### Executive Summary

A Programme Board has now been established to take forward the work of the Sustainable Acute and Community Hospital Services Review. The process is commissioner led and it is proposed that the joint SRO for this work is Dr Caron Morton Accountable Officer Shropshire CCG, and Dave Evans Chief Officer Telford & Wrekin CCG. Membership will include representation from Shropshire and Telford and Wrekin CCG, SaTH, Shropshire Community Health NHS Trust and Powys LHB. There will also be a number of ex officio members from stakeholder organisations.

The core membership of the Programme Board attended a workshop and have met in shadow form over the past month to discuss the likely work plan, timescales and resources. The CCGs are in the process of establishing the support necessary to take the programme forward through discussions with NHS England and the Central Midlands Commissioning Support Unit (CSU). Stakeholder organisations have been invited by the Joint SROs to offer representatives to sit on the Programme Board. The final Terms of Reference will be approved at the first meeting of the full Programme Board in December.

This paper summarises the outcome of these discussions to date.

During October and November, the CCGs have utilised NHS Belongs to the People, and Call to Action as the framework for early engagement with communities and stakeholders to identify options and opportunities that will further inform the discussions within the Clinical Services Review (CSR). A dialogue about how services should change will therefore take place through a range of engagement activities over coming weeks. These will include a ‘Call to Action’ joint conference at Telford International Centre on 25 November 2013. From this event, the Clinical Services Review process will be formally launched.

### Strategic Priorities

- Quality and Safety
- Financial Strength
- Operational Objectives
- QS8 Develop a long-term clinical services site strategy and wider health strategy for the optimal configuration of acute, community and primary care services
- FS1 Deliver our milestones to achieve NHS Foundation Trust status
| Board Assurance Framework (BAF) Risks | □ Deliver Safe Care or patients may suffer avoidable harm and poor clinical outcomes and experience  
□ Implement our falls prevention strategy to help prevent patients suffering serious injury  
□ Achieve safe and efficient Patient Flow or we will fail the national quality and performance standards  
☒ Clear Clinical Service Vision or we may not deliver the best services to patients  
□ Good levels of Staff Engagement to get a culture of continuous improvement or staff morale and patient outcomes may not improve  
□ Appoint Board members in a timely way or may impact on the governance of the Trust  
□ Achieve a Financial Risk Rating of 3 to be authorised as an FT |

| Care Quality Commission (CQC) Domains | ☒ Safe  
□ Effective  
□ Caring  
☒ Responsive  
□ Well led |

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<th>Receive</th>
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| ☒ Receive  
□ Note  
☒ Approve | Recommendation | The Board is asked to RECEIVE and APPROVE the briefing on the Excellent and Sustainable Acute and Community Hospital Services Programme Board |
Excellent and Sustainable Acute and Community Hospital Services
Programme Briefing

1. Background to the Programme

There are significant challenges faced by the NHS both locally and nationally in planning for the future sustainability of its services, it is important therefore that there is a debate about how we shape our hospital services for the future, both the main acute hospitals and Shropshire’s four community hospitals. The two CCGs, Shrewsbury and Telford Hospital NHS Trust (SaTH), Shropshire Community Health Trust and representatives from Powys have committed to work collaboratively to undertake a Clinical Services Review (CSR), engaging fully with their patient populations, to secure long-term high quality and sustainable patient care.

There is clear evidence that if patients have quicker access to senior clinical decision makers then this is better for their outcomes and their safety. This Review aims to understand how local services measure up and what the gaps are in key areas such as:

- Providing more consultant-delivered services operating seven days a week, with less reliance on junior and middle grade doctors.
- Being able to invest in the latest technologies to ensure the best diagnosis and treatment for our patients, as duplication of services between hospitals can double the costs.
- Meeting the growing demands of an ageing society with a rise in long-term conditions, rurality and aging population
- Moving towards a more integrated model of service delivery

These are national challenges; however Shropshire, with its two CCGs, also faces unique challenges in securing sustainable hospital services. Shropshire CCG covers a large geography with issues of physical isolation and low population density and has a mixture of rural and urban aging populations. Telford & Wrekin CCG has an urban population ranked amongst the 30% of most deprived populations in England. Both are dependent on in-county acute and community care provision operating across multiple sites with the challenges that that can bring. Both commissioners are also aware of the needs of the Powys population who are dependent on utilising services from the same local hospital trusts.

