

Title of paper:	Community Hospital Services Review		
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Date:	23 rd February 2015		
Meeting:	Executive Committee		
Agenda item:	09	Attachment:	04
For:	Decision		
<p>Executive Summary:</p> <p>NHS Surrey Downs CCG has decided to undertake a comprehensive review of our community hospitals services. This review will involve extensive engagement with the public, CSH Surrey and all organisations for whom the Community Hospitals play a part of their care or service model. The review will also examine the Acute Hospitals bed requirements as well as taking into account the ongoing estates review.</p> <p>The review will be both clinically focused and clinically led, putting patients and their needs at the centre of the process.</p> <p>There are a number of distinct steps or stages to the review process to ensure NHS Surrey Downs CCG can base any decisions what is best for the patients we serve in terms of health outcomes. The Terms of Reference outlines the review process including accountabilities.</p>			
<p>Compliance section</p> <p>Please identify any significant issues relating to the following</p>			
Risk Register and Assurance Framework	This forms part of the risk on local service transformation and similar risks on the assurance framework		
Patient and Public Engagement	Public (and political) interest in the review is extremely high. A comprehensive plan is under development (as per terms of reference).		
Patient Safety & Quality	Patient safety and quality will be parameters of the review process.		

Financial implications	Value for money in both service provision and estates costs will be considered as part of the review
Conflicts of interest	No issues identified as yet
Information Governance	No issues identified as yet
Equality and Diversity	Equality impact assessment requirement highlighted in review terms of reference
Any other legal or compliance issues	The CCG is under a legal duty to undertake patient engagement in the design of services and the work may identify legal duties to consult.
Accompanying papers (please list): Community Hospitals Services review terms of reference	
Summary: What is the Executive Committee being asked to do and why? To agree the terms of reference of the review	

Community Hospital Services Review

Terms of Reference

Introduction

NHS Surrey Downs Clinical Commissioning Group (CCG) is focused on making sure our patients receive the highest standard of care in a consistent and efficient manner. Our primary goal is improving the long term health of our population, providing timely health and social care interventions when needed, and ensuring such interventions give the best outcomes for our patients and their carers.

Patients within Surrey have access to a wide range of community-based services including four community hospitals with inpatient beds. These four sites provide a wide range of inpatient and outpatient services to their local communities. There are a range of challenges in providing these services under the current operating model. Each operates a relatively small bed base of 12 – 15 beds which impacts on efficiency and is vulnerable to short-term staffing challenges (such as those which led to the temporary transfer of beds from Leatherhead Hospital in November 2014). A number of CCG commissioning intentions call for more services to be provided in community settings, but some of these services face structural challenges in terms of recruiting and retaining an appropriate workforce.

NHS Surrey Downs CCG has decided the time is right to undertake a comprehensive review of the services in these community hospitals. This review will involve extensive engagement with the public, CSH Surrey and all organisations for whom the Community Hospitals play a part of their care or service model. The review will also examine the Acute Hospitals bed requirements as well as taking into account the ongoing estates review. The review will need to take account of other available estate which can accommodate, but which do not currently host, bedded community services.

The review will be both clinically focused and clinically led, putting patients and their needs at the centre of the process.

There are a number of distinct steps or stages to the review process. The Terms of Reference outline these.

Purpose

- Undertake a comprehensive **review of current inpatient and outpatient services** undertaken at the four community hospital sites with bedded care within NHS Surrey Downs CCG's catchment (Molesey, New Epsom and Ewell Community Hospital, Dorking and Leatherhead).
- Determine the **long term inpatient and outpatient care requirements of the patient population** from community hospitals including the number of beds required across both acute and community sectors combined
- Propose **what** services should be provided in the future drawing on the CCG's commissioning strategy and established best practice
- Link with a review of the community healthcare estate to determine the best fit of the future service model with the available estate and its suitability to meet future needs. This will inform options as to **where services are provided**

Review approach

1. Activity Review

The first step in the review process is to understand how the Community Hospitals Estates are being utilised. The Activity review will focus on a detailed examination of each individual, commissioned care service, looking at:

- Why the service was commissioned and/or how the service has developed over time
- How the service is delivered
- Who the service users are
- What the referral pathways are
- What the capacity / utilisation is for each service
- What the cost per episode / patient is for the service
- For inpatient services, how length of stay compares to comparable services elsewhere

The activity data will then be benchmarked against similar services provided locally and nationally.

