

Agenda No 7

AGENDA MANAGEMENT SHEET

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| <i>Name of Committee</i> | Health Overview and Scrutiny Committee |
| <i>Date of Committee</i> | 9th November 2005 |
| <i>Report Title</i> | Acute Services Review |
| <i>Summary</i> | The Committee to receive the attached briefing paper on the Acute Service Review, produced by Mr. Moosa Patel, Project Manager Coventry and Warwickshire Acute Services Review University Hospitals Coventry and Warwickshire NHS Trust. |
| <i>For further information please contact:</i> | Phil Maull Senior Committee Administrator, Tel: 01926 412834 philmaull@warwickshire.gov.uk |
| <i>Would the recommended decision be contrary to the Budget and Policy Framework?</i> | No. |
| <i>Background papers</i> | None |

Briefing paper on the Acute Services Review, produced by Mr Moosa Patel, Project Manager Coventry and Warwickshire Acute Services Review University Hospitals Coventry and Warwickshire NHS Trust

Creating a World-Class health service for the people of Coventry and Warwickshire

Healthcare needs are changing and if the NHS does not respond to this by changing the way it delivers care, we will very quickly find that the services we have are unable to meet the needs of the population.

To continue to meet the needs of patients both now and in the future, it is vital that Coventry and Warwickshire's health economy adjusts to keep up with these changes in demand so as to be well placed against other local providers.

To address these issues and suggest the way forward, West Midlands South Strategic Health Authority has commissioned its Primary Care Trusts to conduct a Review of the services that are delivered by acute hospitals across Coventry and Warwickshire.

The Review has been asked to produce recommendations which will lead to its hospital services being more patient focused, of a higher quality, sustainable and affordable. This Review was felt to be necessary in order to ensure that we could continue to provide sustainable services for the population as well as allowing us to respond fully to recent national documents that have been issued, in particular Commissioning a Patient Led NHS, Patient Choice and Keeping the NHS Local.

How have needs changed?

Some operations that used to require a ten night stay in hospital can now be carried out as day cases, whilst others can be performed in GP Clinics or health centres. A specialist nurse or other health care professional now routinely provides care that used to be delivered by a doctor.

The health service is getting better at treating people. More complex procedures and surgery are being undertaken, the boundaries at which premature babies can be saved are being pushed back. Many conditions that were once fatal are now curable and more patients with long term conditions are able to manage their own care with support outside of hospital. People are living longer so the need to treat long-term conditions and care for people with age-related diseases is growing.

In contrast, more people are being admitted to hospital for emergency care and the number of people attending A&E is rising year on year.

The new Patient Choice initiative will allow patients to choose where they are treated when they are referred by their GP. This will present challenges to hospitals, as patients opt to be treated in the private sector or at hospitals further away which have shorter waiting times, lower MRSA rates or where there might be more clinicians specialising in their condition. Our population is now more mobile, moving around the country and across geographical boundaries and many are more than prepared to travel to see a specialist at the hospital they have chosen. For other patients, travel is a problem and reliable high quality local services are very important for them and this must be our goal.

Changes in medical practice and demand, coupled with more specialisation by clinicians and the growth of highly specialised services, means that the current health service must adapt to meet the new needs of its patients. As we continue to specialise, learn more and expect more it is no longer reasonable to expect any one district general hospital to provide everything an individual may need during their lifetime. Instead hospitals, primary care and other health and social care providers will need to work more closely together to ensure the services they provide as a whole meet patients' needs. The challenge for this Review is to see how the services could be networked across Coventry and Warwickshire to strengthen the provision that is available and maintain the viability of local hospitals. In other words keeping local care available in local hospitals, as well as enhancing the levels of specialist care in Coventry and Warwickshire and making this equitably available to all residents.

Why Coventry and Warwickshire?

The individual hospitals across Coventry and Warwickshire do not have all the facilities that would be needed to meet all the needs of their population. However when these hospitals are bought together, their combined facilities are more than able to meet the needs of their collective population.

Which organisations will be involved in this review?

The Review is jointly commissioned by:

- Coventry Primary Care Trust
- North Warwickshire Primary Care Trust
- Rugby Primary Care Trust
- South Warwickshire Primary Care Trust

In partnership with:

- George Eliot Hospital NHS Trust
- South Warwickshire General Hospitals NHS Trust (including Stratford Hospital)
- University Hospitals Coventry and Warwickshire NHS Trust (including Hospital of St Cross, Rugby)

The organisations that are being reviewed are:

- George Eliot Hospital
- South Warwickshire General Hospitals NHS Trust (including Stratford Hospital)
- University Hospitals Coventry and Warwickshire NHS Trust (including Hospital of St Cross, Rugby)

What does the review aim to achieve?

