

# Future of Acute Hospital Services in Worcestershire - Executive Summary

The Worcestershire Clinical Commissioning Groups believe every patient is entitled to expect high quality and safe services from the NHS. For the last five years the NHS in Worcestershire has been considering how it can safely provide as wide a range of clinical services as close to people's homes as possible and now believe it has a model for safe and sustainable services for the future.

The Future of Acute Hospital Services in Worcestershire (FoAHSW) is a programme which has sought to re-configure the provision of acute hospital services in Worcestershire, as delivered by Worcestershire Acute Hospitals NHS Trust (WAHT).

## The main elements of the Future of Acute Hospital Services in Worcestershire Clinical Model are:

- Centralising **emergency surgery** onto one site with skilled staff which will improve outcomes and patient experience
- Creation of centres of excellence for **planned surgery**
- Retain **emergency and urgent care** services at the Alexandra Hospital
- Centralisation of **inpatient care for children at Worcester** with the majority of children's care remaining local
- Centralisation of **births at Worcester** with ante-natal and post-natal care remaining local.

## The clinical case for change is strong and is based on the following key drivers:

- Increasing demand for acute hospital services and seven-day working
- Workforce challenges
- Sustaining quality standards of care
- Meeting best practice and clinical guidance
- The need to develop specialist centres
- The national Urgent and Emergency Care review of 2013.

The Worcestershire Acute Hospitals NHS Trust has increasingly found it difficult to sustain safe and high quality services and it has, as a consequence, been necessary to introduce a number of temporary emergency changes to the delivery of services across its hospital sites during the last three years. Improved clinical outcomes have been observed.

The Outline Business Case, developed by the Trust, reports that the case for change for the programme remains fundamentally, as presented in December 2016, primarily one of clinical sustainability and patient safety. Whilst a financial contribution to the turnaround of the Trust can be demonstrated, to the value of £4.4m, it will not in itself deliver the changes required to make the Trust financially sustainable. The Future of Acute Hospital Services in Worcestershire programme is however integrated into the Herefordshire and Worcestershire Sustainability and Transformation Plan.

The overall financial challenge faced by health and social care services is projected to be approximately £200m by 2020/21, and the proposed changes set out in this business case form an integral part of Worcestershire's element of the Herefordshire and Worcestershire Sustainability and Transformation Plans to address this challenge.

It is recognised that successful implementation of the new clinical models will require capital investment of approximately £29.59m, to provide additional capacity on both the Worcestershire Royal Hospital and Alexandra Hospital sites, and this will make an important contribution to the Trust's Plan for achieving longer-term financial sustainability.

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**The proposed £29.59 million investment would be used to:**

- Improve the operating theatres at the Alexandra Hospital so that the hospital can be developed into a centre of excellence for planned surgery
- Develop a women’s centre at the Alexandra Hospital
- Increase the number of beds at the Worcestershire Royal Hospital
- Provide a new children’s outpatient department at the Alexandra Hospital
- Improve the endoscopy facilities at the Alexandra Hospital
- Improve car parking at the Worcestershire Royal Hospital.

