

Appendix 14 - BNSSG Stroke Programme – Partner Organisation Letters of Support

Version: 0.4 Date: Feb 2021



1. Introduction

The BNSSG Stroke Programme has been developed and managed collaboratively across Healthier Together partner organisations.

Local authorities have not been asked to provide specific letters of support. Assurance and agreement has been provided as part of the Healthier Together Executive Group and associated governance process. Therefore Bristol, North Somerset and South Gloucestershire local authorities have inputted to the development of the clinical model.

The Healthier Together Executive Group has provided support to the proposals, shown in section 2.1.

No.	Organisation / Group
2.1	Healthier Together Executive Group

NHSEI require letters of support to the proposals as set out in the Pre Consultation Business Case (PCBC) from all of the affected health providers to pass Stage 2 assurance. Letters have been provided from the following organisations:

No.	Organisation / Group
2.2	North Bristol Trust (NBT)
2.3	University of Bristol and Weston Trust (UHBW)
2.4	Sirona Care & Health
2.5	South West Ambulance Service Trust (SWAST)
2.6	Bristol, North Somerset, South Gloucestershire CCG (BNSSG CCG)
2.7	NHSE Specialised Commissioning
2.8	OneCare

The following letters of support have been received from partner organisations outside of BNSSG, where there is an expected impact:

No.	Organisation
3.1	Somerset Foundation Trust
3.2	Somerset CCG



2. BNSSG Letters of Support

2.1 Healthier Together Executive Group



Healthier Together Level 4 South Plaza Marlborough Street Bristol, BS1 3NX Tel: 0117 900 2583

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To:

Dr Chris Burton, Medical Director, North Bristol NHS Trust Rebecca Dunn, Deputy Director of Transformation, BNSSG CCG

Sent by Email: Rebecca.dunn8@nhs.net; Chris.burton@nbt.nhs.uk

23rd February 2021

Dear Chris and Rebecca,

Support for the BNSSG Stroke Services Reconfiguration

We are writing on behalf of the Healthier Together Executive Group following the review of the BNSSG Stroke Programme's proposals for service reconfiguration. The proposals were considered in detail at Healthier Together Executive Group meetings on 18th December 2020, 14th January and 5th February 2021. They have also been considered through the governance processes of the Healthier Together partner organisations, who I understand to have provided their own organisational support to the programme.

We are therefore pleased to confirm the support of the Healthier Together Executive Group to the proposals that are put forward. We understand that the next steps will involve consultation with the public on the options associated with the new clinical model. The Healthier Together Partners will look forward to being involved in this, and in the next phase of work, that will enable a Decision Making Business Case to be developed.

Yours sincerely,

Julia Ross

Joint STP Lead Executive and Chief Executive of Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group

Robert Woolley

Pacholles

Joint STP Lead Executive and Chief Executive of University Hospitals Bristol and Weston NHS Foundation Trust

Respecting everyone Embracing change Recognising success Working together Our hospitals.



University Hospitals Bristol NHS Foundation Trust 0117 923 0000 Minicon, 0117 934 9869 www.uhbristol.nhs.uk



2.2 **NBT**



Rebecca Dunn Deputy Director of Transformation

Sent by email: rebecca.dunn8@nhs.net

16 February 2021

Dear Becca

NHS Trust
Trust Headquarters
Level 2, Gate 3, Brunel Building
Southmead Hospital
Bristol
BS10 5NB

Evelyn.barker@nbt.nhs.uk Telephone: 0117 414 3729

Website: www.nbt.nhs.uk

Support for the BNSSG Stroke Services Reconfiguration

I am writing in response to your request for an organisational letter of support to the proposals for reconfiguring the BNSSG Stroke Service. The proposals were reviewed in detail at Healthier Together Executive Group meetings on 18th December 2020 and 5th February 2021 and have also been considered through our own organisational governance processes.

I am therefore pleased to confirm the support of North Bristol NHS Trust to the proposals that are put forward by the Healthier Together BNSSG Stroke Programme. I understand that the next steps will involve consultation with the public on the options associated with the new clinical model. Our team will look forward to being involved in this, and in the next phase of work, that will enable a Decision Making Business Case to be developed.

