







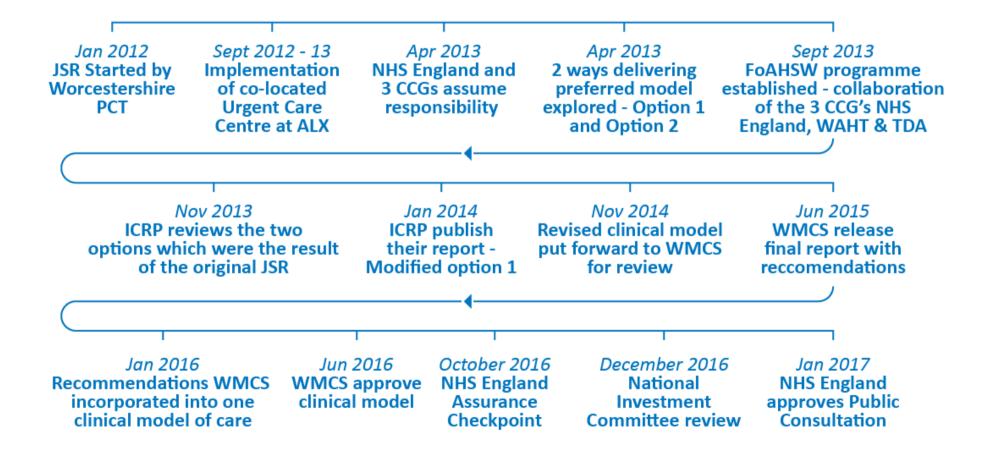
South Worcestershire Clinical Commissioning Group Wyre Forest Clinical Commissioning Group



#### Introduction

- A brief history of the programme
- Summary of the proposed clinical model and permanent service changes
- Key issues for consideration transport
- Emergency changes and impact
- Key challenges currently facing the Trust and response
- Timeline and process for the consultation

## **History of programme**



### Why did we start this?

#### Workforce

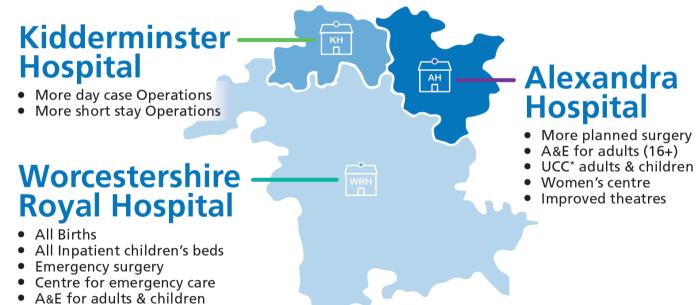
- National shortages
- Reduction in trainees
- Consultant-led care
- Seven day services

#### Quality

- Better outcomes
- Better patient experience



# What does this mean for my local hospital?



• UCC\* for adults & children

\*Urgent Care Centre

#### **Transport issues**

- Mott MacDonald Equality Impact Assessment
- Mott MacDonald Transport survey
- Census 2011
  - Approximately 20.3% of households in Redditch do not own a car or van
- Independent Transport Group Recommendations
  - 350 bus
  - More public and visitor car parking
  - Promotion of alternative transport
  - Use of community transport

#### **Transport issues**

- Worcestershire County Council scoping extending the 350 bus
- Staff cars moved off site to increase spaces available for public and visitors
- Capital bid includes £1.6 million for extra public car parking
- Promotion of alternative transport
- Hopper Bus 3 month pilot to review usage

### **Temporary emergency changes**

- Suspected blocked or perforated bowels –
  February 2014
- Children's emergency surgery **December 2014**
- Emergency gynaecology August 2015
- Neonatal services and hospital births –
  November 2015
- Inpatient children's services **September 2016**

## **Effect of temporary emergency changes**

- Bowel surgery patient outcomes have improved
- Maternity caesarean sections fallen from 32.6% to less than 25%
  - All births accommodated
  - More senior doctor cover on labour ward

#### Effect of temporary emergency changes

#### Children

- all assessed by senior doctor
- Admission rates have fallen by 10%
- GPs can access consultant clinics
- Individual travel plans for 'open access' children





#### Current challenges facing the Trust

- Pressure at 'front door':
  - combination of more frail, sicker patients attending and 'exit block' due to it being harder to discharge these sicker patients
- Emergency pressures affecting capacity for planned inpatient surgery
- National shortages in Consultant and trainee staff in key specialities e.g. elderly care/stroke
- Establishing the future acute service model and care pathways across Worcestershire
  - Uncertainty impacting on recruitment and retention

## What the Trust is doing to address those challenges

- 'Front door' streaming into alternatives to admission: AEC, OPAL, GP in ED, UCC
- Plan/focus on discharge on admission and new transitional care facilities e.g. Evergreen
- More routine surgery at KTC and AGH
- Medical recruitment drive linked to future vision
- Capital OBC to support full realisation of FoAHSW proposals (WRH/AGH)

#### What does it mean?



#### **Timetable and milestones**

- 12 week Consultation started 6th January
- Series of public engagement events members of the public now have the chance to have their say
- Consultation closes on 30th March
- CCGs to review responses and propose final recommendation for CCG Governing Bodies to consider end of May
- Implementation thereafter
- Worcestershire Acute Hospitals NHS Trust apply for £29m capital funding, including preparing Business Case for NHS Improvement

