

Report to Torbay Overview and Scrutiny Board 14 March 2018

Progress update on the Acute Services Review

Work on acute services is progressing well and at present the focus is on aligning our acute services across Devon with some of the key national programmes of work, and this will continue throughout 2018 and into 2019.

We have made some good progress in Pathology and have set up the Peninsula Pathology Network, chaired by Ann James Chief Executive at Plymouth Hospitals NHS Trust. Whilst all areas of the country are at different stages in terms of their development our peninsula network is seen as one of the most advanced nationally and recognised as an exemplar.

The Devon STP has also secured the early imaging network bid and therefore will receive support from NHS improvement to progress the review of radiology services.

The clinical cabinet are supporting the Getting It Right First Time (GIRFT) programme which aims to bring about higher-quality care in hospitals, at lower cost, by reducing unwanted variations in services and practices. The cabinet are keen for providers to progress this at the same time across Devon.

As you will also recall, phase 1 of the acute services review led to some big developments, such as the mutual support agreement policy for Devon and the development of service delivery networks.

Last year all four trusts boards and both CCGs put in place a formal arrangement to provide short-term mutual support for any hospital facing service challenges that it couldn't manage on its own. That might be due to staff sickness or retirement or a surge in demand giving rise to a need for extra capacity. This arrangement has been recognised nationally as an 'exemplar of good practice' by NHS England, who are encouraging other CCGs to do the same.

This arrangement has been put in to action several times since it was launched, and we are proving that we have the ability to solve our own problems. For example, specialists from Exeter have been working with the breast service in Plymouth to help cover staff sickness, and senior doctors from Exeter and Plymouth have been supporting staff in Barnstaple's obstetrics service.

By working as a single team like this, we are showing that we can support each other to address service challenges and maintain specialist services across Devon.

Good progress has also been made on networking arrangements, we now have a framework for Service Delivery Networks (SDNs) which includes three levels, each providing a level of collaboration between clinical teams and hospital providers but underpinned by an expert clinical group, who have oversight across Devon for clinical quality and effectiveness.

In terms of stroke and maternity services we have spent some time assessing each of the clinical recommendations that came out of the phase 1 review, to make sure they are viable from a workforce perspective and also financially. As you will appreciate this is a complex piece of work and takes time to get right. We outlined this as the next stage in the process when we released the findings of phase 1.

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