The Stroke Programme has developed as a model for how we as partners in the BNSSG Integrated Care System (ICS) and wider health and care community seek to review the care we provide for vulnerable members of the community. The process and governance structures put in place have enabled a staged review of the proposals and confirmation to proceed by the leadership of the BNSSG health system meeting in common as Healthier Together.

We are assured that the Programme has considered the spectrum of need of patients from acute through to community rehabilitation and reablement to assure and support greater independence for people following stroke and improved quality of life. It addresses existing weakness in service provision and proposes an integrated care pathway that moves across organisational boundaries to best meet patient needs and respond to the concerns expressed by patients.

This has been supported by the wide engagement and depth of involvement of clinical and service leads from all parts of the stroke pathway in the development of the consultation proposals.



Michele Romaine Chair. Evelvn Barker Chief Executive

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A clear clinical evidence base is demonstrated within the pre-consultation business case building on national best practice and evidence and with a clear assessment of the current quality and outcomes of the services provided. This case has been tested and confirmed by the Clinical Senate which has indicated that both options contained within the pre-consultation business case are assured.

We are assured that a thorough review of the value for money and impact of the stroke reconfiguration has been undertaken by finance leads from all organisations to challenge and test the assumptions put forward. This has been undertaken by the Stroke Finance Cell, reviewed by Deputy Directors of Finance and finally by Directors of Finance.

This review has sought to ensure that the scope and size of investment required for the implementation of the options contained within the PCBC are known and the consequences of resource movement are owned in common by the BNSSG system. It has also considered the opportunities that the reconfiguration of services will release to address existing capacity constraints and the implications of the activity growth forecast by our Long Term Plan.

We consider that the risks and opportunities evidenced by the Stroke Programme have been appropriately considered and understood at this pre-consultation business case stage.

Further work is required to understand potential transition costs and capital requirements; we are assured that this will be undertaken as the business case progresses to consultation. It is also important that we seek to further understand and make real the opportunity costs of the stroke reconfiguration in partnership with social care.

Yours sincerely

Evelyn Barker Chief Executive

Evelyn Barker



Michele Romaine Chair. Evelyn Barker Chief Executive.

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2.3 UHBW



Trust Headquarters Marlborough Street

Marlborough Street Bristol BS1 3NU Tel: 0117 342 3720 Switchboard: 0117 923 0000

Email: robert.woolley@uhbw.nhs.uk website: www.uhbw.nhs.uk

1 March 2021

Letter sent by e-mail

Rebecca Dunn Deputy Director of Transformation BNSSG CCG

Dear Becca,

Support for the BNSSG Stroke Services Reconfiguration

Further to my letter of 23 February and following the Trust Board meeting on 26th February, I am pleased to be able to formally confirm the support of UHBW to the proposals that have been put forward by the Healthier Together BNSSG Stroke Programme.

In my earlier letter I set out the following observations, raised by the UHBW Stroke Reconfiguration Board, which we will want to address ahead of completing the Decision Making Business Case:

 At this stage there is not full consensus around the designation of option 1b being the "preferred" model.

The clinical adjacencies between specialist services based on UHBW's Bristol campus and acute stroke care offer significant benefits for a sub-set of stroke patients within a wider patient cohort.

UHBW recommends that the final evaluation criteria for the decision making business case should consider the impact of all patients and that work needs to continue between BNSSG partners to ensure that potential adverse impacts of both options can be confidently mitigated.

. The selection of Options 1b and 2b mean that a 3 SSARU option will not be considered.

The reduction from 3 to 2 SSARUs was in response to the greater affordability deficit from a 3 SSARU model, available workforce and patient flow challenges that the modelling suggests will be seen when running 3 small units. The UHBW Stroke



Chairman: Jeff Farrar Chief Executive: Robert Woolley



Reconfiguration Board requests that work to demonstrate that the 2 SSARU model will sufficiently improve clinical outcomes, access and patient experience is undertaken.

· Weston General Hospital has been identified as one of the SSARU sites.

It should be noted however that capacity on the site to accommodate the SSARU has not been identified and may conflict with other service developments planned for the Weston site. The PCBC does not make provision any capital redevelopment that may be required as a result of the proposal, if the capacity exceeds the current provision for stroke care within Weston Hospital, or in the event that it is agreed to use this capacity for another purpose.

Whilst these points were noted by the Board there were no new issues raised.

