

Kent and Medway vascular programme options appraisal refresh - 2021
Individual scores from eight panel members

| Domain | Criteria |
|-----------------------------------|---|
| Quality of care for all | Clinical effectiveness and responsiveness |
| | Patient experience |
| | Clinical co-dependencies |
| | Clinical outcomes |
| | Safety |
| Access to care for all | Distance and time to access services |
| | Service operating hours |
| | Patient choice |
| Affordability and value for money | Profit/Loss |
| | Affordability to commissioners |
| | Capital cost to the system |
| | Meet license conditions |
| Workforce | Scale of impact |
| | Sustainability |

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|-------------------------------|--|
| | Impact on local workforce |
| Deliverability | Expected time to deliver |
| | Co-dependencies with other strategies |
| Research and Education | Disruption to education & research |
| | Support current & future education & research delivery |
| | Totals: |

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Member 1

Member 2

| Member 1 | | | Member 2 | | |
|----------|----------|------------|----------|----------|------------|
| Option A | Option B | Difference | Option A | Option B | Difference |
| 1 | 1 | 0 | 1 | 1 | 0 |
| 2 | 1 | 1 | 2 | 1 | 1 |
| 2 | 2 | 0 | 2 | 2 | 0 |
| 1 | 1 | 0 | 2 | 1 | 1 |
| 1 | 1 | 0 | 1 | 1 | 0 |
| 2 | 2 | 0 | 1 | 1 | 0 |
| 2 | 2 | 0 | 2 | 2 | 0 |
| 2 | 1 | 1 | 2 | 1 | 1 |
| 2 | 1 | 1 | 1 | 0 | 1 |
| 1 | 1 | 0 | 1 | 1 | 0 |
| 2 | 0 | 2 | 2 | 0 | 2 |
| 1 | 1 | 0 | 1 | 1 | 0 |
| 1 | 0 | 1 | 2 | 1 | 1 |
| 2 | 2 | 0 | 2 | 2 | 0 |

| | | | | | |
|----|----|----------|----|----|-----------|
| 2 | 1 | 1 | 2 | 1 | 1 |
| 1 | 0 | 1 | 2 | 1 | 1 |
| 1 | 1 | 0 | 2 | 0 | 2 |
| 1 | 1 | 0 | 2 | 1 | 1 |
| 1 | 1 | 0 | 2 | 2 | 0 |
| 28 | 20 | 8 | 32 | 20 | 12 |

Member 3**Member 4**

| Member 3 | | | Member 4 | | |
|-----------------|-----------------|-------------------|-----------------|-----------------|-------------------|
| Option A | Option B | Difference | Option A | Option B | Difference |
| 1 | 0 | 1 | 1 | 1 | 0 |
| 1 | 1 | 0 | 2 | 0 | 2 |
| 1 | 0 | 1 | 2 | 1 | 1 |
| 2 | 1 | 1 | 2 | 2 | 0 |
| 2 | 1 | 1 | 1 | 1 | 0 |
| 2 | 1 | 1 | 2 | 2 | 0 |
| 2 | 2 | 0 | 2 | 2 | 0 |
| 1 | 1 | 0 | 2 | 1 | 1 |
| 1 | 0 | 1 | 1 | 1 | 0 |
| 1 | 0 | 1 | 1 | 1 | 0 |
| 1 | 0 | 1 | 2 | 1 | 1 |
| 0 | 0 | 0 | 1 | 1 | 0 |
| 1 | 0 | 1 | 1 | 1 | 0 |
| 2 | 0 | 2 | 2 | 2 | 0 |

| | | | | | |
|----|---|-----------|----|----|----------|
| 0 | 0 | 0 | 2 | 1 | 1 |
| 2 | 0 | 2 | 1 | 0 | 1 |
| 2 | 0 | 2 | 2 | 1 | 1 |
| 1 | 1 | 0 | 2 | 2 | 0 |
| 1 | 1 | 0 | 2 | 2 | 0 |
| 24 | 9 | 15 | 31 | 23 | 8 |

