



**Dartford Gravesham
and Swanley**
Clinical Commissioning Group

Improving NHS urgent care services in Dartford, Gravesham and Swanley

Presentation of the decision making business case and the
Clinical Commissioning Group's Governing Body decision
regarding the Urgent Treatment Centre model

Prepared for the Bexley and Kent Urgent Care Review
Joint Health Overview and Scrutiny Committee

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1 Introduction

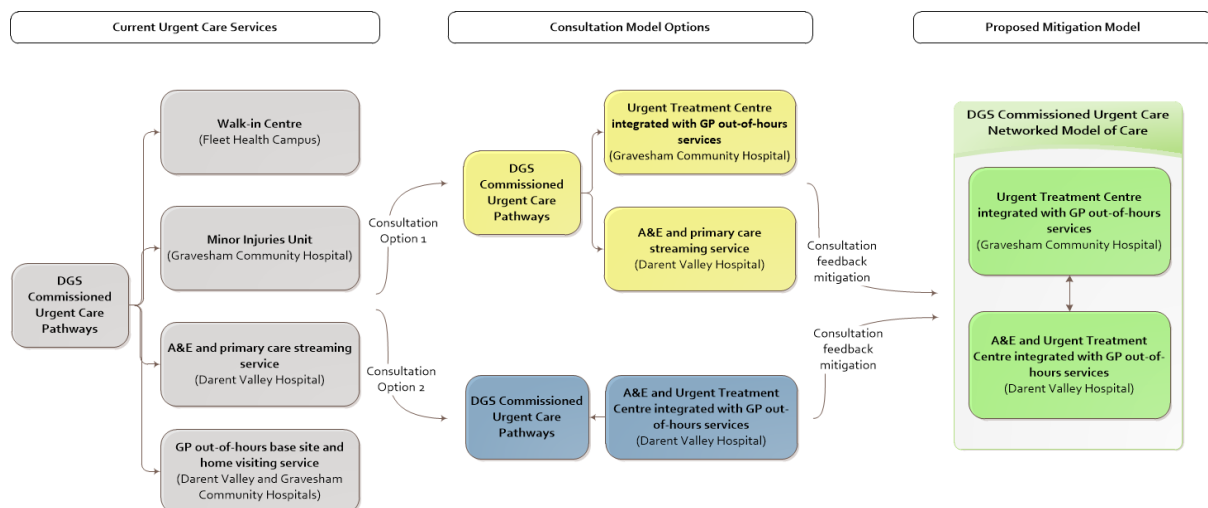
- 1.1 This update has been prepared for the Bexley and Kent Urgent Care Review Joint Health Overview and Scrutiny Overview Committee (JHOSC) by Dartford, Gravesham and Swanley Clinical Commissioning Group (DGS CCG).
- 1.2 The Committee is presented with the urgent care review decision making business case, formed following the completion of the 12 week full public consultation regarding potential site options for a future Urgent Treatment Centre within the DGS CCG's boundary.
- 1.3 The decision making business case was considered by the DGS CCG Governing Body on 16 January 2020 at an extra-ordinary Governing Body meeting held in public.
- 1.4 The Governing Body approved the model recommended in the decision making business case for a networked urgent care services model with two linked Urgent Treatment Centres, one at Gravesend Community Hospital, and one co-located with A&E at Darent Valley Hospital.
- 1.5 This update is intended to support discussion between the CCG and the JHOSC regarding the CCG's decision prior to this Committee making recommendations to both the Kent Health Overview and Scrutiny Committee on 29 January 2020, and the Bexley Communities Overview and Scrutiny Committee on 5 February 2020.

