



Report to Health Scrutiny Sub-Committee

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Report of:	Jackie Mills, Director of Finance, NHS Sheffield CCG
Report to:	Health Scrutiny Sub-Committee
Date of Decision:	21 June 2022
Subject:	Primary Care Capital Transformation Programme, Pre-Consultation Engagement Findings, Draft Consultation Plan and Draft Pre-Consultation Business Case

Purpose of Report:

The report summarises a programme to invest and transform primary care in three areas of the city, this includes the proposal to build 5 new health centres.

A strategic outline case for the programme has been approved and submitted to NHS England and Improvement, following this pre-engagement consultation that took place between March and May 2022 and a Pre Consultation Business Case (PCBC) has been prepared that presented the options for public consideration taking into account the findings of the engagement.

The PCBC includes the pre-consultation engagement report, consultation plan and consultation document and is presented here in draft for the Sub-Committee to consider before it is presented to NHS Sheffield Clinical Commissioning Group (SCCG) Primary Care Commissioning Committee (PCCC) on 23 June 2022 where PCCC will be asked to approve the PCBC and the commencement of consultation on the plans.

Please note, there is duplication across the reports as all are designed to be standalone documents.

Recommendations:

The Health Scrutiny Sub-committee are invited to:

- Note the results of the pre-consultation engagement
- Consider and provide comments on the draft pre-consultation business case

before it is approved by pccc on 23 june 2022.

Primary Care Capital Transformation Project Draft Pre-Consultation Business Case

1. Introduction

As part of £57.5m allocated to primary care developments across South Yorkshire, NHS Sheffield Clinical Commissioning Group (SCCG) has been awarded £37m for bids made to transform Sheffield GP practices in the city. The funding is part of a £1 billion increase to NHS capital spending by the current government (Wave 4B Capital Funding).

The funding comes with strict national requirements, including a deadline of December 2023 for completion of all funded developments and a strict business case development and approval process set by HM Treasury. While the national timetable for approving the programme has slipped these requirements and deadlines have not changed. This, together with the COVID-19 pandemic, has meant that we have been unable to involve patients and the public in our plans from the beginning, as we would have preferred, and that we now have very tight timelines for involvement and consultation.

The funding cannot be used for other developments in Sheffield or for service provision e.g. new clinical staff. If these schemes do not proceed the funding will be released back to the South Yorkshire Capital Programme Board. The ICS programme has a list of reserve schemes, with schemes in Doncaster and Barnsley being prioritised as being deliverable should funding be released elsewhere in the programme. If these do not proceed the funding will be returned to HM Treasury.

The plans would support us in our plans to tackle health inequalities so it is important that we work with local communities in planning the hubs to meet their specific community needs.

The plans include creating up to 5 new health centres in Sheffield bringing together existing GP practices, other health services, and some voluntary services all under one roof to change the way that healthcare is delivered. These health centres would give practices more modern, flexible spaces to help meet the needs of patients in the 21st century and the demands of a growing population. Council services may also have a presence in some of the buildings.

The attached Pre-Consultation Business Case (PCBC) details the work completed by the programme team to date and the proposed options for the health centres. It includes the report on the pre-consultation engagement undertaken between March and May 2022, the consultation plan and

consultation document. The PCBC will be presented to the CCG Primary Care Commissioning Committee on 23 June 2022 for approval before consultation.

2. Background

These plans were originally developed by the GP practices and SCCG supported the practices to develop the plans into bids for funding. Following confirmation of the ICS award, SCCG has worked with the practices to develop the plans to Strategic Outline Case.

The health centres are planned for 3 areas in the city centre, SAPA5 Primary Care Network and Foundry Primary Care Network. These areas were chosen because the practices here developed the original proposals, they have not benefited from previous funding for GP buildings, so many practice sites are in converted properties or otherwise need modernisation and their populations have some of the highest levels of deprivation in the city.

SCCG is working in partnership with the city council to develop the business cases for these projects. In order to meet the funding requirements the buildings developed under this scheme remain in public ownership it is proposed that the city council owns the buildings once completed. This offers additional advantages, such as opportunities to co-locate and integrate social care and other council services with health and voluntary sector provision at locations that are accessible to local people.

At present no commitment is required from any practice as part of the development of these projects. After the results of pre-consultation engagement were shared with the practices SCCG asked all practices to indicate if they wished to continue with the development of the projects. The results of the engagement and this confirmation request have led to changes in the plans that are reflected in the pre-consultation business case.

