Response to feedback on StF consultation from JOINT EAST BERKSHIRE HOSC

Ref	Feedback	Our response
1.	Having reviewed the document, it is clear that the programme is primarily focusing on Heatherwood and Wexham Park Foundation Trust (H&WPT), and therefore the title of the document in referring to "Healthcare in East Berkshire" is misleading. The proposals, as a whole, are not strategic, do not provide any significant changes to the provision of healthcare, and reflect something of the status quo, which we had been led to believe was not a viable option. Connected to this, we believe that more detail of how other public and private health service providers neighbouring facilities, including those at Frimley Park and the Royal Berkshire, fit within these proposals is required.	These proposals are one part of the overall Shaping the Future Programme. The four proposals we are now planning to formally consult on are specific service changes that we are ready to discuss with local people. The overall Shaping the Future programme involves developing clinical models of care and working locally to develop changes in services that go well beyond these specific proposals. As part of this, the Bracknell and Ascot CCG is in the process of developing an integrated acute sector workstream where it is inviting all its acute providers to work with it to shape services. We propose to make it more explicit in the consultation that we are focussed on a relatively small number of changes that are important for some specific services currently provided by the Heatherwood and Wexham Park NHSFT at Heatherwood. The "substantial" service changes on which we are consulting in this particular consultation are focussed on services provided by Heatherwood and Wexham Park NHSFT - and we will make this clearer. Our wider planning processes will include all key providers when relevant. It is true that in 2011 our analysis was that it was likely we needed to look at closing hospital sites. However, the public and clinicians were strongly opposed to this and more detailed work since then has made it clear that this is not the right way to address our deficit and CCGs and our provider Trusts are identifying important functions for all our key hospitals.

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2.	We are deeply concerned that there is a complete lack of detail on the financial model. The JEBHOSC recognised the significant development required at all three of the primary sites in East Berkshire (Wexham Park, Heatherwood and Bracknell), alongside the Community Health teams, yet there is no clear understanding of how the financial investment to meet these requirements will be settled. A fundamental element of this is the sale of land at the Heatherwood site, of which much more information is needed on who holds the land and what covenants exists and how these impact on any proposals, specifically whether this can realistically deliver the funding required for the development of H&WPT on time. In addition, the JEBHOSC would seek confirmation from the NHS that a portion of currently unused land Heatherwood will not be included in the sale in order to support any future healthcare needs at the site.	The pre-consultation engagement Vision document was intended to be a high level presentation of our ideas, and naturally did not include significant detail on some areas. In our engagement document we tried to cover all of the plans we have affecting Heatherwood Hospital so that people could understand what the changes meant as a whole. This included the improved elective hospital and related land transactions as these are plans the Trust is actively pursuing. However, it is not a substantial service change as the proposal for the hospital is not moving significant services away from the site. The Trust is exploring the detail of how it will deliver the new hospital under the constituted programme board, and Stakeholder Reference Groups that have CCGs and Local Authorities as members and the issues you identify will all be tackled by the Trust and that Board. The Trust is the freehold owner of the site and details about its use will be discussed and examined through the Groups described above. However, these plans do not form part of the formal consultation, and we are not intending to provide significant detail on them within the consultation.
3.	We also feel that the plans are missing details of the anticipated benefits realisation plan, which we feel is fundamental to allowing a reasoned judgement to be made on the proposals.	We are including benefit realisation plans in our business case for the consultation which will be available as part of the consultation.

