



**Integrated
Care System**
Shropshire, Telford and Wrekin



**Shropshire, Telford
and Wrekin**

Shrewsbury Health and Wellbeing Hub

Progress Update

**Shropshire Health and Adult Social Care
Overview and Scrutiny Committee**

27th March 2023

Recap of progress so far



Shrewsbury Hub Development has 3 Options Appraisal components

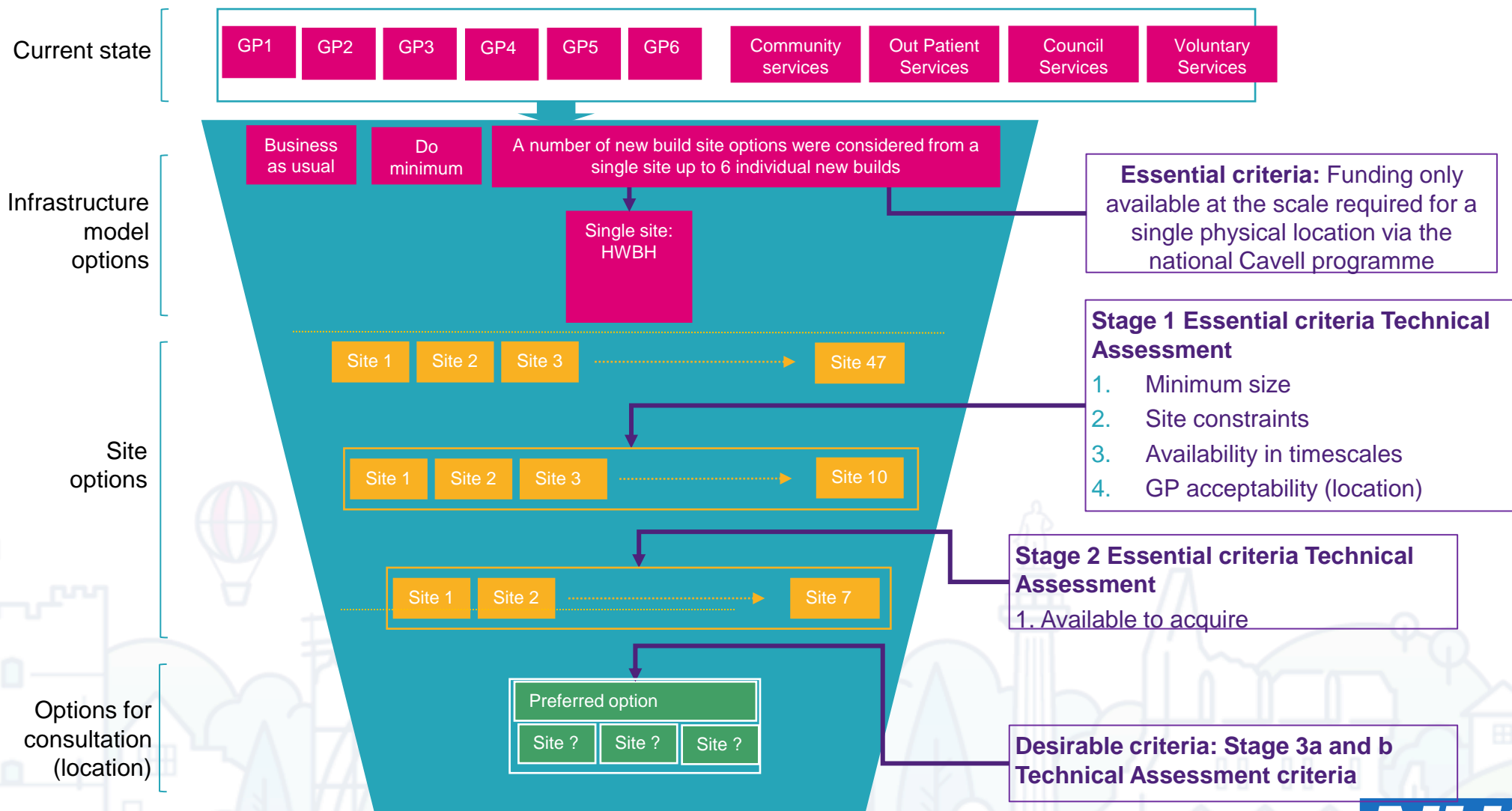
Option appraisal	Status	Outcome
Providing sustainable fit for purpose GP premises	Complete	Single site new build through national Cavell programme is the only viable option – only source of funding at the scale required
Location of single new build site	In progress	Target date for completion of prioritised list and identification of preferred site option early May 2023
Configuration of other services to be co-located with the 6 GP Practices at the new site	In progress	Currently seeking the views of the public through engagement events



