

Future of Acute Hospital Services in Worcestershire

Sub-Committee / Patient and Public

Gateway 1 Brief

Document Purpose
To provide an outline brief to the Patient and Public Sub-Committee as to the requirements, objectives and outcomes within this phase of the programme.
Note: The terms of reference for this sub-committee were approved in principle on 20 th September 2013 and will be represented for final approval once the chair is in post and has clarified the key deliverables and purpose of the sub-committee with the Programme Board.

Programme details	
Programme Name	Future of Acute Hospital Services in Worcestershire
Programme SRO	David Williams
Programme Director	Simon Angelides
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Patient and Public Sub-Committee | Gateway 1 / Brief

1. Background

The three Clinical Commissioning Groups in Worcestershire (Redditch and Bromsgrove CCG, Wyre Forest CCG and South Worcestershire CCG), have jointly initiated a programme of work that has replaced the Joint Services Review (JSR) previously undertaken to determine the future of the acute hospital services that are to be provided to the population of Worcestershire. In conjunction with Worcestershire Acute Hospitals NHS Trust (WAHT) and with the NHS England Local Area Team, this programme will aim to determine a shared strategic vision for future acute services within the county.

2. Purpose –Gateway 1

To support the Future of Acute Hospital Services in Worcestershire programme of work, Gateway 1 has been agreed which will run from 20 September 2013 for twelve weeks, to 13 December 2013. The purpose of Gateway 1 is to undertake an assessment of Option 1 and Option 2 provided by WAHT, in terms of its overall viability and where and if its viability cannot be determined within this gateway, to determine what further evidence is required to make that assessment. From a clinical perspective, this assessment will be undertaken by the Clinical Review Panel. As an input to this the three Worcestershire CCGs will provide a prospectus which will outline their medium term commissioning intentions. These prospectuses will remain in draft until they have been assured by NHS England. In addition the original JSR Case for Change will also be identified and used as an input.

3. Purpose – Patient and Public Sub-Committee | Gateway 1

Patient and Public Sub-Committee during Gateway 1 will have two key purposes.

The first objective of the Patient and Public Sub-Committee for Gateway 1 will be to provide the necessary support to the Clinical Review Panel as required, specifically in terms of assessing Option 1 and Option 2. Specifically this will need to consider how patient and public engagement will be undertaken once the clinical and financial work has been undertaken to assess the baseline viability of Option 1 and Option 2. It is expected that this engagement with the Patient and Public will need to take place in Gateway 2, although the Sub-Committee will need to satisfy itself that it is not appropriate during Gateway 1, that the appropriate involvement with Patient and Public is being undertaken.

The second objective will be to establish the programme's Patient and Public engagement capability. This will need to ensure that there is not only the appropriate planning in terms of public involvement and that all communities and stakeholders have been mapped, engaged and an appropriate communication mechanism has been established.

Where support is required to the Clinical Review Panel or Sub-Committee, Sub-Committee will then instruct the Programme Director to commission resources as appropriate.

4. Patient and Public Sub-Committee in the Context of the Wider Programme

Whilst Gateway 1 primary purpose will be to provide support to the Clinical Review Panel, the Programme will also initiate four sub-committees which will consider the wider context of the programme and develop the thinking necessary to support a re-configuration. See Programme Governance Structure for the governance structure on a page. The roles and overall responsibilities of the programme structures are set out in the table below.

Title	Role	Programme Responsibility
Programme Board	To bring together the key decision makers within Worcestershire Health and Social Care Community	a) To approve recommendations to be submitted to statutory bodies b) Provide oversight and guidance
Internal Trust Programme	To ensure that the Trust internally and within its clinical and medical community undertakes the support and guidance necessary for the Trust to support the programme	a) To provide assurance to the Trust Board
Finance Sub-Committee	To bring together the assurance provided by NHS England and the NHS Trust Development Authority	a) To provide the oversight of the financial assurance work
Operations & Delivery Sub-Committee	To bring together all the activities which need to be commissioned to support the Case for Change within one structure	a) To undertake the Equality Impact Assessment b) To consider other activities, developments and outcomes that need to be considered
Clinical Review Panel	To determine the clinical viability of the CCG Prospectus, Option 1 and Option 2	a) To consider the optional appraisal approach and clinical standards to determine the clinical viability b) To commission additional input to determine clinical viability
Patient / Public Sub-Committee	To champion the role of the Patient / Public To guide the engagement with the Patient / Public	a) To commission the wider communications plan b) To commission pre-consultation engagement c) To agree the public consultation plan

5. Outcomes – Patient and Public Sub-Committee | Gateway 1

By way of outcomes for Gateway 1 Patient and Public Sub-Committee, will:

1. Provide the necessary support to allow the Clinical Review Panel to undertake its assessment
2. Support the Independent Clinical Review of Option 1 and Option 2 as presented by WAHT
3. To have undertaken an initial engagement with all communities that have an interest in the development and outcome of the programme and where appropriate established an on-going dialogue
4. Have undertaken the appropriate involvement of the public at this stage of the programme
5. Have begun the detailed planning of Patient and Public involvement – with a specific focus upon the public consultation
6. Have established the initial outward facing Patient and Public communications infrastructure for the programme (e.g. website / Facebook page)
7. Have considered the lessons learnt by the Joint Services Review and other relevant change programmes in terms of Patient and Public engagement and consultation

6. Out of Scope – Patient and Public Sub-Committee | Gateway 1

The programme will not seek to replicate Patient and Public engagement infrastructure of existing statutory bodies, rather it will seek where possible to utilise existing mechanisms wherever possible.

7. Timescales – Patient and Public Sub-Committee | Gateway 1

The proposal is that Gateway 1 will be completed within twelve weeks.

The Sub-Committee is expected to meet for the duration of the FoAHSW programme.

8. Governance – Patient and Public Sub-Committee | Gateway 1

Due to the scale and complexity of this programme, it is imperative that robust governance mechanisms are put in place to support the programme and decision-making throughout the process, however due to the tight timescales in which to reach a preferred way forward, the governance arrangements also need to be flexible enough to enable accelerated decision-making.

The Programme Board will establish a Programme Management Team, and Programme Office that will manage the business of the programme, and will liaise with the various assurance functions required by stakeholders on behalf of the sub-committee.

It is important to note the pre-requisite inputs that will be required to support successful delivery of the FoAHSW programme:

1. Effective scoping at the outset
2. Clear and robust governance and accountability to support accelerated decision-making
3. Sufficient and timely access to resources (staff, systems, external expertise as required)

9. Risks and Issues – Patient and Public Sub-Committee | Gateway 1

A risks and issues log will be maintained by the FoAHSW Programme Team with key risks. Any key risks and issues identified by the Sub-Committee will be escalated to the overall Programme Board and subsequently to the programme team as appropriate.

Amendment History		
Document Owner: Simon Angelides		
Version Number	Date	Reason for Amendment
v00a	05/08/2013	First draft
v00b	11/08/2013	Second draft (Internal)
v00c	17/09/2013	Third draft
v01a	25/09/2012	Final
V01b	27/09/2013	Final with Chair amendments