

Reconfiguration of NHS Services: The framework for NHS decision making

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So do hospital closures matter?

Thousands march against Grantham A&E closure

🕒 29 October 2016 | Lincolnshire

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Protestors marched through Grantham to express their concerns about the temporary closure

Thousands of people have protested against the overnight closure of Grantham hospital's accident and emergency unit.

And

6 reasons why Labour made history and won the Canterbury seat from the Conservatives

By [benashton](#) | Posted: June 09, 2017

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What is driving changes to NHS services?



- **Lack of money**
- **A lack of trained staff.**
- **Changes in the way medicine is delivered.**
- **Demographic changes**
- **The demands of the STP process:**

Who has a say in change processes?

- **NHS commissioners**
- **Providers of NHS services**
- **NHS staff**
- **Local authorities**
- **NHS England and NHS Improvement**
- **Politicians**
- **Patients and the public – whose taxes pay for the services, who are the end users and who have a statutory right to be involved in decision making**

The Guidance



**Planning, assuring and
delivering service change
for patients**

The statutory planning processes

- Health and Wellbeing Boards
- Joint Strategic Needs Assessments (“**JSNA**”)
- Joint Health and Wellbeing Strategy (“**JHWS**”)

“JSNAs are assessments of the current and future health and social care needs of the local community. These are needs that could be met by the local authority, CCGs, or the NHS CB. JSNAs are produced by health and wellbeing boards, and are unique to each local area”

- CCGs “Have regard” duty to outcome of JSNA and JHWS

The CCG Annual Commissioning Plan



- **S14Z11 of NHS Act**
- **Consultation under s14Z13**
- **NHS England “Operational Planning and Contracting Guidance 2017-2019” makes no mention of the duties on CCGs to produce annual commissioning plans.**
- **What is the legal effect for a CCG that tries to make changes to services without having an Annual Commissioning Plan?**

The Four Tests from 2010



- Strong public and patient engagement.
- Consistency with current and prospective need for patient choice.
- Clear, clinical evidence base.
- Support for proposals from commissioners.

New tests on closing acute beds

- Demonstrate that sufficient alternative provision, such as increased GP or community services, is being put in place alongside or ahead of bed closures, and that the new workforce will be there to deliver it; and/or
- Show that specific new treatments or therapies, such as new anti-coagulation drugs used to treat strokes, will reduce specific categories of admissions; or
- Where a hospital has been using beds less efficiently than the national average, that it has a credible plan to improve performance without affecting patient care (for example in line with the Getting it Right First Time programme)

NHS England Assurance process



- **“Pre-consultation business case**
- **Discussion of formal proposal with local authorities**
- **Public Consultation**
- **Guidance on Public Involvement duties:**
 - ***“Transforming Participation in Health and Care”***
 - **Is Guidance consistent with wording of s14Z2?**

Finally decision and implementation



- Decision by CCG or committees of CCGs
- Implementing by changes to NHS contracts
- Staff transfers and changes to services