

East Sussex Healthcare NHS Trust Transformation of Ophthalmology Services

Summary Report for: Health Overview Scrutiny Committee

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1.0 Background

Improving ophthalmology health outcomes is a key priority area for the Sussex Health and Care Partnership (SHCP).

On 4th March 2021, East Sussex Clinical Commissioning Group (ESCCG) and East Sussex Healthcare NHS Trust (ESHT) presented early draft proposals for a change in the way that ophthalmology services are provided in East Sussex to the Health Overview and Scrutiny Committee. At that meeting East Sussex HOSC confirmed that any proposals that include a relocation of current ophthalmology services will likely constitute a substantial variation in services and will require a formal consultation.

A pre-consultation business case has now been prepared that builds on the early draft proposals and this has been supported by NHS England and NHS Improvement as part of an assurance process.

At its meeting on Tuesday 30 November 2021, members of the East Sussex Healthcare NHS Trust Board are invited to review and consider the pre-consultation business case (PCBC) for the re-configuration of ophthalmology services, endorse the proposals and agree that the CCG commences a consultation process with the East Sussex Health Overview and Scrutiny Committee (HOSC), and agree that the proposal should be subject to formal public consultation. It has also been considered and approved, in principle pending approval from ESHT, by the Joint Sussex Committee at its meeting on Wednesday 17 November 2021.

The full pre-consultation business case and associated documents, including the Equality and Health Inequality Impact Assessment, Quality Impact Assessment, the pre-consultation engagement report and options development and appraisal reports, will all be available and published on the CCG website. The PCBC Executive Summary is provided as Appendix 2 and our plans for consultation are set out in Appendix 3.

2.0 The Proposal

Our proposal is to locate ophthalmology services at two hospitals, Eastbourne District General Hospital and Bexhill Hospital, supported by one stop clinics at both hospitals and a diagnostic eye hub at Bexhill Hospital. This means:

- There would be no change to activity at the Eastbourne site.
- The activity provided at the Conquest site would move to Bexhill. However, the activity that would be moved will only relate to outpatients and day cases. This equates to:

POD	Number of Conquest patients	Percentage of total ophthalmology activity
Outpatient First Appt	7,113	8.08%
Outpatient Follow Up	17,158	19.50%
Day Case	111	0.13%

NB: this data is based on pre-covid data. Number of appointments does not accurately reflect number of patients, as many patients attend multiple appointments.

- Bexhill is 6.6 miles from Conquest.
- Both Conquest and Bexhill are outside of the Hastings main population centre.

- The proposed pathways would reduce the number of appointments that individual patients need to attend due to one-stop clinics, faster diagnostics and senior decision making. Patients who move would need to attend an alternative site, but may need to attend less often.
- The proposal does not affect unplanned or emergency care, the pathway for which is not changing.
- Emergency and General Anaesthetic surgical cases (including cases which require overnight stay), would continue to be delivered at Conquest Hospital.
- Moving Conquest activity to Bexhill would allow us to avoid fragmentation of the service and implement redesigned pathways to increase quality of care and efficiency (including High Volume Low Complexity work), provide one-stop clinics, and provide a consultant led (as opposed to delivered) model of working that efficiently utilises skill mix and training opportunities.
- This change also enables the wider Sussex Ophthalmology plan, as training and supervision from the East Sussex Healthcare Trust consultant body support upskilling the community Optometry workforce.

The introduction of one stop clinics and a diagnostic eye hub will ensure faster diagnosis, reduce waiting times, reduce number of appointments required for patients to attend and repeated tests. These are key quality improvements to the ophthalmology service.

Over time, as part of the longer-term vision to continue to improve ophthalmology services, we will consider the needs of the following ophthalmology service provision at East Sussex Healthcare NHS Trust (e.g. pre/post op cataract pathway, glaucoma referral refinement) alongside enhanced service provision in the community, provided by local optician practices, across East Sussex

3.0 How we developed our proposal

We have worked with patients, their families and carers, wider public and stakeholders, alongside our clinical teams and local GPs throughout the development of this programme, specifically engaging in how we have:

- set out the case for change for the reconfiguration and consolidation of the current ophthalmology services delivered at the East Sussex Healthcare NHS Trust (ESHT) in the context of a wider programme of transformation and improvement
- described the agreed clinical model for acute cardiology services in the context of the Trust's wider service provision and wider national and local drivers
- worked with stakeholders to inform, develop and evaluate viable options for the redesign of acute cardiology services in East Sussex.

All information gathered in the pre-consultation phase has shaped the development and selection of the shortlisted options and feedback has provided a rich source of information which has been used to further shape and refresh the Pre-Consultation Business Case (PCBC), Equality and Health Inequality Impact Assessment (EHIA), and Quality Impact Assessment (QIA).

This PCBC describes our case for change, needs assessment, engagement process, development of options, and sets out the scope of the shortlisted options for reconfiguration and modernisation and the associated costs, risks and benefits.

4.0 The process of assurance

When developing our options, our final draft proposals, and this Pre-Consultation Business Case:

- We have considered the outputs from engagement with local people and clinicians and used these to inform the Pre-Consultation Business Case.
- We have developed the Pre-Consultation Business Case with due regard to our duties to reduce inequalities and promote integration of health services where this will improve the quality of those services, in addition to ensuring compliance with all relevant equality duties.
- We have assessed the impacts of our proposal by undertaking a Quality Impact Assessment and an Equality and Health Inequality Impact Assessment to identify any potential negative impacts and identified appropriate mitigating actions.
- We have taken into account the recommendations of the South East Clinical Senate.
- We have been informed by feedback from the East Sussex Health Overview and Scrutiny Committee.
- We have assessed our proposal against the NHS Four Tests for service reconfigurations.¹
- We have developed our proposal and associated consultation plans in line with the Gunning Principles² to ensure that:
 - a decision will not be taken until after public consultation
 - local people and stakeholders have information that enables them to engage in the consultation and inform our decision;
 - there is adequate time for people to participate in the consultation
 - we will demonstrate how we have taken account of engagement and formal consultation by publication of a consultation feedback report describing this.
- We have considered opinions and insight from a number service leads and managers within our acute hospitals in East Sussex that represent a broad range of clinical specialties.
- We have engaged extensively with NHS England and Improvement (NHSE/I) and completed a rigorous NHSE assurance process in relation to the proposal and our consultation and engagement plans.

A Quality Impact Assessment (QIA) has been completed and scored highly in terms of a positive impact on safety, experience and effectiveness. The QIA will continue to be developed as the proposals progress to ensure that quality and safety considerations are built into the outcome.

The Programme has also completed an Equalities and Health Inequalities Impact Assessment (EHIA). The EHIA concludes that the proposed changes will have a positive impact on service users with protected characteristics. The EHIA also indicated that through the design and location, there may be an opportunity to reduce health inequalities through these proposals. The EHIA is a live document and will continue to be developed with the proposals.

¹ <https://www.england.nhs.uk/wp-content/uploads/2018/03/planning-assuring-delivering-service-change-v6-1.pdf>

² <https://www.england.nhs.uk/wp-content/uploads/2017/05/patient-and-public-participation-guidance.pdf>

5.0 Conclusion

This proposal represents an opportunity to significantly improve ophthalmology services in East Sussex. The CCG and ESHT welcome the opportunity for wider engagement through public consultation, and look forward to engagement with and feedback from the HOSC.