

September Programme Board meeting update

Oct 5, 2017

The Kent and Medway Sustainability and Transformation Partnership Programme Board met on 11 September 2017.

The Programme Board's meeting structure allows for occasional 'deep dives' – lengthier discussion and more detailed scrutiny of key subjects – on a regular basis. At its September meeting, the Board had 'deep dive' sessions in two areas; hospital care and system transformation.

Hospital care

The Board's 'deep dive' on hospital care focussed on stroke services for Kent and Medway and on plans for urgent and emergency care services in east Kent.

Stroke work has been underway for several years to review and improve stroke services across Kent and Medway and the Board looked at the latest proposals for stroke services, including how detailed financial and activity modelling data, clinical co-dependencies and the results of recent patient engagement have informed their development.

Page | 1

The Stroke Programme Board, which is leading the review of acute stroke services, is currently looking at a number of possible models and expects to make an announcement on the list of options it will consult on early next year. The shortlist is likely to include a number of options, each involving three specialist hyper-acute stroke centres at existing acute hospitals.

In order to get to a shortlist, potential options will be assessed against the following evaluation criteria, each with specific metrics to support the assessment: quality; access; workforce; affordability and value for money; and, deliverability. The assessment and the outcome from this will be taken through a formal sign-off and approval process by commissioners before going to formal public consultation in 2018. Public engagement has been a key part of the review, with feedback from stroke patients demonstrating support for proposals to move from the existing provision of seven units to three highly-specialist units. Over the summer, an online survey and a series of focus groups with patients and the public took place to help develop the evaluation criteria. The Board discussed the initial findings from this engagement activity which will be published in due course.



Additional work looking at travel times, access and workforce considerations is ongoing and will inform the development of the final short-list of options for stroke services.

East Kent

In east Kent, clinical service models for emergency, acute and elective orthopaedic care are in development alongside the review of stroke services. With a new focus on local care – care that is delivered within the community and close to or even at home – as well as preventing ill-health and making sure that hospital care is available when it is needed, the service models for east Kent will reshape the design and delivery of healthcare.

Proposals for hospital care will be assessed using criteria that have been developed by clinicians and others on the hospital care workstream, with wide input from other stakeholders, including patients and the public. Additional input from the South East Clinical Senate and all relevant CCGs has also been received and is being incorporated into the ongoing work.

Over the summer, around 350 people attended six listening events across east Kent to give their views and insights on the proposed model of care and evaluation criteria for east Kent.

The offer of a new hospital ‘shell’ in Canterbury from housing developers has been widely reported in the local media and is being formally analysed and scrutinised to see if it is a viable option. The Board acknowledged that if it is considered to be viable this would have a considerable impact on the proposals for hospital services in east Kent. The work to develop proposals for east Kent continues, with a focus on finding potential long-term solutions to the current challenges as quickly as possible.

Governance

A joint committee of the CCGs to consider hospital changes in east Kent is being established with the appointment of an independent chair expected in the coming weeks. The first meeting of the joint committee is likely to be in October.

At a Kent and Medway level work is taking place across the eight CCGs, and with CCGs in neighbouring areas, to set up a further joint committee to consider stroke changes.

System transformation

At a national level, health and care economies across England are being encouraged to become Accountable Care Systems (ACSs) as the next step in supporting the delivery and implementation of sustainability and transformation plans. ACSs will be an ‘evolved’ version of the partnerships that are in place now, to better integrate health



and care locally. The 'accountable care systems' are intended to support NHS organisations (both commissioners and providers) work in partnership with local authorities to take on collective responsibility for resources and population health, providing better integrated and coordinated care.

In Kent and Medway, work is now underway to look at how health and care commissioners and providers can operate in a more integrated way. There is agreement amongst health and social care leaders that there should be one single strategic commissioner for Kent & Medway. There are also proposals for a small number of Accountable Care Partnerships (2-3) to plan, buy and deliver services for local people across this geographical area.

The Board examined the outcomes of a survey and a series of workshops undertaken with health and social care representatives over the summer to discuss possible options for a Kent and Medway accountable care system.

ENDS



