# Somerset Health and Wellbeing Board

## 12 July 2018

## Healthy Weston Update

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	Seen by:	Name	Date
	Relevant Senior Manager / Lead Office (Director Level)	Rosie Benneyworth, CCG	27/06/18
Report Sign off	Cabinet Member / Portfolio Holder (if applicable)	N/A	
	Monitoring Officer (Somerset County Council)	Scott Wooldridge	02/07/18
Summary:			stershire CCG) t which set out a vices in the the programme is way that is lable. I was clearly that there was colleagues in Somerset NHS involved in the tin October 2017, o-design which process are now gressed through livery of the nple the ton to support our

Risk Assessment:	n/a	
Equalities Implications:	These will be addressed as part of the Healthy Weston (North Somerset) developments. Not applicable for this paper which is for information	
Financial, Legal and HR Implications:	n/a	
Links to Somerset Health and Wellbeing Strategy:	This paper describes proposals for health and care North Somerset. These are being presented to the Somerset Health and Wellbeing Board for information. Any impacts on Somerset, or Somerset residents will be taken into account.	
Reasons for Recommendations:	To support the next phase of the Healthy Weston Programme.	
Recommendations:	That the Health and Wellbeing Board receive the report and offer any comments and observations to support the next phase of work.	
	Partners from Somerset will continue to be closely involved in this work.	
	It is recognised that to progress these opportunities and develop detailed proposals as part of a pre-consultation business case, there firsts needs to be a process by which the South West Clinical Senate test our proposed options, followed by the NHS Regional Team. This process will take place over the course of the Autumn and early winter. Where significant changes to services are proposed in the PCBC, a full public consultation subject to assurance and approvals, will start ideally in January 2019.	
	<ul> <li>a) the current temporary overnight closure of the Accident and Emergency Department at Weston General Hospital, and the need for a long term solution for urgent and emergency care provision;</li> <li>b) the financial deficit of providers and commissioners across BNSSG, particularly the increasing deficit at WAHT;</li> </ul>	

#### 1 Introduction

This paper seeks to provide an update to the Somerset Health and Wellbeing Board on the Health Weston Programme.

#### 2 Background and Context

Healthy Weston is responding to the Commissioning Context set out by the NHS Bristol, North Somerset and South Gloucestershire CCGs in October 2017 which set out a clear vision for local services and, specifically for a new model of care on the Weston General Hospital site<sup>1</sup>.

The Commissioning Context is explicit that "doing nothing" is not an option and confirms that the CCG is determined to work with health and social care partners, and the wider community, to design a new model of care that is best able to meet the needs of the local population in a way that is clinically and financially sustainable. Somerset CCG has been closely involved in this work, recognising the population flows from Northern Somerset to Weston General Hospital. (Note: while 20% of Weston General Hospital activity relates to residents from the north of Somerset, this represents less than 2% of the Somerset population).

Summary Vision for local services & a new model of care (from the Healthy Weston Commissioning Context)

1. Primary Care (General Practice) working at scale & providing strong system leadership: A key objective is to support primary care to be more robust, working together more effectively with each other, with other health and care services and the wider community system to help people to stay well, independent and at home wherever possible. A significant dimension of this work will also be improving our messaging and support for patients to enable them to choose self-care options wherever appropriate.

2. Stronger, more integrated community services supported by a 'Health & Care Campus' model at the WGH site: A key objective of the new model of care is to bring together services and resources that are already in place, centred around closer collaboration between primary care and the wider community system as a whole. This will mean patients receive a more coherent, high quality and effective service which is proactive and responsive to their needs, and will maximise the role of the Hospital and the specialist diagnostics and expertise.

**3. A stronger, more focused acute model at Weston General Hospital:** A key objective is to address the long standing financial and clinical sustainability challenges experienced by Weston Area Health Trust, and specifically Weston General Hospital. Some hospital services will continue to be provided locally, other services may need to move off-site to another acute hospital(where it makes sense to do so and some new services may be provided.

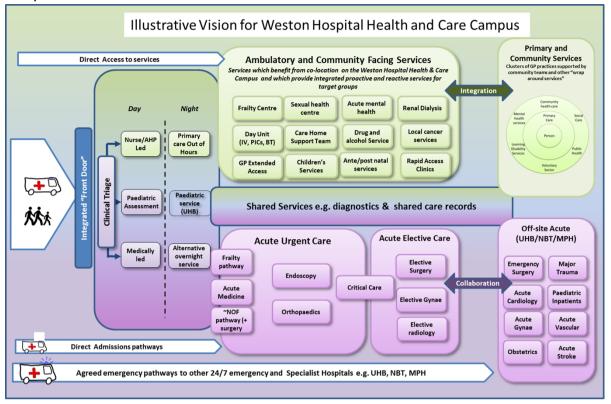
<sup>&</sup>lt;sup>1</sup> Healthy Weston: Joining up services for better care in the Weston Area. A Commissioning Context for North Somerset 2017/18 – 2020/21. NHS Bristol, North Somerset and South Gloucestershire CCGs, October 2017

The commissioning context articulates a vision for services in Weston and Worle which includes the development of a "health and care campus" model on the Weston General Hospital Site. This model, along with a review of acute services configuration, was set out as a way to secure a clinically and financially sustainable future for the hospital. Throughout the work, and underpinning the commissioning context, is a shared ambition to take this opportunity to see a vibrant and dynamic future for Weston General Hospital at the heart of a local, integrated care system. Specifically, it is expected that the Programme will identify proposals to address a number of long standing issues, including<sup>2</sup>:

