



Health Commission Background Papers

Saturday, 14th January,
2017
10.00 am

Council Chamber
Town Hall
Redditch



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Health Commission

Saturday, 14th January, 2017

10.00 am

Council Chamber Town Hall

Agenda

Membership:

Cllrs: Bill Hartnett (Chair) John Fisher
Greg Chance (Vice-Chair) Mark Shurmer
Debbie Chance Yvonne Smith
Juliet Brunner Pat Witherspoon
Brandon Clayton

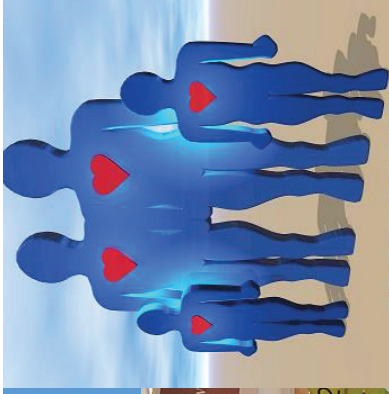
4. Save the Alex

(Pages 1 - 16)

To invite a representative of the Save the Alex campaign to put forward their views about proposed changes to Worcestershire Acute Hospitals NHS Trust's services.

(Presentation attached)

Save The Alex



Redditch Borough Council Health Commission
Presentation



Save The Alex 2005 - 2008

Worcestershire
Primary Care Trust



Improving maternity and
children's services for
Worcestershire

Commissioning Strategy for:
Maternity Services
Neonatal Services
Services for Children in Hospital

I am delighted to welcome this Strategy for Worcestershire's maternity services, neonatal services and services for children in hospital. ***In developing this Strategy we have listened to the public's wishes to keep services at the Alexandra Hospital, Redditch.*** We have also worked closely with clinicians within Worcestershire Acute

Hospitals NHS Trust to understand what is needed to improve the safety and quality of services across Worcestershire. We have discussed our proposals with service users through the Worcestershire Maternity Services Forum.

This Strategy will ensure that we have first class maternity services, neonatal services and services for children in hospital. ***It shows our commitment to putting care for mothers and children at the top of our agenda and our commitment to sustaining and improving services for the whole of Worcestershire.*** This Strategy also shows our commitment to working in closer partnership with Worcestershire Acute Hospitals NHS.

Save The Alex 2012

“Before Worcestershire NHS officially open their consultation on Health Services in Worcestershire, we want to make it clear that we do not support any suggestion or proposal that Redditch will lose A&E, Maternity or the Alex Hospital.”



Save The Alex

- Joint Service Review Concluded Jan 2013 – 2 options promised to be worked up.
- Spring 2013 Worcester Acute Trust sought legal advice which blocked UHB being able to work up option 2.
- Worcester Acute Trust Completed a bias internal piece of work – Acute Service Review which concluded UHB taking over the Alex would not work.
- Autumn 2013 – January 2014 an Independent panel reviewed both option 1 and 2, they that neither option 1 or 2 worked a but presented modified option 1.

THIS PANEL NEVER MET WITH UHB AND IT IS THE ONLY CLINICAL PANEL TO HAVE EVER CONSIDERED OPTION 2 AND THIS WAS ONLY BASED ON THE ASR

- Modified option 1 included the centralisation of maternity and inpatient paediatrics, but kept an adult A&E with paediatric consultant PAU. It also suggested all antenatal care regardless of birth choice at Worcester, Birmingham or Warwick should be provided from the Alex.



Save The Alex – 4 Resignations

Most importantly, all four of the A&E Consultants claim that their concerns for patient safety and those of external experts about patient safety were ignored by the Trust's management.

“...even when these experts have suggested that this model poses staffing, sustainability and safety concerns, the Trust's response has suggested that these experts are misguided.”

“It was very obvious to us all that we were being heard but not listened to. This is despite us raising serious safety concerns about the Trust's plans and the inevitable knock-on effect it would have on the existing severe overcrowding at Worcestershire Royal Hospital.”