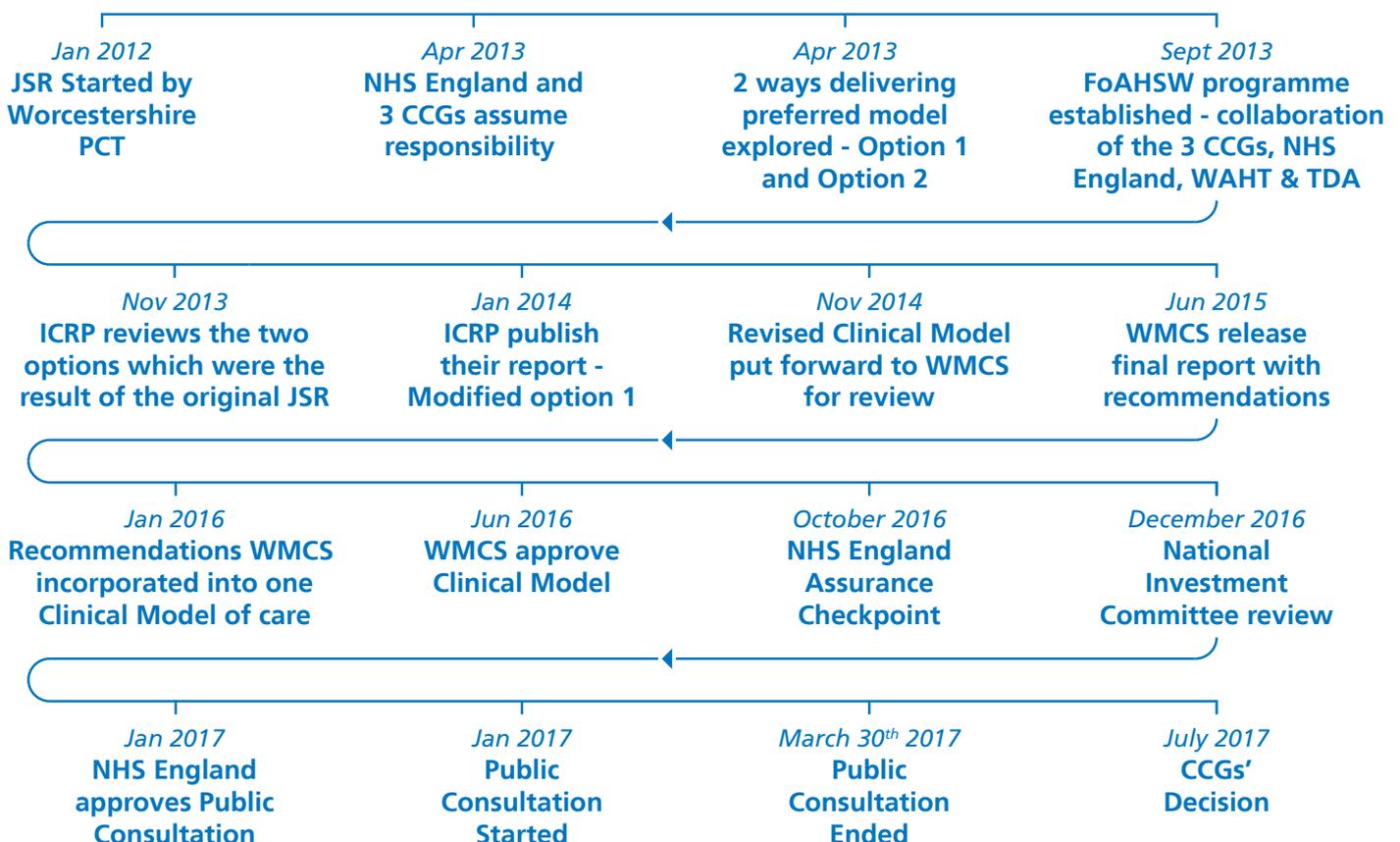
This Decision Making Business Case demonstrates that the four assurance tests for service change as set out in NHS England planning guidance: Planning, Assuring and Delivering Service Change (updated 2015) have been adequately tested and affirmed.

**The four tests of service reconfiguration are:**

- **Clear, clinical evidence base**

The Future of Acute Hospital Services in Worcestershire programme has sought independent clinical advice on the options and clinical assurance around the reconfiguration proposal from an Independent Clinical Review Panel and the West Midlands Clinical Senate. This has provided external assurance regarding the proposed Clinical Model, and on the safety and sustainability of clinical services under this model.

Following a lengthy process, and detailed in the pre consultation business case, full clinical assurance was received from the West Midlands Clinical Senate in June 2016; agreeing that it provided sustainable clinical services for Worcestershire.



- **Support for proposals from commissioners**

Commissioners and GPs have been involved at every stage of the reconfiguration of Future of Acute Hospital Services in Worcestershire and their input has been crucial to the development of the Clinical Model which was approved by the Governing Bodies of the three Clinical Commissioning Groups in February 2016.

The three Governing Bodies approved the Pre-Consultation Business Case which was presented to and approved to go forward to public consultation by NHS England in October 2016 and the National Investment Committee in December 2016.

