

**Improving Healthcare Together 2020 to 2030 (IHT)
Surrey Heartlands and South West London CCGs' Committees in Common
Summary cover sheet**

Date of Meeting: 3rd July 2020

Agenda No: 3 and 7

Paper: 2

Title of Document: Decision-Making Business Case	Purpose of Report: For decision
Report Authors: IHT Programme Team	Lead Director: Andrew Demetriades, Joint Director for IHT programme
Executive Summary:	
<p>In December 2017, the Improving Healthcare Together 2020 to 2030 (IHT) programme was established to address the significant quality, estates and finance challenges that the Epsom and St Helier University Hospitals NHS Trust (ESTH) is currently facing.</p> <p>NHS Surrey Heartlands and South West London Clinical Commissioning Groups¹ (CCGs) are the organisations responsible for making decisions about local healthcare and have led the development of proposals for potential service change.</p> <p>In January 2020, the CCGs' Committees in Common approved the Pre-Consultation Business Case (PCBC) and agreed to proceed to a 12 week consultation on the proposals and the three options for change as set out in the PCBC.</p> <p>The Improving Healthcare Together consultation on the options for delivering the clinical model and addressing the case for change was launched on the 8th of January 2020 and closed on the 1st of April 2020. Feedback from the consultation across all strands was analysed and collated in an independent consultation report produced by Opinion Research Services².</p> <p>The attached draft Decision-making Business Case (DMBC) is based on the evidence set out in the PCBC, feedback from consultation and further evidence compiled post-consultation. The purpose of the DMBC is to make a decision that address the three challenges ESTH is currently facing.</p> <p>The DMBC describes the work undertaken to date to determine the best solution to address the three challenges. This document outlines the:</p> <ul style="list-style-type: none"> • Case for change - which describes the barriers to delivering our vision for future healthcare 	

¹ From 1st April 2020, four CCGs in Surrey, including Surrey Downs CCG, have joined together to create a new singular commissioning organisation across the area - the Surrey Heartlands CCG; Similarly, CCGs in South West London, including Sutton and Merton CCGs, have joined several other CCGs to form South West London CCG.

² Independent analysis of feedback from consultation report, by Opinion Research Services; Available at: www.improvinghealthcaretogether.org.uk/document/independent-analysis-of-feedback-from-consultation-report/.

- **Proposed clinical model** - how we will deliver district hospital services and major acute services to provide excellent care in the future, integrated with and supported by out of hospital services.
- **Options to deliver the clinical model and address the case for change** – including how potential solutions were developed and assessed following a standard approach for options consideration.
- **Previous assurance undertaken** - our proposals have been assured by a range of organisations which include the Joint Clinical Senate for London and the South East, and NHS England and Improvement.
- **Decision-making for consultation** – which includes an outline of how we've arrived at a decision to proceed to consultation with a preferred option.
- **Consultation and engagement process** – which includes a detailed description of the promotional activities and programme of engagement undertaken to reach out, disseminate information and listen to the views of the local populations.
- **Feedback from consultation** – the DMBC provides a summary of the main findings of the consultation report and identifies a number of cross-cutting feedback themes such as travel and access, workforce, clinical model, population and bed modelling, deprivation, out of hospital and site-specific themes (such as multi-site working).
- **Process for addressing the themes from consultation** - For each consultation feedback theme, the DMBC describes how we have:
 - Listened to the feedback from consultation;
 - Developed and assessed any new evidence and proposed alternative solutions based on detailed analysis of consultation outcomes; and
 - Used the feedback from consultation and any additional evidence to understand any impacts on the proposals, shape and inform the decision-making process.
- **Further assurance of proposals following consultation** - including the final Integrated Impact Assessment, the Mayor's assurances and the Improving Healthcare Together Joint Health Overview Scrutiny Committee.
- **Process for decision-making** – the DMBC sets out a number of resolutions and recommendations for implementations made by the Programme Board to the Committees in Common.
- **Process for implementation** - how the IHT proposals would be implemented in terms of governance following any decisions made by the CCGs and the role of commissioners in scrutinising future processes and business cases.

The CCGs' Governing Bodies have reviewed and considered the feedback from consultation and the evidence available to date.

Alongside this process, the Programme Board has also reviewed the feedback from consultation and the additional evidence developed as part of this DMBC. The Programme Board has considered the impact of the feedback from consultation and additional evidence on the proposed clinical model, the ranking of the options, and the recommendations for implementation.

The Programme Board concluded that the feedback from consultation and additional evidence have not materially impacted the ranking of the options and have proposed a number of recommendations to the Committees in Common.

Resolutions:

The Committees in Common is asked to approve the DMBC and agree the following resolutions taking into account all the evidence that has been made available:

- a) To agree and adopt the clinical model for the delivery of district hospital services and the specialist emergency care hospital (SECH);
- b) To agree that the preferred option for the location of the SECH is Sutton, with continued provision of district hospital services at Epsom Hospital and St Helier Hospital.
- c) To agree and adopt the recommendations for implementation (set out in Appendix 1); and
- d) To establish a Strategic Executive Group and Strategic Oversight Group to monitor the delivery of the recommendations throughout implementation.

Financial Implications:

- In September 2019, as part of the Health Infrastructure Plan, we were allocated £500 million to improve the current buildings at Epsom and St Helier hospitals as well as build a new specialist emergency care hospital on one of the three sites – Epsom, St Helier or Sutton.
- A comprehensive financial model has been developed which includes the impact on other providers.

Equality Impact Assessment:

The final Equality Impact Assessment has been completed as part of the Integrated Impact Assessment (IIA) for the Improving Healthcare Together: 2020 to 2030 programme. The IIA was reviewed against the findings of the consultation and updated to include any additional impacts and recommendations as part of the final phase of this work.

Communication Plan:

A communications and engagement plan for the Improving Healthcare Together 2020-2030 has been developed.