

Healthier Communities Select Committee			
Title	Appendix 2: Commissioners Review – Kings College Hospital NHS Foundation Trust: Elective Service Move Proposals		
Author	Lewisham Clinical Commissioning Group	Item	6
Class	Part 1 (open)		16 July 2014

Recommendations

The Healthier Communities Select Committee is asked to note the following;

- The review undertaken by Lewisham Clinical Commissioning Group (LCCG) with regard to the potential impact on Lewisham patients and the agreed actions by King's College Hospital Foundation Trust (KCH).
- That LCCG is supportive of the proposals subject to agreed actions including mitigating any potential adverse impact on Lewisham patients.

1. Commissioner Review

2.1 Southwark Commissioning Group is the lead commissioner for KCH. However, Lewisham Clinical Commissioning Group (LCCG) is an associate commissioner and therefore the proposals were reviewed by LCCG along with other impacted the CCGs; Bromley, Southwark and Lambeth – in addition to the South East London CCG's Clinical Strategy Committee.

2.2 LCCG along with neighbouring CCGs considered the proposal and submitted a commissioner responses on 20th May 2014 and again on 15th June 2014. LCCG Clinical Directors along with its Strategy and Development Committee reviewed the proposals and considered the potential impact on Lewisham patients. There are 4 key areas for consideration raised by LCCG, which are consistent with neighbouring CCGs;

- A&E and Referral to Treatment (RTT) Performance: The proposals demonstrably recover the A&E and RTT performance concerns.
- Patient Choice & Transport: Extended choice is evident and that this made apparent to patients at the point of referral. There are equitable arrangements for patients and transport for Lewisham residents.
- Quality: The proposals must demonstrate how quality will be assured if patients choose to maintain their treatments at Denmark Hill.
- Commissioner Review: The proposals are time limited with articulated exit plans, which support a commissioner led review of the temporary use of the Orpington site by September 2015.

2.3 Based on activity levels for 2013/14 overall the numbers of affected Lewisham patients is 905 per annum. This compares to patients levels in Bromley of 1,500, Southwark 1,157 and Lambeth 957. The vast majority of Lewisham patients with regard to volumes again (predicated on 2013/14 activity levels) will be impacted by the transfer of non-complex cataract surgery from Denmark Hill and PRUH to QMH.

2.4 KCH has responded (05.06.14) to the joint commissioner concerns and as stated in section 2.2 commissioners submitted recommendations (13.06.14) recognising where assurances have been provided by the Trust;

A&E and RTT performance and quality improvement

1.1. It is considered that the proposed service moves will impact positively on the Trust's ability to secure the urgently required improvements in RTT and A&E performance, noting that current recovery plans assume the assessed positive impact of these proposed service moves on performance. It is also recognised that the plans support the wider transformation of services across the Trust's sites that will be vital in securing robust and resilient staffing and improved quality and outcomes for the future.

Choice and communication

1.2. Choice is extended in that the impact on patients of the proposed service moves is clearly quantified and understood and that the choice offer to patients will be clear and transparent. Consequently, KCH has provided the following assurances;

- A clear engagement and communication process with patients and GP referrers is planned with KCH committed to working with commissioners on this process.
- That the choice offer available to patients will be clearly communicated to GPs and patients, with patients choosing to remain at the DH site for their treatment able to do so.
- For all moves the KCH assessment is that travel times will either be improved or marginally affected for all.

Commissioner led review

1.3. KCH has recognised the need for the future longer term use of the Orpington site to be considered in the context of the development of the South East London Strategy and has committed to a commissioner led review of Orpington arrangements in September 2015 to support final decisions on the longer term use of the site to be implemented by October 2016.

2. Conclusions

3.1 There is an urgent need for KCH to implement a number of proposed internal service moves to support quality and performance improvement, the Trust's PRUH transformation programme, the optimal utilisation of the Trust's sites and the decompression of the PRUH and DH sites is recognised.

3.2 In implementing the proposed service moves KCH has committed to ensuring that patients will be offered clear choices and can choose to remain on the DH site for inpatient treatment if they wish. Communication and engagement mechanisms are being put in place to support the implementation of the service moves, noting the overall numbers of patients impacted by the moves is relatively small. It is therefore considered that, subject to appropriate communication and engagement processes being agreed, formal consultation on the service moves is not required.

3.3 Commissioners are assured that the proposed service moves retain flexibility for the longer-term use of the Orpington site to be reviewed and any required changes implemented.