

Joint Health Overview and Scrutiny Committee

The South Yorkshire and Bassetlaw Integrated Care System and potential areas of scrutiny

1. Introduction

The South Yorkshire and Bassetlaw Integrated Care System has a shared responsibility for the way health and care services are run and delivered to the 1.5 million people in the region. Made up of health and care organisations, it has more local ownership over local services to ensure the continued provision of services that our populations really need and deserve.

Working with the growing partnerships in each of the 'places' within the region, the ICS's aim is to:

- Support the coordination of services, with a particular focus on those at risk of developing acute illness and being hospitalised
- Provide more care in a community- and home-based setting, including in partnership with council social care, and the voluntary and community sector
- Ensure a greater focus on population health and preventing ill health
- Allow systems to take collective responsibility for how they best use resources to improve health results and quality of care, including through agreed cross-system spending totals

The ICS does not replace any legal, or statutory, responsibilities of any of the partner organisations. It is simply an agreement to work together better. The partnership includes:

Commissioners:

- NHS Bassetlaw Clinical Commissioning Group
- NHS Barnsley Clinical Commissioning Group
- NHS England
- NHS Doncaster Clinical Commissioning Group
- NHS Rotherham Clinical Commissioning Group
- NHS Sheffield Clinical Commissioning Group

Healthcare providers

- Barnsley Hospital NHS Foundation Trust
- Chesterfield Royal Hospital NHS Foundation Trust
- Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust
- Sheffield Children's Hospital NHS Foundation Trust
- Sheffield Teaching Hospitals NHS Foundation Trust
- The Rotherham NHS Foundation Trust
- Sheffield Health and Social Care NHS Foundation Trust
- Rotherham, Doncaster, South Humber NHS Foundation Trust
- Yorkshire Ambulance Service NHS Trust

Health Regulator, Assurer, Education and Training:

- NHS England

- NHS Improvement
- Health Education England
- Public Health England

Local Authorities:

- Barnsley Metropolitan Borough Council
- Doncaster Metropolitan Borough Council
- Nottinghamshire County Council / Bassetlaw District Council
- Rotherham Metropolitan Borough Council
- Sheffield City Council

2. Areas we are working on:

There are 15 areas of focus:

- Primary care
- Urgent and emergency care
- Cancer
- Mental health and learning disabilities
- Living well and prevention
- Elective and diagnostics
- Children's and maternity
- Digital and IT
- Medicines optimisation
- Workforce
- Corporate services
- One public estate
- Finance
- Communications and engagement
- Leadership and organisational development

And two reviews:

- Hospital Services Review
- Future of commissioning

The Hospital Services Review, which was carried out independently, made a series of recommendations in a report recently published. The JHOSC was updated on the findings in June 2018.

The review team spent ten months looking closely at hospital data, patient outcomes and experience, had in-depth conversations with the staff who run the services, the patients who use them and also the wider public.

The services reviewed were:

- Urgent and emergency care
- Acute stroke (including rehabilitation and early supported discharge)
- Maternity
- Care for the acutely ill child
- Gastroenterology and endoscopy

The Report made several recommendations:

- The majority of services should remain in local hospitals
- All seven emergency departments should remain
- Hospitals should develop, “networks of care” with each one taking responsibility for one of the reviewed services
- There should be an expansion of services for children in the community and short stay units, meaning less need for longer stay inpatient wards and partners should consider further work to think about a small reduction in the number of inpatient paediatric units
- Women should have more choice over their maternity care and healthcare partners should explore further options for developing maternity care in the community and at home
- A Health and Care Institute and an Innovation Hub should be developed, linked with universities, colleges and schools to develop and support the workforce while also researching new developments and technologies