- The primary objective for the Review is to assess the overall health needs and requirements of the Coventry and Warwickshire population and then from that assessment, the services that are required.
- To set out a long-term vision for the shape and standards of healthcare that the population of Coventry and Warwickshire need from their health service;
- To establish a process by which services can be redesigned to achieve that vision;
- Working with patients, staff, the public and other key partners set out key challenges and standards that we would all expect to be delivered in the long-term;
- To demonstrate the effectiveness of that process, by developing future models of service provision in materially significant areas, which meet the key challenges and deliver the standards that have been set.
- To ensure equity of access and consistent service standards for all patients by producing a minimum set of services and standards that all hospitals will provide, guaranteeing all patients local access to the same core services. This will leave each hospital free to develop additional services that meet the more specialised needs of the population

Core Values and Principles we will work to

- Keeping services local including delivering these to people at home whenever appropriate
- Equity of access and quality of service for all Coventry and Warwickshire residents
- Efficient use of resources to ensure maximum benefit for the population
- Services that meet or exceed national expectations delivered from premises that are fit for purpose
- The need to ensure all of our hospitals are able to develop into successful Foundation Trusts

How will we do this?

The Review will be carried out in two parts. The first stage will be to assess the needs of the population and list all the options that should be considered. The second stage is to consult on the options so that this can inform the Project Board's recommendations and allow implementation to begin.

There are three pieces of work to be done in the first stage:

- A population analysis that will assess health needs and access to services across Coventry and Warwickshire. This will be carried out by public health with support from information analysts.
- Public consultation using general polling through an external organisation and a series of open meetings in each area conducted through existing PCT and local authority organisations. People will be asked about their priorities and what would influence their choice. The meetings will provide members of the public with information on the issues that are identified by the health needs and technical analysis and people will be asked to prioritise the issues and discuss acceptable solutions. A Citizen's Jury will also be established. It will consist of local members of the public who represent different communities across the area. Emerging findings from the Review will be taken to the panel for early challenge and feedback.
- The economic sustainability of current patterns of provision and any proposed changes will also need to be assessed, to ensure that all options that are to be considered are deliverable. This will need to consider the current financial challenges for all organisations as well as expected levels of funding for the future, Payment by Results and the financial requirements for Foundation Trusts. All options would also need to be assessed and rated in terms of their evidence base, benefits to patients, ability to meet required quality standards, equity of access, value for money and impact upon each organisations' financial stability.

Final options will be fully consulted on in the second stage

The Project Board

The review will be overseen by a Project Board. The board will be chaired by Madeleine Atkins, Vice Chancellor of Coventry University and will consist of:

- Project Director
Mark Newbold (Managing Director, Hospital of St Cross, Rugby)
- Coventry Primary Care Trust Chief Executive Officer
- Managing Director West Midlands South Strategic Health Authority
- Lead Primary Care Trust Chief Executive Officer – South Warwickshire
- Local Authority representative – Coventry
- Local Authority representative – Warwickshire
- Patient representative – Coventry

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- Patient representative – Rugby
- Patient representative – South Warwickshire
- Patient representative – North Warwickshire
- Professional Executive Committee Chair – Coventry
- Professional Executive Committee Chair – Rugby /North Warwickshire
- Chief Executive Coventry and Warwickshire Hospitals Trust
- Chief Executive George Eliot Hospital
- Chief Executive Warwickshire General Hospitals Trust

The Project Director will be supported by a small team in order to drive the project forward. The team will pool results from all the pieces of work to enable the Service Review Groups to work more effectively. The team will distil information and produce reports to the Project Board.

West Midlands South Strategic Health is leading a separate project on mental health and learning disabilities

Service Review Groups

Once the issues from the analysis have been identified, they will be put to five Service Review Groups:

- Older people and intermediate care
- Children's and maternity
- Planned care and diagnostics
- Emergency services
- Clinical Support Services (e.g pathology)

Each Service Group will be given a set of key questions to address. Their membership will include clinicians and patients and they will be required to address issues arising from the analysis including:

- How best to meet the identified health needs of the local population
- How to ensure that we follow best practice service models and delivery the highest possible levels of productivity
- Ensuring that clinical governance remains a priority
- Consider issues arising from the public consultation and use these to inform their decisions

In addition to this, each Service Review Group will need to take account of national policy such as the Children's Act, National Service Frameworks for individual clinical areas, Adult Social Care Reforms and Non-Hospital Care. The five Service Review Groups will produce a report with options assessed against a set of criteria determined by the Project Board. Each group will have input from the technical analysis team to test the affordability and economic impact of each option. Advice will also be sought from appropriate clinical networks. The groups will report to the Project Board who will produce a recommended service model.