- **Strong public and patient engagement**

A 12-week public consultation finished on 30th March and the Clinical Commissioning Groups have spent the subsequent time through the pre-election periods reviewing the responses to this consultation and formulating recommendations.

The proposed Clinical Model and permanent changes to local paediatrics and maternity services in particular continues to be controversial, particularly in the Redditch area of the county. A total of 3,206 completed consultation questionnaires have been received by the Clinical Commissioning Groups and nearly 1,885 people attended one of the broad range of meetings to discuss this that were held over the 12-week period. In addition Redditch Borough Council organised their own 'Health Commission' to feed into their formal response to the consultation.

**In summary the responses to the consultation focused on:**

- Viability of Worcestershire Acute Trust, and its ability to provide quality and safe services (as evidenced by Section 29a)
- Anxiety about loss of services at Alexandra Hospital in Redditch
- Appreciation of national workforce issues and the ability to run services at three sites
- Transport and access issues
- Concern regarding capacity at Worcestershire Royal Hospital to accommodate additional demand
- Support for the clinical workforce and quality of services
- Concern regarding Accident and Emergency services, e.g. long waits.

In response to the feedback from the consultation the recommendations will include a series of specific mitigations that take into account feedback from the consultation. These mitigations include actions around transport and access, work with other providers to improve choice for local maternity services, safeguarding local access for the Redditch population to ante-natal and post-natal outpatients services, enhanced monitoring of quality and safety, and work with NHS Improvement to ensure that the Trust has sufficient support.

- **Consistency with current and prospective need for patient choice**

Patient choice was heavily considered throughout the Future of Acute Hospital Services in Worcestershire programme of work, in developing the clinical and service models that underpin these proposals. The overarching model recognises the rights of patients to be offered choice, whilst accepting that this needs to be balanced against issues of clinical sustainability and affordability. Wherever possible, choice has been maintained or extended although some compromises have had to be made to sustain high quality services.

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The Future of Acute Hospital Services in Worcestershire programme has been committed to working together to increase patient choice by developing more services in the community with a particular focus on self-care, early diagnosis and high quality management of long term conditions. The key areas of action will be primary care at scale and care closer to home such as proactively managing people of all ages with long term conditions, people who are frail because of their old age and people at the end of life stage in out of hospital settings, in or near people's homes.

This Decision Making Business Case describes the important elements of the Future of Acute Hospital Services in Worcestershire programme, the case for change and presents the data and information required to support voting members of the three Worcestershire Clinical Commissioning Groups in making a final commissioning decision to agree and support the re-configuration of acute services at Worcestershire Acute Hospitals NHS Trust.

The recommendations are:

## Recommendations

The Governing Bodies of the three Worcestershire Clinical Commissioning Groups are asked to approve the following recommendations:

1. Approval of Clinical Model - The three Worcestershire Clinical Commissioning Groups are therefore asked **to approve the Clinical Model** proposed for acute hospital services in Worcestershire.
2. Fit with Future of Acute Hospital Services in Worcestershire programme core principles - The Clinical Commissioning Groups are asked to **affirm that this proposal meets the core principles of the Future of Acute Hospitals Services in Worcestershire programme** based on the original vision and objectives and summarised as:
  - Patients will receive the highest standards of quality care
  - Services will be provided locally wherever possible and centralised where necessary
  - Services will be integrated across organisational boundaries to provide a seamless experience of care.
3. Strategic fit - The three Worcestershire Clinical Commissioning Groups are asked to affirm that this proposal:
  - Has been subjected to a **full and thorough public consultation**
  - **Improves the clinical service and financial viability of the Trust**
  - **Has met the NHS England Four Tests** for service reconfiguration.
4. Clinical Senate recommendations - Prior to the implementation of the Clinical Model **the Trust must demonstrate their commitment to comply with the advisory recommendations** made by the West Midlands Clinical Senate in June 2016, specifically including:
  - The staffing levels for the Emergency Department consultants at each site
  - Countywide rotation of Emergency Department Consultants
  - Middle grade and Emergency Department consultants at Alexandra Hospital need to rotate to maintain paediatric experience
  - Use of the emerging national model for Urgent Care service specification in reviewing the current Urgent Care Centre specification