We look forward to continuing the development of this important business case and thank you for the considerable commitment it has taken to reach this important stage.

Yours sincerely,

Robert Woolley Chief Executive

Pacholler

cc: Julia Ross, Sarah Truelove, William Oldfield, Neil Kemsley, Chris Burton, Victoria Hastings



Chairman: Jeff Farrar Chief Executive: Robert Woolley



2.4 Sirona



2nd Floor Kingswood Civic Centre High Street Kingswood Bristol BS15 9TR

t: 0300 124 5499* www:sirona-cic.org.uk

Date: 12th February 2021

Medical Director

Chris Burton

Dear Chris,

Support for the BNSSG Stroke Services Reconfiguration

I am writing in response to yours and Rebecca's request for an organisational letter of support to the proposals for reconfiguring the BNSSG Stroke Service. The proposals were reviewed in detail at Healthier Together Executive Group meetings on 18th December 2020 and 5th February 2021 and have also been considered through our own organisational governance

I am therefore pleased to confirm the support of Sirona for the proposals that are put forward by the Healthier Together BNSSG Stroke Programme to progress to the next stage of the process. I understand that the next steps will involve consultation with the public on the options associated with the new clinical model. Our team will look forward to being involved in this, and in the next phase of work, that will enable a Decision Making Business Case to be developed.

I recognise that we are at an early stage of developing the detail of the Business Case and that as part of this

the models of staffing in all parts of the pathway will be reviewed in order to ensure realistic staffing models that do not drive excessive costs or an overly medicalised model of care that would be difficult to staff.

Yours sincerely

Janet Rowse Chief Executive

Sirona care & health

Registered Office: Sirona care & health, 2nd Floor, Kingswood Civic Centre, High Street, Kingswood, Bristol, BS15 9TR.
*Cals from landlines are charged up to 10p per minute; calls from mobiles vary, please check with your network provider. This is not a premium-rate nur



2.5 SWAST

Our ref: JW167.sa

Wednesday10 February 2021

Rebecca Dunn
Deputy Director of Transformation
BNSSG CCG
South Plaza
Marlborough Street
Bristol
BS1 3NX

South Western Ambulance Service NHS Foundation Trust

Trust Headquarters
Abbey Court
Eagle Way
Exeter
Devon
FX2 7HY

Tel: 01392 261500 Fax: 01392 261510 Website: www.swast.nhs.uk

Sent via email: rebecca.dunn8@nhs.net

Dear Rebecca

BNSSG Stroke Redesign Programme

I am writing to formally set out the Trust's support for the BNSSG Stroke Redesign Programme, and the principles underpinning that support.

The Trust recognises the aim of Stroke Redesign programme is to improve outcomes for this cohort of patients and further recognises the need to work in partnership with the BNSSG system in this regard. However, where service changes will have an impact on the Trust's journey times it also has to consider its own service provision, and ensure that these changes do not negatively impact its ability to respond to other patients.

Therefore, the principles below will need to be satisfied for the purpose of the continued support of the Trust to this transformation programme.

- Involvement of the Trust in stroke redesign Trust representatives continue to be
 invited to relevant meetings where stroke redesign is discussed and are actively involved in
 the decision making process. The Trust can only support changes where we have been
 involved in the planning and implementation process.
- Modelling the impact where there is an identified impact on the Trust of the service redesign, this is appropriately modelled and the impact is fully understood and agreed.
- Funding of adverse impacts where there is an adverse impact on Trust resourcing, performance or clinical risk this is appropriately quantified and funding identified to mitigate this impact.

These principles are reflected in the Trust's current contract with commissioners, which states: Any services that are developing revised current or future pathways must involve the Provider in the discussions and service redesign. Consideration will be given to the impact on the Provider with respect to the potential for undertaking additional or extended journeys which result from any service re-design, and discussions will need to take place with the Provider prior to any agreements being made as to how these are to be managed. Any service re-designs or centralisation which may impact on the ambulance service must be agreed by the Provider and the Lead Commissioner before implementation. Due consideration must be given to the potential

Chairman: Tony Fox Chief Executive: Ken Wenman







impact on existing patients and the clinical and operational implications for the ambulance service and integrated UEC system as a whole.

I trust this is a positive statement of support and look forward to working closely with the local system to progress this programme.

