

## Humber Acute Services Review

### Stakeholder Briefing

#### Background

Across the Humber area, local health and care organisations are working in partnership to improve services for our local populations. We are working together to carry out a review of how acute hospital services are provided in the Humber area. The review will consider how to provide the best possible hospital services for the people of the Humber area within the resources (money, workforce and buildings) that are available to us. The review will consider both *current* and projected *future* needs for hospital services, taking into account local plans to improve and extend the types of care and treatment that are available outside of hospital settings. The purpose of this review is to develop plans for delivering acute hospital services that are safe, sustainable and meet the needs of our local populations across the Humber area. This may include delivering some aspects of care outside of hospital settings and in peoples' own homes to better meet the needs of our populations.

A transparent and inclusive approach will be adopted at all stages of the process. We will implement a rigorous process for generating and refining potential future scenarios that will offer a variety of opportunities for clinicians, staff, patients, the public and any other interested parties to share their views and ideas on how services could be delivered differently. Any significant service changes that are proposed will then be subject to formal consultation and the decision-making processes of the constituent organisations in our Partnership.

#### What will the review entail?

Across the Humber area, there are two acute hospital Trusts – Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) and Hull and East Yorkshire Hospitals NHS Trust (HEY) – that provide a variety of hospital-based services from five different hospital sites:

- Hull Royal Infirmary
- Castle Hill Hospital
- Diana Princess of Wales Hospital, Grimsby
- Scunthorpe General Hospital
- Goole Hospital

The review of acute hospital provision across the Humber area will consider how best to organise the acute hospital services that are currently being provided on the five acute hospital sites. The review will consider how to provide the best possible care for local people who need acute hospital services within the resources (money, staffing and buildings) that are available to the system.

The review will build on the well-established collaborations between NLaG and HEY in the provision of acute hospital services but, where appropriate, will consider opportunities to develop additional collaborations with other acute providers. This will include looking outside of the Humber geography for some patients, particularly those living near the boundaries. Working as a Humber partnership



will not preclude discussions with other providers where this will best address the needs of local people. We have established links with health and care Partnerships in West Yorkshire, South Yorkshire and Lincolnshire who are conducting similar reviews to ensure coordination across areas. A similar review of acute hospital provision in the York/Scarborough area will also be undertaken in parallel. Further arrangements are being made for a specific group of services (e.g. Pathology) to be reviewed on a regional or multi-regional basis.

Mental health hospitals will not be included in the review. This is because mental health is a separate workstream within the Humber, Coast and Vale Partnership with experts from across health and care working on how we can improve care and services. Where there are interdependencies, these will be taken into account.

The purpose of the review will be to look at service arrangements across the Humber area and how these might be strengthened; it is not within the scope of the review to consider an organisational merger of the two hospital Trusts.

The review will investigate possible scenarios for the provision of acute services for the population of the Humber area that are person-focussed, safe and sustainable. It will look at how we can work differently, making the most of new technology and new ideas to provide the best possible care for local people. This may include delivering some aspects of care outside of hospital settings services meaning people can access care locally rather than having to go to an acute hospital as they do now.

The review will be undertaken in accordance with the following principles:

- A commitment to provide acute hospital services that are patient-focussed, safe and sustainable, meeting the needs of our population both now and in the future.
- The service review will be clinically-led.
- The review will be evidence-based and take into account best practice.
- The review will focus on hospital *services* rather than hospital buildings and organisations.
- The review will be cognisant of local developments in out-of-hospital care and work towards solutions that support joined-up care across the system.
- A transparent, collaborative and inclusive approach will be adopted at all stages of the process, ensuring engagement with key stakeholders from the outset.
- Plans for the future provision of acute hospital services will be developed in accordance with the levels of human, physical and financial resource expected to be available.
- Plans for the future provision will include urgent and emergency care and maternity care at Hull Royal Infirmary, Diana Princess of Wales in Grimsby and Scunthorpe General Hospitals.
- The review will be undertaken in accordance with a project plan that sets out objectives, processes, timescales and resources.

