

Appendix 33

(15/10/20)

In accordance with NHSE&I Guidance letters of support from neighbouring CCGs and other impacted commissioners are required as part of the Stage 2 Assurance process.

We have engaged for some time with all of our neighbouring CCGs, providing updates as our proposals developed and will continue to work closely with those CCGs who may be impacted. We have provided patient numbers by GP Practice to assist the identification of areas to focus our consultation communication. Furthermore, due to Coronavirus (COVID-19) there is greater emphasis (but not exclusively) on use of electronic channels to seek feedback as part of our consultation, so this will facilitate consultation feedback from impacted residents in neighbouring CCG areas.

The FFTF Programme team have been in contact with the following neighbouring CCGs:

- Bath and North East Somerset, Swindon and Wiltshire
- Bristol, North Somerset and South Gloucestershire
- Herefordshire and Worcestershire
- South Warwickshire
- Oxfordshire
- Monmouth (Aneurin Bevan Health Board)

As of 15/10/20 we have received letters from Bristol, North Somerset and South Gloucestershire, South Warwickshire, Oxfordshire and Herefordshire and Worcestershire CCGs and these are provided overleaf. We are liaising with the remaining CCGs to ensure letters are received in accordance with the NHSE&I post-Stage 2 requirements dated 10/09/20.

In addition to CCGs we have also engaged with NHS England Specialised Commissioning in respect of the ~ 115 patients travelling out of county who undergo various Interventional Radiology interventions. A statement from Specialised Commissioning is included.

In accordance with NHSE&I request we also include a letter from the Gloucestershire ICS to Gloucestershire CCG in support of these proposals.

Finally, the letter from NHSE&I confirming the proposals have met the Stage 2 Assurance process is also included.

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Accountable Officer
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11 September 2020

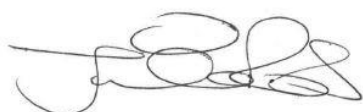
Dear Mary

Re: Gloucestershire's Fit for the Future Pre-Consultation Business Case

On behalf of Bristol North Somerset and South Gloucestershire CCG I can confirm that we support the reconfiguration of services within the Gloucestershire Fit for the Future programme. We understand this may impact a very small number of patients locally but recognise the need to ensure services can be delivered safely, robustly and within the workforce constraints which exist.

We note that you will be engaging with the BNSSG population in areas where there is a higher flow of patients across the CCG boundaries. We look forward to staying aligned on understanding the views of the population and deeper understanding of the impacts as you work through the PCBC and consultation process. We would also like to remain close to you as your thoughts develop on the 'centres of excellence' vision and ensure that this is aligned with the work in the BNSSG system on our tertiary services.

Yours sincerely



Julia Ross
Chief Executive

Private and Confidential

Mary Hutton
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17/08/2020

Dear Mary

Re: Gloucestershire's Fit for the Future Pre-Consultation Business Case

On behalf of South Warwickshire CCG I can confirm that we support the reconfiguration of services within the Gloucestershire Fit For The Future programme. We understand this may impact a small number of patients locally but recognise the need to ensure services can be delivered safely, robustly and within the workforce constraints which exist.

We are keen to ensure that the small numbers of South Warwickshire patients that do use services in Gloucestershire are able to contribute to the consultation and therefore would like to work with you to ensure that the consultation is promoted to the relevant practices and patients.

Yours sincerely



**Anna Hargrave
Chief Strategy Officer**



**Herefordshire and
Worcestershire**
Clinical Commissioning Group

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2nd September 2020

Micky Griffith
Programme Director – Fit for the Future
Gloucestershire Integrated Care system
Sanger House
Valiant Court
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Dear Micky

Fit for the Future – Letter of Support

Further to our correspondence, we confirm that we have received the information you have shared regarding the proposed changes within Gloucestershire ICS. In particular, we understand that your modelling would suggest that the impact on patients registered with practices within Herefordshire and Worcestershire who may be using your services is likely to be small.

Given the geographical proximity of our CCG's, particularly with regard residents in South Worcestershire, we will share the link to your consultation with our practices in the south of our patch, and encourage them to share the information with patients. We understand that as your consultation has been entirely virtual through this time, patients in Worcestershire will have access to all the same materials and opportunities to share their views as patients residing within your ICS.

