

Title of paper:	Better Service Better Value (BSBV)
Meeting:	Governing Body, 29 th November 2013
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Purpose	To Agree	
	To Advise	
	To Note	

Development

This paper and the decision arising from it have been developed from an agreed decision making framework in the Governing Body on 27th September 2013 (part 2). An appraisal of the future scenarios open to us for driving improvement in acute commissioning has been undertaken, the inputs externally validated and a Governing Body seminar on 22nd October agreed a recommendation to send this information to GPs preparatory to a vote. To allow further debate and full information flow from all parties there was a meeting for all Surrey Downs GPs on the 5th November including representation of the BSBV team and Epsom St Helier NHS Trust. A vote, offered to all GPs working in Surrey Downs CCG, followed and the decision in this paper is driven by the outcome of this vote as administered by the Electoral reform services.

Executive Summary and Key Issues

The Governing Body on 17th May 2013 agreed to nominate three members of the Governing Body to represent the CCG in the joint meeting with other CCGs to determine whether or not to go to consultation on the proposals emerging from the Better Service Better Value (BSBV) programme. The NHS England Assurance process on BSBV was still underway at this point but has now concluded all areas with the exception of requiring assurance of the support of GPs in Surrey Downs.

Given the major changes proposed by BSBV, Surrey Downs CCG offered every GP the opportunity to vote to find out if GPs agreed with the proposals as part of the four tests required to be satisfied before public consultation can begin. All GPs working in the Surrey Downs CCG area were asked to vote on the question

“Do you agree with the BSBV proposals?”

The results of the ballot were as follows;

Number of yes votes – 37 (25%)
Number of no votes – 110 (74.3%)
Number who abstained – 1 (0.7%)
Total votes – 148 (66.7% of eligible voters)

The ballot results demonstrate that Surrey Downs GPs do not agree the BSBV proposals are right for our Surrey population. The Governing Body expected to act in line with the results of the GP vote when making a formal decision at this meeting and so has already announced an intention to withdraw.

What happens now and when?

Our next steps are to make our vision for out of hospital care a reality so patients benefit from having integrated care delivered more effectively and efficiently. We are not ruling out service changes in the future but the implication is the Governing Body would now, together with our partners, focus our work on achieving the improvements we want to see locally. We will continue to work with Epsom and St Helier University Hospitals NHS Trust to ensure local people continue to have access to safe and sustainable services. Part of our out of hospital strategy also looks to increase community capacity and improve the hospital discharge process, which will help ensure local patients get the best possible care. Given our patient flows into South West London we will continue to work closely with our colleagues in London and ensure we understand and respond appropriately to any emerging proposals.

Recommendation(s):

The Governing Body is asked to **AGREE** to withdraw from the BSBV programme as a vote of the GPs working in Surrey Downs CCG does not evidence support for the proposals.

Attachments: NONE

Implications for wider governance

Quality and patient safety: Quality and safety was addressed in the preparatory work for the GP vote.

Patient and Public Engagement: There was an engagement process around BSBV in Surrey Downs leading up to the proposal to move to public consultation. Engagement will now be around developing Surrey Downs future plans as part of our commitment to improve healthcare for local people, working in partnership with clinicians, our partners, local people and patients.

Equality Duty: There is no significant service change arising from this paper.

Finance and resource: Financial assessment was addressed in the preparatory information for the GP vote.

Conflicts of interest: Dr. Mark Hamilton is a secondary care clinician working at St George's Hospital. This interest is therefore specifically relevant to the discussion and we confirm Mark has not participated in any vote related to BSBV.

Communications Plan: Stakeholders have been kept informed of the vote and its outcome. This paper is available on the CCG web site.

Legal or compliance issues: Legal advice has previously been sought. If the BSBV programme continues and recommends changes which impact on services in the Surrey Downs area then further legal advice is likely to be sought to assure appropriate action and response.

Risk and Assurance: Risk SD0003 applies (this is now on the assurance framework) and is significantly managed by this recommended decision. If SDCCG exit the BSBV process BSBV may continue but not including Epsom Hospital. There will continue to be some risk emerging until the future direction of services is settled.

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