The Future of Acute Hospital Services in Worcestershire

Health Commission
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

- **Jan 2012**
  - JSR Started by Worcestershire PCT

- **Sept 2012 - 13**
  - Implementation of co-located Urgent Care Centre at ALX

- **Apr 2013**
  - NHS England and 3 CCGs assume responsibility

- **Apr 2013**
  - 2 ways delivering preferred model explored - Option 1 and Option 2

- **Sept 2013**
  - FoAHSW programme established - collaboration of the 3 CCG’s NHS England, WAHT & TDA

- **Nov 2013**
  - ICRP reviews the two options which were the result of the original JSR

- **Jan 2014**
  - ICRP publish their report - Modified option 1

- **Nov 2014**
  - Revised clinical model put forward to WMCS for review

- **Jun 2015**
  - WMCS release final report with recommendations

- **Jan 2016**
  - Recommendations WMCS incorporated into one clinical model of care

- **Jun 2016**
  - WMCS approve clinical model

- **October 2016**
  - NHS England Assurance Checkpoint

- **December 2016**
  - National Investment Committee review

- **Jan 2017**
  - NHS England approves Public Consultation
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?

**Kidderminster Hospital**
- More day case Operations
- More short stay Operations

**Worcestershire Royal Hospital**
- All Births
- All Inpatient children’s beds
- Emergency surgery
- Centre for emergency care
- A&E for adults & children
- UCC* for adults & children

**Alexandra Hospital**
- More planned surgery
- A&E for adults (16+)
- UCC* adults & children
- Women’s centre
- Improved theatres

*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?

95% of all patients will be treated at the same hospital as now.
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