“The Trust appears to tolerate massive overcrowding in the county's A&E Departments. This is a disgrace and a patient safety issue which causes serious harm to many patients and intolerable stress on all A&E staff.”

“The final straw for us came on Day 4 of the West Midlands Clinical Senate. This day was put in place to explore concerns raised by the majority of the countywide A&E team concerning modified option 1. Prior to the meeting we were presented with an agenda for the day stating the expected outcome was for A&E Consultants to support the proposed model, rescind concerns for patient safety and determine the implementation status of the model.”

“Furthermore, we discovered the Trust had written additional plans to reduce the already proposed skeletal surgical service in modified option 1 to the point where all surgical in-patient services at the Alexandra Hospital would be removed in April of this year without any public consultation.

Save The Alex



- Gary Walker a former NHS Acute Trust Executive and NHS Government advisor concluded
- “The process adopted by the NHS appears deeply flawed since all options considered required the continuation of Worcester Acute Hospitals NHS Trust. The priority for commissioners is the provision of services not the protection of providers or organisations. Consideration should have been given to options that included transferring all of the current services to other existing providers.”
- “The Independent Clinical Review Panel did not examine or refer to the increasingly significant financial problems at Worcester Acute Hospitals NHS Trust. Financial sustainability must be considered alongside clinical sustainability because there is a direct relationship between the two. Worcester Acute Hospitals NHS Trust is in severe financial distress with a current overspend of £25.9m for 2014/15 and any new models of service configuration would need to address this.”

Save The Alex 2012- 2017

- Emergency surgery on suspected blocked or perforated bowels has been centralised at the Worcestershire Royal Hospital
- Emergency surgery on children has been centralised at the Worcestershire Royal Hospital
- Emergency gynaecology has been centralised at the Worcestershire Royal Hospital
- All births (except home births) have been centralised at the Worcestershire Royal Hospital
- Inpatient children's services have been centralised at the Worcestershire Royal Hospital
- Not forgetting mention Stroke and Heart attack services removed in 2013 all be part of a different review that was concluded before this one.



Save The Alex



“Redditch has the largest areas of deprivation across the county and that brings with it associated health problems. Indeed the prevalence of stroke, asthma and high blood pressure in Redditch are higher than the national average with over 28 per cent of adults obese. With a clear link between physical and mental health problems and deprivation, the removal of key health services from the Alexandra Hospital to an inaccessible central base would put some of our most vulnerable residents at risk”

Cllr Bill Hartnett, Leader of Redditch Borough Council

“Transport and access are key factors when considering the reconfiguration of hospital services. While any removal of services at the Alexandra Hospital will impact on our residents, if there has to be change then the simple fact is this area enjoys good bus, road and rail links to Birmingham, whereas Worcester is inaccessible for many. The NHS ignores this fact at its peril”.

Cllr Roger Hollingworth, Leader of Bromsgrove District Council

Save The Alex



- “It is expected that 95% of patients will continue to access their hospital care in the same hospital as they do now **and that 80% of children** who currently attend the Alexandra Hospital will continue to have their care provided in Redditch.”
- Economic challenges
- “The NHS budget has grown year on year for the first 60 years of its life but the NHS is now facing, at best, a static budget going forward. This gives the NHS across the country a huge challenge and Worcestershire is no different.”
- “It is important that our plans help towards improving the Trust’s financial deficit. It is anticipated that the Trust will see an improvement of £3.5million as an impact of our proposed changes. This has a further potential saving of at least £5million through improving the Trust’s reputation and its ability to recruit and retain staff, reducing their reliance on higher priced agency workers.”

Save The Alex – Key Concerns



Adult only A&E

Joint Services Review set up in 2012 was all about the level of staffing and it being unsustainable this was a cornerstone of the argument for removing A&E from the Alex site.

WMCS stipulates that there need to be 10 A&E consultants at both WRH and the Alexandra. Is it realistic to expect WAHT to successfully recruit ED consultants to the required level, given the national shortage so often referenced?

