

The Shrewsbury and Telford Hospital NHS Trust

Trust Board – 26 May 2011

The Future Configuration of Hospital Services Programme

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Strategic Domain	C. Quality and Safety A. Financial Strength
Organisational Objective	C3. Provide the right care, right place, right professional C4. Deliver services that offer safe, evidence, based practice A1. Development and implement sustainable clinical strategies
Executive Summary	<p>This paper provides an update on the Future Configuration of Hospital Services Programme, including progress on:</p> <ul style="list-style-type: none"> • the development of clinical service models, including workforce requirements to inform the Outline Business Case • the development of the physical options and non financial appraisal • the next steps for public and stakeholder engagement • planning for the ongoing assurance of the programme including the assessment by the Office for Government Commerce, working with the Strategic Health Authority and agreeing the plans for the ongoing involvement and engagement of the Joint Health Overview and Scrutiny Committee <p>Despite a challenging timeline for the delivery of the Outline Business Case for the Trust Board in June 2011, the programme remains on track against key milestones.</p>
Recommendations	The Board is asked NOTE the progress on the Future Configuration of Hospital Services Programme

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Contribution to Inspection, Registration, Assurance, Performance and Delivery

Risks and Assurance	The Future Configuration of Hospital Services Programme will support the local NHS to address risks to the clinical quality of services.
Contribution to Key Performance Indicators	Not applicable
Compliance with Clinical and other Governance Requirements	The Future Configuration of Hospital Services Programme will support the local NHS to address risks to compliance with a range of clinical safety standards.
Engagement and Decision-Making Process	<p>The Boards of the Trust and the PCTs met on 24 March 2011 and approved the proposals as the basis for a more detailed implementation plan and Outline Business Case. Their decisions were endorsed by the Joint Health Overview and Scrutiny Committee for Shropshire and Telford & Wrekin, which also met on 24 March 2011.</p> <p>Ongoing public and stakeholder engagement will be integral to Phase 2 of the Future Configuration of Hospital Programme, and will continue to support the NHS to addresses legislative requirements on engagement and consultation set out in Section 242 and Section 244 of the NHS Act 2006 and related policy and guidance.</p>

Strategic Impact Assessment

Quality and Safety	The Future Configuration of Hospital Services Programme will support the local NHS to address risks to the clinical quality of services.
Financial Strength	The proposals are not driven by financial considerations and will not lead to financial savings. Instead they aim to deliver safe, sustainable services within available resources. The financial implications of the option for reconfiguration in terms of capital and revenue are being further developed within the Outline Business Case.
Learning and Growth	There are no immediate workforce implications from this paper. The workforce implications of the option for reconfiguration are being developed within the Outline Business Case.
Patients, GPs and Commissioners	The proposals that will be developed further during Phase 2 of the Future Configuration of Hospital Services Programme will change the way that some patients access local hospital services, and the way in which GPs refer some patients to our services. A comprehensive programme to communicate changes with patients and GPs will be needed.
Equality and Diversity	There are no immediate equality and diversity implications from this paper. The potential equality and diversity implications, including issues raised within the PCTs' Equality Impact Assessment during the consultation and assurance phase of the programme, are being considered as part of the Phase Two delivery programme.
Legislation and Policy	The Future Configuration of Hospital Services Programme will support the local NHS to fulfil legislative requirements for patient and public engagement and policy requirements as set out in government guidance on service configuration.
Communication and Marketing	A stakeholder engagement plan for Phase Two of the Future Configuration of Hospital Services Programme has been developed.

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Board Update

This paper updates the Trust Board on the progress of the Future Configuration of Hospital Services (FCHS) Programme since the update on 28 April 2011.

The Trust's Future Configuration of Hospital Services Steering Group is meeting every two weeks during the development of the draft Outline Business Case to ensure appropriate decision making and performance monitoring of the programmes deliverables. The Finance and Estates Group is meeting weekly to deliver the draft Outline Business Case by the end of May 2011, in preparation for external assessment by the Office of Government Commerce and the Joint Health Overview and Scrutiny Committee prior to submission to the Board on 30 June 2011.

Key activities this month have included:

- Continued development of clinical service models, including workforce requirements to inform the Outline Business Case and the options appraisals process (see Section 1).
- Agreeing the next steps for public and stakeholder engagement (see Section 2).
- Planning for the ongoing assurance of the programme through assessment by the Office for Government Commerce, submitting our monitoring returns as part of our accountability for service reconfiguration proposals through the regional Strategic Health Authority to the Department of Health and agreeing the plans for the ongoing involvement and engagement of the Joint Health Overview and Scrutiny Committee (see Section 3).

