

Final Report to Governing Bodies on the Hospital Services Programme

Governing Body meeting

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5 September 2019

Author(s)	Alexandra Norrish, Programme Director, Hospital Services Programme
Sponsor Director	Lesley Smith, Accountable Officer
Purpose of Paper	
<p>Over the last two years, the South Yorkshire and Bassetlaw (SYB) health and care system has been considering how best to support the long term sustainability of acute hospital services in South Yorkshire and Bassetlaw, Mid Yorkshire and North Derbyshire (SYB(MYND)). This work has considered how far the system can address the challenges that it is facing through transfiguration, based on developing shared working between the Trusts within the current configuration of services, or whether the challenges of maintaining the current configuration of services is too great and change is needed to the configuration of services. The work has focused on five services which are amongst the most challenged in SYB.</p> <p>Analysis of the options has now been completed, and Governing Bodies of Clinical Commissioning Groups are asked to take a decision on whether they believe that the system should continue with a focus on transformation; or whether, in addition, we should invite any of the Governing Bodies to take forward public consultation on reconfiguration.</p> <p>The recommendations in the current report relate to acute providers in SYB and Chesterfield, and their commissioners, but exclude Mid Yorkshire which is part of the West Yorkshire STP. This paper is therefore for discussion by the Governing Bodies of Barnsley, Bassetlaw, Derby and Derbyshire, Doncaster, Rotherham and Sheffield CCGs.</p> <p>CCG Governing Bodies have agreed to delegate decision making on issues related to the Hospital Services Review to the Joint Committee of Clinical Commissioning Groups.</p> <p>Therefore individual Governing Bodies are asked to discuss the attached paper in public meetings and reach their own view on it. (due to the size of the report, this has been included for Governing Body members as part of the supporting information pack – item 20a).</p> <p>Following discussion at individual Governing Bodies, JCCCG will discuss the attached paper at its September meeting, agreeing whether to adopt the direction of travel laid out in the paper as the direction for the Integrated Care System.</p>	
Key Issues	
<p>Over the last two years, the South Yorkshire and Bassetlaw (SYB) health and care system has been considering how best to support the long term sustainability of acute hospital services in South Yorkshire and Bassetlaw (SYB), Mid Yorkshire and North Derbyshire (SYB(MYND)).</p>	

Analysis of the options has now been completed, and have been discussed by Accountable Officers and the CEOs and Medical Directors of the acute providers.

In summary, system leaders concluded that:

- The system was strongly supportive of the approach to **shared working** between the Trusts. Work should go forward as quickly as possible on developing the Hosted Networks, as an important vehicle for transformation going forward.
- The **transformation** agenda should continue to go forward, in particular with a focus on strong workforce planning across the system, and development of new models of care and patient pathways, through shared working. This approach of collaboration was strongly supported by public engagement. Since it cannot be guaranteed that transformation will address all of the challenges, and unplanned workforce issues may arise, a monitoring system with early warning signals should be put in place at a system level.
- **Reconfiguration** was a more complex decision, but in summary the group agreed that reconfiguration itself carried a risk of unsettling the workforce and thereby destabilising the system. The group felt that reconfiguration should only be taken forward if there was an immediate risk of safety issues or immediate sustainability issues that would justify it, as had been the case at Bassetlaw in 2016.

The group discussed paediatrics services at Bassetlaw. Clinicians consider that the Bassetlaw paediatrics service has been sustainable since the changes made in January 2017, with no detriment to clinical outcomes and no complaints related to the new model of care.

However the underlying challenges with staffing that led to the original concerns at Bassetlaw have not been resolved, as shown in the modelling around the shortfall of workforce across the system, and ongoing recruitment challenges since 2017. These are exacerbated by Bassetlaw's geographical position which makes it more difficult to rotate staff across sites or build a locally-recruited workforce. It was felt to be unlikely that transformation alone would be able to improve the sustainability of Bassetlaw enough for it to return to running an overnight inpatient unit.

The CEOs and AOs supported Bassetlaw CCG and Doncaster and Bassetlaw Teaching Hospital in continuing to test potential partnership working with Sheffield Children's Hospital as a way to strengthen services, but that it was not likely that this would be sufficient to support a reopening of overnight inpatient paediatric services.

The report also invites the Bassetlaw commissioners, working with the Trust, to consider transformation and reconfiguration options for maternity services.