2. Outcome Review

Once the Activity Review is complete the focus of the review will shift to assessing the Outcome for each service. The key questions to be answered in this element will be:

- What patient experience / satisfaction audits are telling us about the service
- What referring clinicians perceive of the service provided
- What Health & Wellbeing outcomes are being measured for patients using the service
- Whether the service offers value for money

The Outcome Review will give a clear picture of the effectiveness of the current community hospital services.

Both activity and outcome reviews will link with other CCG commissioning strategies and service re-design work e.g. around elective care pathways for outpatient and diagnostic care and integration for ambulatory and inpatient bedded care.

3. Options and Impact Review

Once the initial two review stages are complete the process moves into the Recommendations Phase. This phase will use the information developed at previous stages along with best practice and learning from others to co-develop a number of potential options that can then be fully evaluated. Alongside the Options will be an Impact Analysis of proposed changes that will assess the impact of recommendations on patients, the wider public, staff and service providers. Such Impacts must be fully explored and explained if commissioners and patients are to make the most informed decisions. The Options and Impact Review will take approximately six weeks to complete.

Patient & Public Engagement

This is a critical part of the review process. There is a huge amount of public and political interest in the Community Hospital review process and all communications must be handled in a robust but sensitive manner. The review process is clearly being undertaken during the run up to the General Election and pre-election (commonly known as 'purdah') are effective from March 31st.

The structure of communications and engagement activity will also be agreed with representatives from Surrey County Council health scrutiny committee prior to finalization.

The key elements of the Communications and Engagement Plan are to:

- Ensure consistency of message across the locality
- Accurately inform patient / public expectations during the review
- Engage with the public in each locality and gather service user feedback
- Ensure stakeholder concerns are understood and fully considered as part of the review
- Inform and involve provider services co-owners/staff

A detailed Communications and Engagement Plan is being produced by the CCG Communications Team working with colleagues at Central Surrey Health. The plan will include meetings with a range of stakeholders, including but not limited to:

- Residents Associations
- Hospital League of Friends
- Staff Representative Groups

Programme Governance

A number of working groups will be established to assist in each phase of the overall review.

Programme Group

This will be the group which looks at the progress of the Community Hospitals Review against the key milestones identified in the Project Plan. The group will provide guidance and insight into how the services are currently operated and ensure that all relevant considerations are being made in the conduct of the review.

The Programme Group will have as its members:

- NHS SDCCG Director of Commissioning and Strategy (SRO)
- NHS SDCCG Governing Body GP clinical lead (Chair)
- CSH Surrey Director Lead
- NHS Property Services senior representative

- Other relevant provider representatives by invitation (to consider the implications of the review on other provision e.g. Epsom & St Helier NHS Trust at Leatherhead; Kingston Hospital NHS FT at Molesey; Dorking Healthcare and Surrey and Sussex Healthcare NHS Trust at Dorking)
- SDCCG Governing Body lay member
- Surrey County Council Adult Social Services senior representative

Service Design Group

This group will examine specific services in detail, working on pathway design and operational models. The purpose of this group will be to give guidance on how the future service models may look, incorporating best practice and patient expectation.

The Service Design group will have as its members:

- NHS SDCCG Urgent Care Lead
- NHS SDCCG Communications & Engagement Lead
- NHS SDCCG Integration and Partnerships Lead
- CSH Surrey representatives
- Patient Representatives
- GP provider network representatives
- Acute NHS Trust representatives (Epsom, Kingston and SaSH)
- Other relevant provider(s) operations leads for site specific discussions
- Surrey County Council Adult Social Services operational leads

Accountability

The Programme Group will create a monthly report on progress for the CCG's executive committee with detail on progress for each section of the review. The recommendations of the review will be considered by Surrey Downs CCG's Governing Body.

