

ANNEX 2 – Provider commentary

For further detail on how to use this Annex to obtain commentary from local, acute providers, please refer to the Technical Guidance.

Name of Health & Wellbeing Board	Central Bedfordshire Health & Wellbeing Board
Name of Provider organisation	East and North Herts NHS Trust
Name of Provider CEO	Nick Carver
Signature (electronic or typed)	

For HWB to populate:

Total number of non-elective FFCEs in general & acute	2013/14 Outturn	21,775	
	2014/15 Plan	21,602	
	2015/16 Plan	20,444	
	14/15 Change compared to 13/14 outturn	173	
	15/16 Change compared to planned 14/15 outturn	1,158	
	How many non-elective admissions is the BCF planned to prevent in 14-15?	0	
	How many non-elective admissions is the BCF planned to prevent in 15-16?	757	E&NH indicative contribution
		112	

For Provider to populate:

	Question	Response
1.	Do you agree with the data above relating to the impact of the BCF in terms of a reduction in non-elective (general and acute) admissions in 15/16 compared to planned 14/15 outturn?	<p>Emergency flows into the East & North Hertfordshire NHS Trust from Central Bedfordshire and from Bedfordshire CCG overall are increasing – our latest analysis shows a 27% increase in emergency admissions from Bedfordshire CCG into the Lister this financial year to Month 4, compared to 13/14.</p> <p>The current strategic context appears to be driving a shift in demand away from Bedford Hospital and towards the Lister. This strategic context includes both the Bedfordshire and Milton Keynes Healthcare Review and the opening enhanced facilities and services at the Lister Hospital, following completion in October 2014 of an eight year programme of acute</p>

		<p>consolidation at the Lister.</p> <p>The overarching ambition of the Central Bedfordshire BCF is broadly consistent with the Trust's strategic objectives and we are keen to work with Central Bedfordshire to achieve these ambitions for the communities that we serve.</p> <p>The Trust understands that the data is indicative and understands that the Health & Wellbeing Board intends to refresh the 15/16 plan to reflect 14/15 activity and activity trends for both planning and contractual purposes .</p>
2.	<p>If you answered 'no' to Q.2 above, please explain why you do not agree with the projected impact?</p>	<p>N/A</p>
3.	<p>Can you confirm that you have considered the resultant implications on services provided by your organisation?</p>	<p>An overview of the proposals has been shared with the Trust and these have been considered in principle. The current plans for each workstream and project now need to be developed to a stage at which clear and mutual understanding can be reached regarding implementation lead times and the expected impact on emergency demand specifically from those localities that generate demand for the Lister. This will enable the Trust to plan accordingly and adjust services and resources accordingly within reasonable lead times.</p>