In addition to these major developments, some funding will also be used to improve and make more space in some existing GP practices and health centres, to create modern and flexible spaces offering a range of services to patients, joining up local services and improving the use of digital technology in primary care.

3. Constraints on the Programme

Throughout, SCCG has sought to balance the preferred local approach of the CCG, our partners and stakeholders with the constraints on the programme and despite our best efforts these have inevitably shaped the approach to development and engagement plans.

3.1. Funding

This programme has strict national conditions attached to it and to be successful in receiving this funding we must meet these in full:

- The funding must be used for the purposes laid out in the initial bid only. In this case, that means that only these health centres can be built using this funding, we can't use the money to build in other areas, and if it is not used it

will have to be returned to the ICB for use elsewhere in South Yorkshire or to the Treasury.

- The buildings have to be in public ownership. NHS Sheffield CCG has been working with Sheffield City Council to identify suitable council owned locations.
- The buildings need to be completed by December 2023. This is a tight deadline, but achievable.

3.2. Timetable

Official approval of this funding from the government has been significantly delayed. Despite this delay the original deadline for completion has remained December 2023. The process of developing the sites and building the health centres is estimated to take over 12 months, so the instruction to develop would have to be made by November 2022.

This has placed considerable constraints on the timetable to progress the programme including engagement and consultation activity. This has resulted in the planned consultation having a duration of 10 weeks. National approval to make the plans public has not yet been received, however the CCG has agreed with the NHS England regional team that it is essential to begin public involvement immediately.

Although there is no set time for the duration of a consultation, it is often suggested that this should be 12 weeks. SCCG has taken advice from the Consultation Institute

We sought to mitigate this challenging timescale through our pre-consultation engagement which has informed the pre-consultation business case presented today prior to the formal consultation.

Despite the restraints, SCCG is committed to running a fair and open consultation process that meets the Gunning Principles of good consultation:

- Proposals are still at a formative stage
- There is sufficient information to give 'intelligent consideration'
- There is adequate time for consideration and response
- 'Conscientious consideration' is given to the consultation responses before a decision is made

4. Pre-Consultation Business Case (PCBC)

Following the development of the Strategic Outline Case a PCBC has been developed for the programme. The draft of the PCBC is attached to this paper.

The purpose of the PCBC is to:

- Describe our emerging proposals for service change, and to enable decision makers to decide whether there is a case to launch a public consultation

- To build alignment between the NHS and local authority by describing the case for change and:
 - Demonstrate that all options, benefits, and impact on service users have been considered
 - Demonstrate that the planned consultation will seek the views of patients and members of the public who may potentially be impacted by the proposals.
- To inform the necessary assurance process that our proposals against the government's four tests of service change, and NHS England's fifth test of service change and best practice checks for planning service change and consultation.

Following the pre-consultation engagement there have been a number of changes to the programme presented in the Strategic Outline Case and these are fully reflected in the PCBC. The PCBC therefore presents plans for the practices interested in further exploring a move to one of the new health centres and the preferred locations of these. Changes to the programme reflected in the PCBC are summarised in the table below.

Interested Practices	Potential Location of New Health Centre	Changes Since Pre-Consultation Engagement
Burngreave Surgery Sheffield Medical Centre	Spital Street	Pitts Moor Surgery will not be part of the potential health centre but will pursue an intermediate option, Catherine Street is therefore no longer a possible location
Page Hall Medical Centre Upwell Street Surgery	Rushby Street	No change
Firth Park Surgery Dunninc Road Surgery (Green Cross Group Practice) Shiregreen Medical Centre (main site)	Concord Sports Centre	Elm Lane and Norwood will not move to a potential health centre.
The Health Care Surgery (Green Cross Group Practice) Buchanan Road Surgery Margetson Surgery (Ecclesfield Group Practice)	Buchanan Road / Wordsworth Avenue	Southey Green will not move to a potential new health centre
Clover City Practice The Mulberry Practice	City Centre location TBC	Separate consultation to be completed once potential site(s) identified

Pitts Moor Surgery who were included in the pre-consultation engagement on early proposals are now pursuing the intermediate option which is to develop their current premises. Norwood Medical Centre, Elm Lane are pursuing funding

to extend and improve their buildings and would not relocate to a new Health Centre. Southey Green will not move to a potential new health centre.

As a suitable site has not yet been identified the possible city centre health centre will not form part of this consultation but a separate consultation will take place once a preferred site is identified.