Summary

The Community Hospital Service Review is a collaborative process which will include regular communication and engagement with the public. Providing the highest quality patient care remains the guiding principle of the review.

Although the focus of the process is the Community Hospitals service NHS Surrey Downs CCG cannot and will not lose sight of the impact any changes may have on the wider health economy, both in the short and long term.

The review will be completed by 31st July 2015.

APPENDIX

Review of services delivered out of community hospital sites -

Communications and Engagement Plan

Introduction

NHS Surrey Downs CCG is conducting a full review of all community hospital service provision. To include:

- Bedded care
- Diagnostics
- Ambulatory care
- Outpatient services
- Estates

Other options to be considered within the review:

- Site access, including, but not limited to patient transport
- Current nurse/staff provision
- Clinical quality and patient safety
- Use of buildings and fit for purpose

The aim of the review will be to consider community hospital service provision as a holistic system for the Surrey Downs CCG area, whilst also being mindful of individual health economies and variances within our local population. The review will remain mindful of related pathways of care and will aim to achieve:

- The best outcomes for all patients, with patient experience as a priority
- Equal access for all
- The ability to live within our means as a commissioner of service
- The ability to provide a secure future model for services

The purpose of the review will be to establish one or more options with which to move forward for the future commissioning of community hospital services. These options should encompass all of the above and align against the priorities outlined within the NHS Five Year Forward View. At the end of the review process any consideration of major service change will also include a 12 week consultation period. For minor service changes, this period may still be introduced, but reduced in length of time.

Good communication and stakeholder engagement are key to this review. The challenge of the review process is to ensure that all key individuals and groups are included in this process. Also that we not only ensure that each voice is heard, but that it is listened to and the appropriate feedback is given. Within this review we are likely to receive a number of diverse opinions, it is also possible that, due to certain limitations, everyone cannot be pleased from this process. However, where this occurs, it is our duty to be open, honest and transparent about the process, and where possible to build consensus by encouraging and responding to open criticism and debate. Our aim is that the stakeholders involved in this process can own the outcomes, having been part of each stage of the review.

This document will be used to support the review process and ensure that we communicate and engage with all key stakeholders throughout the process. This is a **working document**, therefore it will be updated as part of the process.

Stakeholder groups and key actions have been highlighted below.

Engagement

The review will offer the following levels of engagement:

Participate – the opportunity to participate in the review’s stakeholder groups or targeted engagement activities in addition to the opportunity to receive and comment on detailed information about the process and the progress of the review; its findings and recommendations

Engage – the opportunity to receive and comment on detailed information about the process and progress of the review; its findings and recommendations

Inform – the opportunity to receive summary information about the process and progress of the review; its findings and recommendations

We will work with all stakeholders in a way that is appropriate to them.

Population monitoring:

A process by which we will gather information on the population(s) most affected by this review and map engagement accordingly. This process will look at where targeted engagement can be most efficient. As well as including hard to reach groups and protected characteristic groups within the engagement process, population monitoring ensures that specific groups can be targeted, where relevant throughout the review process. It will include, but not be limited to:

- Up to date demographic information/Surrey-i
- Current service access monitoring – what services does the review encompass and what are the current patient demographics for each service
- Age trends – working with performance to map the increase in these populations over the next 5-10 years
- How these populations currently receive information
- Which groups are currently active in each area, for example: league of friends, specific condition-related groups, local community groups, local residents associations.