Despite a challenging timeline for the delivery of the Outline Business Case for the Trust Board in June 2011, the programme remains on track against key milestones.

1. Outline Business Case

- 1.1 The clinical service models and briefs have now been developed for all four areas (maternity, gynaecology and neonatology; paediatrics; head and neck; and surgery and urology). Clinical and managerial engagement in the process has been robust with a combination of smaller working groups and wider clinical meetings. The service briefs include the service assumptions and capacity requirements for both the Princess Royal Hospital (PRH) and the Royal Shrewsbury Hospital (RSH) sites.
- 1.2 The detailed workforce plans for the delivery of the reconfigured services are near completion, comparing the current establishment with future staffing needs. These plans will include details on numbers of professional group, training needs and change management issues for each area. The plans will be costed and reviewed by the FCHS Steering Group on 26 May 2011.
- 1.3 The meeting with all paediatricians, lead nurses, Strategic Healthcare Planning (the external consultancy working with the Trust on the development of the Outline Business Case) and the Royal College of Paediatrics and Child Health was held as planned on 5 May 2011. The future service model, activity assumptions and workforce requirements were all discussed. A meeting with all paediatricians, neonatologists and lead nurses to agree the paediatric workforce model is planned for 20 May 2011

- 1.4 The physical options for the services at PRH have been developed and shortlisted by the FCHS Steering on 12 May 2011. Benefits criteria have been developed and will form the basis of an Options Appraisal workshop on 20 May 2011. Executive Directors, Centre Chiefs, Clinical Leads (both nursing and medical) have been invited to the workshop.
- 1.5 A Benefits Management Strategy was submitted to the FCHS Steering Group on 12 May 2011. This document outlines the ongoing process for the identification and delivery of interim and end benefits of the reconfiguration by each clinical working group. Benefits Realisation Plans will be developed for each service area by the end of June 2011.

2. Public and Stakeholder Engagement

- 2.1 A workshop was held on 4 May 2011, with invitations sent to the Local Involvement Networks/Community Health Council and representatives from the Health Overview and Scrutiny Committee to review the consultation phase of the programme and advise on the communication and engagement during Phase Two.
- 2.2 The feedback and outcomes of that workshop have been incorporated into the communications and engagement plan which describes the ongoing involvement of individuals, groups, communities and staff in the reconfiguration programme. The specific objectives for Phase Two are:
 - To raise awareness of the outcome of the consultation and what it will mean for patients
 - To encourage and provide opportunities for people to get involved in planning the detail of hospital services
 - To provide regular communication to all patients, public, staff and other stakeholders regarding the ongoing plans for the future configuration of local hospital services
- 2.3 Dr Andrew Cowley (Consultant Paediatrician/Oncology Lead) and Jackie Hyne (Nurse Specialist) organised and led the first meeting of the Paediatric Oncology and Haematology Parents Group on 12 May 2011 to which the Chief Executive, Head of Communications and Programme Manager were invited. This interactive session involved parents working in groups to identify the issues and opportunities of moving the Rainbow Unit to Telford followed by questions and answers during the feedback session. Parents signed up for ongoing involvement in their particular area of interest and another full meeting will be organised for September 2011.

3. Ongoing Assurance

- 3.1 The next meeting of the Clinical Assurance Group will be 7 June 2011. The group will receive and review the progress made by the Clinical Working Groups in the development of the Outline Business Case including their models of care, service assumptions and workforce models.
- 3.2 The OGC Gateway Review Level 1 will take place 8 to 10 June 2011. This formal review will involve reviewing the Outline Business Case, all programme documentation and controls and the interviewing of key Trust clinicians and staff, partner organisations and representatives from the public and the Health Overview and Scrutiny Committees.

3.3 The Joint Health Overview and Scrutiny Committee have submitted a work plan to the Trust detailing areas in which they require further information or an update on progress. The Trust's response will be in a similar format to the Trust's submission to the Joint Health Overview and Scrutiny Committee as part of the Assurance and Consultation Phase in March 2011 and will be discussed together with the draft Outline Business Case on 16 June 2011.

4. Recommendations

4.1 The Board is asked to:

- **NOTE** the progress on the Future Configuration of Hospital Services Programme