

## Update Briefing for:

### Joint Health Overview and Scrutiny Committee (Hampshire Together: Modernising our Hospitals and Health Services)

08 March 2021

**Report Authors:** Ruth Colburn-Jackson (Managing Director, North and Mid Hampshire – Hampshire and Isle of Wight Partnership of CCGs, West Hampshire CCG), Alex Whitfield (Chief Executive – Hampshire Hospitals NHS Foundation Trust)

#### Summary

This report provides an update on the progress of the *Hampshire Together: Modernising our Hospitals and Health Services* programme since December 2020, when the committee last met, as we prepare a business case and proposals for consultation.

In addition to this report, a presentation will be provided for members of the committee as part of the meeting.

#### Background

Hampshire Together is a programme that involves NHS organisations and local authorities across north and mid Hampshire (Alton, Andover, Basingstoke, Eastleigh, Winchester and the surrounding areas). It is being led by Hampshire and Isle of Wight Partnership of Clinical Commissioning Groups and West Hampshire Clinical Commissioning Group, in partnership with Hampshire Hospitals NHS Foundation Trust. It involves all organisations providing health and social care across the area working together to develop a health, wellbeing and care service so that everyone in north and mid Hampshire can access high-quality, timely and sustainable health care as close to home as possible.

The programme is looking at the best way to organise services to meet the population's changing health needs and to adapt the way some services are delivered so they can continue to meet best practice and clinical quality guidelines, and are sustainable for the long-term. To meet these challenges the local NHS has been exploring the possibility of centralising some of the most specialist hospital services for the sickest people on one site, rather than spread across two main sites (Basingstoke and Winchester) as they currently are.

Consolidating the most specialist services in one place would mean a better use of senior clinicians, who are currently spread too thinly across hospital sites. It would also mean clinical teams treat more patients with particular conditions and illnesses, helping to better maintain their specialist expertise and more consistently meet national clinical quality guidelines. Clinicians, who have led the thinking and design-work for how services could be organised in the future, have also been exploring the benefits of centralising all planned operations and procedures on to one of the sites, thus creating two centres of excellence for people in north and mid Hampshire: one for specialist services and one for planned operations and procedures. Importantly, the day-to-day hospital services that more people use more regularly – such as urgent care and treatment, scans and tests, outpatient services and others - would remain at both the existing hospital sites.

The programme also includes the potential for the construction of a brand-new hospital as part of the Government's New Hospital Programme. Hampshire Hospitals was named as one of the trusts chosen to receive capital funding as part of the Department of Health and Social Care's plan, which is designed to support 40 hospital building projects across the country between 2025 and 2030.

### **Progress since last meeting**

As discussed at the last meeting of the committee, public consultation on the proposals, is planned for later this year, subject to the MoHHS programme progressing through assurance processes with its regulator NHS England, and with the National Hospitals Programme led by the Department of Health and Social Care.

The decision to plan for public consultation later this year was taken following discussions with national partners at the Department of Health and Social Care and NHS England / Improvement. Holding consultation later in the year brings the programme into line with the wider national programme and had the additional benefit of reducing demands on staff at a time when services were under the most pressure due to the COVID-19 pandemic.

A constructive meeting was held with colleagues from the Department of Health and Social Care and NHS England in early February. The national team has held similar meetings with all of the projects on the New Hospital Programme, discussing where each has got to and the proposed next steps and looking to identify areas where the benefits of standardisation can be spread across all schemes for efficiency and speed of delivery of these proposed new construction programmes.

It was clear that the national team share our vision in terms of the digital opportunities presented by the New Hospital Programme and are keen to ensure that any new facility makes use of all the latest innovations.

The informal feedback received following the meeting was very positive and we are currently awaiting formal feedback, which we expect to help us clarify our timelines for the rest of the programme, including the assurance process we need to go through with our regulator, NHS England / Improvement, and public consultation.

Work on the Hampshire Together programme continues to run at a high pace. We have taken the opportunity to further develop the Pre-Consultation Business Case (PCBC), ensuring that it is as strong as possible ahead of submission to NHS England / Improvement as part of the assurance process.

Our programme of staff and public engagement has also continued. An online public survey asking people how they would like to receive information and provide feedback during public consultation was made available in mid-February and received more than 500 responses in its first week.

A programme of focus groups for NHS staff as well as targeted members of the community is also under way. In addition to further exploring how they would like to receive information and provide feedback during consultation, we are also taking the opportunity to explore views on the programme to date and understanding of the way health services are currently provided to help inform the development of information to support the consultation.

We have scheduled a virtual public meeting for the evening of 09 March, where the focus will be on setting out how health, and particularly hospital, services are currently operated and to reinforce and explain our case for change, as well as getting further information on the ways that people would like to receive information and provide feedback during consultation.

### **Next steps**

The PCBC has to go through Stage Two assurance with our regulator, NHS England / Improvement before being finalised and considered in full by North Hampshire Clinical Commissioning Group and West Hampshire Clinical Commissioning Group governing bodies in a 'decision to consult' meeting prior to the launch of public consultation.

### **Consultation**

We are planning for public consultation to take place later in 2021 and an updated consultation plan is available at Appendix 1, which we would welcome the committee's comments and feedback on before it is finalised.

As well as conducting a full public consultation on our proposals for change, we will also be seeking to consult directly with local authorities on our proposals via this Joint Health Overview and Scrutiny Committee. This is as per our Section 244 duty under the National Health Service Act 2006 (as amended by the Health and Social Care Act 2012), which requires NHS bodies to consult relevant local authority overview and scrutiny committees on any proposals for substantial variations or substantial developments of health services.

We would suggest a meeting midway through the consultation period to hear members' views, answer questions, and update the committee on the progress of the public consultation. We would then seek a further meeting at the end of the consultation period, once we have an independent report of the consultation findings to share with the committee. We would like to agree regular meetings to keep the committee updated through the next stage of our work and preparation of our 'decision-making business case', before the CCGs make a final decision on their proposals for change.

### **Recommendations**

The committee is asked to:

- (i) Note this update report.
- (ii) Request any information that they would like shared in advance of or as part of the next or future meetings
- (iii) Share comments and feedback on our plans for public consultation, considering whether the committee supports it as a plan for a full and meaningful public consultation
- (iv) Note that once the programme has been assured to proceed to consultation, we will discuss with JHOSC members the proposed date by which we would require the JHOSC to provide any comments on our proposals.

### **Appendices**

1. Strategic Consultation Plan