Stakeholders:

Key stakeholders include (please note this list is not exhaustive and will be developed during the activity stage of the review):

- Patients, carers and the public (Inc. all those affected by services and wider engagement with all demographics). This includes local representative organisations and Practice Participation Groups (PPGs).
- Clinical/professional bodies
 - GPs – both as commissioners and service providers via GP networks
 - NHS Property Services
 - Service providers - including social care, community, acute, patient transport and the voluntary sector. This will include (but not be limited to):
 - Epsom and St Helier University Hospitals NHS Trust
 - Surrey and Sussex Healthcare NHS Trust
 - Kingston Hospital NHS Foundation Trust
 - CSH Surrey
 - Virgin Healthcare
 - Dorking Healthcare
 - Surrey County Council (social care)
 - SECAMB – emergency use and patient transport services
 - Voluntary sector organisations
- National and local government/health authorities, for example:
 - NHS England Area Team
 - MPs
 - County and Borough Councillors
- Staff – internally (CCG) and within provider organisations/LA (as above)
- Commissioning partners, such as other CCGs
- Scrutiny agencies, such as Healthwatch and our local Health and Scrutiny Committee

Communication and Engagement Channels:

Below are some of the key channels that will be used throughout this review. Each review stage will be mapped separately and developed as part of this working document.

- Public meetings
- Educational events/updates – to monitor what information is needed for the review
- Programme group – to be the overseeing and recommending group
- Working groups (workshops and focus groups) – to be aligned with key project milestones/areas. To look at individual health economies and come together holistically to focus on:
 - Disease/condition/service specific area
 - Targeted demographics, e.g. carers, disability coalition
 - Patient pathways
 - Staff/co-owner opinions
- Invitations via:
 - Posters and leaflets circulated via local groups and GP practices
 - Local magazines/Borough council publications/Surrey matters
 - Information via health professional – GP surgery, district nurse
 - Email and to online subscription group
- Internet:
 - SDCCG website - dedicated project area
 - Shared web presence through other authorities
 - Advertisements via social media, including Twitter, Facebook and Streetlife
 - Online surveys
 - Virtual groups - both existing and purpose specific (created)
- Promotion/discussion targeted as one-offs
- Local media:
 - Press releases
 - Promotion
 - Targeted campaigns
- Existing communications channels
 - Health and wellbeing groups
 - Stakeholder newsletter
 - Start the week

- Existing forums, such as PAG
- Invitations to already existing groups
- Situation/example planning sessions (for outcomes development)

As part of the review process the communications and engagement team will also actively work with members of the community to look at where gaps may be filled.

Potential barriers to engagement:

- Hard to reach groups
- Gaps in information
- Divided communities/contested ideas
- Need for independent facilitation
- Support for representatives/individuals to attend events.

Openness and transparency:

The CCG wishes to remain open and transparent throughout this process. We also need to ensure that we are visible to our stakeholders and that they have the necessary means of contacting us during this process with any questions or queries. As well as the communications channels listed above we will have the following information points available to the public and regularly updated:

- A dedicated project section on the CCG website, to include:
 - Engagement group minutes
 - Timeline/project updates
 - Areas for involvement
 - Links to relevant work streams, smaller projects
 - Regular updates
 - Feed in from the Director and project leads
- Contact details for the communications and engagement team, available on the website and circulated through all other correspondence
- Liaison with local groups and magazines to advertise ways in which the public can be involved and get in touch
- Promotion and links via social media, including Facebook, Twitter and Streetlife
- Where necessary, links available through other stakeholder websites.

Resources:

The Communications & Engagement Team will support this review, to ensure that it is appropriately resourced. This is required in order to ensure that the public and key stakeholders are able to be thoroughly involved from start to finish, and that updated information can be made available to wider groups.

Timeline:

A finalised timeline will be provided as part of the final project scope document. Breakdowns of each review stage and estimated timings are provided below. As a working document, key event calendars will be made available throughout the review, aligned to each communication and engagement mechanism. Patient representatives and other bodies (such as the Health and scrutiny committee) will be asked to critique engagement plans as part of the process, to ensure that key stakeholders and communications channels are not missed.

Stages of the Review

1. Preparation:

For the CCG to work with and inform all key staff groups about the review.

Community hospital site visits:

4 x site visits, to take place week commencing 23 March 2015, to take place at:

- Leatherhead Community Hospital
- Molesey Community Hospital
- NEECH (New Epsom and Ewell Community Hospital)
- Dorking Community Hospital

In attendance – Key CCG personal, CSH Surrey representatives and other interested parties, including CSH Surrey co-owners and other relevant provider staff

Attendees – Invitations to all CSH Surrey co-owners and provider staff, who work on or out of community hospital sites. To include non-clinical and support staff.

