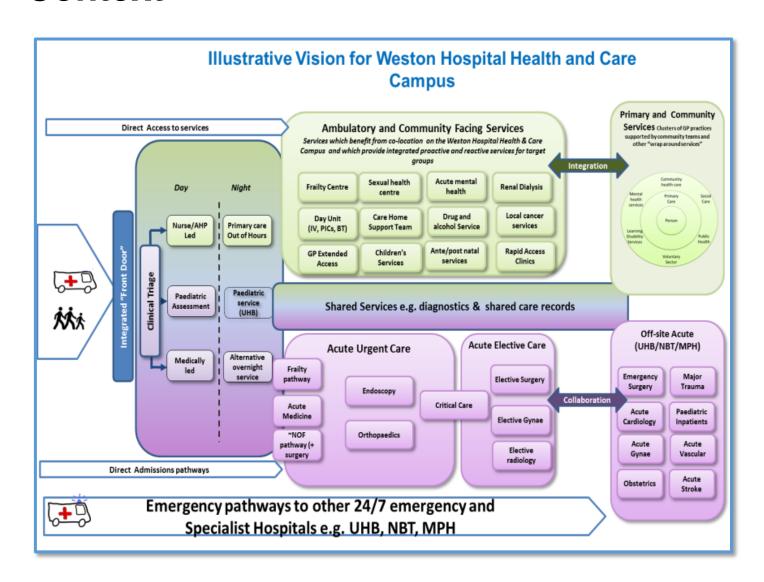
Despite population increase, activity has been reducing in Weston year on year.

The midwife led maternity service is not chosen by enough women to make it viable with just 170 in 2016/17.





The Case for Change – Building on the Commissioning Context



Preventive, primary care and community based services, working to help people stay well, independent and at home wherever possible

Integrated services working collaboratively for the population of Weston and Worle

Greater collaboration between acute hospitals.



Vision for 2023

In 2023, people will be saying....

"We have reduced the health inequality gap in Weston and Worle"

"I feel confident in the local health & care system"

"Weston General Hospital Health and Care Campus is a great place to work"

> "I can get to see the right health care professional when I need to"

"Healthy Weston has been great – we have really had the opportunity to shape the way our services have been developed"



How will we know?

Based on our widespread co-design work with the local community ...



Frail older people are less likely to be admitted to hospital in an emergency because they are being supported to remain independent.



Recruitment and retention across medical, nursing and allied health professional roles in primary, community and hospital based services is good.



Year on year we have been able to increase the relative investment in primary, community and mental health services.



Weston Hospital Health and Care Campus is seen as a national exemplar for integrated services.



There is greater involvement of the voluntary sector in the provision of local services.



There is integration of mental and physical wellbeing at all levels and care settings.

Progress (1) Building on the Co-Design Work



We have considered all the opportunities generated through the co-design work and agreed how these will be taken forward.



We have been progressing the "Just Do It" opportunities, for example confirming recurrent funding to support the proposal for a crisis café in Weston, joint appointments, primary care collaboration.



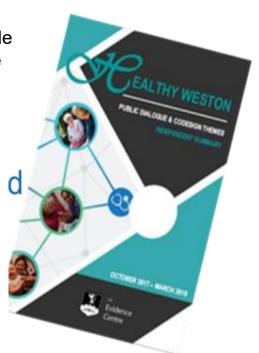
We have recognised that these opportunities alone will not be sufficient to secure clinically and financially sustainable services, and we need to be bolder in exploring options for the future.



We have refreshed the Healthy Weston Governance to support the next phase of work – to develop the pre-consultation business case by the Autumn of 2018.



We have been working with clinicians to develop best practice pathways for urgent, emergency and elective care to inform the development of options for Weston General Hospital that will be assessed against a set of evaluation criteria which have been informed by the co-design feedback.





Progress (2) Building on the Co-Design Work – Clinical Service Options



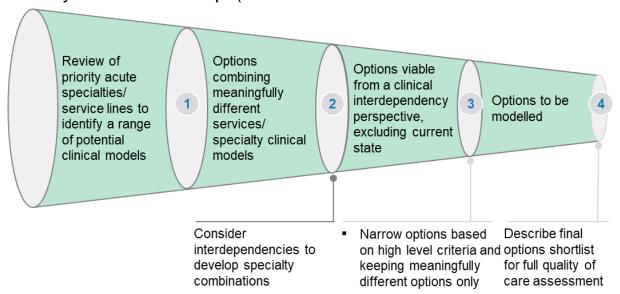
Clinical colleagues have been working to describe **best practice pathways** considering first contact, investigations, treatment and follow-up.



The clinical group has now working through possible **clinical service models** for each service and the **clinical interdependencies**. The full list of service options will go through a process of assessment and evaluation as summrised below to identify the most suitable/preferred option of service provision. This process will ensure input from clinicians, service users, carers and other key partner.