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4.	We will also add that we feel that the proposals would have the effect of committing the new Clinical Commissioning Groups to contracts which may hinder their future work towards improving competition and patient choice.	We have no intention of restricting patient choice and under the NHS financial regime money will inevitably follow patient flows. It is true that the three CCGs have made a commitment through a Memorandum of Understanding to provide temporary support to the Heatherwood and Wexham Park NHS Foundation Trust to help it regain a stable financial footing. We are confident that local people support the CCGs in their desire to ensure we retain the Trust as key provider of local healthcare services in the area, and that we should be giving it the temporary support needed to ensure this. The biggest reduction in local choice possible would take place if this was not done. The Memorandum does not restrict patient choice and we fully expect that patients, in consultation with their physicians, will be choosing to use a number of different acute providers
5.	JEBHOSC is very disappointed that the document did not provide sufficient information for them to fully respond to the questions posed. In particular, greater clarity is needed about the future provision of rehabilitation beds. The JEBHOSC understands that there will be a provision held at Heatherwood but this is not clearly articulated in the document, nor is how rehabilitation beds at the Community Hospitals will effectively meet requirements. The JEBHOSC asks that detailed information is provided in the main consultation document, which gives exact provision numbers.	We have not indicated that in the future there will be rehabilitation beds at Heatherwood and we will be very clear in the public consultation documents that our proposals would close the stroke and general rehabilitation beds at Heatherwood. The rationale for this closure is not that the patients would go to other community hospitals, but that we will reinvest the resources that were paying for patients to stay in hospital into community based services that will allow patients to be cared for at home. We are confident that this will mean in the future that there is significant reduction in the number of people staying too long in hospital. We are therefore not providing a detailed analysis of community hospital bed numbers. What we will do is describe resource we are putting in place which will deliver the reduction we need to enable the closure of beds at Heatherwood.

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6.	Following the 'Right Care Right Place' major consultation in 2007/08, Health Service Commissioners committed to providing the 'Healthspace' in Bracknell Forest. Despite that promise and funds having been allotted to its creation some years ago, the document proposes consulting afresh on whether it is a good idea. We do not see any case for this to be included in the consultation. Instead, efforts need to be concentrated on the delivery of the Healthspace, which is long overdue.	This is primarily a matter of presentation – and we quite agree that the 'Healthspace' has been long planned and agreed. The critical point is that when those plans were first developed it was not clear that it would result in a better and more financially viable service if the full MIU at Heatherwood was integrated into the Urgent Care Centre within the 'Healthspace'. As you will see in the consultation we are now making it clearer that the consultation is focussed on the aspect of moving the MIU services from Heatherwood to Bracknell.
7.	The JEBHOSC also feels that the reference to maternity services fails to fully show how patients' preferences will be met. It also fails to indicate how staff capacity will be ensured, in what is already a difficult national picture.	We believe we have shown that patients will be able to choose any of a) obstetric led services in any of the three major local acute hospitals b) midwife led units based alongside those obstetric services but very much with the non-medical ethos that makes people want midwife led services c) midwife led births at home We would like to know what additional information you require. In a challenging national climate for the numbers of midwives it would be very difficult to demonstrate definitively how staff capacity would be ensured. However, all our local providers are committed to policies of recruitment and retention which will ensure they attract enough of the best midwives. What we are certain of is that in that challenging climate is not right to keep open a unit which is not well used.

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8.	The JEBHOSC would like to see more information in the main consultation document on what transport provisions will be put in place to support residents with mobility issues when they may need to travel further to receive services in the future; as well as how the capacity to the Ambulance Service will be taken into consideration with the potential of a greater number of residents than currently requiring transportation to facilities at Frimley Park and the Royal Berkshire.	We will continue to discuss opportunities to improve transport with local councils for all of our hospital sites. However, we do not think any of the changes will result in large numbers of people needing to travel significantly further and this is evidenced by the analysis we are including in the consultation. Most of the proposals will reduce travel, particularly where they are to provide support in people's own homes. We do not expect greater number of residents to require transportation to Frimley Park and Royal Berkshire as a result of these proposals. If anything we expect the Urgent Care Centre to reduce the number of those journeys. Overall we expect the proposals together will reduce the number of patients needing to travel to Wexham Park hospital.
9.	The JEBHOSC would like to see details of how the engagement of the public will be undertaken during the consultation process. The Committee welcomed the public engagement that has been undertaken during the pre-consultation, but questioned how well these events had been advertised. The JEBHOSC requests details of the Communication Plan that the NHS will be using during this period.	We welcome the chance to discuss this at the meeting with you on 28 August, and your views will influence our approach.
10.	In addition to the above, the JEBHOSC also asks that the PCT provide confirmation as to who will be taking the Shaping the Future proposals forward after the PCT is abolished in April 2013.	This will primarily be the responsibility of the local Clinical Commissioning Groups in east Berkshire who have agreed to work together on Shaping the Future.