Member 5**Member 6**

| Member 5 | | | Member 6 | | |
|----------|----------|------------|----------|----------|------------|
| Option A | Option B | Difference | Option A | Option B | Difference |
| 1 | 1 | 0 | 1 | 1 | 0 |
| 2 | 1 | 1 | 1 | 1 | 0 |
| 2 | 2 | 0 | 2 | 2 | 0 |
| 2 | 2 | 0 | 1 | 1 | 0 |
| 1 | 1 | 0 | 1 | 1 | 0 |
| 1 | 2 | 1 | 2 | 1 | 1 |
| 2 | 2 | 0 | 2 | 2 | 0 |
| 2 | 2 | 0 | 2 | 1 | 1 |
| 1 | 2 | 1 | 2 | 1 | 1 |
| 2 | 2 | 0 | 2 | 2 | 0 |
| 2 | 1 | 1 | 2 | 0 | 2 |
| 0 | 0 | 0 | 1 | 1 | 0 |
| 1 | 1 | 0 | 2 | 1 | 1 |
| 2 | 2 | 0 | 2 | 2 | 0 |

| | | | | | |
|----|----|----------|----|----|-----------|
| 2 | 1 | 1 | 1 | 0 | 1 |
| 2 | 1 | 1 | 1 | 0 | 1 |
| 2 | 0 | 2 | 2 | 0 | 2 |
| 1 | 2 | 1 | 2 | 1 | 1 |
| 2 | 2 | 0 | 2 | 2 | 0 |
| 30 | 27 | 9 | 31 | 20 | 11 |

Member 7**Member 8**

| Option A | Option B | Difference | Option A | Option B | Difference |
|----------|----------|------------|----------|----------|------------|
| 1 | 1 | 0 | 1 | 1 | 0 |
| 1 | 1 | 0 | 1 | 0 | 1 |
| 2 | 2 | 0 | 1 | 1 | 0 |
| 2 | 1 | 1 | 1 | 1 | 0 |
| 1 | 1 | 0 | 1 | 1 | 0 |
| 2 | 2 | 0 | 1 | 1 | 0 |
| 2 | 2 | 0 | 1 | 1 | 0 |
| 2 | 1 | 1 | 1 | 1 | 0 |
| 1 | 0 | 1 | 1 | 0 | 1 |
| 2 | 1 | 1 | 1 | 0 | 1 |
| 2 | 0 | 2 | 2 | 0 | 2 |
| 2 | 2 | 0 | 0 | 0 | 0 |
| 2 | 1 | 1 | 1 | 0 | 1 |
| 2 | 2 | 0 | 1 | 1 | 0 |

| | | | | | |
|----|----|-----------|----|----|-----------|
| 2 | 0 | 2 | 1 | 0 | 1 |
| 2 | 1 | 1 | 2 | 0 | 2 |
| 1 | 0 | 1 | 1 | 0 | 1 |
| 2 | 1 | 1 | 1 | 1 | 0 |
| 2 | 2 | 0 | 1 | 1 | 0 |
| 33 | 21 | 12 | 20 | 10 | 10 |

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| non differential | Either option should improve this but I do not think this differentiates because both providers rated RI and in SOF4 |
| EKHUFT requires fewer patients to move. EKHUFT service colocated with renal and has dedicated ward facilities | Similar at both providers |
| Neither site has all necessary clinical adjacencies (NSS and SE Clinical Senate) | |
| Having single hub will improve outcomes regardless of where located | Outcomes comparable at both sites although note numbers lower at Medway currently |
| Having single hub will improve safety regardless of where located | Combined service expected to improve safety but both providers currently rated RI |
| non differential | Higher number of admissions taking over 60 mins expected with MFT option |
| non differential | |
| non differential | Final patient choice similar but more patients affected by MFT option |
| MFT scored lower due to higher revenue costs (cost of capital and MFF) | Greater stranded and revenue costs with MFT option |
| MFT would require capital which the system doesn't have | MFF not a significant differentiator |
| Capital costs and time for implementation mean MFT scores lower | |
| non differential (although recognise that MFT would be more expensive to implement) | Both in SOF 4 |
| K&CH better as fewer patients impacted | More staff affected in MFT option |
| non differential however long term the service will be at EKHUFT | |