A set of **evaluation criteria** has been developed, drawing on the feedback from the Healthy Weston Co-design work, clinical input and testing through the Healthy Weston Patient and Public Reference Group. Subject to the approval of the CCG Governing Body, these criteria will be used to assess the options identified by the Clinical Group. (The evaluation criteria have been circulated separately)





Development of the Pre-Consultation Business Case

Where formal consultation is required, the commissioner (CCG) is required to develop a **Pre-Consultation Business Case** (PCBC), which must be approved by NHS England. The PCBC provide the evidence that NHS England's 5 tests for service change have been addressed, including quality, clinical and financial sustainability, assurance on the how preferred options have been developed and appraised and on the system's ability to implement changes if agreed.

Emerging Scope of Healthy Weston PCBC Options

Strengthened primary, community and mental health services networked with Weston General Hospital Health & Care Campus

Options for urgent and emergency care services

Elective Surgery and Maternity

Integrated models of care focusing on frailty, vulnerable groups, children's services and ambulatory care that support prevention and the delivery of enhanced primary and community services..

Elective care for the local population.

Options to support urgent and emergency care drawing on the Keogh Urgent and Emergency Care Review, Best Practice Pathways and the emerging BNSSG Urgent Care Strategy.

The options will ensure that the interdependencies between acute medicine, emergency surgery, critical care, diagnostics and paediatrics are recognised.

An elective centre for the BNSSG population covering non-complex elective care (e.g. for orthopaedics and/or urology) delivered in partnership by WAHT, North Bristol Trust and University Bristol Trust. Maternity care to include midwife-led ante-natal and post-natal clinics. Midwife-led deliveries may be offered both at home and in the hospital, or at home only.

This will be "a given" enabling existing services to work more effectively building on the Healthy Weston co-design.

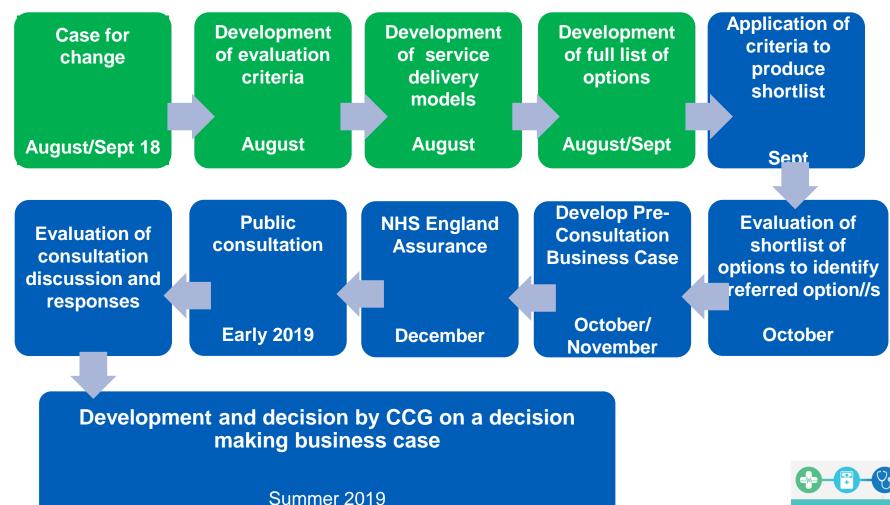
The CCG will consult on a preferred **option/s**.

Subject to confirmation with HOSP we agree whether these changes are considered as substantial changes requiring consultation.



High Level Indicative Time Line

The following sets out a **high level time line**. As we work through the Programme we will link closely with the HOSP and Joint HOSC to test assumptions and ensure the process respects **the statutory** role of the HOSP.





Working with the HOSP

How we want to work with the HOSP and Our Next Steps



Through the programme arrangements we recognise our statutory duty to consult with HOSP members on the work we are doing any emerging proposals for change. We want to work with the HOSP to ensure we take on board HOSP views and meet our respective statutory responsibilities.



The clinical service design work is looking carefully at impact on all service users and carers, including the impact for residents in the North Somerset and in neighbouring areas to help the HOSP consider whether any joint committees are required.



We will be providing regular updates to the HOSP to both inform and seek feedback, and these will continue – this will be important as we develop options for service change, and look to the Scrutiny Committee to discharge its statutory role in relation to NHS public consultation



We are finalising our route to consultation which will include **confirming milestones with the HOSP** to ensure open and clear decision making and effective engagement and consultation.



We are asking the HOSP to **note and support the proposed evaluation criteria** that we will be using to assess the clinical model options emerging through the clinical service design group to secure a strong focused hospital for Weston in the context of strengthened out of hospital services.

Comments and feedback from the HOSP would be welcome to ensure that the we are doing enough of the right things to provide you with assurance with regard to the work progressing.

