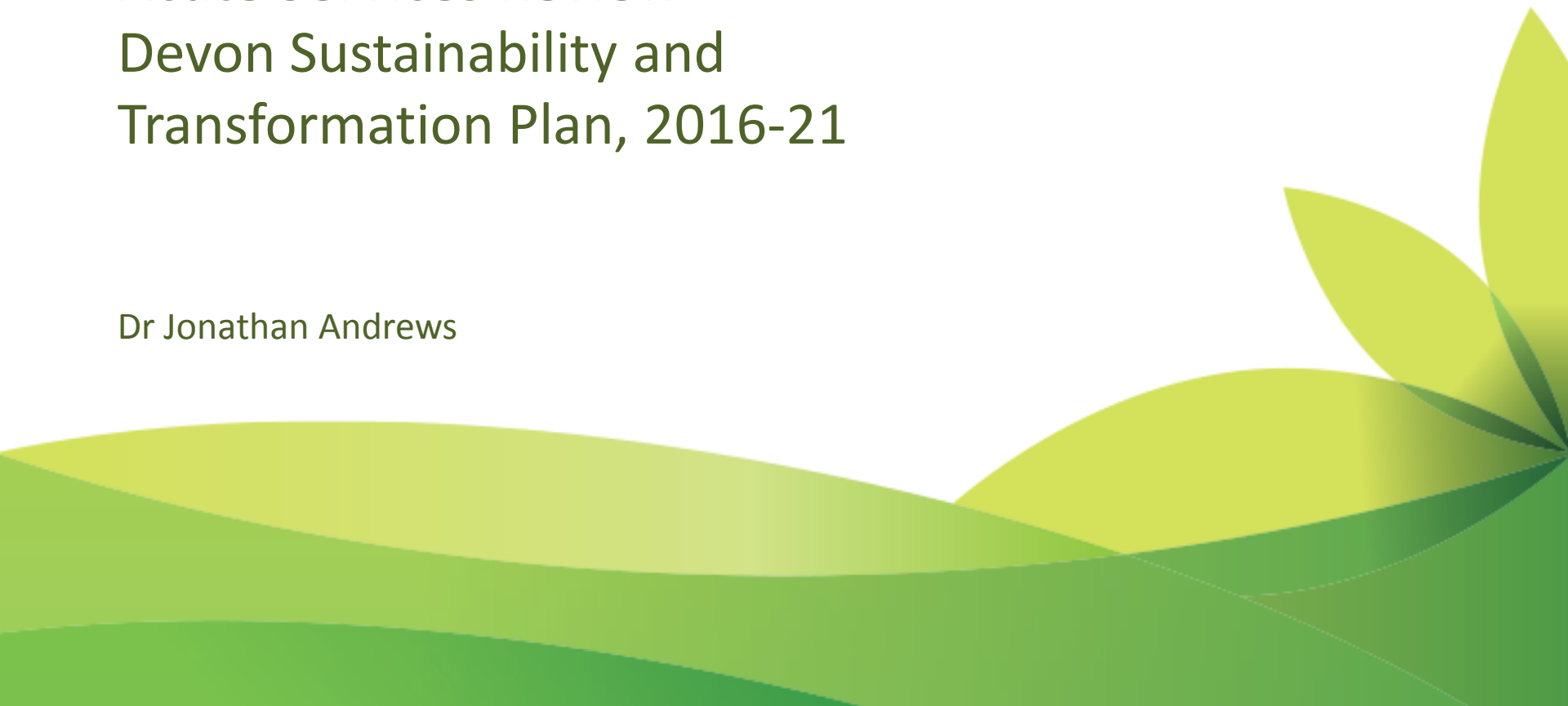




Acute Services Review

Devon Sustainability and Transformation Plan, 2016-21

Dr Jonathan Andrews



Case for change – why review our services?