Site options appraisal process



Options Appraisal (2) location



Site options appraisal Process Summary

Part	Description	Output
1	Identification of all potential sites	Long list
2	Stage 1 Technical Assessment Essential Criteria applied to the long list	Medium list
3	GP practice validation of medium list sites	Shortlist
4	Stage 2 Technical Assessment Essential criteria 'is the site available to acquire?' applied	Shortlist
5	Stage 3 Technical Assessment Desirable criteria applied (current stage, will be concluded by the end of March 23)	Detailed assessment analysis for each of the appraisal criteria
6	Stage 4 System Stakeholder Site Options Appraisal Workshop (this is a change to the original process, see detail in next slide)	Prioritised shortlist and identified preferred site option



Proposed Stage 4 Workshop Format

1. Invitees:- Project Board, Practice representatives, Health and Adult Overview Scrutiny Committee, Stakeholder Reference Group, Healthwatch, Technical experts, Senior officers of LA , External facilitator
2. Face to Face
2. The technical experts will present their findings and rationale.
3. To allow for complete objectivity the sites will not be named at this stage of the workshop. The process will be to discuss the facts of each of the shortlisted options and consider what could be considered as more suitable than others, and have an evidence trail in place to support this process.
4. There will be no preferred option information shared at this stage of the workshop.
5. At the end of the workshop the final site list will be named in terms of location.
6. Non-disclosure agreement form prior to participation.
7. The group is being engaged to offer transparency in the process and to inform the final prioritised site list, but it is not a decision-making group. The group views/findings will be shared as a recommendation for the ICB Board to consider.
8. Indicative date is early May 2023
9. We will try and make the workshop venue accessible by public and private transport.
10. Ahead of the workshop more details will follow.



HASC are formally invited to attend and participate



Site options appraisal criteria and method of assessment



Site options appraisal - Stage 3 (current stage): technical assessment criteria

	Criteria
Stage 3a	1. Ability to achieve planning permission to deliver a Health Hub on the site
	2. The site should have 'clean title' i.e. free from any insurmountable restrictive covenants and low amount of general covenants
	3. The site should have access to statutory utilities and adopted highways, existing or to be created
Stage 3b	1. The site location should be well located and in close proximity to serve the patients of the 6 participating practices
	2. The site should be easily accessible by sustainable travel methods eg. on foot, cycle and by public transport (on existing primary bus route, park and ride or to a proposed route in conjunction with Shropshire Council) and also by car
	3. The site should be located within or near to an area in Shrewsbury which has the highest levels of overall deprivation
	4. The site should allow for future adaptability, expansion and development for future partner services
	5. The site is flexible in terms of the building plan which will impact upon the footprint subject to planning constraints



Change to Criteria weighting and scoring

- It is proposed to move away from the original proposal to numerically weight and score each of the criteria as this is not the current recommended best practice approach.
- It is proposed for each of the criteria to be assessed against the following 5 categories:



- The technical experts will provide definitions for how they have applied them for each of the 5 categories.
- Given the degree of concern expressed by the public in relation to the travel impact, it is proposed to share the definitions and the output of the assessment with Healthwatch for sense checking prior to presentation at the workshop
- **Examples for illustration purposes** of what the outputs of this approach would look like are included on the next 2 slides



EXAMPLE FOR ILLUSTRATIVE PURPOSES ONLY: Travel time (public transport) evaluation

LSOA population weighted travel times by public transport

Sites	Average travel time	% within 15 mins	% within 30 mins	% within 45 mins	% within 60 mins	Max (mins)
Current	15 mins	42%	87%	100%	100%	38
Site 1	27 mins	12%	60%	99%	100%	48
Site 2	26 mins	14.5%	62.3%	99.3%	100%	50
Site 3	31 mins	8.1%	48%	89.1%	99.4%	58
Site 4	23 mins	17.7%	81.5%	100%	100%	45
Site 5	36 mins	3.2%	34.2%	70.2%	97.9%	65
Site 6	18 mins	32%	78%	100%	100%	42

See overleaf

++
-
-
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+
--
+

Key

++	No change	-	<100% in 45 mins OR max >50 mins
+	Max > 40 mins	--	<100% in 60 mins OR max >55 mins
/	Max > 45 mins		