2 The Decision Making Business Case

- 2.1 The decision making business case sets out the information and recommendations for the CCG's Governing Body to make informed decisions about the future configuration and siting of urgent care services in Dartford, Gravesham and Swanley.
- 2.2 Included in the document is a summary of the case for change and the urgent care review process as outlined in the pre-consultation business case.
- 2.3 The decision making business case provides an analysis of the feedback received from the public consultation, including the intensive engagement exercise with Bexley residents.
- 2.4 The CCG received an unprecedented number of survey responses (online and hard copy), with 16,474 surveys returned, and over 25,000 free-text responses received.
- 2.5 The consultation responses, analysed by an independent third party organisation, were considered by both the DGS Governing Body, and the Kent Health Overview Scrutiny Committee, and there was unanimous agreement that the CCG had met its statutory responsibility regarding the public consultation.
- 2.6 Bexley Communities Overview and Scrutiny Committee, made a formal decision on 16 October 2019, that the DGS CCG urgent care proposals represented a significant variation to the Bexley

population. As this was close to the end of the public consultation period it was not possible to plan additional formal engagement with Bexley residents before the end of the consultation period. An intensive engagement exercise with Bexley residents and patients using Bexley urgent care services took place after the period of purdah was lifted in December 2019 – January 2020. These engagement activities, and the feedback received, have been analysed by the same independent third party organisation and form part of the decision making business case.

2.7 The decision making business case recommends how the proposed site options could be adjusted to best mitigate the concerns raised by local people and stakeholders. **It is recommended that these issues may be best mitigated by implementing a networked urgent care services model with two linked Urgent Treatment Centres, one at Gravesend Community Hospital, and one co-located with A&E at Darent Valley Hospital.**



2.8 The case suggests a phased approach to implementation to ensure the networked model of care and/or service specification(s) meet the needs of the local population and can be delivered in a safe and sustainable way.

2.9 The ambition is to implement the new Urgent Treatment Centres as quickly as possible, in line with current contract expiry dates, whilst ensuring that quality and patient safety are not compromised.

2.10 Based on the financial modelling the networked model of urgent care will be supported by budget commitment that has a further 2% contingency assigned to it, and is profiled in line with the phased implementation approach.

3 The Decision of the CCG Governing Body

- 3.1 The DGS CCG Governing Body considered the decision making business case on 16 January 2020 at an extra-ordinary Governing Body meeting held in public.
- 3.2 The decisions of the DGS CCG Governing Body are as follows:
 - 3.2.1 **APPROVED** - the implementation of the mitigated model of networked urgent care services with two linked Urgent Treatment Centres, one at Gravesham Community Hospital and one by Darent Valley Hospital (co-located with A&E) by the end of June 2020, as set out in the decision making business case
 - 3.2.2 **AGREED** - further work on the detailed networked model, service specification(s) and procurement process, as identified in the key implementation and programme plan in the decision making business case, be undertaken over the coming months and refined in collaboration with the current providers of urgent care services and other key partners
 - 3.2.3 **AGREED** - that the proposed networked model of urgent care is supported by a budget commitment that has a further 2% contingency assigned to it, and is profiled in line with the phased implementation approach.
- 3.3 The Governing Body also agreed on a number of actions to be incorporated in the phased implementation of the networked model, these included (but were not limited to):
 - 3.3.1 The establishment of a Clinical Reference Group to consider the development of a robust clinical governance process ensuring the networked model of care provides a service that is both safe and of high quality across two sites. Ongoing review of clinical governance will be key to the networked model of care.
 - 3.3.2 A communications and engagement plan to be developed to address the concerns raised during the public consultation, and to support the phased implementation approach.

4 Summary

- 4.1 This update and decision making business case regarding the future configuration of urgent care services within the DGS CCG boundary are presented to the Committee following consideration by the DGS CCG Governing Body on 16 January 2020.
- 4.2 The CCG's Governing Body approved the model recommended in the decision making business case for a networked urgent care services model with two linked Urgent Treatment Centres, one at Gravesend Community Hospital, and one co-located with A&E at Darent Valley Hospital.

- 4.3 This briefing is intended to support discussion between the CCG and the JHOSC regarding the CCG's decision prior to this Committee making recommendations to both the Kent Health Overview and Scrutiny Committee and the Bexley Communities Overview and Scrutiny Committee.