We would endorse your ongoing efforts to communicate directly with patients who use your services, in particular with regard to clarifying the complex messaging that differentiates changes made as part of Covid response, and those proposed as part of Fit for the Future.

Yours sincerely,

Ruth Lemiech
Director of Strategy and Transformation
NHS Herefordshire and Worcestershire CCG

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Mark Walkingshaw
Deputy Accountable Officer/ Director of Commissioning
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21st September 2020

Dear Mark,

Re Gloucestershire's Fit for the Future Pre-Consultation Business Case

I am writing to confirm that the Gloucestershire Integrated Care System Executive and Board have had regular updates in relation to the development of the Fit for the Future service reconfiguration proposals. The ICS is in support of the proposed options for consultation.

The Board will receive updates during the consultation and will be part of the formal approval /signing off process for the Decision Making Business Case (DMBC).

With kind regards,



Mary Hutton
Gloucestershire ICS Lead

Deborah Lee
Chief Executive Officer
Gloucestershire Hospitals NHS Foundation Trust

Steve Sylvester
Director of Specialised Commissioning
and Health & Justice – South West
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25 September 2020

Dear Deborah

**Re NHS England & NHS Improvement Specialised Commissioning –
Gloucester Hospital Fit For The Future Business Case**

I write in response to the request for Commissioner Support for FFTF business case, with a specific focus on those areas under the Specialised Commissioning portfolio.

NHS England and NHS Improvement is committed to working with providers and systems to develop sustainable services that support the needs of local populations. It is however known, that for a range of Specialised Services, the volumes are relatively small. Therefore, the need for robust clinical, financial and governance arrangements are paramount, sometimes this is required through formal partnership arrangements across providers.

I detail below our position at each service area, although support does come with some clinical and organisational conditions to ensure patient safety and service resilience.

Trans-arterial uterine fibroid embolization – This case is supported; however, it is noted that this service is currently being provided by a single-handed clinician. Our support is dependent upon a formal joint working arrangement between yourselves and that of Oxford. Our concern is largely because you have a single-handed practitioner, therefore there is a risk in relation to service continuity and resilience. The need for this joint working arrangement can be reviewed in the future.



Liver tumour ablation - We are supportive of the Trust developing these services locally but *initially* under a sub-contractual arrangement with the current providers, we note the good working relationships already established and their support for you developing a service from QEH. We are committed that once the service becomes fully established, we can re-look to see if the sub-contractual approach is the right one going forward.

Cryo ablation of Lesion of the kidney - We are supportive of the Trust developing this service locally but *initially* under a sub-contractual arrangement with NBT or QEH, we note the good working relationships already established. We are committed that once the service becomes fully established, we can re-look to see if the sub-contractual approach is the right one going forward.

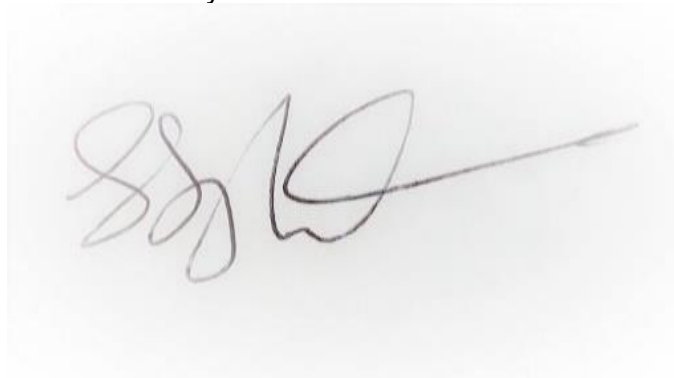
Prevention of post thrombotic syndrome - At this stage we would wish to work with you further on this proposed development and will be happy to do so through 2021/22. We will need to seek national guidance to support us with these discussions. We note the number of cases and financial values are relatively small so this should not have a material impact upon your business case.

It is anticipated that next financial year, 2021/22, the ability for NHS England and NHS Improvement, as a commissioner, to move funding to support populations should improve. Regional NHSE/I teams should have the budgets for their population on a usage basis, therefore the ability for the Regional team to enact some of the changes outlined above going forward is anticipated to be easier.

