ADULTS AND HEALTH SELECT COMMITTEE



25 JANUARY 2018

SURREY HEARTLANDS SCRUTINY SUB-GROUP UPDATE

Purpose of report:

To provide the Committee with an update on developments in the Surrey Heartlands Sustainability and Transformation Partnership (STP) and scrutiny undertaken by the Sub-Group since it was established.

Introduction:

- 1. In December 2015, the Government asked local health and care organisations to work together across larger areas to plan and improve services for the next five years to deliver the NHS vision (also known as the Five Year Forward View). These partnerships are called Sustainability and Transformation Partnerships (STPs). These plans were expected to be ambitious, improving services for local residents to offer the very best care and treatments, whilst ensuring the plans are sustainable in the long term.
- The Surrey Heartlands STP covers the central and western parts of Surrey; those areas currently looked after by Surrey Downs, North West Surrey and Guildford and Waverley Clinical Commissioning Groups (CCGs).
- 3. A Sub-Group was formally established by the Adults and Health Select Committee in September 2017 to monitor the development of the Surrey Heartlands STP plans in 2017/18, including
 - proposals for the Epsom and St Helier estate;
 - stroke review plans for Surrey;
 - the approach to public engagement.
- 4. Membership of the Sub-Group was agreed as Ken Gulati, Sinead Mooney, Bill Chapman and John O'Reilly. It was agreed that the Members would meet quarterly with Surrey Heartlands officers and would report back to the Adults and Health Select Committee.
- 5. The Terms of Reference of the Sub-Group were approved by the Overview and Budget Scrutiny Committee at its meeting on 14 September 2017. These are attached at Annex 1.

6. The Sub-Group has met with officers on two occasions; 22 August 2017 and 3 January 2018. This report provides Members with an update on scrutiny of Surrey Heartlands STP carried out by the Sub-Group to date.

Epsom and St Helier Estate Proposals

- 7. The Sub-Group received a briefing on the approach that will be used to engage with public and patients on the plans for Epsom and St Helier University Hospitals NHS Trust (ESTH) from 2020 to 2030.
- 8. Members of the Sub-Group had the opportunity to review the proposed engagement materials and provide feedback. Members suggested some amendments be made to the documents which would provide clarity around what services would be changed and what this would entail, whilst emphasising that 85% of patients would see no change to where they receive their care.
- 9. Members heard that the main challenge faced by ESTH were poor buildings and grounds which need to be replaced and modernised in order to ensure they are fit for purpose in 2020 to 2030. Members toured two wards at Epsom Hospital to see the current facilities and to gain an understanding of what changes would be required in order to facilitate modern health care services in the future.

Stroke Services in Surrey

- The Chairman of the Adults and Health Select Committee met with officers from Guildford and Waverley CCG in August 2017 to discuss the review of Stroke Services in Surrey.
- 11. The stroke review had identified that there was a requirement for three Hyper-Acute Stroke Units (HASUs) in Surrey, with two located in the west and one in the east. Frimley's services were considered a fixed point as they also covered Berkshire and Hampshire. An options appraisal had identified Ashford and St Peter's Hospital (ASPH) as a preferred site for the second HASU, given the population profile and presence of vascular services at the hospital. The choice of this site was also supported by the national stroke expert panel.
- 12. As a result of a consultant resignation in October 2016, Royal Surrey County Hospital (RSCH) informed commissioners that they were unable to provide safe stroke care as of January 2017 when their consultant departed. An interim model was put in place which saw hyper acute services (up to 3 days) being delivered by Frimley, with the acute support (3-10 days) being provided at RSCH. This arrangement saw consultants working across both sites. Members noted that this met the minimum requirements of the South East Strategic Clinical Networks (SESCN) Stroke

Service Specification.

- 13. It was explained that the data and consultation feedback received had meant that a new proposal was being put forward to the CCG's committee in common. This would see the interim model essentially being retained. This proposal responded to local concerns about the accessibility of services.
- 14. Members queried what work had been undertaken to address concerns in respect to ambulance travel times. It was noted that SECAmb had an improvement plan in place and new leadership who had acknowledged the need to address issues. Members were satisfied that there were no specific concerns regarding the proposal and therefore asked for further communications to be shared following agreement of the final proposal.
- 15. Impact of the proposed model will be measurable within a 1-2 year timeframe and it is recommended that the Committee review Surrey's stroke services again at that point.