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|---|---|
| K&CH better as fewer staff impacted | MFT currently has fewer staff for specialist vascular |
| MFT will take years to deliver as they don't have capacity, requires business cases and capital | Likely to be a significant delay if MFT option chosen |
| Long term the service is to be in East Kent | |
| non differential | would require move of vascular junior doctors |
| non differential | |
| | |

| | Free text comments from panel m |
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| only adjust for no. patients impacted once | Medway challenged by patient flow and theatre capacity issues |
| | No stroke service at Medway |
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| are these shown in the correct option? Scored based on site narrative rather than column header | |
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| | Would be challenging to start work at this point on new infrastructure @ Medway |
| | Should align with stroke model |
| are these shown in the correct option? Scored based on site narrative rather than column header | |
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| Members |
| Operational difficulties at K&C may pose short term challenges but these should be resolved once service comes together and stops operating on two sites. MFT site's current difficulties would have a negative medium term impact |
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| Although there are co-dependencies which are not met on the K&C site, most notably A&E, these are met in the EKHFT Trust as a whole to co-location with renal & stroke (interim) make this a reasonable interim option |
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| Current larger service |
| Problems with current clinical workforce |
| Small proportion of South Kent not within 1 hour travel time for Medway |
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| Cost less for K&C option |
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| Large build would be needed to accommodate at Medway |
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| More staff would need to move from EKHFT to MFT as larger service |
| taking account of long term with plans to EKHFT and co-location with A&E services |

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| Most infrastructure in place at K&C whereas significant build at MFT |
| Fits |
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| | CQC ratings for both are requires improvement |
| more patients impacted with option B | EHUFT have slighty better pts outcome sususing the measure and less pts would be impacted |
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| no readmission rates provided, ? Outcomes in national audits | Below avaaerage outcomes |
| | CQC ratings for both are requires improvement |
| Possible net gain KCH if admissions from TW remains as is | Almost equal travel times and impacts |
| ? Retention | |
| patient numbers impacted as discriminator | More pts affected if option B |
| | both options represent increase in costs. However less cost impact at EKHUFT |
| | Note not a significant differentiator |
| no capital money indentified to support MFT | Could be significant impact on the system |
| | Both receieving SQR support |
| greater impact at MFT but criteria scale unclear so may be same | Bigger impact for option B |
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| | Bigger impact for option B |
| longer time at MFT | Extended time required for option B |
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| impact of difference low | Disruption to EKHUFT junior doctor training posts |
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Compiled scores from eight panel members

| Domain |
|-----------------------------------|
| Quality of care for all |
| Access to care for all |
| Affordability and value for money |
| Workforce |
| Deliverability |
| Research and Education |
| |

All individual scores are given (0,1 or 2). Score Red if less than 4/8 panel members

*NB: These two criteria are not included in the current methodology. This was

| Criteria | Average compiled score in favour of Option A |
|--|---|
| Clinical effectiveness and responsiveness | 0 |
| Patient experience | 1 |
| Clinical co-dependencies | 0 |
| Clinical outcomes | 0 |
| Safety | 0 |
| Distance and time to access services | 0 |
| Service operating hours | 0 |
| Patient choice | 1 |
| Profit/Loss | 1 |
| Affordability to commissioners | 0 |
| Capital cost to the system | 2 |
| Meet license conditions | 0 |
| Scale of impact | 1 |
| Sustainability | 0 |
| Impact on local workforce | 1 |
| Expected time to deliver | 1 |
| Co-dependencies with other strategies | 2 |
| Disruption to education & research | 0 |
| Support current & future education & research delivery | 0 |
| Totals: | 10 |

are scored in favour of Option A (Medium term solution at EKHFT). Compiled score is rated Green if at least 6/8 panel members agree on score, Amber if at least 5 panel members agree on score (or if scoring varies as to which option is preferred).

