

**BCUHB STRATEGIC SERVICE REDESIGN
CHECKLIST AND PRIORITISATION
FRAMEWORK**

USING THE STRATEGIC SERVICE REDESIGN CHECKLIST AND PRIORITISATION FRAMEWORK

The checklist is to be used to when developing proposals for strategic service change. Using the checklist will ensure that the evidence required to assess the relative priority of proposals is available for scrutiny.

The prioritisation framework will enable structured assessment of the evidence against the principles in the Clinical Strategy. It will help to inform decisions regarding the relative priority of each proposal and to agree the proposals to take forward via the BCUHB Clinical Services Plan and/or Integrated Medium Term Plan (IMTP) development process.

STEP 1 – IDENTIFYING AREAS FOR STRATEGIC SERVICE REDESIGN

Circumstances under which a proposal may be considered:

- Pertains to a formally agreed pre-existing commitment
- Meets at least one of the National Clinical Framework criteria for service reconfiguration, as below:
 - Criteria 1:** There is evidence that the outcomes for people are significantly below comparator providers or there are significant patient safety concerns.
 - Criteria 2:** There is no viable prospect of the service meeting professional standards and/or recommended minimum volumes of activity to maintain high standards of care.
 - Criteria 3:** The workforce required to safely and sustainably deliver the service is not available because it cannot be recruited, developed or retained - or can only be delivered by a dependency on agency or locum staff.
 - Criteria 4:** There is professional consensus on the merits of reconfiguring services to deliver an enhanced pathway or a new service model.
 - Criteria 5:** There is significant public support or democratic mandate to change a service model.
- Delivers BCUHB strategic objectives as per the BCUHB Clinical Services Strategy, including improvements to quality, outcomes and experience

STEP 2 – EVIDENCE REQUIREMENTS AND ASSESSMENT

Structured assessment and comparison will consider four 'Evidence Areas':

- **Does it work?**
- **Does it add value?**
- **Is it a reasonable cost to the public?**
- **Is it the best way of delivering the service?**

The 'Evidence Areas' are further broken down into 12 'Factors for Consideration' which are detailed in the checklist, Table 1 overleaf.

Table 1: Checklist - Factors to consider

| | Factor to Consider | Checklist questions |
|---|----------------------------------|--|
| 1 | Is change required? | <p>Is this a formally agreed pre-existing commitment?</p> <p>Do the National Clinical Framework criteria for service reconfiguration apply?</p> <p>Will the change deliver BCUHB strategic objectives?</p> |
| 2 | Clinical Effectiveness | <p>Will the change safeguard or improve the quality, effectiveness and sustainability of clinical services?</p> <p>(a) Impact on clinical outcomes: will the proposal make a positive difference to clinical outcomes? Will it minimise the harm (physical and psychological) that an illness or health condition could cause?</p> <p>(b) Value Based Health Care: to what extent will the proposed change deliver a measurable benefit over the existing service provision?</p> <p>(c) Patient outcome and experience: will there be a positive impact on the patient outcomes and experience?</p> <p>(d) Evidence base: what scientific evidence base is available? For example, national guidelines and standards, NICE, benchmarking, research etc.</p> <p>(e) Sustainability: will services be more sustainable following the proposed change?</p> |
| 3 | Health Gain and wellbeing | <p>Will the change have a positive effect on:</p> <p>(a) Mortality - saving life,</p> <p>(b) Longevity - prolonging life,</p> <p>(c) Health-related quality of life and wellbeing</p> <p>(d) Population health - improvements against lifestyle indicators</p> <p>(e) Reducing harm</p> |
| 4 | Strategic Fit | <p>Is proposed change consistent with principles in the BCUHB Clinical Services Strategy and any other relevant national or local strategies or plans?</p> |
| 5 | Population Health Need | <p>Does the proposal meet population health need current and forecast?</p> <p>Is the change proportionate? Does it strike a balance between the needs of a group of patients, the demands of the wider community and the need to respect an individual's human rights?</p> <p>What will the mean for the individual patient, group of patients and the wider community?</p> |
| 6 | Health Inequities | <p>Will the proposal contribute to reducing or widening health inequities amongst our population?</p> |
| 7 | Affordability | <p>How much will the change cost – capital and revenue?</p> <p>Can existing resources be reallocated to fund the change? If not are alternative funding sources available?</p> |

| | Factor to Consider | Checklist questions |
|----|-------------------------------------|--|
| | | Does the proposal present an opportunity to release resources for alternative uses? Resources include staff time, estate and finance. |
| 8 | Value Based Health Care | Is the proposal consistent with Value Based Healthcare principles? What are the opportunity costs of the change to BCUHB and where relevant our partners? |
| 9 | Transformation opportunities | Have end-to-end pathways been mapped – current and optimal? Is there evidence that this is the best way of delivering the service? What opportunities exist to deliver in partnership? What are the transformation opportunities – shift left workforce, estate, use of technology? Does the proposal support and improve integrated delivery of health and social care? |
| 10 | Impact on services elsewhere | Is there an impact on other BCUHB service areas? Is there an impact for non-BCUHB services? |
| 11 | Workforce | Will there be changed workforce requirements? Will the change assist with recruitment and retention? Will the change help meet training and education needs? |
| 12 | Accessibility | Have accessibility issues e.g. transport, geography, language etc. been taken into account? |

A completed 'Strategic Change Proposal' form, Appendix A, is required for each submission.

STEP 3: APPLICATION OF PRIORITISATION FRAMEWORK AND GOVERNANCE

(In development to follow)

APPENDIX A

STRATEGIC CHANGE PROPOSAL CHECKLIST

| Factors to Consider | | Description and supporting evidence | Additional Information |
|---------------------|--|-------------------------------------|------------------------|
| | Does it Work? | | |
| 1 | Is change required? | | |
| 2 | Clinical Effectiveness | | |
| 3 | Health Gain | | |
| | Does it Add Value to Society? | | |
| 4 | Strategic Fit | | |
| 5 | Population health need | | |
| 6 | Health Inequities | | |
| | Is it a Reasonable Cost to the Public? | | |
| 7 | Affordability | | |
| 8 | Value based health care | | |
| | Is it the Best Way of Delivering the Service? | | |
| 9 | Transformation opportunities | | |
| 10 | Impact on Services Elsewhere | | |
| 11 | Workforce | | |
| 12 | Accessibility | | |

BCUHB CLINICAL SERVICES STRATEGY – PRIORITISATION TEMPLATE

(TO FOLLOW)

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