- **Public engagement:** Any proposed permanent change to services will need to go through public engagement, and (following discussion with the relevant Overview and Scrutiny Committee) the CCG may consider formal consultation with patients and the public. The timing of such a consultation and other issues that may also be included in a consultation process are matters for the CCG to consider.

Is your report for Approval / Consideration / Noting

Consideration and agreement

Recommendations / Action Required by Governing Body

The Governing Body is asked to consider whether they agree with the conclusions reached by the AOs and CEOs above.

In particular, they are asked whether they agree that an approach of focusing on transformation, and considering reconfiguration only if there is an immediate risk of safety issues, is appropriate in addressing the long term sustainability of acute services in SYB. If transformation fails to address the workforce issues in the medium to long term reconfiguration may have to be reconsidered.

They are also asked to agree the approach to monitoring the progress of transformation, and any emerging risk, that is laid out in the paper.

What assurance does this report provide to the Governing Body in relation to Governing Body Assurance Framework (GBAF) objectives?

Which of the CCG’s Objectives does this paper support?
To ensure there is a sustainable, affordable healthcare system in Sheffield

Are there any Resource Implications (including Financial, Staffing etc)?

Resource implications considered as part of individual service design changes

Have you carried out an Equality Impact Assessment and is it attached?

If reconfiguration is required full equalities impact assessment (EIA) would be led by the CCG. The ICS has considered equalities issues at each stage but CCGs have a statutory responsibility to undertake a full EIA for any consultation that they will be leading

Have you involved patients, carers and the public in the preparation of the report?

Any proposed permanent change to services will need to go through public engagement, and (following discussion with the relevant Overview and Scrutiny Committee) the CCG may consider formal consultation with patients and the public. Public engagement on the direction of travel laid out in this paper will take place in parallel with Governing Body discussions.

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5th September 2019

1. Introduction

- 1.1 Over the last two years, the South Yorkshire and Bassetlaw (SYB) health and care system has been considering how best to support the long term sustainability of acute hospital services in South Yorkshire and Bassetlaw, Mid Yorkshire and North Derbyshire (SYB(MYND)). This work has considered how far the system can address the challenges that it is facing through transfiguration, based on developing shared working between the Trusts within the current configuration of services, or whether the challenges of maintaining the current configuration of services is too great and change is needed to the configuration of services. The work has focused on five services which are amongst the most challenged in SYB.
- 1.2 Analysis of the options has now been completed, and Governing Bodies of Clinical Commissioning Groups are asked to take a decision on whether they believe that the system should continue with a focus on transformation; or whether, in addition, we should invite any of the Governing Bodies to take forward public consultation on reconfiguration.
- 1.3 Under the current legal accountabilities in the system, Governing Bodies are legally responsible for considering the impact on their own CCG's population. As members of the South Yorkshire and Bassetlaw Integrated Care System, the Governing Bodies are also asked to consider the issues as they impact on the sustainability of SYB(ND) as a whole, and the JCCCG will consider this under its delegated powers to discuss the Hospital Services Programme.

2. Findings/ Conclusions

- 2.1 Analysis of the options has now been completed, and have been discussed by Accountable Officers and the CEOs and Medical Directors of the acute providers.
- 2.2 In summary, system leaders concluded that:
 - The system was strongly supportive of the approach to **shared working** between the Trusts. Work should go forward as quickly as possible on developing the Hosted Networks, as an important vehicle for transformation going forward.
 - The **transformation** agenda should continue to go forward, in particular with a focus on strong workforce planning across the system, and development of new models of care and patient pathways, through shared working. This approach of collaboration was strongly supported by public engagement. Since it cannot be guaranteed that transformation will address all of the challenges, and unplanned workforce issues may

arise, a monitoring system with early warning signals should be put in place at a system level.

- **Reconfiguration** was a more complex decision, but in summary the group agreed that reconfiguration itself carried a risk of unsettling the workforce and thereby destabilising the system. The group felt that reconfiguration should only be taken forward if there was an immediate risk of safety issues or immediate sustainability issues that would justify it, as had been the case at Bassetlaw in 2016.

The group discussed paediatrics services at Bassetlaw. Clinicians consider that the Bassetlaw paediatrics service has been sustainable since the changes made in January 2017, with no detriment to clinical outcomes and no complaints related to the new model of care.