We are yet hear from WMCS – What will the impact be on the ambulance service

Where are the GP's coming from to staff the GP UCC?

Emergency care for Children is still very unclear and much is said in the final WMCS report.

Save The Alex – Key Concerns



MATERINTY

Delivering antenatal care for women at the Alex regardless of where they choose to deliver, this was on the cards before the emergency closure and was the preferred way forward. If they were to implement this it would give women so form of real choice, as it stands if you want antenatal care at the Alex you have to opt to give birth at WRH or at Home.

When will the promised additional capacity at BWH be available?

PEADATRICS

Can WAHT clarify why the CQC is monitoring paediatrics if there isn't a capacity problem?

Save The Alex – Key Concerns



ALEXANDRA HOSPITAL

It has to be asked why FoAHSW Programme Board did not include acute medicine in the terms of reference for the WMCS report?

Given the known concerns of the acute medical consultants, the resignations of senior medical consultants from the Alexandra site, and the clear difficulties WAHT is experiencing with recruitment and retention of consultant staff.

What is the future for acute medicine at the Alex?

Save The Alex – Key Concerns



General

Will FoAHSW state what concerns the National Investment Committee have?

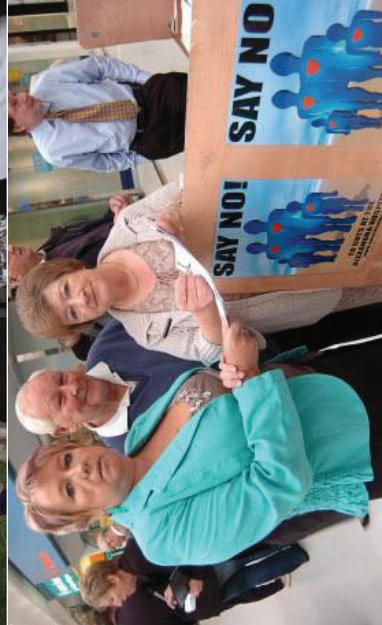
Will FoAHSW publish plan b, plan b is the model they have had to work up if the £29m funding is not approved?

Given the dangerous overcrowding at Worcester how does WHAT / FoAHSW justify continuing to centralising services in the name of safety?

Can enough capacity be provided at the WRH site and how will this be funded?

How will WAHT and the Worcestershire Health Economy be able to provide this approved model in a financially sustainable way?

Does the Alex Still Need Saving



It needs saving from a trust in special measures, saving from a trust racking up £200 million in debts and rising, saving from a trust tarred by allegations of bullying and with major recruitment issues, saving from a trust failing patients waiting weeks on end for an operation or for vital cancer treatment.

It needs saving from the wider issues of reorganisation and austerity measures imposed by the current government. This is happening to NHS services across the country. This may be a local issue, but the situation is in no way unique to Redditch.

Some of what Save the Alex have constantly warned about is starting to come true. We now know the Care Quality Commission is so concerned by reports of sick children being sent away from Worcester due to lack of capacity they are now monitoring the situation and NHS England has finally decided it is unacceptable and dangerous to have patients waiting hours on end in a corridor in Worcester.

The problem is this fake concern from within the NHS or our political masters in Westminster is all too little too late. They simply refuse to believe our concerns are real and what's more they don't care.

Does the Alex Still Need Saving



There is a new, more dangerous threat to our health service in the form of the Sustainability and Transformation Plan for Herefordshire and Worcestershire – or in English, how we will cut services to save money as the Government won't fund the NHS properly.

This makes it very clear that the future plan will be another review of A&E provision with the potential for a super A&E, no doubt at Worcester, for the two counties and a further reduction in the services provided by what will remain at the A&E in Redditch. In short, the plan in June 2012 to major downgrade the Alex A&E by turning it into an urgent care centre is back on the table and will likely be implemented in the next five years. It also backs centralisation so we can expect more and more of what the Alex provides today to be stripped away as it is transformed into nothing more than a hub for elective surgery and diagnostic tests.