3. Areas of work the JHOSC will want to scrutinise

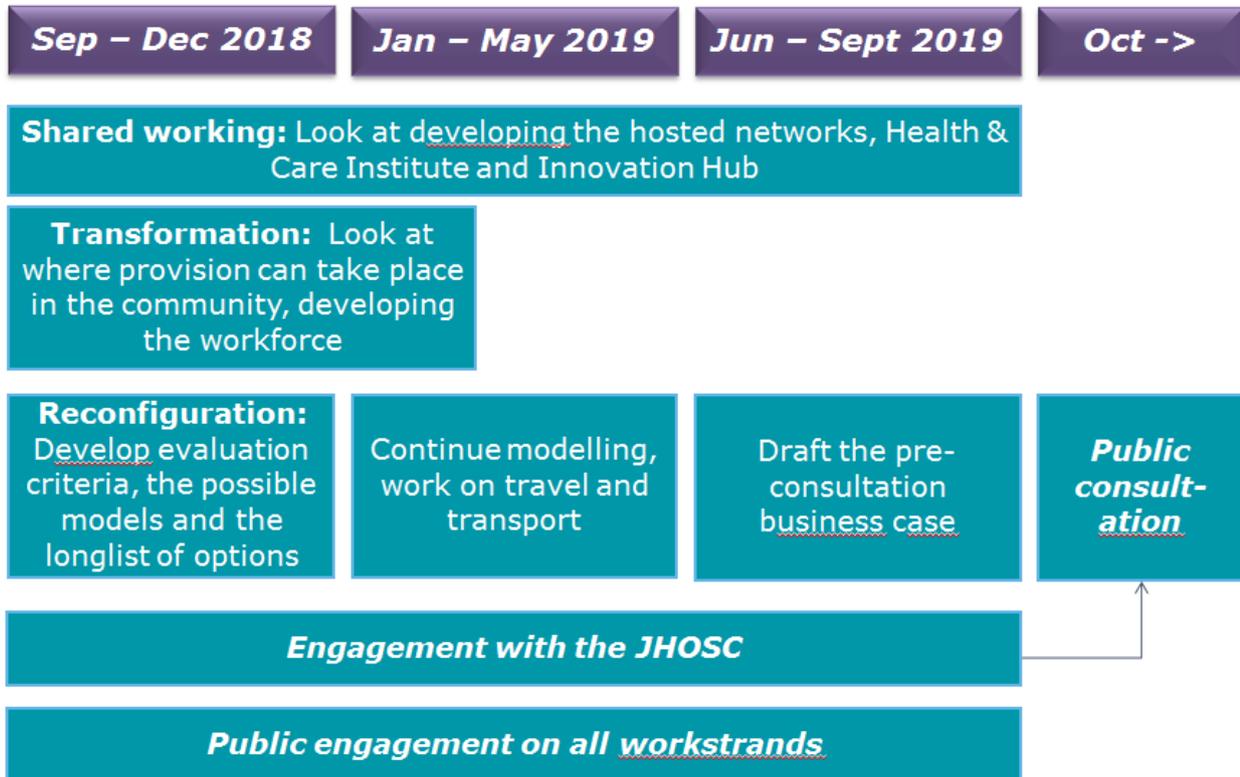
The recommendations within the Hospital Services Review focus on transformation and, if agreed, some reconfiguration across Barnsley, Bassetlaw, Doncaster, Rotherham and Sheffield. The services that members of the JHOSC will want to be kept fully abreast of and where public consultation might be needed are:

- **Maternity**, specifically any proposals that look at developing maternity care in the community and at home which could lead to a change in the number of consultant led units in the region
- **Care for the acutely ill child**, specifically any proposals that look at a small reduction in the number of inpatient paediatric units in the region
- **Acute stroke**, specifically any proposals that look to standardise rehabilitation access and service offer across the region
- **Gastroenterology**, specifically any proposals to reduce the number of sites where overnight and weekend emergency gastrointestinal bleeds are treated

If all Boards and Governing Bodies of the partners in the ICS agree that the Report recommendations should be taken forward, a next phase of ‘modelling’ how services could be reconfigured across the hospitals in the region in the future would take place. At the conclusion of this phase, options for how the above services could be delivered in future will be clear. This may or may not have implications for elective services and the JHOSC will be kept fully up to date once the modelling work is complete.

3.1 Timescale

The following timeline is indicative and subject to change.



4. Conclusion

The JHOSC is invited to comment and give their views on the areas of scrutiny and the indicative timeline and to make recommendations or suggestions on how members would like to be kept involved and updated during the next phase.