# Committees in Common Meeting

**12 February 2020**

Report TitleDecision Making Business Case (DMBC) for the proposed relocation of services from Moorfields’ City Road site to St Pancras.

## Agenda Item

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## **Summary of financial implications**

See section 1.10 (p.16) of the DMBC, and Appendix C for Commissioner Directors of Finance letter of support

Report Summary

On 24 May 2019, a 16-week public consultation was launched to seek the views from as many people as possible about the proposal to move services from Moorfields Eye Hospital NHS Foundation Trust’s (Moorfields) City Road site to the St Pancras Hospital site, bringing together excellent eye care, ground-breaking research and world-leading education in ophthalmology.

The new centre would be a joint development between Moorfields, the University College London (UCL) Institute of Ophthalmology (IoO), and Moorfields Eye Charity (MEC), enabling integration of clinical services, research and education. This development proposal is referred to as ‘Oriel’.

The public consultation was led by NHS Camden CCG, on behalf of the 109 CCGs who commission services from Moorfields’ City Road site, working in partnership with NHS England Specialised Commissioning (who are the largest single commissioner of Moorfields’ services at City Road) and the 14 CCGs who commission over £2m activity per annum. These organisations, together with Moorfields, have overseen the pre-consultation engagement activities, development of the Pre Consultation Business Case (PCBC), the consultation and development of this Decision-Making Business Case (DMBC).

The consultation team spoke to over 4,600 people, including 1,511 survey responses. They attended 99 meetings and events including discussion workshops run by Moorfields, and attendance at existing groups. They included specific workshops on key issues, such as accessibility. The consultation specifically sought the views of groups of people with protected characteristics and rare conditions, to ensure their views were captured on the proposal itself and any potential impact on equality.

Support has been gained from a number of Health Overview and Scrutiny Committees (HOSCs) and engagement with Joint Commissioning Committees (JCCs), as set out in section 5.15 (page 65) of the DMBC.

Consultation feedback was independently analysed in a report, which was published, on the Oriel website for feedback before finalising. Commissioners are confident that robust conclusions can be drawn from the consultation feedback due to high response rates and consistent themes emerging throughout.

The key themes from the consultation feedback were:

* Overall agreement with the proposal to build a new centre at St Pancras – including 73% of the 1,511 survey respondents.
* Maintaining the high quality of clinical care at Moorfields is the highest importance.
* Patients and public should be involved in further development of proposals. Moorfields have established user groups to develop designs for Oriel, which will include patient representatives, staff, clinical leads and independent experts where appropriate.
* A majority of people support the St Pancras location. Alternative sites suggested were evaluated by independent property experts and found to be either unavailable, more expensive or more inaccessible for the majority of patients in comparison to the St Pancras location. A slightly higher level of dissatisfaction with the proposals was expressed by people living in north east London. The ways in which the needs of this population will be addressed is set out in the DMBC (section 1.6).
* Accessibility to and around the proposed St Pancras site is extremely important. Key concerns included the difficulties of navigating a busy open-plan area from a station with multiple exits. Suggestions were made as to how Moorfields could help service users travel the last half-mile to the St Pancras site, and navigate the building. If proposals proceed, Moorfields will lead the development of an Accessibility Plan with patient representatives, transport providers, sight loss charities and Camden Council to ensure concerns are adequately addressed.
* Some aspects of patient experience could be improved now. Moorfields have commissioned a major programme of customer service training and improvement during 2020, informed by the consultation feedback.

## System modelling

System modelling was undertaken to inform the DMBC, which identified a forecast annual increase in demand for ophthalmology outpatient services of 3.1%, which could be reduced to 2.3% if activity is re-provisioned in alternative settings where appropriate. This will be pursued by commissioners and Moorfields (as per the recommendations set out in section 1.11 (page 17) of the DMBC, and below).

Following this, commissioner finance leads have reviewed the proposals and system modelling and confirmed that Oriel is not expected to have a material financial impact on commissioners, and that activity projections are in line with commissioner expectations and are therefore financially sustainable.

## Options appraisal

Following the end of the consultation, the options appraisal was validated to identify any feedback that could change the preferred option. This involved two workshops with commissioners, patients and public representatives to review the critical success factors, and a review of alternative sites suggested during the consultation. It was concluded that the proposed relocation of Moorfields services from City Road to the St Pancras site remains the preferred option.

## Assurance and compliance

Independent assurance on the consultation methodology has been sought from the Consultation Institute (tCI). Legal advice has confirmed the consultation has been undertaken in a manner that is compliant with commissioners’ statutory requirements.

The Secretary of State’s four tests for service change, and the Mayor of London’s six tests for major health and care transformation or service reconfiguration proposals in London, were closely considered throughout this process, and are considered to have been met. A letter of support from the Mayor of London for the first four of six tests is included at Appendix A. The consideration of the fifth and sixth test is expected by 10th February 2020.

NHS England/Improvement have reviewed and assured the finance case in the DMBC.