Clinical Sounding Board

In addition to the Service Review Groups there will be a Clinical Sounding Board consisting of Professional Executive Committee Chairs, Medical Directors and Directors of Nursing. It will comment on the final proposals from each Service Review Group.

Implementation

Once the Review has been completed, plans for implementation will be set in place involving all the organisation who had signed up to the Review and had committed to implementing the Review's recommendations.

Provisional Timescales

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| August 2005 | Setting up the project team and board |
| September 2005 | Gain approval of the aims and commitment from all organisations |
| September 2005 | Carry out part 1 assessing the needs and developing the options |
| October 2005 | Analyse information and sign off remit of the Review |
| November 2005 | Approval of options and permission to consult received from Secretary of State for Health if required |
| December 2005 - March 2006 | Carry out stage 2 consulting on the options |
| April 2006 | Communicate conclusions and recommendations of the review |
| April 2006 | Begin implementation of recommendation |

Conclusion

This is an opportunity to get it right for Coventry and Warwickshire and create a world class health economy. We need to invest five months developing a product that will meet the needs of our population and use the skills of our staff to maximum effect. Our approach balances the clinical knowledge of staff with the expertise of external specialists, the knowledge of our patients and the public and a high powered project team. The analysis of health needs, public opinion and affordability also gives the Review strength in terms of delivering a solution that is credible, deliverable and unified.

Organisation Commitment

By participating in this review process all organisations (see list on page 2) have agreed to act upon the recommendations of this review.

Each PCT and Trust Board has endorsed:

- the aims of the Review
- the methodology of the Review
- the commitment of clinicians and managers to participate in the work of the Review
- sign up to the implementation of the Review's recommendations

List of associated documents

- Patient led NHS
- Patient Choice
- Keeping the NHS Local

Other languages

This document is available in other languages or formats on request from the Communications Department
South Warwickshire Primary Care Trust
Westgate House
Market Street
Warwick
CV34 4DE

0196 493491

general.office@swarkpct.nhs.uk

- આ જાણકારી જો તમને બીજી કોઈ ભાષામાં જોઈતી હોય તો તે ભાષાની સામે નિશાની (ટીક ✓) કરી નીચે જણાવેલાં સરનામા પર મોકલી આપશો.
- यदि आप वह जानकारी अपनी भाषा या किसी अन्य भाषा में प्राप्त करना चाहते हैं तो उस भाषा के आगे टिक (✓) का निशान लगायें और इस पत्र के निम्नलिखित पते पर डाक द्वारा भेज दीजिये।
- ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਆਪਣੀ ਬੋਲੀ ਜਾਂ ਕਿਸੇ ਹੋਰ ਬੋਲੀ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ ਤਾਂ ਉਸ ਬੋਲੀ ਦੇ ਸਾਹਮਣੇ ਟਿੱਕ (✓) ਦਾ ਨਿਸ਼ਾਨ ਲਾ ਦਿਓ ਅਤੇ ਇਸ ਪਤਰੇ ਨੂੰ ਹੇਠਾਂ ਲਿਖੇ ਪਤੇ 'ਤੇ ਡਾਕ ਰਾਹੀਂ ਭੇਜ ਦਿਓ।
- اگر آپ کو یہ معلومات کسی دوسری زبان میں درکار ہوں تو براہ کرم میری اپنی ضرورت کی زبان کے قریب اس پر ٹیک کر کے اس پر چوکھیل کے پتہ پر بذریعہ ڈاک بھیج دیں:
- Aby uzyskać powyższe informacje w innym języku, prosimy o zaznaczenie wybranego języka i odesłanie ulotki na podany poniżej adres.

Contact details

A full public consultation will take place, enabling people to comment on the options that are produced. If you would like additional information at this early stage of the process please contact:

Dr Mark Newbold, Project Director on 01788 545214 or

Mr Moosa Patel, Project Manager on 02476 535189. You can also write to the project office. The details are:

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Glossary of terms

Health economy – Primary Care Services, Acute Services, social services, Ambulance Services