If you have any queries please do not hesitate to contact me.

Yours sincerely

Jenny Winslade

Executive Director of Quality and Clinical Care

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CC: Sue Sutton, Dorset CCG

Jonathan James, Acting Executive Director of Finance, SWASFT Jessica Cunningham, Executive Director of Operations, SWASFT

Chairman: Tony Fox Chief Executive: Ken Wenman







2.6 BNSSG CCG



Dr Chris Burton Medical Director North Bristol NHS Trust South Plaza Marlborough Street Bristol BS1 3NX

Rebecca Dunn
Deputy Director of Transformation
BNSSG CCG

Via email: chris.burton@nbt.nhs.uk rebecca.dunn8@nhs.net

11 February 2021

Dear Chris and Rebecca

Support for the BNSSG Stroke Services Reconfiguration

I am writing in response to your request for an organisational letter of support to the proposals for reconfiguring the BNSSG Stroke Service. The proposals were reviewed in detail at Healthier Together Executive Group meetings on 18 December 2020 and 5 February 2021 and have also been considered through our own organisational governance processes.

I am therefore pleased to confirm the support of BNSSG CCG to the proposals that are put forward by the Healthier Together BNSSG Stroke Programme. I understand that the next steps will involve consultation with the public on the options associated with the new | clinical model. The CCG will lead this on behalf of the Healthier Together System and our team will look forward to continuing to work with you on the next phase of work, that will enable a Decision Making Business Case to be developed.

Yours sincerely

Julia Ross

Chief Executive BNSSG CCG



Clinical Chair: Dr Jonathan Hayes Chief Executive: Julia Ross



2.7 Specialised Commissioning



NHS England and NHS Improvement South West

Chris Burton Medical Director – North Bristol NHS Trust Chair – BNSSG Stroke Reconfiguration Board South Plaza 3rd Floor Marlborough Street Bristol BS1 3NX

Trust Headquarters North Bristol NHS Trust Southmead Hospital Bristol 23rd February 2021

Dear Chris

Re: Commissioner Support for BNSSG Service Reconfiguration

I am writing in response to your request for an organisational letter of support to the proposals for reconfiguring the BNSSG Stroke Service which are outlined in a Pre Consultation Business Case.

The proposals were reviewed in detail at Healthier Together Executive Group meetings on 18th December 2020 and 5th February 2021 and we have discussed inprinciple support for the proposals at our South West Direct Commissioning Senior Leadership Team meetings.

I am pleased to confirm the support of NHS England South West to the proposals that are put forward by the Healthier Together BNSSG Stroke Programme. I understand that the next steps will involve consultation with the public on the options associated with the new clinical model. Our team will look forward to being involved in this, and in the next phase of work, that will enable a Decision Making Business Case to be developed.

NHS England is the responsible commissioner for stroke thrombectomy services which are delivered by NBT for a sub-regional patient population and has considered the proposals specifically in relation to their impact on this service.

We note specifically:

- that the proposals have no impact on the finances associated with thrombectomy provision;
- that the proposals are not expected to have any adverse impact on workforce to deliver thrombectomy provision;

NHS England and NHS Improvement





· that the proposals would potentially support subsequent incremental expansion in the population served by the NBT thrombectomy service should these be commissioned, which is consistent with national ambitions to continue expanding thrombectomy coverage to patients who would benefit from this.

Yours sincerely

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Luke Culverwell
Deputy Regional Director for Specialised Commissioning NHS England & NHS Improvement South West



2.8 OneCare



One Care (BNSSG) C.I.C. Unit 5 Osprey Court Hawkfield Business Park Whitchurch Bristol BS14 0BB

Date Wednesday, 18th February

Dear Chris

Support for the BNSSG Stroke Services Reconfiguration

I am writing in response to yours and Rebecca's request for an organisational letter of support to the proposals for reconfiguring the BNSSG Stroke Service. The proposals were reviewed in detail at Healthier Together Executive Group meetings on 18th December 2020 and 5th February 2021 and have also been considered through our own organisational governance processes.

I am therefore pleased to confirm the support of One Care (BNSSG) C.I.C. to the proposals that are put forward by the Healthier Together BNSSG Stroke Programme. I understand that the next steps will involve consultation with the public on the options associated with the new clinical model. Our team will look forward to being involved in this, and in the next phase of work, that will enable a Decision-Making Business Case to be developed.

