

Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group

REPORT TO THE: HEALTH OVERVIEW AND SCRUTINY PANEL

DATE OF MEETING: 11TH DECEMBER 2018

SUBJECT OF REPORT: HEALTHY WESTON PROPOSALS

TOWN OR PARISH: ALL

PRESENTED BY: COLIN BRADBURY

RECOMMENDATIONS

That the Health Overview and Scrutiny Panel:

- Reviews the proposals set out in the accompanying presentation to this paper
- Confirms whether any of the models outlined are likely to constitute a substantial variation on current services provided at Weston General Hospital, thereby requiring formal public consultation before any decisions can be taken by the Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (CCG) in its statutory role as the Consulting Authority
- Confirms support for the planned **approach** to formal public consultation as set out in the attached draft Consultation Plan (Annex 1)

1. SUMMARY OF REPORT

This report summarises the work that the *Healthy Weston Programme* has undertaken so far with clinicians, partner organisations, front-line staff, patients, carers and members of the public to consider the local health care services that might best serve the population both now and in future. In particular, it focuses on areas of proposed change around Weston General Hospital – supported by an ongoing programme of improvements in local primary and community care services. We are aware that the Healthy Weston programme is likely to be of significant interest to the local community.

The North Somerset Health Overview and Scrutiny Panel (HOSP) has received regular updates throughout the duration of the Healthy Weston Programme, as have Somerset Health Overview and Scrutiny Committee and the Joint meetings of Health Overview and Scrutiny Committees that have been held in common across Bristol, North Somerset and South Gloucestershire.

From our previous discussions and meetings, it is BNSSG CCG's understanding that North Somerset HOSP have agreed with these bodies that they will take the lead on scrutiny of the Healthy Weston Programme. From these discussions it has also been made clear that

the reforms and improvements to 'out of hospital' care that the Healthy Weston programme has designed so far need not be subject to formal consultation. Therefore, this paper focusses on the clinical design work to date and the emerging proposals for change, to ensure safe, high quality, and clinically and financially sustainable services at Weston General Hospital for the long-term. This clinical design work is subject to expert independent assurance by a body called the South West Clinical Senate.

Once the HOSP has specified if any potential changes are in its view a substantial variation to current service provision, the CCG will present a Pre Consultation Business Case to its regulatory body NHS England. NHS England will assess the CCG's case against 5 nationally defined tests for service change. If BNSSG CCG receives assurance from NHS England, then the Governing Body will also thoroughly consider the pre-consultation business case and use it to inform its decision to consult, and the options it wishes to consult the public on. Subject to the assurance process outlined above, BNSSG CCG anticipates undertaking a formal consultation with the public from mid-January 2019 which would last for 12 weeks.

Following the completion of the consultation, and a full and thorough analysis of the responses received, along with all the other data and evidence collected as part of the Healthy Weston review, the CCG would then publish and consider a Decision Making Business Case. This would set out in detail the evidence and rationale for the CCG Governing Body to decide on an option for the future shape of services and how to progress. Therefore, no decisions on the long-term future of services commissioned at Weston General Hospital will be taken until the summer of 2019 at the earliest.

2. POLICY

Healthy Weston is the name of the work the CCG is doing together with a range of health and care organisations to change and improve local NHS services. It is a key workstream of the wider Bristol, North Somerset and South Gloucestershire Healthier Together partnership. The proposals set out below have been developed by local senior doctors, nurses and other health and care professionals, drawing on evidence, national and international best practice standards and guidelines. This work in turn has been informed by a significant period of public engagement and codesign undertaken in the winter/ spring period of 2017/18 and ongoing engagement with staff, stakeholders, patients and the public through the summer/autumn period of 2018.

3. DETAILS

A Case for Change has been published which sets out the compelling need to change and the rationale behind the Healthy Weston Programme. The attached presentation sets out the details of the work done so far in response to this, and the emerging options that have been developed as part of this work. This builds on the engagement and discussions to date with HOSP and the discussion with Full Council when we met them on 20 November 2018. The Consultation Plan.

4. ENGAGEMENT AND FORMAL CONSULTATION

A comprehensive engagement process began in June 2017 and informed the development of a 'Commissioning Context' which was published in October 2017. This outlined the principles for whole-system change and was the subject of a period of public dialogue and co-design from October 2017 to March 2018. Over 1,627 pieces of feedback representing 2,518 people were received. The independent report summarising themes informed ongoing work about hospital care and care in the community.

There has been ongoing engagement with staff, stakeholders (including local elected representatives, the voluntary and the community social enterprise sectors), patients, carers, and the public from the summer 2018 through the autumn and ongoing now. This includes outreach engagement to seldom heard groups and those with protected characteristics under the equalities legislation. This phase of our work has been to raise awareness of the case for change and to test the emerging proposals. Insights from all the involvement and engagement activity undertaken have informed the design of our evaluation criteria, used in the clinical design process to assess and evaluate and narrow down the longlist to the current medium list of potential options for different ways of delivering services in the future.

A full Consultation Plan is being developed to support the anticipated formal consultation process starting in early 2019, subject to confirmation from the HOSP and the necessary assurance being received from NHS England. The latest version of this plan is attached under Annex 1.

5. FINANCIAL IMPLICATIONS

Delivering best value for the taxpayer by commissioning high quality, efficient and effective services that best meet patients' needs is an important consideration for the Healthy Weston Programme. Any future public consultation would set out in detail the estimated financial impact that our proposal(s) would have.

6. RISK MANAGEMENT

It is important to acknowledge that there are risks associated with any change in service models. A full analysis of these risks will be published as part of any future consultation. However, it is equally important to highlight that the strong consensus coming out of the Healthy Weston Programme is that the "do nothing" option carries with it the greatest risk for both Weston General Hospital and the wider system as it brings with it the possibility of unplanned changes that have the potential to destabilise the system and affect patient care if changes are not made to create more sustainable services. A good example of this is the temporary overnight closure of the A&E department at Weston hospital following a CQC inspection in 2017.

7. EQUALITY IMPLICATIONS

An Equality Impact Assessment will be published as part of a consultation – should this go ahead. At the future stage of compiling a decision making business case, a further equality impact will again be assessed for any disproportionate effect on protected or vulnerable groups and to ensure that mitigations are put in place to address these.

8. OPTIONS CONSIDERED

More than 1,000 potential clinical models were identified via reviews of national and international best practice and Royal College guidelines and clinical input. Reviewing clinical interdependencies helped to narrow this down to fewer than 200 models. Looking at the extent to which models would be applicable in Weston based on the changing needs of our population, workforce, access and safety constraints narrowed the potential models to fewer than 40.

Clinicians reviewed these models in depth using pre-selected evaluation criteria that had been tested and agreed with clinicians, stakeholders and patient and public representatives, and cross referenced with national guidelines and best practice. This led to shortlisting six models for formal detailed evaluation, including assessment of clinical quality

and patient outcomes, workforce, financial and activity modelling. The evaluation criteria, which are directly linked to the case for change, were:

- Quality of care: clinical effectiveness, patient and carer experience, safety
- Access to care: distance, cost, travel time and patient choice
- Workforce: scale of impact, impact on recruitment, retention and skills
- Value for money: capital costs, income and expenditure, net present value
- Deliverability: expected time to delivery, co-dependencies.

The 6 models described in the attached presentation are the ones that the clinical design group have recommended for detailed analysis and assessment and further review in order to ensure that the best possible range of services to meet the local population's needs are provided at Weston Hospital.

AUTHOR

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