## Implementation plans

If there is approval to proceed, Moorfields will manage project delivery and will submit an Outline Business Case (OBC) to NHS Improvement/England (NHSI/E) and the Department of Health and Social Care (DHSC) for detailed review in March 2020. As implementation plans are developed further, they will be reviewed again as part of the Moorfields Full Business Case (FBC). Both OBC and FBC will require commissioner support letters as part of completing the submission checklist.

It is expected that Oriel could open in 2025/26, if approval is given to proceed.

Commissioners also plan to establish a London Ophthalmology Collaborative to progress system-wide service redesign of ophthalmology services across London. Commissioners will pursue opportunities for re-provisioning activity, working in partnership with providers and commissioners across London to ensure services are delivered in the best possible way for patients, and deliver value for money.

# Recommendation

The Committees in Common are requested to:

1. **COMMENT and APPROVE** on the Decision Making Business Case, which sets out the evidence for the case, including:

* The clinical case and evidence of support.
* The future models of care and evidence from system modelling.
* Feedback from engagement and consultation.
* Findings from the integrated health inequality and equality impact assessment (IIA).
* The financial plan and affordability, which provides an assessment of value for money.
* The Secretary of State for Health and Social Care’s four tests for proposed service change and are considered to have been met:
* Strong public and patient engagement
* Consistency with current and prospective need for patient choice
* A clear clinical evidence base
* Support for proposals from clinical commissioners.
* The Mayor of London has considered the first four of six tests, as set out in the decision making business case, and is broadly content. The assessment of final two tests is expected by 10th February 2020 but have not raised any material concerns with our approach to date.
* NCL JHOSC considered the consultation outcome on 31 January 2020 and concluded that the engagement process with relevant local authorities, residents, patients and staff has been of sufficiently high quality and proposals are in the interests of healthcare for our residents and patients. This is on that the basis that they will improve patient experience, access to care, as well as the integration of healthcare, teaching and research while delivering the best possible value for money.

1. **APPROVE** the proposal to relocate services from Moorfields Eye Hospital’s City Road site to St Pancras, and build a new centre bringing together excellent eye care, ground-breaking research and world-leading education in ophthalmology.

As part of formal support for the proposal, the Committees in Common is requested to approve the following recommendations that seek to address the feedback we have gained. These are included in the formal support letter and record of decision making, for Moorfields and commissioners to address as part of the development and design phase:

1. **Accessibility**

The consultation clearly highlights accessibility both within the new site, and for the last half mile to the St Pancras site. To ensure this is addressed, Moorfields Hospital should develop and implement a robust accessibility plan, which is co-designed by Moorfields Eye Hospital in partnership with sight loss charities, Oriel Advisory Group, patients, transport providers, local authorities, commissioners and voluntary organisations. The accessibility plan should be incorporated into the building master plan, planning application and the development of the Oriel Full Business Case.

1. **Working in partnership and programme governance**

The Committees in Common would like to thank all statutory, non-statutory groups and members of the public who contributed to the consultation to provide such a wealth of information to inform the decision and future design of the proposed St Pancras site. They also commend the approach and valuable input of the Oriel Advisory Group and the network of other partners into the consultation process.

As such, the Committee recommends that the Moorfields Oriel programme continues to actively involve the Oriel Advisory Group as well as the extensive range of stakeholders that have contributed to the consultation, in the development of the centre at the St Pancras site.

Given the St Pancras site development includes a range of stakeholders, the Committee recommends further consideration be given, with NHS England and Improvement, about the need for formal programme governance, which brings together the multiple stakeholders involved in the St Pancras site development, including NCL STP representation to ensure there is robust strategic oversight of the development as a whole.

Governance for the Moorfields Oriel development of the new St Pancras site will be through the Trust governance mechanisms. The Trust will report progress of the development into the proposed St Pancras site governance.

1. **Service Improvement**

Feedback during the consultation identified improvements in patient experience that can be started prior to the proposed move. It is recommended that Moorfields review the feedback received during the consultation and address areas of improvement before implementation of Oriel where possible.

1. **New Models of Care**

The ophthalmology demand and capacity modelling highlighted the potential benefits of working collaboratively to ensure a coherent approach to the development and implementation of new models of care that improves care for patients and provides care closer to home. To realise this potential, it is recommended that post decision making:

* Commissioners **establish a London Ophthalmology Collaborative** to progress system-wide service redesign of ophthalmology services across London, which would support:
  + Collaboration between system partners including Moorfields and relevant commissioners to develop coherence and standardisation in the pathways experienced by ophthalmology patients.
  + Delivering the aspiration relating to follow up outpatient appointments as set out in the NHS long term plan, where clinically appropriate.
  + Managing activity growth assumptions as outlined in the Ophthalmology Systems Modelling report to support a sustainable model of high quality eye care.
  + Determining potential for future collaboration between Western Eye Hospital and Moorfields to ensure the most effective model of ophthalmology care.

1. **Workforce and transition**

To optimise the benefits of the new centre as referenced in both the PCBC and DMBC, it is recommended that Moorfields:

* Develop an **organisational development programme** to integrate clinical services, research and education, which enable optimal use of the new facilities and enable the Trust to realise the benefits of the integrating research, education and innovation with clinical practice.
* Acknowledge and celebrate the history of the City Road site.

