

REPORT TO:	HEALTH AND WELLBEING BOARD (CROYDON) 12 June 2013
AGENDA ITEM:	10
SUBJECT:	Better Services Better Value
BOARD SPONSOR:	Paula Swann, Chief Officer, NHS Croydon Clinical Commissioning Group
CORPORATE PRIORITY/POLICY CONTEXT: Health Service Reconfiguration	
FINANCIAL IMPACT: Service reconfiguration will have important consequences for Croydon CCG – please see Chapter 5 of the draft PCBC (http://www.bsbv.swlondon.nhs.uk/document-library/).	

1. RECOMMENDATIONS

This report recommends that the health and wellbeing board:

- 1.1 Note the contents of this report.

2. EXECUTIVE SUMMARY

- 2.1 Better Services, Better Value (“BSBV”) is the project to reform hospital and out of hospital services provided in South West London and Epsom.
- 2.2 Local doctors and nurses support the need for change and recommend that services should be configured and in some cases centralised. The recommendations seek to provide better outcomes for the population, whilst ensuring that services are clinically safe, sustainable and affordable.
- 2.3 There are 3 options to deliver the reconfigured services ranging from the (1) preferred, (2) alternative option and (3) least preferred option.
- 2.4 One of the options (option 3 – C2) will impact significantly on services delivered at Croydon Hospital Services.

3. DETAIL

- 3.1 The CCGs within the BSBV review will meet in mid-June to decide whether to consult on the proposals. If agreed the consultation would run over the

summer. The decision-making process will take place after consultation after consideration of responses.

- 3.2 There are a number of risks that impact on the deliverability of the BSBV programme.
- 3.3 It is essential that improvements in community services and out of hospital services are made and working well before any reconfiguration of services.

4. CONSULTATION

- 4.1 There has been considerable public engagement to date, with local clinicians holding in excess of 100 meetings to inform the development of BSBV.
- 4.2 A full 14 week public consultation is planned, dependent on approval from local CCGs and NHS England.
- 4.3 The BSBV communications team has developed the consultation plan with local Overview and Scrutiny Panels, local councilors, Ipsos Mori, the Consultation Institute and the Patient and Public Advisory Group.

5. SERVICE INTEGRATION

- 5.1 The programme requires out of hospital integration ensuring that more care is delivered in a joined up way in community settings to support people to manage their health so that less reliance is placed on hospital based services. There is a significant risk that the least preferred option (option 3) will impact unfavourably on the CCG's transformation and service integration strategy and financial improvement plan.

6. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

- 6.1 Refer to draft PCBC Appendix G – Detailed Financial Analysis (<http://www.bsbv.swlondon.nhs.uk/document-library>)

7. LEGAL CONSIDERATIONS

- 7.1 There are no legal implications arising from this report applicable to the HWBB.

8. HUMAN RESOURCES IMPACT

- 8.1 Refer to BSBV Appendix k – Workforce (<http://www.bsbv.swlondon.nhs.uk/document-library>)

9. EQUALITIES IMPACT

9.1 The Integrated Impact Assessment process has already published its' pre-scoping report, which provides an analysis of which protected groups within the BSBV geography are considered to have disproportionate need for the services under review and, therefore, are likely to experience positive and negative impacts to a disproportionate degree. Further detailed work will be undertaken during public consultation in order to understand the impact on these groups of the proposed options for configuration of services. In addition, each CCG will also carry out an equality analysis in line with duties under the Equality Act prior to making the decision to go out to consultation. .

10. ENVIRONMENTAL IMPACT

10.1 There are no specific environmental impact issues arising from this report.

11. CRIME AND DISORDER REDUCTION IMPACT

11.1 There is no specific impact on the reduction of crime and disorder arising from this report.

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BACKGROUND DOCUMENTS: Presentation attached.