This document refers to proposals and indicates changes that will be made to services if those proposals are implemented. However, the CCG has not made any final decisions on:

- Whether to make changes to services in accordance with any of the proposals discussed in this document, or
- How to implement any proposal which is subsequently agreed.

Attached as appendices to the PCBC are the following key documents:

4.1. Pre-consultation Engagement Report

This describes in full the findings of the engagement activity which commenced on 14 March 2022 and ended on 15 May 2022. This activity aimed to start the conversation with the public and stakeholders, gather insights on identified viable locations, and discover what the public felt the most important factors about primary care provision were in each area. People were able to share their contact details so they can be directly informed about future ways of being involved in the programme.

Overall, we received feedback from 2,205 people. The key findings of the pre-consultation engagement were:

- People like the idea of talking therapy, diagnostics, community mental health and children's services co-located in new centres
- People think more investment in their local area is needed
- Most people say they can travel but the majority aren't willing to travel further for better care
- Slightly more people disagree with the idea of building centres than agree
- Some of the concerns people have been that it could be further to travel for some people, it could be harder to get to by bus, people are worried about changes to their practice and want to know if they have to re-register.
- Most people are happy with the environment of their Current GP practice.

The engagement results were shared in full with practices for consideration when deciding if they wished to proceed further in developing these plans.

4.2. Consultation Plan

The consultation aims to ensure the public voice is heard, shapes the final plans, and provides sufficient insight into the impact the plans may have on local people and patients.

The findings of the consultation will be shared with the Health Scrutiny Sub-Committee to enable the Sub-Committee to make a formal response knowing the views of the public and patients.

A comprehensive consultation plan has been developed that covers:

- communications channels to ensure a robust consultation that is as far reaching as possible
- documents and materials to ensure that people can make a considered response to the consultation
- potential issues such as language and cultural barriers, that have been identified and the plan and describes how we will address these.
- multiple ways in which people can provide feedback on the plans.

4.2.1. Analysis

An independent analysis will be commissioned by the ICB to ensure an unbiased interpretation of the responses and will include an equality analysis by protected characteristic. An individual report will be produced for each health centre to ensure they can be considered and influence each project separately.

4.2.2. Post-consultation Governance and Decision Making

Following the completion of the consultation, a report will be provided to the committee with responsibility for approval of the arrangements for discharging statutory duties relating to public involvement, consultation, and equality. This will detail the activity undertaken alongside the independent analysis.

If assurance is given, the consultation report including the independent analysis will then be provided to South Yorkshire Integrated Care Board for their consideration. All responses will also be available to the committee to read and review before they make their decision. before final decision being made.

A final post-consultation business case will be presented to the South Yorkshire Integrated Care Board for their decision in November 2022. This meeting will be held in public.

4.3. Consultation Document

To support the consultation a draft consultation document has been prepared that summarises the PCBC. This document will be made widely available alongside the PCBC to inform people and enable them to form a view on the plans under consultation.

4.4. Timescales

Due to time restrictions with the pre-election period and the time required to build the sites, the consultation period will be 10 weeks. Although there is no legal set time for the duration of a consultation, it is often suggested that this should be 12 weeks however, that timeframe is usually for citywide consultations or where affected populations are harder to identify and reach.

As we know all potentially affected people, that is the patients at the registered practices, and they can be reached via the practices along with complimentary outreach we plan to consult over 10 weeks to meet the Treasury's timeline. This has been advised by Consultation Instituted and legal advisors.

Subject to PCCC approval the consultation will commence on 18 July 2022 and end on 25 September, a timeline and milestones are included in the PCBC.

Appropriate timescales for consideration and approval have been built into the timeline to ensure that successor ICB committee has sufficient time to scrutinise the feedback received from the consultation before a decision is made.

5. Comments from Health Scrutiny Sub-Committee

Given the timescales required to meet the project deadlines and the impending transition from CCG to ICB it will not be possible to reflect the comments from the Health Scrutiny Sub-Committee in the final report that will accompany the PCBC when PCCC are asked to approve the business case and the consultation on 23 June 2022. However, all comments made by the Sub-Committee will be written up and shared with PCCC before the meeting so that Committee members can take them into consideration when reaching a decision.

6. Recommendations

The Health Scrutiny Sub-committee are invited to:

- Note the results of the pre-consultation engagement
- Consider and provide comments on the consultation plan
- Consider and provide comments on the draft pre-consultation business case before it is approved by PCCC on 23 June 2022.

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