### **Why do we need a review? Why can't services just stay as they are?**

Healthcare is changing. In the last 15 years, there have been great advances in medical knowledge and technology, and the development of increasingly sophisticated and specialist treatments and procedures. Our skilled clinicians have developed a number of fantastic services in our local hospitals

and more people are living longer and surviving illnesses that they might not have a generation ago. These developments have enabled more services to be provided outside of hospitals, in GP practices and community-settings, while hospitals increasingly focus on looking after the most seriously ill patients. As the ways of delivering care change, it is important that we review our services and how they are organised in order to provide the most effective and efficient services for local people.

In each of our local areas, health commissioners (Clinical Commissioning Groups), local authorities (Councils) and health and care providers are working together to improve and extend the care and treatment that is available outside of hospital settings, this includes work to integrate (join-up) health and social care provision. Over time, our services will focus more on preventing disease and ill-health, supporting people to look after themselves and their families, maintaining their independence and treating people in community settings wherever possible by providing more care outside of hospitals. It is important that we plan our future hospital services to support these new ways of working. Therefore, our hospital services review will be conducted alongside discussions about how to improve and extend services that are available outside of hospital settings.

We have a number of really great health and care services in the Humber area and many people have excellent experiences of the care they receive, however, our current services are under increasing pressure and in many cases are finding it extremely challenging to adequately staff and resource all the services that are provided *in their current form*. Today our hospitals are struggling to keep pace with patient demand and in some service areas are not performing as well as we would expect. There are a significant number of clinical services that have serious challenges in meeting key service standards such as waiting times and providing 24/7 cover. This is set against a backdrop of increasing pressure on services with growth in demand continuing to outstrip growth in funding. In addition, there are shortages in many areas of the workforce (doctors, midwives, nurses and other roles) across our hospitals. Despite active recruitment campaigns, there are still significant vacancies in both Trusts and key roles that cannot be filled. It is important that we review our hospital services now, because they are under pressure now and we need to act.

The impact of staffing shortages in our area has already led to one of our hospital providers, Northern Lincolnshire and Goole NHS Foundation Trust (NLaG), having to take the difficult decision to change the way in which it provides a small number of services on the grounds that they could no longer safely staff all aspects of the service across two sites.

A comprehensive hospital services review is necessary in order to plan for the longer-term future of these specific service areas and also to identify the possible options for delivering hospital-based services for the people living within the Humber area. We will begin by reviewing these most fragile services, where temporary changes have already been made, before moving on to consider other service areas. We need longer-term plans to address these challenges. This is about improving and sustaining our hospital services today but also about securing the long-term future of hospital-based services and planning them for the people who will need them in the future.

### Who is conducting the review?

The review will be conducted and managed under the auspices of the Humber, Coast and Vale Sustainability and Transformation Partnership (STP), reporting into the Humber, Coast and Vale Partnership Board in addition to the decision-making bodies of the partner organisations that are involved. The review will be overseen by a steering group, which will be chaired by Moira Dumma, Director of Commissioning Operations (Yorkshire and the Humber), NHS England. It was felt by the hospitals that it was important for the work to be led by an independent person so that the services are looked at independently, without bias to any one of the involved hospitals.

The core membership of the steering group includes representation from the following organisations:

- Northern Lincolnshire and Goole NHS Foundation Trust
- Hull and East Yorkshire Hospitals NHS Trust
- NHS North Lincolnshire Clinical Commissioning Group (CCG)
- NHS North East Lincolnshire Clinical Commissioning Group (CCG)
- NHS Hull Clinical Commissioning Group (CCG)
- NHS East Riding Clinical Commissioning Group (CCG)
- NHS England
- NHS Improvement
- Humber, Coast and Vale Sustainability and Transformation Partnership

The review is also being supported by the four local Councils in the Humber area and other expert organisations including Health Education England and Public Health England, who are providing expertise and advice into the process.