2. Call to Action Process

The Clinical Services Review (CSR) will focus on acute and community hospital services in Shropshire and Telford & Wrekin. It will need to involve all communities who use those services, particularly across Shropshire, Telford & Wrekin and mid Wales. The aim will be to develop a clear vision for excellent and sustainable acute and community hospitals—safe, accessible, offering the best clinical outcomes, attracting and developing skilled and experienced staff, providing rapid access to expert clinicians, working closely with community services, focused on those specialist services that can only be provided in hospital.

Shropshire CCG and Telford & Wrekin CCG have in October jointly launched a local “Call to Action” debate that will inform the CSR. Both CCGs are committed to leading discussions with local people on
the best way of transforming what we do locally. Through the Call to Action process, there is to be an honest and realistic debate on how services are delivered - what is expected of services; where they can be improved; and what the priorities are. It is about looking at doing things differently:

- Harnessing the potential of new technology
- Preventing rather than treating illness
- Giving people more control over their own health and care
- Treating people closer to home and enabling them to live their lives well for longer
- Integrating health and social care further in a ‘patient-centred’ approach to services
- Doing more for people with mental illness.

This will identify the wider opportunities and challenges for the NHS, drawing on the experience and insight of patients and staff which will in turn inform a more detailed public and stakeholder debate about the configuration of acute and community hospital services. A dialogue about how services should change will therefore take place through a range of engagement activities over coming weeks. These will include a ‘Call to Action’ joint conference at Telford International Centre on 25 November. From this event it, the Clinical Services Review process will be formally launched.

3. Purpose of the Programme Board

To underpin this process and the commitment to working collaboratively in undertaking a CSR, a Programme Board has been established led by the CCGs. The overall purpose of the Programme Board is to agree, lead and coordinate the actions and deliverables in progressing the Excellent and Sustainable Acute and Community Hospital Services (ESACHS) Programme. Key component parts of this will be:

- to ensure the quality and safety impact of any service change is assessed and all necessary actions delivered;
- to design and agree a communications and engagement programme that ensures meaningful engagement and consultation with patients, public and other stakeholders at all stages of the programme
- to be responsible for ensuring effective and independent clinical and programme assurance processes are put in place including strong link with the Joint HOSC, Gateway Reviews, effective and timely Local Assurance Processes established (LAP) and National Clinical assurance Team reviews take place (NCAT)

4. Overall Programme Objective

The overall programme objective has been proposed:

| To agree the best model of care for excellent and sustainable acute and community hospital services that meet the needs of our urban and rural communities in Shropshire Telford & Wrekin and Mid Wales |

The process will be commissioner led and some of the key issues for consideration will be:

- How do we best meet the needs and expectations of both our urban and our rural communities?
- How do we make sure that hospital services are meeting national standards for the future?
• How do we make sure that we keep our range of services in the county, reducing the risk of losing them to specialist centres elsewhere?
• How do all parts of the health and care system work together with the patient or citizen at the centre?
• How do we design services that can recruit or develop the workforce for the future?
• How do we deliver this within the resources invested in us from the public purse?

The detailed scope of the programme and the final work plan will be defined over the coming weeks and will also be influenced by the outputs from the Call to Action engagement process.

5. Programme Resources and Governance arrangements agreed to date

The joint Senior Responsible Owners (SRO) are Dr Caron Morton, Accountable officer, Shropshire CCG and David Evans, Chief Officer Telford and Wrekin CCG.