EXAMPLE: evaluation matrix

		BAU	1	2	3	4	5	6	
Stage 3	1 Feasibility	> 1. a) Ability to obtain Planning consent?	/	/	+	/	+	-	/
	2 Accessibility	2. a) Travel time (public)	++	-	-	--	+	--	+
		2. b) Travel time (peak)	++	/	++	+	+	/	+
		2. c) Travel time (off peak)	++	+	+	-	+	-	+
		2. d) Number of changes (public)	++	++	+	-	+	-	+
		2. e) Number car parking spaces	-	-	/	/	+	/	-
	3 Deprivation	3. a) Average deprived groups (public)	/	--	/	--	+	/	+
		3. b) Maximum deprived groups (public)	--	+	--	--	/	/	-
	4 Adaptability	4. a) Size of site	-	-	/	-	/	-	-
		4. b) Flexibility of site	--	++	++	++	++	+	-
	5 Site flexibility	5.a) Complexity of build	--	+	+	++	+	-	--

See previous

EXAMPLE FOR ILLUSTRATIVE PURPOSES ONLY

ALL DUMMY DATA



Communication and Engagement



Community Based Comms and Engagement

- Since our last meeting, the targeted community engagement phase has begun using a focus group model. We have been engaging with our target groups since the end of January and more activity is scheduled until the end of March.
- We are particularly engaging younger people under age 24 years, older people over age 80 years, carer organisations, expectant parents, ethnic minority groups and faith groups. These groups were identified by a gap analysis exercise.
- To enhance reach to target groups, a comprehensive stakeholder toolkit has been created which includes email and website templates, social media posts and graphics, for wide distribution within networks.
- Community engagement work has been extensive and has included attendance at multiple special interest groups such as dementia and carer support groups, disability networks, LGBTQIA+ groups, parent's groups, day centres and veteran groups.
- Communications activity has included clinical staff participation in short videos to share their views on the hub and why they feel it will benefit their patients and staff. These clips will be uploaded onto the hub landing page of the NHS STW website which we signpost people to for further information.
- A feature on current GP pressures and why the hub could help, written by Dr Matthew Fallon, GP partner at Claremont Surgery, has been shared on the NHS Shropshire Telford and Wrekin website for important context and was recently covered by the Shropshire Star: [Doctor says Shrewsbury GP hub is an opportunity they must not risk losing | Shropshire Star](#)



National programme update



National Programme update

- The national programme team has taken a decision to “slow down” the process to allow all pilot programmes to develop at the same speed. As you know, some areas were ahead of the funding approval period.
- This does not impact on the financial decision timelines previously shared as the 2024/2025 spending review period for capital allocation in 2025/26.
- In regard to Shrewsbury Health and Wellbeing Hub:
 - The project team will continue to develop the options appraisal process.
 - We will complete the public engagement activity.
 - The project team will complete the pre-consultation business case. The current timeline for consultation start is September 2023.
 - In line with our statutory duties, the project team we will present those findings to Shropshire Council Health and Care Scrutiny Committee.



Response to outstanding HASC questions



Response to questions not yet answered

HASC Question	ICB Response
11/7/22 Whether overseas examples of primary health care provision had been taken into account;	The integrated health and wellbeing hub single site model designed with primary care at its centre is mandated as part of the national Cavell programme therefore STW has not explored alternative models of delivery from overseas
31/10/22 “Had unintended consequences been considered – particularly the impact a hub might have on recruitment and retention in practices in more rural parts of the county, other providers and would an independent pharmacy be located at the hub and if so what would be the impact on existing provision in the community;”	The potential co-located services include a pharmacy. The appointment of a pharmacy within the hub would be subject to a formal procurement exercise. The ICB will consider any unintended consequences on pharmacy provision in the practice existing locations as part of its planning. The Local Pharmaceutical Committee are a member of the Stakeholder Reference Group.
31/10/22 “Was it correct that services delivered from the hub would be available to patients from other practices in the county;”	Where capacity allows and it makes sense to do so, the co-located services in the hub will be available to patients from other practices. Detailed demand and capacity modelling as part of the development of the business case will inform this decision.
30/1/23 Can the HASC be provided with the weightings and scores for the options appraisals	Only yes/no essential criteria were applied in the options appraisal for delivering sustainable fit for purpose premises for the 6 GP practices. The next stage where weighted and scored desirable criteria are applied was not reached as the application of the first stage essential criteria resulted in there being only one viable option of a single site new build via the national Cavell programme as the only source of capital funding. The Project Team is adopting an alternative assessment process than weighting and scoring for the site options appraisal as set out in this briefing report



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Thank you