### What is the timescale for change?

The initial phases of the review process are currently in progress or have recently been completed. Phase One (July 2017 to December 2017) was to conduct a comprehensive analysis of current and projected future needs for acute hospital services in the Humber area. This analytical work was undertaken by York Health Economics Consortium (YHEC), based at the University of York. Their independent analysis will be used to support the later phases of the review by providing a detailed model of the potential impact on hospital services of particular scenarios for the delivery of services. Phase Two (October 2017 to January 2018) was concerned with conducting analysis of the sustainability of current hospital services, including assessment of workforce, quality, capacity and financial pressures in order to prioritise service areas for review. During these initial evidence-gathering phases, we have also been working to put in place mechanisms to engage with partners and stakeholders (both internal and external) throughout the review. This work is ongoing and we are committed to providing as many opportunities as possible for people to be involved in the work of the review.

Subsequent phases of the review (referred to as phases 3 to 6 in the project plan) will be undertaken with respect to each individual service area (or group of services) to be considered by the review, beginning in January 2018. In order to make the review more manageable, service areas will be

considered in stages (known as “waves”). We will begin by looking at a small group of “fragile” services. These are services where staffing shortages or other factors are impacting significantly on the ability of these services to operate safely and effectively in their current form and/or where temporary service changes have been put in place in order to ensure they can continue to be delivered safely. These service areas are:

- Ear, Nose and Throat services (ENT)
- Urology (care for people with problems of the urinary tract or male reproductive organs)
- Haematology (care for people with diseases or disorders of the blood)

We will then look to widen the scope of the review to look at other hospital service areas in a planned, methodical way. It is envisaged that the review work on this wider group of services will not begin before Spring 2018. We will publicise clearly when review work in these areas is taking place and include details of how people can get involved at each stage of the process.

We intend to review local hospital services in the following stages:

**Wave 2** will include the following services:

- Urgent and Emergency Care services (care when you need it unexpectedly), which will include:
  - Accident and Emergency,
  - Acute Medicine,
  - Elderly Medicine,
  - Respiratory Medicine,
  - Acute (unplanned) surgery,
  - Critical Care.
- Maternity and paediatrics (services for pregnant women, mother-and-baby and children)
- Cardiac (care for people with heart problems)
- Immunology (care for people who have problems with their immune system)
- Neurology (care for people with disorders or diseases affecting the brain)

Urgent and emergency care services will be reviewed in the early stages of the review because these have the largest impact on the future shape of other hospital services that are interrelated.

**Wave 3** will include the following services:

- Planned and Specialist Services (including , Dermatology, Gastroenterology, GI Surgery, Oral and Maxillofacial Surgery, Ophthalmology and Orthopaedics)
- Radiology

**Wave 4** will include the following services:

- Any further services identified as needing review on the basis of ongoing quality or service issues.

We will communicate what we are working on at all times and ensure opportunities for involvement are advertised widely. Further details of the proposed timetable are included in the project plan, which you can view here: [www.humbercoastandvale.org.uk/humberacutereview](http://www.humbercoastandvale.org.uk/humberacutereview).

### How will I be able to have my say?

We are committed to providing opportunities for staff, patients and the public to put forward their views and ideas on the future of hospital services in their area. We will do this through a variety of means, including focus groups, drop-in information events, surveys (online and face-to-face) and by speaking to local groups and networks.

We will publish regular updates about the programme on our website, via our newsletter and through other existing patient groups and networks.

Opportunities to have conversations with local people in the Humber area will be set up over the coming months and will be publicised on our website and through other local channels. If you would like to express an interest in attending an event and/or finding out more please get in touch:

Email: [humber.acutereview@nhs.net](mailto:humber.acutereview@nhs.net)

Phone: 01482 344711

Write to us: Humber Acute Services Review, c/o NHS Hull CCG, 2<sup>nd</sup> Floor, Wilberforce Court, Alfred Gelder Street, Hull, HU1 1UY