I would like to thank you and your team for providing the relevant information to support our review and enable us to provide our support as outlined above.

With best wishes.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Steve Sylvester', is written on a light-colored background.

Steve Sylvester
Director of Specialised Commissioning and Health & Justice - South West

Elizabeth O'Mahony
Regional Director South West
NHS England and NHS Improvement
South West House
Blackbrook Park Avenue
Taunton
TA1 2PX

7 October 2020

Mary Hutton
CCG Accountable Officer &
One Gloucestershire ICS Lead

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Via email: mary.hutton1@nhs.net

Dear Mary

Stage 2 Assurance of the Gloucestershire Centres of Excellence (CoEx) Proposals

My thanks to you and the CoEx team for the extensive work on the CoEx Pre-Consultation Business Case and the constructive manner in which you have addressed the points arising from discussions with our SW service reconfiguration assurance panel on 3 September and then the follow-up meeting on 1 October 2020.

Statement of Assurance

Following consideration of the evidence presented and the discussion at the assurance meetings on 10 August, 27 August, 3 September and 1 October 2020, it is concluded that this scheme is Fully Assured against the four Key Tests, and the Finance and Best Practice requirements:

Test	Panel finding
Test 1 - Strong Public & Patient Engagement / Stakeholder Engagement	Fully Assured
Test 2 - Consistency with current & prospective need for Patient Choice	Fully Assured
Test 3 - Clear Clinical Evidence Base	Fully Assured
Test 4 - Support from Clinical Commissioners	Fully Assured
Test 5 - NHS Beds Test	Not Applicable***
Financial Assurance	Fully Assured
Implementation Plan	Fully Assured

****Note: At the Stage 2 Panel Meeting on 3 September, Gloucestershire ICS confirmed that there is no overall change in hospital bed numbers in their CoEx proposals. As a result of this it was agreed that the NHS Beds Test is Not Applicable in relation to the CoEx proposals.*

There has been extensive independent expert review of the FFtF CoEx proposals by the SW Clinical Senate Clinical Review Panel (CRP). The CRP Report was issued on 20 August 2020. I understand that at the Stage 2 follow up meeting on 1 October, Gloucestershire colleagues shared their appreciation for the Senate's further support through their additional independent clinical review of the colorectal staffing model.

As a result, the GHFT Medical Director and the FFtF team confirmed their confidence in the safety and deliverability of the two options for colorectal proposals - either centralising elective colorectal to CGH or to GRH.

The final PCBC is due to be reviewed and approved by GHFT Board and the GCCG Governing Body on 8 October and the considerations will include:

- The actions taken in response to the CRP's feedback, especially in respect to vascular and colorectal.
- The legal advice received by the team confirming that no issues have been identified about moving forward to consultation.

For the avoidance of doubt, my agreement to proceed to public consultation does not constitute approval or sign-off for:

- Capital expenditure or confirmation of capital availability. This is a particularly significant point given the constrained national capital funding position.
- Control totals for the trusts or surplus/deficit for the CCG for future years.
- Any other funding beyond routine allocations

I wish you and colleagues every success in taking forward these proposals.

Yours sincerely



Elizabeth O'Mahony
Regional Director South West

cc: Glos ICS:

Deborah Lee
Ellen Rule
Micky Griffith
Mark Pietroni
Anthony Dallimore
Becky Parish
Karen Johnson
Catherine Leech

NHSE/I:

Rachel Pearce
Laura Nicholas
Christina Button
David Halpin
Ellie Devine
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24 September 2020

Mary Hutton
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Dear Mary

Re: Gloucestershire's Fit for the Future Pre-Consultation Business Case

As Chair of the Oxfordshire A&E Delivery Board I can confirm that we support the reconfiguration of services within the Gloucestershire Fit for the Future programme. We understand this may impact a small number of patients locally but recognise the need to ensure services can be delivered safely, sustainably and within the workforce constraints which exist.

We note that you will be engaging with the population in areas where there is a higher flow of patients across the CCG boundaries. We look forward to hearing the views of the population and gaining a deeper understanding of the impacts as you work through the PCBC and consultation process.

Yours sincerely

Dr Bruno Holthof MD PhD MBA
Chief Executive Officer