

## **REPORT TO THE HEALTH OVERVIEW AND SCRUTINY PANEL**

**DATE OF MEETING: 18<sup>TH</sup> MARCH 2021**

**SUBJECT OF REPORT: HEALTHY WESTON IMPACT MONITORING**

**OFFICERS PRESENTING: COLIN BRADBURY, AREA DIRECTOR – BRISTOL,  
NORTH SOMERSET & SOUTH GLOUCESTERSHIRE CLINICAL  
COMMISSIONING GROUP**

### **RECOMMENDATIONS**

That HOSP members:

- Agree the proposed approach to monitoring the impact of the changes agreed in the Healthy Weston Decision Making Business Case for the purposes of the HOSP's review, now rescheduled for 3<sup>rd</sup> June 2021

### **1. SUMMARY OF REPORT**

In October 2019 the Governing Body of the Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (CCG) agreed the Decision Making Business Case (DMBC) for the Healthy Weston Programme. The DMBC set out a series of proposals developed by senior clinicians and approved by independent experts. These proposals were designed to make the services at Weston General Hospital and the surrounding area more sustainable and better able to meet the needs of the local population. The document included indicative timelines for the delivery of the agreed changes and metrics to monitor their impact.

This paper proposes a way forward in relation to responding to the monitoring requirements set out by the HOSP, using the metrics contained within the Benefits Realisation section of the DMBC as the foundation for this work.

### **2. POLICY**

The Healthy Weston DMBC and supporting appendices are the core reference documents to support this paper. Please see hyperlinks in the "BACKGROUND PAPERS" section below.

### 3. DETAILS

Following the CCG Governing Body's decision in October 2019 to approve the proposals in the DMBC, the HOSP convened a meeting later that month to consider its response. As a result of that meeting, the HOSP requested a review of the impact of the changes one year post implementation. This was originally scheduled for April 2021, although the HOSP's revised timeline for this review is now June 2021.

The HOSP identified 4 issues that it wished to include within this review. By the same token, the Healthy Weston DMBC included a section related to the monitoring of outcomes following implementation of the proposed changes. The table below lists the HOSP's requirements and cross references them with the monitoring system that is set out in the DMBC.

HOSP review	Relevant DMBC monitoring requirements (pp68-70)
1) The staffing position for urgent and emergency care and the prospect of sustainably staffing a return to a 24/7 rota (including the impact on other specialties and services)	<ul style="list-style-type: none"> <li>• Delivery against the CQC action plan (for the Emergency Department)</li> <li>• Vacancy rates in directly impacted services</li> <li>• Total vacancy rates associated with Weston Hospital</li> <li>• % nursing shifts filled by agency staff</li> <li>• % consultant and junior doctor shifts filled by agency</li> </ul>
2) Progress in recruiting primary care staff for the new front door model for the A&E	<ul style="list-style-type: none"> <li>• Delivery against the CQC action plan (for the Emergency Department)</li> <li>• Vacancy rates in directly impacted services</li> </ul> <p><i>Note: the new Push Doctor system that is being introduced to ED has an evaluation programme built into the project</i></p>
3) Evaluation of the impact and outputs of the mental health community crisis and recovery centre following the setting up of the new service in Spring 2020	<p><i>Note: the DMBC does not include any specific monitoring requirements for this service, but the CCG has separately instigated a monitoring and evaluation programme, noting that the service model has been modified due to Covid-19 restrictions</i></p>
4) The number of people transferring to care elsewhere in the health system and their experience and outcomes	<ul style="list-style-type: none"> <li>• Number of patients transferred from Weston to other acute trusts (excluding critical care conveyances)</li> <li>• Serious incidents related to patient transfers (excluding critical care conveyances)</li> </ul>

### 4. CONSULTATION

The Healthy Weston programme included a major public consultation exercise, running over the course of the first half of 2019. A summary of the process can be found in Appendix 2 of the DMBC.

## **5. FINANCIAL IMPLICATIONS**

The financial impact of the Healthy Weston proposals are set out in Appendix 6 of the DMBC.

## **6. RISK MANAGEMENT**

The key risk that has been identified is the impact of a delay in implementing the Healthy Weston changes, leading to a loss in momentum in the drive to reform and improve key services on the hospital site. Mitigation takes the form of the monitoring and oversight arrangements agreed between the CCG and UHBW to keep pace and focus on the change agenda.

## **7. EQUALITY IMPLICATIONS**

Delays to implementation could impact on UHBW's ability to better meet national clinical standards/ guidelines for people using services on the Weston Hospital site.

## **8. OPTIONS**

The Healthy Weston DMBC and earlier Pre Consultation Business Case set out all the options that had been considered by senior local clinicians and the rationale behind the consultation proposals and final decisions.

## **AUTHOR(S)**

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## **BACKGROUND PAPERS**

The Healthy Weston DMBC can be accessed [here](#) and the appendices [here](#)