- Review of the clinical procedures proposed relating to the Urgent Care Centre service
  - Further work to be undertaken between the Trust Management and acute medical consultants across both sites to develop the vision and implementation for sustainable countywide working.
5. Quality and safety - In recognition of the continued concerns regarding the clinical safety and quality of services provided by Worcestershire Acute Hospitals NHS Trust and the ongoing poor performance against NHS Constitutional standards, it is recommended the Clinical Commissioning Group Governing Bodies continue to **support enhanced surveillance of the quality and safety of commissioned services**.
  6. Support for the Trust - As part of this it will be important to **work with NHS Improvement to ensure that the Trust receives the necessary support and assistance** to both implement the proposed Clinical Model and to deliver the required service improvements. In practice this should also include assistance from other NHS Trusts through partnering and support arrangements.
  7. Capacity and implementation plan - The Clinical Commissioning Group Governing Bodies recommend that **NHS Improvement work with the Trust to review the Trust's outline business case** which details their capacity and implementation plan, ensuring capacity and demand will be appropriately managed and activity and capacity projections are consistent with Pre-Consultation Business Case and the Sustainability and Transformation Plan.
  8. Transport and access - **Worcestershire Acute Hospitals NHS Trust must review the scheduling of its outpatient appointments and operations** to take account of patient travel needs and individual circumstances. The Clinical Commissioning Groups and Worcestershire Acute Hospitals should work together with Community Transport Providers in Worcestershire to **provide an enhanced transport service between the Alexandra and Worcestershire Royal Hospitals**.
  9. Communication and education - Worcestershire Acute Hospitals NHS Trust and other local NHS partners must **implement a comprehensive publicity campaign** which clarifies where health services are available across the county and how people should access them. As a matter of urgency a communication campaign should be launched to clarify how children should access emergency services.
  10. Monitoring patient flows - The Clinical Commissioning Groups must **monitor patient flows to providers outside the county** on a monthly basis and work collaboratively with partners to mitigate any potential impact of increased patient flows should this occur.
  11. Maternity Services - **Local access to maternity services should be a priority** for the Clinical Commissioning Groups. In line with the implementation of 'Better Births', there must be local access to services for women and their babies, regardless of where they live. Women should have a choice of where to deliver with access to local maternity services for midwife-led ante-natal and post-natal care. The Clinical Commissioning Groups should also work with other providers to improve choice for mothers-to-be.
  12. Further review maternity capacity - The Clinical Commissioning Groups should **undertake a further review before the end of 2020 of local maternity capacity** and specifically the potential of introducing a midwife-led birth centre in the north of the county.
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## Implementation Timeline

Following approval the three Clinical Commissioning Groups are advised that the implementation timeline is as described below.

Milestone	Completed by
<b>Outline Business Case approval</b>	July 2017
<b>Car Parking Worcestershire Royal Hospital Site:</b> Procurement Process completed Full Business Case Approval Construction completion	November 2017 March 2018 August 2018
<b>Maternity and Paediatrics and Worcestershire Royal Hospital Site:</b> Procurement Process completed Full Business Case Approval Construction completion - Paediatric ward Construction completion - Maternity ward Construction completion - Paediatric Assessment Unit	January 2018 July 2018 November 2018 May 2019 May 2020
<b>Alexandra Hospital</b> Procurement Process completed Full Business Case Approval Construction completion - Paediatrics Construction completion - Theatres Construction completion - Elective Centre/Endoscopy	January 2018 July 2018 November 2018 August 2019 August 2019
<b>Worcestershire Royal Hospital Acute Bed Capacity</b> Procurement Process completed Full Business Case Approval Construction completion - Aconbury East Construction completion - Ward Modifications, main hospital	January 2018 July 2018 November 2019 March 2020

For more information about the Future of Acute Hospital Services in Worcestershire, visit the [website at: www.worcsfuturehospitals.co.uk](http://www.worcsfuturehospitals.co.uk)