- 1) The BNSSG STP's projected "do nothing" annual deficit for WAHT, which is forecast to be £20.6m by 2020/21;
- 2) The provision of a long term clinically sustainable and affordable emergency and urgent care that meets the dominant needs of local people
- 3) The ability to retain and recruit to roles in key clinical specialties and critically addressing issues with trainee doctor placements (supervision and satisfaction), which are putting service delivery at risk.
- 4) The ongoing reduction in the number of pregnant women assessed as low risk who are choosing the local midwife led maternity service at Weston General Hospital, which is impacting significantly on the clinical and financial viability of the service in its current form;
- 5) The sustainability of some services which may be more appropriately delivered elsewhere at scale, such as emergency surgery and Level 3 critical care
- 6) The ongoing requirement for premium payments to subsidise specific services that would otherwise not be financially viable.

<sup>&</sup>lt;sup>2</sup> Taken from Healthy Weston: Joining up services for better care in the Weston Area. A Commissioning Context for North Somerset 2017/18 – 2020/21. NHS Bristol, North Somerset and South Gloucestershire CCGs, October 2017

Fig 1: Illustrative Overview of a Health and Care Campus Model on the Weston Hospital Site



#### 3 Phase 1 Healthy Weston – Co-Design

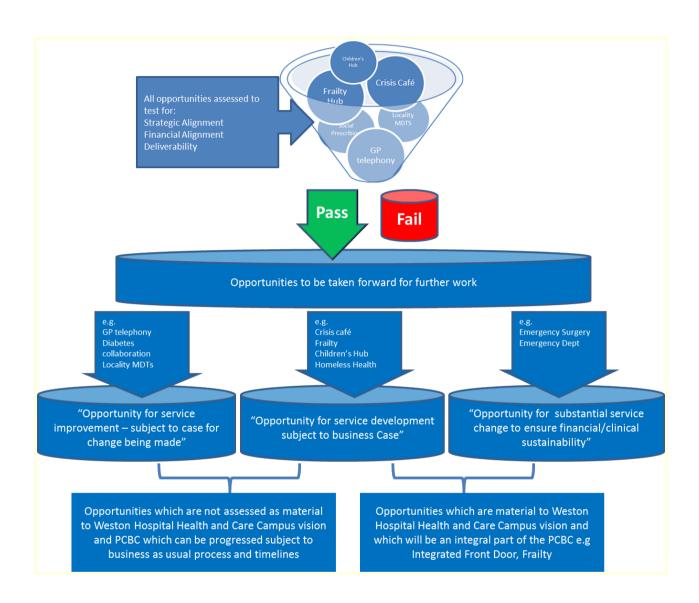
The first phase of the Healthy Weston Programme has supported a period of engagement and co-design which has identified a range of opportunities for service change and improvement through three working groups:

- Enabling primary care
- Integrated community services
- Integrated Acute Care

Each opportunity has been subject to a high level, desk top assessment to test whether it is:

- 1) **strategically aligned** the opportunity is consistent with Healthier Together, the Healthy Weston Commissioning Context and/or relevant national strategies;
- 2) **financially aligned** the opportunity has scope to be financially sustainable and/or make a positive contribution to the system financial position;
- 3) **Deliverable** that there is scope to deliver the opportunity in a way which will be acceptable to service users, staff and stakeholders.

This resulted in a range of opportunities and ideas which have been grouped by theme and an assessment undertaken to consider how they might be progressed. This process has identified that many of the opportunities developed through the co-design phase can be taken forward within "business as usual" and move to implementation, such as the commissioning of a Crisis Café in central Weston to support our vulnerable groups. Other opportunities have the potential for more substantial service change to realise the vision for the Weston General Hospital Health and Care Campus, and therefore potentially requiring formal public consultation.



### 4 Phase II - Pre-Consultation Business Case

In addition to progressing opportunities that can be taken forward through business as usual processes, the work to date has resulted in a shared understanding of the need for a process where informed and deliberate choices can be made around how to maintain access to high quality acute hospital services for the local population in Weston through strong collaboration with neighbouring hospitals, and in the context of the vision for the Weston Hospital Health and Care Campus described earlier. We are therefore now working to develop our proposals and set these out in a pre-consultation business case which will draw together:

- Our plans to strengthen primary and community services and how these will be networked with Weston General Hospital Health and Care Campus;
- Options for urgent and emergency care services and associated pathways

• Options for elective services and for maternity care

There is a process in place to support the development of the Pre-Consultation Business case to ensure the necessary NHS England assurance processes are followed. This will enable public consultation where significant changes to services are being considered, to begin ideally in early in January 2019 in advance of the local council elections taking place in May 2019.

#### 5 Implications for Partners in Somerset

Through the programme arrangements we have maintained strong links with colleagues in Somerset CCG and Taunton and Somerset NHS Foundation Trust. Updates have also been provided to the Somerset Health Overview and Scrutiny Committee.

As the clinical service models are progressed, ensuring that there is a clear understanding on the impact for service users, carers is recognised as being critical, including the impact for residents in the north of Somerset who look to Weston General Hospital.

At this point in time, the assumption is that any changes that may be subject to public consultation are unlikely to require a joint consultation and joint decision making between BNSSG CCG and Somerset CCG. This is being kept under review and close links with the Somerset HOSC, which has a statutory role in relation to NHS public consultation are being maintained.

### 6 Recommendations and Conclusion

The Health and Wellbeing Board are asked to note this report and offer any comment or feedback to support the next phase of the Healthy Weston programme.