Criteria were presented as Green in the meeting, whereas they should have shown as Amber, as highlighted to the panel members after the meeting, and did not affect the

| Alternative scores | RAG rating | Agreed score following panel discussion on 28/9 |
|---------------------|------------|---|
| One 1 | | 0 |
| One 2 and Three 0 | | Discussed - 1 |
| Three 1s | * | 0 |
| Three 1s | * | 0 |
| One 1 | | 0 |
| Three 1s | | Discussed - 0 |
| | | 0 |
| Five 1s Three 0s | | Discussed - 0. (Rationale - need to stick to methodology of using whole digits, so change to 0 - not a significant difference between options and largely emergency admissions) |
| One 0 | | 0 |
| Three 1s | | Discussed - 0 |
| Three 1s | | Discussed - 2 |
| | | 0 |
| Two 0s | | 1 |
| One 2 | | Discussed - 0 |
| One 0 One 2 | | 1 |
| Two 2s | | 1 |
| Three 1s, One 0 | | Discussed - 2 (NB: add footnote on the differing scores but not material to outcome) |
| Four 1s | | Discussed - 0 |
| | | Discussed - 0 |
| Range 8 - 16 | | 9 |

Final score is taken from most frequent score
 if at least 4/8 panel members agree on score, and
 available for that criteria).

Final score is as Amber according to the above
 based on overall scoring or recommendation.

| Average compiled score in favour of Option A | Alternative scores | RAG rating | COMBINED RAW SCORES | | CO |
|--|---------------------|------------|---------------------|------------|-----------|
| | | | Option A | Option B | Option A |
| 0 | One 1 | | 8 | 7 | 1 |
| 1 | One 2 and Three 0 | | 12 | 6 | 2 |
| 0 | Three 1s | * | 14 | 12 | 2 |
| 0 | Three 1s | * | 13 | 10 | 2 |
| 0 | One 1 | | 9 | 8 | 1 |
| 0 | Three 1s | | 13 | 12 | 2 |
| 0 | | | 15 | 15 | 2 |
| 1 | Five 1s Three 0s | | 14 | 9 | 2 |
| 1 | One 0 | | 10 | 5 | 1 |
| 0 | Three 1s | | 11 | 8 | 1 |
| 2 | Three 1s | | 15 | 2 | 2 |
| 0 | | | 6 | 6 | 1 |
| 1 | Two 0s | | 11 | 5 | 1 |
| 0 | One 2 | | 15 | 13 | 2 |
| 1 | One 0 One 2 | | 12 | 4 | 2 |
| 1 | Two 2s | | 13 | 3 | 2 |
| 2 | Three 1s, One 0 | | 13 | 2 | 2 |
| 0 | Four 1s | | 12 | 10 | 2 |
| 0 | | | 13 | 13 | 2 |
| 10 | Range 8 - 16 | | | | |
| TOTALS | | | 229 | 150 | 29 |

lution at EKUHFT). Compiled score is taken from 8 panel members agree on score, Amber if at least 4 members agree on score (or if scoring varies as

reas they should have shown as Amber according to the meeting, and did not affect the overall

MBINED AVERAGES
(rounded up)

| Option B | Difference | Agreed score following panel discussion on 28/9 |
|-----------|------------|---|
| 1 | 0 | 0 |
| 1 | 1 | 1 |
| 2 | 0 | 0 |
| 1 | 0 | 0 |
| 1 | 0 | 0 |
| 2 | 0 | 0 |
| 2 | 0 | 0 |
| 1 | 1 | 0 |
| 1 | 1 | 1 |
| 1 | 0 | 0 |
| 0 | 2 | 2 |
| 1 | 0 | 0 |
| 1 | 1 | 1 |
| 2 | 0 | 0 |
| 1 | 1 | 1 |
| 0 | 1 | 1 |
| 0 | 1 | 2 |
| 1 | 0 | 0 |
| 2 | 0 | 0 |
| | | |
| | | |
| 19 | 10 | 9 |