However the underlying challenges with staffing that led to the original concerns at Bassetlaw have not been resolved, as shown in the modelling around the shortfall of workforce across the system, and ongoing recruitment challenges since 2017. These are exacerbated by Bassetlaw's geographical position which makes it more difficult to rotate staff across sites or build a locally-recruited workforce. It was felt to be unlikely that transformation alone would be able to improve the sustainability of Bassetlaw enough for it to return to running an overnight inpatient unit.

The CEOs and AOs supported Bassetlaw CCG and Doncaster and Bassetlaw Teaching Hospital in continuing to test potential partnership working with Sheffield Children's Hospital as a way to strengthen services, but that it was not likely that this would be sufficient to support a reopening of overnight inpatient paediatric services.

The report also invites the Bassetlaw commissioners, working with the Trust, to consider transformation and reconfiguration options for maternity services.

- **Public engagement:** Any proposed permanent change to services will need to go through public engagement, and (following discussion with the relevant Overview and Scrutiny Committee) the CCG may consider formal consultation with patients and the public. The timing of such a consultation and other issues that may also be included in a consultation process are matters for the CCG to consider.

3. Action / Recommendations for Governing Body

The Governing Body is asked to consider whether they agree with the conclusions reached by the AOs and CEOs above.

In particular, they are asked whether they agree that an approach of focusing on transformation, and considering reconfiguration only if there is an immediate risk of safety issues, is appropriate in addressing the long term sustainability of acute services in SYB. If transformation fails to address the workforce issues in the medium to long term reconfiguration may have to be reconsidered.

They are also asked to agree the approach to monitoring the progress of transformation, and any emerging risk, that is laid out in the paper.

Paper prepared by Alexandra Norrish, Programme Director, Hospital Services Programme

On behalf of Lesley Smith, Accountable Officer

August 2019

Final report to Governing Bodies on the Hospital Services Programme

GOVERNING BODIES OF CCGS IN SOUTH YORKSHIRE AND BASSETLAW, AND DERBY AND DERBYSHIRE CCG

BOARDS OF FOUNDATION TRUSTS IN SOUTH YORKSHIRE AND BASSETLAW, AND CHESTERFIELD

19th July 2019

Author(s)	Alexandra Norrish, Programme Director, Hospital Services Programme
Is your report for Agreement / Consideration / Noting	
Consideration and agreement by CCG Governing Bodies	
Discussion by Foundation Trust Boards	
Process of consideration by Governing Bodies	
<p>The recommendations in the current report relate to acute providers in SYB and Chesterfield, and their commissioners, but exclude Mid Yorkshire which is part of the West Yorkshire STP. This paper is therefore for discussion by the Governing Bodies of Barnsley, Bassetlaw, Derby and Derbyshire, Doncaster, Rotherham and Sheffield CCGs.</p> <p>CCG Governing Bodies have agreed to delegate decision making on issues related to the Hospital Services Review to the Joint Committee of Clinical Commissioning Groups.</p> <p>Therefore individual Governing Bodies are asked to discuss the attached paper in public meetings and reach their own view on it.</p> <p>Following discussion at individual Governing Bodies, JCCCG will discuss the attached paper at its September meeting, agreeing whether to adopt the direction of travel laid out in the paper as the direction for the Integrated Care System.</p>	
Process of discussion by Foundation Trust Boards	
<p>The paper is also being shared with the acute providers, for discussion in their private Boards during July, ahead of public discussion in Governing Bodies.</p>	
Summary of key issues	
<p>Over the last two years, the South Yorkshire and Bassetlaw (SYB) health and care system has been considering how best to support the long term sustainability of acute hospital services in South Yorkshire and Bassetlaw (SYB), Mid Yorkshire and North Derbyshire (SYB(MYND)).</p> <p>Analysis of the options has now been completed, and have been discussed by Accountable Officers and the CEOs and Medical Directors of the acute providers.</p> <p>In summary, system leaders concluded that:</p> <ul style="list-style-type: none">• The system was strongly supportive of the approach to shared working between the Trusts. Work should go forward as quickly as possible on developing the Hosted Networks, as an important vehicle for transformation going forward.• The transformation agenda should continue to go forward, in particular with a focus on strong workforce planning across the system, and development of new models of care and patient	

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Recommendations

Governing Bodies are asked to consider whether they agree with the conclusions reached by the AOs and CEOs above.

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