1. **Reducing inequality**

To ensure that the negative impacts identified in the Integrated Health Inequalities and Equalities Impact Assessment (or Integrated Impact Assessment (IIA) are mitigated as far as possible and the potential positive impacts are harnessed, a plan should be developed in response to each of the recommendations arising from the IIA.

In addition, Moorfields should seek to ensure that there is comparable experience and outcomes between the new site at St Pancras and the Trust’s existing network of sites.

Identified risks and risk management actionsThe key risks to commissioners are described in the DMBC section 1.9 (page 15).

Conflicts of interest None noted at this stage. A Register of Interests of all the Nominated Representatives will be available at the meeting.

Resource implicationsIf the proposals are approved, the project will be resourced by Moorfields.

The resource required for the London Ophthalmology Collaborative and potential new governance for the St Pancras redevelopment (described in the recommendations) will be resourced through the NCL STP and Moorfields’ existing infrastructure. There are no additional resource requirements.

Engagement This DMBC has been informed by 16 weeks of public consultation, which captured feedback from over 4,600 contributions, including patients, the public, staff, voluntary and statutory organisations. This is described in the DMBC chapter 5 (page 41).

Equality Impact Analysis To ensure the NHS has paid ‘due regard’ to the matters covered by Public Sector Equality Duty, commissioners appointed an independent expert to undertake an Integrated Impact Assessment (IIA), to ensure the project does not have a disproportionate impact upon any groups with protected characteristics.

The IIA found that Moorfields City Road service users are more likely than in other healthcare settings to have one or more of the protected characteristics. Users of services at the City Road site often have a long and trusted relationship with the teams located there.

The IIA specifically focused on the impact of the proposed relocation. The analysis showed a number of protected characteristics, health inequalities and health impacts were not negatively impacted by this proposed relocation. A summary of the key impacts are:

* Most feedback supported the proposal to relocate, due to the integration of eye care with research and education. This would specifically support the opportunity for closer working with organisations such as the Francis Crick Institute, RNIB and UCL.
* People felt that the new centre would benefit both patients and staff, in that a specialist and highly regarded hospital such as Moorfields needs 21st century purpose-built facilities providing a world class centre of excellence.
* The primary issue for people with protected characteristics is the complexity of navigating the last half mile.

Moorfields have accepted all recommendations in the IIA. Moorfields’ detailed response to the IIA is included in the DMBC Appendix H.

Report history and key decisionsThe consultation findings have been presented to the following groups:

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| **Committee name** | **Date discussed** | **Outcome** |
| NCL JCC Seminar | 5 September 2019 | Discussion and noted |
| Ealing Governing Body Seminar | 11 September 2019 | Discussion and noted |
| NCL JCC Seminar | 7 November 2019 | Discussion and noted |
| NEL JCC meeting | 13 November 2019 | Discussion and noted |
| East & North Hertfordshire GB Workshop | 14 November 2019 | Discussion and noted |
| Herts Valleys Governing Body | 14 November 2019 | Discussion and noted |
| Camden CCG Governing Body Forum | 27 November 2019 | Discussion and noted |
| Ealing CCG Governing Body Seminar | 27 November 2019 | Discussion and noted |
| Ealing CCG Governing Body public meeting | 22 January 2020 | Discussion and noted |

The Consultation Findings Report, which presented an independent summary of feedback received during the consultation, was sent to all Governing Body members of the 14 CCGs who commission over £2m per annum of activity from City Road on 23 October 2019. Members were invited to share their views on the report, particularly anything they felt was pertinent to the final decision-making, before the report was finalised.

The Consultation Findings Report, Integrated Impact Assessment and report on ‘consultation with people with protected characteristics and rare conditions’ were published on 13 January 2020 on [www.oriel-london.org.uk](http://www.oriel-london.org.uk).

Next stepsSubject to approval of the decisions by Committees in Common, the following next steps will be undertaken:

* Moorfields will submit an Outline Business Case (OBC) for the proposals with detailed plans for approval by NHSE/I, DHSC and HM Treasury.
* The recommendations will be progressed.

## Appendices

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| Appendix A(i) | Mayor of London consideration of the proposals in line with the Mayor’s Six Tests (first four tests – Sept 2019) |
| Appendix A(ii) | Mayor of London consideration of the proposals in line with the Mayor’s Six Tests (fifth and sixth test – February 2020) |
| Appendix B | London Clinical Senate recommendations and action plan |
| Appendix C | Commissioner Finance Directors’ letter of support |
| Appendix D | System modelling |
| Appendix E | Consultation with people with protected characteristics and rare conditions |
| Appendix F | Summary of Local Authority and Overview and Scrutiny Committee (OSC) engagement |
| Appendix G | Integrated Health Inequalities and Equality Impact Assessment (IIA) |
| Appendix H | Moorfields’ response to consultation |
| Appendix I | Oriel options appraisal validation |
| Appendix J | Independent review of suggested alternative sites for the proposed new centre |
| Appendix K | North Central London (NCL) Joint Health Overview and Scrutiny Committee (JHOSC) response |