Format –

- Introductions to key members of the CCG undertaking the review

- Update into the process and how to contact us and be involved with the review
- Information from CSH Surrey on staff support during this process
- Q&A session
- Next steps

Key messages:

- To give some background about the CCG, and why the review is needed
- Scope of the review
- Timeline for review process and key stages
- Opportunities to be involved
- Staff messages from CSH Surrey, supported by:
 - The review will focus on services required
 - We want CSH Surrey staff to be fully involved and require their opinions in order for this review to be successful
 - We want to work closely with CSH Surrey to support staff during this time and provide assurance about the review
- Review will culminate in options being considered and stakeholders will be regularly updated on review progress and outcomes
- This is a clinically-led review, making considerations based on patient/population need and what services are currently available and need to be available
- To future proof services – for future population growth
- Information previously collected for review purposes will be included in this review.

Outcomes required:

- For CSH Surrey staff to:
 - have the opportunity to meet CCG staff involved in the review face-to-face
 - understand why the review is happening
 - be given an opportunity to be involved and make the CCG aware of any worries and concerns
 - know who to contact within CSH Surrey and the CCG to raise and questions or concerns about the process
 - know where to find information about the review and engagement opportunities
 - be informed on key messages
- The CCG is aware of the key concerns of stakeholders
- The CCG has a comprehensive list of who to engage with and contact details, where appropriate

CCG Staff engagement –

To share the key messages raised externally and with CSH Surrey staff internally.

Channels:

- Through individual Heads of Service team meetings
- CCG bi-weekly Team brief
- Email to all staff providing key messages and links to information

Outcomes:

For CCG staff to:

- Understand the key messages
- Know how this will affect their individual areas of work
- Have the tools available to answer any queries
- Know how to signpost individuals to key contacts and further information

Programme Group –

This group will commence in this stage of the review and continue to meet throughout the process

Format –

This will be in the form of bi-weekly meetings, where key programme individuals will meet to monitor the review process. This will include the following areas:

- Communications & Engagement
- Project scope
- Quality and assurance processes
- Outcomes to be achieved before the next meeting

Membership:

- Director of Commissioning & Strategy, CCG
- Governing Body Clinical Lead, CCG
- Director Lead, CSH Surrey
- Urgent Care Lead, CCG
- Communications and Engagement Lead, CCG
- NHS Property Services representative
- Governing Body Lay Representative, CCG
- Other relevant provider and commissioning representatives, by invitation

2. Launch:

The purpose of the launch phase is to **inform** and **engage** with all key stakeholders about the review. It is all to ensure that all stakeholders have the mechanisms in place with which to take part and have clear communication channels given to them to ask questions about the review.

Key messages:

- To give some background about the CCG, our role and the population/area we serve
- Scope of the review
- Timeline for review process and key stages
- Opportunities to be involved
- Review will culminate in options being considered.
- This is a clinically-led review, making considerations based on patient/population need and what services are currently available and need to be available
- To future proof services – for future population growth
- Information previously collected for review purposes will be included in this review.

Outcomes required:

- The appropriate stakeholders have been given the opportunity to discuss and add to the engagement strategy
- Stakeholders have been informed on key messages
- Stakeholders are aware of how to be part of the review
- The CCG is aware of the key concerns of stakeholders
- The CCG has a comprehensive list of who to engage with and contact details, where appropriate

Channels:

Specific channels (other than those generally listed) are as follows:

Launch events –

- Monday 2 March, 2-4pm, Bourne Hall, Ewell
- Wednesday 4 March, 7-9pm, Elmbridge Civic Hall, Esher
- Thursday 5 March, 7-9pm, Burford Bridge Hotel, Dorking

Attendees – CCG and provider representatives. Open to all members of the public, with invites sent to targeted groups and local organisations.

