

Provider Medical Directors and Intestinal Failure Clinicians
Provider Contract Leads
Independent Sector providers
NHSE Hub specialised commissioning managers
NHSE specialised commissioning Regional Directors
NHSE specialised commissioning Regional Clinical Directors
Colorectal CRG members
PINNT Intestinal Failure review patient representatives

Internal Medicine Programme of Care
Specialised Commissioning
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Adult Intestinal Failure Services - Stakeholder Update #01

Dear colleagues,

Many trusts, clinicians and others have undertaken considerable work over the last couple of years as part of a national procurement exercise for specialised intestinal failure services for adults. We very much appreciate the time and effort you have given to this. As you will be aware, this process revealed that intestinal failure service provision needed to be materially different than initially anticipated. As a result, the procurement was stopped so that a full review of the service specifications and service requirements can be carried out. We recognise this was disappointing to many, but hope you agree it is important we do this in order to make the right decisions for our patients.

This review will include nationwide engagement with clinicians, providers, commissioners, patients and the public on the priorities and future model of the service, as well as the interface with the HPN Framework and paediatric intestinal failure services, both of which are outside the scope of the review. Once this has been completed, a new commissioning strategy will ensure the right services are commissioned in the right place to meet the needs of patients and the national standards agreed by clinicians. We are also taking this opportunity to review costs and prices.

A project structure has been established to oversee this process which includes a project board, with clinical and patient engagement, and commissioning sub-groups. The project board met for the first time this week to agree terms of reference and membership of the board and sub-groups, and to discuss a draft communications and engagement plan. This briefing is expected to be the first of a regular update to providers and stakeholders to keep you informed of the project's progress.

The first phase of the project will involve liaison with providers to validate the data about the specialised intestinal failure services they currently provide, with the aim of reaching a shared understanding at the outset. We will also seek to gather a picture of patient satisfaction across the country by looking at existing data, and plan to carry out two patient focus groups and a number of patient interviews in February / March this year, tapping into established intestinal failure patient networks. A patient survey and clinician survey will be conducted alongside these events.

The outcome of this work will be brought together at a combined workshop with clinician, patient and commissioner participation. Providers, patient groups and regional commissioning teams will be invited to send representation to this event which we expect to take place in London at the end of March or early April. Our intention is to use this workshop to co-produce the proposed priorities for the service model and key features that should be considered when commissioning services from individual providers, which we expect to then be the subject of national public consultation over the summer. The outcome of that consultation will inform the development of the commissioning strategy and any required provider selection process that follows towards the end of the year.

The evidence gathered last year suggests there is less demand for specialised surgical centres for adult intestinal failure than had been anticipated. The review being undertaken will recommend whether this is still correct, and any process that is required to select providers. Any such process will include input from clinicians and patient representatives. Feedback from the consultation and pre-consultation engagement activities will also be considered when determining how providers will be selected. Implementation of the new commissioning strategy, including any provider selection process, is anticipated to be announced before the end of the 2017/18 financial year.

Please cascade this briefing to relevant clinical and non-clinical staff and stakeholders as you feel appropriate. Our workstream leads will be in touch with provider clinical and communications leads and other stakeholders as necessary, but do not hesitate to contact us if you would like any further information. Please also let us know if you are aware of any patient groups or networks that you think we should be engaging with. An invitation to the combined workshop will follow once the date and venue have been finalised.

Key contacts for this project are as follows:

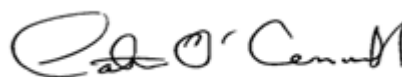
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If you would like to ensure you receive stakeholder updates directly from the project team, and alerts to newly published information relating to the review, please email your contact details to our project email address: england.ifservicereview@nhs.net

Kind regards



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Chair, Colorectal Clinical Reference Group



Catherine O'Connell
Chair, Internal Medicine Programme of Care

The Clinical Reference Group considers the promotion of equality and the reduction of health inequalities as part of its work programme. If you would like this letter in an alternative format, for example large print or easy read, or if you need help communicating with us, please email england.ifservicereview@nhs.net.