

NHS DORSET CLINICAL COMMISSIONING GROUP
GOVERNING BODY MEETING
CLINICAL SERVICES REVIEW – COMMISSIONING DECISIONS

Date of the meeting	20/09/2017
Author	P Richardson, Director of Design and Transformation
Sponsoring Clinician	Dr F Watson, Chair NHS Dorset CCG
Purpose of Report	The purpose of the report is to decide the future commissioning of services as a result of the Clinical Services Review.
Recommendation	The Governing Body is asked to consider the report recommendations and to: (a) approve each of the Integrated Community and Services recommended options as detailed individually in the report; (b) approve each of the acute services recommended options as detailed individually in the report.
Stakeholder Engagement	A full statement regarding engagement with members, clinicians, staff, patients & public is included as part of the Decision Making Business Case to which this report refers.
Previous GB / Committee/s	N/A

Monitoring and Assurance Summary

This report links to the following Strategic Principles	<ul style="list-style-type: none"> • Services designed around people • Preventing ill health and reducing inequalities • Sustainable healthcare services • Care closer to home 		
	Yes [e.g. ✓]	Any action required?	
		Yes Detail in report	No
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		✓
Board Assurance Framework Risk Register	✓		✓
Budgetary Impact	✓		✓
Legal/Regulatory	✓		✓
People/Staff	✓		✓
Financial/Value for Money/Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓
I confirm that I have considered the implications of this report on each of the matters above, as indicated	✓		

Initials : PR

1. Introduction

- 1.1 The Governing Body recognised the scale of the future challenges facing the healthcare of Dorset in 2013 and approved the initiation of the Clinical Services Review (CSR) programme in March 2014. Over the next 2 years the CSR programme developed the CSR for Dorset into a plan that would meet the changing need of our population, best practice clinical standards and would deliver a sustainable healthcare system (Appendix 1).
- 1.2 The transformation plan is based on the need to change the way healthcare is delivered to the people of Dorset. It describes how the NHS can continue to provide high quality services to Dorset's growing elderly population whilst closing gaps in health and wellbeing, care and quality and finance and efficiency.
- 1.3 Following a period of clinical design and stakeholder engagement, the CCG Governing Body approved recommendations during 2016 to proceed to formal public consultation on the acute hospital model of care and the CCG preferred site-specific options and the community services model of care and CCG preferred site-specific options.
- 1.4 The public consultations concluded in early 2017 and there followed a period of deliberations with clinicians and local stakeholders to consider the public feedback and amend proposals over summer 2017, prior to decision making by the Governing Body in September 2017.
- 1.5 This report lists out the recommended commissioning decisions to be considered by the Governing Body and should be read alongside the Decision Making Business Case in Appendix 2 that describes the evidence and rationale for the recommended decisions.

2. Recommendations

- 2.1 The following recommendations are extracted from the Decision Making Business Case to allow for ease of reference during the Governing Body meeting.

Integrated Community Services

ICS 1. The Governing Body is requested to approve the recommendation: to commission more services closer to people's homes delivered through integrated community teams and local community hubs to deliver better care.

ICS 2. The Governing Body is requested to approve the recommendation: to commission a community hub with beds at Sherborne Hospital.

- ICS 3.The Governing Body is requested to approve the recommendation: to commission a community hub with beds at Blandford Hospital.
- ICS 4.The Governing Body is requested to approve the recommendation: to maintain a community hub with beds in Shaftesbury Hospital whilst working with the local community until a sustainable model for future services based on the health and care needs of this locality is established, possibly at a different site to the existing hospital.
- ICS 5.The Governing Body is requested to approve the recommendation: to commission a community hub without beds at Dorset County Hospital.
- ICS 6.The Governing Body is requested to approve the recommendation: to commission a community hub with beds at Bridport Hospital.
- ICS 7.The Governing Body is requested to approve the recommendation: to commission a community hub with beds at Weymouth Community Hospital.
- ICS 8.The Governing Body is requested to approve the recommendation: to maintain services including beds at Westhaven Hospital until the community hub with beds at Weymouth Hospital is established and staff and services have been appropriately transferred.
- ICS 9.The Governing Body is requested to approve the recommendation: to commission a community hub without beds on Portland, possibly at a different site to the existing hospital.
- ICS 10.The Governing Body is requested to approve the recommendation: to commission a community hub with beds at Swanage Hospital.
- ICS 11. The Governing Body is requested to approve the recommendation: to commission a community hub without beds at Wareham, possibly at a different site to the existing hospital.
- ICS 12.The Governing Body is requested to approve the recommendation: to commission a community hub with beds at Wimborne Hospital.
- ICS 13.The Governing Body is requested to approve the recommendation: for St Leonards Hospital to close.
- ICS 14.The Governing Body is requested to approve the recommendation: to commission a community hub with beds on the Major Planned Hospital site.
- ICS 15.The Governing Body is requested to approve the recommendation: to maintain services including beds at Alderney Hospital until alternative services have been established and staff have been appropriately transferred. At which

point Alderney Hospital's community beds will close. Mental health and dementia services will remain unchanged pending the outcome of the dementia services review.

ICS 16. The Governing Body is requested to approve the recommendation: to commission a community hub without beds at Christchurch Hospital. [This will not affect the palliative care beds].

ICS 17. The Governing Body is requested to approve the recommendation: to commission a community hub with beds on the Major Emergency Hospital site.