Yours sincerely

Chief Executive Officer

Ruth Tay W

One Care (BNSSG) C.I.C.







3 Outside of BNSSG - Letters of Support

3.1 Somerset FT

Somerset NHS Foundation Trust was created from the merger of Somerset Partnership NHS Foundation Trust and Taunton and Somerset NHS Foundation Trust

9 February 2021

Rebecca Dunn Deputy Director of Transformation BNSSG CCG

Via email: rebecca.dunn8@nhs.net

Somerset
NHS Foundation Trust

Musgrove Park Hospital
Trust Management
Lydeard House
Parkfield Drive
Taunton
TA1 5DA

Email: Peter.lewis@somersetft.nhs.uk

Dear Rebecca

BNSSG STROKE PROGRAMME: PROPOSALS JANUARY 2021

Many thanks for your recent communication regarding the BNSSG Stroke Programme.

You have requested a statement of support from partner organisations as part of the NHS E/I stage 2 assurance process.

By way of this letter I can confirm support from Somerset NHS Foundation Trust for the proposals you have set out.

I note the proposals suggest change to the service in Weston hospital, which will result in a small increase in patient volumes for the HASU service provided at Musgrove Park. In response to your question about arrangements for the care of patients who longer require acute care, we would request that the patients whose acute care is transferred by these proposals to Musgrove Park Hospital are included in the capacity modelling and planning for the new sub-acute service at Weston, and are also included in the commissioning and provision of the ESD service covering North Somerset.

We look forward to continuing to work closely with the thrombectomy service at NBT and being part of these changes as they go forward.

Yours sincerely

PETER LEWIS
CHIEF EXECUTIVE

Tites loves

Copy to: James Rimmer, CEO - Somerset CCG

Dr Rob Whiting, Clinical Director, Neuroscience and Stroke Services, Somerset

Foundation Trust

Mr Matthew Bryant, Chief Operating Officer - Hospital Services, Yeovil District

Hospital FT/Somerset NHS FT



Chairman: Colin Drummond OBE DL Chief Executive: Peter Lewis



3.2 Somerset CCG

Our Ref: JR/mh/rjb/090221-08

9 February 2021



Rebecca Dunn Deputy Director of Transformation BNSSG CCG

Sent via e-mail to: rebecca.dunn8@nhs.net

Wynford House Lufton Way Lufton Yeovil Somerset BA22 8HR

Tel: 01935 384000

somccg.enquiries@nhs.net

Dear Becca

BNSSG Stroke Programme: Proposals January 2021

Many thanks for your recent communication regarding the BNSSG Stroke Programme.

You have requested a statement of support from partner organisations as part of the NHS E/I stage 2 assurance process.

By way of this letter I can confirm support in principle from Somerset Clinical Commissioning Group for the proposals you have set out.

We have reviewed your proposals against the needs of our population and note that 0.8 Somerset patients per week are currently admitted to WGH with a diagnosis of stroke. We are comfortable that the small increase in patient volumes of 0.6 patients per week admitted to the HASU at Musgrove Park is a reasonable assumption.

In response to your question about arrangements for the care of patients who no longer require acute care, we would request that the patients whose acute care is transferred by these proposals to Musgrove Park Hospital are included in the capacity modelling and planning for the new sub-acute service at Weston, and are also included in the commissioning and provision of the ESD service.

We would welcome the opportunity to work with you to ensure that Somerset patients also have appropriate access to onward stroke care closer to home and look forward to continue to work closely with you as your proposals develop.

Yours sincerely

James Rimmer

Chief Executive & System Lead

Copy to: Peter Lewis, Chief Executive, Somerset NHS Foundation Trust

Dr Rob Whiting, Clinical Director, Neuroscience and Stroke Services, Somerset

NHS Foundation Trust

Mr Matthew Bryant, Chief Operating Officer - Hospital Services, Yeovil District

Hospital NHS FT/Somerset NHS FT

Maria Heard, FFMF Programme Director, Somerset CCG

MINDFUL

Chair: Dr Ed Ford | Chief Executive: James Rimmer

Working Together to Improve Health and Wellbeing www.somersetccg.nhs.uk