Format –

- Presentation from CCG and CSH Surrey re key messages
- Public Q&A session
- Next steps

Patient representatives meeting –

Format -

These will take the form of monthly meetings to discuss the ongoing involvement of the three Surrey Downs CCG patient representatives and to ensure that updates are fed through existing channels.

3. Activity Review

The first step in the review process is to understand how the Community Hospitals Estates are being utilised. The Activity review will focus on a detailed examination of each individual, commissioned care service, looking at:

- Why the service was commissioned and/or how the service has developed over time
- How the service is delivered
- Who the service users are
- What the referral pathways are
- What the capacity / utilisation is for each service
- What the cost per episode / patient is for the service
- For inpatient services, how length of stay compares to comparable services elsewhere

The activity data will then be benchmarked against similar services provided locally and nationally.

Outcomes:

- To provide a basis on which the overall review can be built
- To answer the questions:
 - Why the service was commissioned?
 - How is the service delivered?
 - Who are the service users?

- What are the referral pathways?
- What is the capacity / utilisation for each service?
- What is the cost per episode / patient for the service?
- How does the inpatient length of stay compare to similar local / national services?

The Activity Review will take approximately eight weeks to complete.

4. Outcome Review

Once the Activity Review is complete the focus of the review will shift to assessing the Outcome for each service. The key questions to be answered in this element will be:

- What patient experience / satisfaction audits are telling us about the service
- What referring clinicians perceive of the service provided
- What Health & Wellbeing outcomes are being measured for patients using the service
- Whether the service offers value for money

The Outcome Review will give a clear picture of the effectiveness of the current community hospital services.

Outcomes:

- To provide a clear picture of the effectiveness of the current community hospital services
- To answer the questions:
 - What are the patient experience / satisfaction audits telling us about the service?
 - What do the referring clinicians think of the service provided?
 - What Health & Wellbeing outcomes are being measured for patients using the service?
 - Does the service offer value for money?

The Outcome Review will take approximately six weeks to complete.

Other channels:

Working groups -

Format –

These will be in the form of monthly meetings, where key stakeholders will be invited to work with the programme group on subject specific workshops. The focus of each meeting will be set throughout the activity stage of the review and move forward as each stage develops. Patient and clinical representatives will be invited to attend based on their specific interest in each area of work. For example:

- Inpatient services
- Service specific
- Outpatient services
- Diagnostics

Invites will be made available through all channels listed above. Spaces will be limited based on each workshop criteria. However other tools and channels, such as online surveys will be used to support each workshop with virtual representation.

Outcomes:

- To achieve active participation in each of the activity review scope areas
- To feed outcomes to the wider communication network for comment
- To take all outcomes and feedback into the review process.

Patient opinion and community clinician sessions –

Format –

These will take the form of 4 separate monthly meetings, located at each of the four community hospital sites. This will provide an opportunity for both members of the public and CSH Surrey staff to attend. Meetings will work on a rotational basis to cover both daytime and evening opportunities. The sites are:

- Leatherhead Community Hospital
- Molesey Community Hospital
- NEECH (New Epsom and Ewell Community Hospital)
- Dorking Community Hospital

The content of these meetings will be aligned to the outcome of each workshop session.

Outcomes:

- To provide regular face-to-face contact between the CCG, CSH Surrey, CSH Surrey staff members and other stakeholders (including, but not limited to, patients and members of the public).
- To inform on review progress, including workshop outcomes and future events/opportunities for participation
- To be aware of ongoing public opinion and remain open to questions and concerns of individuals and the wider public
- To take all outcomes and feedback into the review process.

5. Options and Impact Review

Once the initial two review stages are complete the process moves into the Recommendations Phase. This phase will use the information developed at previous stages along with best practice and learning from others to co-develop a number of potential options that can then be fully evaluated. Alongside the Options will be an Impact Analysis of proposed changes that will assess the impact of recommendations on patients, the wider public, staff and service providers. Such Impacts must be fully explored and explained if commissioners and patients are to make the most informed decisions. The Options and Impact Review will take approximately six weeks to complete.