Approach to Public Engagement

- 16. Surrey Heartlands STP recently collaborated with Healthwatch Surrey to recruit "Citizen Ambassadors". This concept is to ensure local people can input into the development of services, ensuring their views are represented when proposed changes are being considered.
- 17. Members questioned how the STP was ensuring a representative view across the demographics when engaging with the public. Officers informed Members that the STP had created a panel of 1500 people, including patients, carers and public, representing all demographics, including typically hard to engage with age groups and commuters. A survey about the development of the mental health workstream was recently circulated to this panel, and the STP received 1500 responses within one week.
- In addition to the new public panel, the STP continues to hold regular stakeholder engagement events which are open to the public.

Integration

- 19. Surrey Heartlands STP has been awarded £80m of transformation funding, phased over the next four years. £15m of this funding is to be used in 2017/18. Members requested information about the types of projects that this £15m would be spent on and examples of how this fitted in with the STPs long term strategic plans.
- 20. £2m of the funding was allocated to deal with winter pressures. Whilst this was a current issue, officers were keen to highlight that this spend was not a reactive measure. Instead the funding in this area was used to deliver planned transformation projects which would help achieve the long term aims of the STP in being winter

- resilient, whilst having an immediate effect in helping with the winter pressures being experienced now.
- 21. The Sub-Group requested some details of examples of winter pressure projects that the funding had been used for. These included additional funding for reablement, increased funding to secure additional community beds, 8am-8pm GP provision in A&E departments and holding GP masterclasses to help with sustainable working.
- 22. £2.5m was allocated to further developing the care model to ensure joined up working across all partner organisations.
- 23. Members explored how timely discharge from hospital into social care is being addressed by the STP. Officers admitted that the targets for delayed transfers of care (DTOC) were high and were difficult to achieve in times of increased demand; however progress had been demonstrated in recent DTOC data.
- 24. The Sub-Group requested examples of specific projects that had assisted the timely discharge process. Members were informed that there was a focus on the "Discharge to Assess" concept; allowing patients to be assessed for their ongoing care needs in their own environment. Furthermore, this concept was also effective in reducing the number of readmissions within 30 days as a result of ensuring the correct package of care was in place from day one of discharge. Other initiatives include the red bag scheme and additional funding in continuing healthcare and nursing processes.
- 25. Members questioned the scale of Surrey Heartlands STP as it does not currently cover a large enough population to benefit from devolved specialised commissioning. Members were informed that the STP were using this as an opportunity to engage with Frimley STP and Sussex and East Surrey STPs. Members acknowledged that this would be a positive step in accruing benefits to all Surrey residents, not just the 85% that live within the Surrey Heartlands footprint.

Conclusions/ next steps:

- 26. The Sub-Group has scrutinised areas of Surrey Heartlands STP as currently outlined in the Sub-Group's Terms of Reference.
- 27. In order to ensure scrutiny of Surrey Heartlands STP remains relevant, Members of the Sub-Group were invited to make suggestions for future areas of focus and the following proposals were put forward by Members which have been incorporated into the revised Terms of Reference for the Sub-Group as detailed in Annex 1:
 - a. the integration of health and social care across the Surrey Heartlands footprint

- b. the impact of the wider determinants of health and the pressure that these put on health and social care services;
- c. Mental Health;
- d. measures to reduce health inequalities within the Surrey Heartlands Footprint
- 28. It has further been proposed that the delivery of Stroke Services remains a priority for the Sub-Group.
- 29. Members of the Sub-Group are satisfied with the progress made with the STP and will continue to monitor developments on a quarterly basis.

Recommendations:

- 30. The Committee is asked to:
 - a) acknowledge the progress to date of the Surrey Heartlands STP.
 - b) commend the STP for its preparedness and resilience in dealing with winter pressures.
 - c) review and agree the revised Terms of Reference of the Sub-Group (annex 1) incorporating future areas of focus for the Sub-Group over the next six months.

Next steps:

The Sub-Group will meet with Surrey Heartlands STP officers in April 2018 and will report back to Committee in July 2018.

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