Acute Services

- AC1. The Governing Body is requested to approve the recommendation: to commission distinct roles for Dorset's acute hospitals (a Planned and Emergency Hospital, a Major Planned Hospital and a Major Emergency Hospital), as part of one acute network of services.
- AC2. The Governing Body is requested to approve the recommendation: to commission a Major Emergency Hospital at the Bournemouth Hospital site.
- AC3. The Governing Body is requested to approve the recommendation: to commission a Major Planned Hospital at the Poole Hospital site.
- AC4. The Governing Body is requested to approve the recommendation: to commission a Planned and Emergency Hospital at the Dorset County Hospital site.

Maternity and Paediatrics

- M&P 1. The Governing Body is requested to approve the recommendation: to commission the delivery of consultant-led maternity and paediatric services from the Major Emergency Hospital.
- M&P 2. The Governing Body is requested to approve the recommendation: to seek to commission the delivery of consultant led maternity and paediatric services integrated across Dorset County Hospital and Yeovil District Hospital for the Dorset population. Implications for this recommendation will be considered by Dorset County Hospital and Yeovil District Hospital and any proposed changes to services in either hospital would be subject to further local public consultation by both Dorset and Somerset CCGs as appropriate.

3. Conclusion

3.1 The Governing Body is asked to:

- **Approve** each of the Integrated Community and Services recommended options as detailed individually in this report.
- **Approve** each of the acute services recommended options as detailed individually in this report.

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Date: September 2017
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APPENDICES	
Appendix 1	Clinical Service Review Timeline
Appendix 2	Decision Making Business Case

Appendix 1: Clinical Service Review Timeline

June 2013	Launch of The Big Ask (29,000 qualitative comments about services)
June 2014	CSR Specification for tendering purposes
September 2014	Dorset Health Scrutiny Committee received briefing to inform that Dorset CCG were about to embark on the CSR
September 2014	Dorset Health and Wellbeing Board received a briefing paper including a synopsis of the case for change
October 2014	Dorset CCG publicly and formally launched the start of the review process with a large-scale event at the Bournemouth International Conference Centre
November 2014	Dorset CCG Chair wrote to the then 100 practices to gain involvement in the design stage
December 2014	First Patient and Public Engagement Group meeting, monthly meeting thereafter
December 2014	Project Initiation Document (PID) for Clinical Services Review
December 2014 to March 2015	Clinical Working Groups held with over 150 clinician's/ managers in attendance at each meeting
January 2015	Published Case for Change
March 2015	Travel Time Analysis carried out
March 2015	Clinical review TOR outlined process for first External Review Team and Clinical Senate Involvement
March 2015	Update on CSR presented to Governing Body, decision to undertake further stakeholder engagement before public consultation
March 2015	Patient and Public Engagement Group (PPEG) Recommendations for Clinical Services Review
March 2015	Confirmation from NHS England of Stage 1 Assurance
April 2015	Strategic Sense Check Meeting with representatives from NHS England-South. Sufficient assurance was given to agree that the CSR could pass Strategic Sense Check 1
May 2015	Dorset Health Scrutiny members asked to nominate members for a Joint Health Scrutiny Committee
June 2015	First Wessex Clinical Senate Meeting
June 2015	Health Gateway Review of CSR
July 2015	Report issued by external review team outlining 16 recommendations for action by the CCG
July 2015	First Joint Overview Scrutiny Committee meeting
July 2015 to September 2015	Mental Health Acute Care Pathway View Seeking Events (public/staff)
September 2015	Dorset Acute Care Collaboration Vanguard approved
October 2015 to November 2015	Two Young Peoples Conferences
November 2015	Stakeholder engagement, further ICS and acute model design
March 2016	CCG launched a programme of engagement specifically to inform and seek views from the public on Integrated Community Services proposals
March 2016	First System Leadership Team Meeting (evolved from Better Care Steering Group)
March to April 2016	Nine locality based Integrated Community Services Engagement Events
April 2016	Royal College of Paediatrics and Child Health Review of Clinical Services Review
May 2016	Governing Body Approve Major Hospital Public Consultation
May 2016	Stage 2 Assurance Meeting with NHS England
June 2016	NHS England Requirements for Stage 2 Assurance
June 2016	Integrated Community Services Roadshows held in 26 locations

4.1

July 2016	Informal meeting with JOSOC members to outline ICS proposals for public consultation
July 2016	Governing Body Approve Integrated Community Services and Mental Health Public Consultation
August 2016	Oversight Group for Change and Service Reconfiguration Panel Review
September 2016	Investment Committee meeting as part of NHS England assurance
October 2016	Clinical Services Review Consultation Plan 2016/2017
October 2016	JOSOC shared outcome of mental health acute care pathway review and proposals which would go forward to NHS England assurance and public consultation
October 2016	Investment Committee meeting as part of NHS England assurance
November 2016	Confirmation from NHS England of Stage 2 Assurance
December 2016 to February 2017	CSR Public Consultation
January 2017	First Shadow System Partnership Board
February 2017 to March 2017	Mental Health Acute Care Pathway Consultation
February 2017	Dorset Health Scrutiny Committee/Joint Overview Scrutiny Committee Reports
February 2017	First formal System Partnership Board
April 2017	Consultation Institute approval of CSR Consultation
May 2017	Results of public consultation
May 2017 to August 2017	Consideration of outcomes of public consultation and further deliberations
September 2017	Final commissioning decisions to be made by Governing Body