Devon wide 'case for change' underpinning STP – specifically highlights concerns with regard to acute services:

Increased demand for treatment and care - longer waiting times

Current configuration of services designed for historical demand model

Ability to comply with rising standards, increasing need, new drugs, diagnostics, interventions

Fragility of current services – failure to delivery on key access and quality standards

Resilience and retention of work force, particularly at sub specialty level

Acute system in Devon costing more than funded levels

Some services are fragile currently, increasing the risk of providers being required to implement short term, unplanned change. There is therefore a risk to 'doing nothing'

Case for change – what will the review achieve?

- Improve inequalities in the health of the population of Devon through:



- Need to focus on improving service quality and sustainability in the interests of an equal standard of care for all in Devon
 - Address any ‘postcode lottery’ where some people wait longer than others
 - Ensure change is evidence based and that will result in improved clinical benefit and outcomes for patients
 - Ensure any reconfiguration of acute hospital care will maximise benefit of integration with primary and community health and social care, mental health, disability and children's care
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Process for each review

- Define scope (inclusions/exclusions)
 - Develop project mandate
 - Appoint chair of review (medical director and GP)
 - Appointment of small review team to support chair(s)
 - Stakeholder identification – initially via intelligence from chairs
 - Wider expressions of interest from provider and commissioner organisations in Devon
 - Work with LMC to ensure ‘provider’ GP representation
 - Work with Healthwatch to identify patient and service user representation
 - Voluntary/community/3rd sector organisation engagement
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Acute Services Review: Identification of priority areas

- STP wide clinical review of services which are not currently delivering best possible outcomes for people of Devon and are not cost effective when compared with other models of care
 - Medical Director review (all Acute Trusts in Devon) and identification of services where clinical sustainability was causing concern
 - Acute providers have performed a self assessment (summer 2016) of a set of quality standards relevant to the service they provide
 - STP wide 'Clinical Cabinet' review of summarised ratings from quality standards – consensus on three priority areas (these will be phase 1, but other services will be assessed for clinical priority in future)
 - Clinical cabinet concerns around fragility of services currently (necessity for providers to implement short term, unplanned change)
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Acute Service Review – overall management

- Senior Responsible Officer agreed via STP Collaborative Board and Delivery Executive Group (Mairead McAlinden, CEO T&SDFT)
 - Senior Clinical lead agreed via STP Collaborative Board and Delivery Executive Group (Phil Hughes – Medical Director, PHT)
 - Further managerial and programme management support across entire priority programme including communications and engagement support
 - Dedicated external support
 - Common review criteria – agreed by STP Programme Delivery Executive Group
 - Multidisciplinary clinical workshops to develop a clinical understanding of the changes needed, options for improving services and evaluating the options.
 - Workshops underpinned by refreshed quality standards data from each provider, activity, performance and workforce data and structured interviews with key clinical staff
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Acute Service Review -criteria

- **Safety:** delivers improved patient safety
 - **Quality and Outcome:** results in clinical benefit and improved outcome for the population, and that the treatment offered will be of proven benefit for the individual patient.
 - **Access:** maximises the ability of patients and carers to access the service
 - **Service sustainability:** results in improved service quality and sustainability and addresses known and/or imminent workforce challenges to the delivery of services both during and outside traditional working hours
 - **Training:** supports the effective training and development of future clinicians and care professionals.
 - **Cost effectiveness:** minimises the cost of service delivery relative to the alternatives.
 - **Patient Choice:** promotes patient ability to choose provider or treatment
 - **User experience:** delivers an improvement to the user experience
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Priority Review areas

Scope

Stroke & cardiovascular

- The objective of this review will be to recommend options for service models within which hyperacute stroke and stroke rehabilitation services are commissioned

Maternity, Paediatrics and Neonatology

- Acute maternity, paediatric and neonatal services will be reviewed together given the interdependencies between them
- Clinical assessment is that gynaecological services can be out of scope for this review though that view will be tested with the specialist contributors

Urgent & Emergency Care

- The objective of this review will be to recommend options for service models within which acute emergency services are commissioned
- Services included in this review will be:
 - Emergency department
 - Acute medical take
 - Acute surgical take (emergency surgery)
 - Interdependent areas

Each review will define a set of standards defining ‘best care in Devon’ which is supported by key stakeholders
