

# INNER NORTH EAST LONDON JOING OVERVIEW AND SCRUTINY COMMITTEE MEETING

11 SEPTEMBER 2014

<b>Title:</b>	Transforming Services, Changing Lives	
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<b>Speakers:</b> Sam Everington – TSCL Primary Care Clinical Lead and Chair of Tower Hamlets Clinical Commissioning Group Peter Morris – Chief Executive, Barts Health NHS Trust Neil Kennett-Brown – TSCL Programme Director		
<p><b>Summary:</b></p> <p>The Local Clinical Commissioning Groups (CCGs) of Tower Hamlets, Waltham Forest, Newham, Redbridge and Barking and Dagenham; plus NHS England, Bart’s Health and other local providers, have established a clinical transformation programme called Transforming Services, Changing Lives (TSCL). It which will consider how services need to change to provide the best possible health and health care for local residents. <b>It does not, at this stage, outline any recommendations for change.</b></p> <p>A key element of the programme is to consider how best to ensure safe, effective and sustainable hospital services at Bart’s Health hospitals, set in the context of local plans to further develop and improve primary, community and integrated care services.</p> <p>The work of the programme, which was launched in February 2014, and is expected to run until autumn 2014, will develop a baseline assessment of the drivers for change in the local health economy and support further discussions about the scope, scale and pace of change needed.</p> <p>Key milestones:</p> <ul style="list-style-type: none"> <li>• <b>9 July:</b> Interim Case for Change published. Engagement commences to gather feedback to help to inform the final Case for Change and help us determine priorities for the future. This includes events for all Barts Health staff, attendance at public events and a series of patient focus groups.</li> <li>• <b>Autumn:</b> Publication of final Case for Change.</li> <li>• <b>After publication of Case for Change:</b> Explore and agree joint priorities to improve local services. If we think change is required we will work with the public and clinicians to consider a range of potential options to help improve healthcare services.</li> </ul>		

## Recommendation(s)

The Joint Overview and Scrutiny Committee is recommended to:

- (i) Provide comment and feedback based on their review of the Interim Case for Change. This will be used in the development of the final case for change, which is due to be published in October
- (ii) Consider and confirm requirements and timings for future updates and presentations about the final Case for Change and any future work programmes

## 1. Background and Introduction

The five CCGs involved in Transforming Services, Changing Lives have a duty to promote a comprehensive health service for their populations of around 1.3 million people. Today, local NHS services face the very real challenge of providing care for a rapidly growing local population, whilst continuing to meet the health needs of some of the most deprived areas seen anywhere in the UK.

The health economy is never static. Change is happening all around the system. In the last year, since the establishment of CCGs, we have seen the introduction of NHS 111, the development of integrated care and soon the launch of personal health budgets. We need to respond to these changes to ensure that benefits are realised and unintended consequences are avoided.

However, we also know that some services simply need to improve to meet local needs. We need to address the areas where we are not so good. We know that the quality of care we provide is inconsistent. We need to work better with providers and with social care to address the challenges we face and decide how we can introduce new and different ways of providing care.

Collectively commissioners have agreed with providers to look at the challenges we face, to ensure we can continue to provide the care our patients need, at the best possible place for them. Organisation boundaries must not and cannot impede the commitment to deliver improvements at scale across the partnership.

We also need to make sure that any changes in the future happen safely and effectively.

In developing their case for change, clinicians will be guided by the principles of the Francis Report<sup>1</sup> to ensure delivering first class care for patients and local populations is the driver for change.

Local clinicians have been asked to use their own knowledge of national and international best practice to review the quality and performance of East London health services, highlight areas of good practice that should be maintained and developed, and set out if, why, and in what specialties they think there may be a case for change to ensure the very best care for local residents. They are not, at this stage, setting out any recommendations for change.

Their work has been published as an 'Interim Case for Change', which is available to view at [www.transformingservices.org.uk](http://www.transformingservices.org.uk).

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<sup>1</sup> The Francis Inquiry report was published on 6 February 2013 and examined the causes of the failings in care at Mid Staffordshire NHS Foundation Trust between 2005-2009

## 2. Governance Arrangements

The governance arrangements for the programme have been established and include:

- Programme Board – tasked with providing the strategic oversight for the Programme. To reflect the external decision making requirements, the Programme Board reports to the relevant statutory bodies of CCGs, providers and the NHS England. CCGs ensure a clear link through to HWBBs. Additionally Waltham Forest, Tower Hamlets and Newham councils (the boroughs in which Barts Health hospitals are located) have been invited to sit on the Programme Board.
- Clinical Reference Group and Clinical Working Groups – these reflect the key clinical leadership role in exploring and shaping a Case for Change. CCGs, Barts Health, Homerton Hospital, community and mental health service providers and the London Ambulance service have nominated clinicians and other front-line staff to join clinical working groups. Links are also being established with academic partners. The clinical working groups focus on:
  - unplanned care (urgent and emergency care, acute medicine, non-elective surgery)
  - long-term conditions
  - elective surgery
  - maternity and newborn care
  - children and young people, and;
  - clinical support services
- A Public and Patient Reference Group – this group meets on a regular basis to provide ideas and feedback to clinicians leading the TSCL programme and support and advise on public engagement activities. Representatives have been invited from three broad groups:
  - local branches of Healthwatch
  - patient representatives from the CCGs involved in the programme
  - patient representatives from the providers involved in the programme

## 3. Engagement

Although TSCL does not, at this stage, set out any recommendations for change, the programme recognises the importance of engaging local stakeholders in our work at an early stage.

Since the programme was launched in February 2014, extensive engagement has taken place with stakeholders across Newham, Tower Hamlets, Waltham Forest, Redbridge, Barking and Dagenham, Hackney and City of London.

The current engagement period runs until 21 September, with feedback collected via online survey, post and at meetings and events. All feedback and requests for amendments to the final Case for Change are logged and reviewed for inclusion in the final document.

Engagement activity has included, but is not limited to:

- Information about the launch of the programme sent in February to key contacts including CCGs, providers, Local Authorities (including the Chief Executives, Health Scrutiny Committees, Health and Wellbeing Boards, Council Leader, Directors of Public Health and other services), Healthwatch, local MPs, London Assembly Members.
- Key stakeholders invited to attend large public events about the programme which took place on 4 April and 6 June 2014 at Stratford Town Hall.
- Formation of the TSCL Public and Patient Reference Group, including ongoing meetings and email updates.
- Press release about the interim Case for Change sent to local press outlets, local authorities, MPs and Assembly Members.
- A series of large staff engagement events at Barts Health
- Discussions with and presentations to Health and Wellbeing Boards and Overview and Scrutiny Committees
- Healthwatch Waltham Forest, Newham and Redbridge jointly hosted a large patient event on TSCL on 18 August, and are developing a report which will be fed in to the final case for change
- Wide clinical engagement programme to update clinicians, including GPs and doctors
- Presentations at CCG Governing Body meetings
- Public events, including attendance at open days and stands within hospitals

#### **4. Appendix**

Transforming Services, Changing Lives interim Case for Change