The Programme Board is seeking financial support through NHS England. In discussions with the Central Midlands CSU, appropriate programme support and governance arrangements will be defined and put in place over the next month.

In terms of reporting arrangements, the Programme Board will make recommendations and report into the individual Boards. There will be a monthly report from the Programme Board to all Boards once the programme has been formally launched post November.

From November 2013, the Programme Board will meet with full membership at least every two months with the first meeting on December 2nd 2013. Additional meetings to be agreed depending on the work plan.

6. Proposed Membership of the Programme Board

It has been proposed that there will be a core membership of the Programme Board which will include the 2 CCGs, Powys LHB, Shrewsbury and Telford Hospital NHS Trust and Shropshire Community Health NHS Trust. In addition it is proposed there will be a number of ex officio stakeholder members who will be invited to nominate representatives to be in attendance. Core membership and job titles are highlighted in the shaded part of Table 1 overleaf.
Table 1:

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<thead>
<tr>
<th>Sector</th>
<th>Organisation</th>
<th>Named and Title of representatives</th>
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<tr>
<td>CCG</td>
<td>Shropshire CCG</td>
<td>Dr Caron Morton, Accountable Officer</td>
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<td>Paul Tulley, Chief Operating Officer</td>
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<td>Dr Bill Gowans, Chief Officer Shropshire</td>
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<td>Telford &amp; Wrekin CCG</td>
<td>David Evans, Chief Officer</td>
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<td>Dr Mike Innes, Chair GP Board</td>
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<td>LHB</td>
<td>Powys LHB</td>
<td>Peter Skitt, Locality General Manager</td>
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<td>Dr Andy Raynsford, Chair North Locality GP Cluster</td>
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<td>Providers within the direct scope of the review</td>
<td>The Shrewsbury and Telford Hospital NHS Trust</td>
<td>Peter Herring, Chief Executive</td>
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<td></td>
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<td>Dr Edwin Borman, Medical Director</td>
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<td>Debbie Vogler, Director of Business &amp; Enterprise</td>
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<td>Adrian Osborne, Communications Director</td>
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<td>Shropshire Community Health NHS Trust</td>
<td>Jan Ditheridge, CEO</td>
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<td>Tessa Norris, Director of Operations</td>
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<td>Julie Thornby, Director of Governance</td>
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<td>Alastair Neale, Medical Director</td>
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<td>Programme Team CSU</td>
<td>Programme Team CSU</td>
<td>Programme Director</td>
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<td>Patient Voice</td>
<td>Shropshire Healthwatch</td>
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<td>Telford &amp; Wrekin Healthwatch</td>
<td>Nominated representative</td>
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<td>Telford &amp; Wrekin</td>
<td>Director of Adult Services</td>
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<td>Other Providers</td>
<td>West Midlands Ambulance Service</td>
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<td></td>
<td>Welsh Ambulance Service</td>
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<td>Robert Jones and Agnes Hunt Orthopaedic</td>
<td>Nominated representative</td>
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<td>Hospital NHS Foundation Trust</td>
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<td>Shropshire and South Staffordshire Healthcare NHS Foundation Trust</td>
<td>Nominated representative</td>
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<td>NHS England</td>
<td>Shropshire and Staffordshire Area Team</td>
<td>Dawn Wickham, Director of Operations and Delivery</td>
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The core membership of the Programme Board has met in shadow form over the past month to discuss the likely work plan, timescales and resources. The CCGs are in the process of establishing the support necessary to take the programme forward through discussions with NHS England and the Central Midlands Commissioning Support Unit (CSU). Stakeholder organisations have been invited by the Joint SROs to offer representatives to sit on the programme Board. The Final Terms of Reference will be approved at the December meeting of the full Programme Board.

7. Recommendation

The Board is asked to note the progress towards establishing formal Programme Board arrangements for the Excellent and Sustainable Acute and Community Hospital Services Programme.