

The Future of Acute Hospital Services in Worcestershire

Summary

Public Consultation Document

Dates to be confirmed – 12 weeks in total

Have your say on plans for the Alexandra and Worcestershire Royal Hospitals

We want everyone to have high quality and safe health services from the NHS.

This document tells you why the people who run the health services in Worcestershire believe some hospital services need to change.

The changes we are proposing only affect 5% of patients. There will be no change to outpatient appointments and tests and 95% of patients will go to the same hospital as they do now for their care.

All three main hospitals, the Alexandra Hospital in Redditch, Kidderminster Hospital and Treatment Centre and the Worcestershire Royal will remain open but will work differently to give all patients good care.

The main differences are that we want to separate planned and emergency care and we want to centralise where children have to stay in hospital and where women have their babies in hospital.

Under our plans most planned operations would take place at the Alexandra and Kidderminster Hospitals which would allow the Worcestershire Royal Hospital to concentrate on caring for the sickest patients and those who need emergency operations.

By separating planned and emergency care we can reduce waiting times and the number of operations we cancel.

Over the last few months we have seen our current clinical services become increasingly fragile due to shortages of highly skilled staff and we have had to make temporary emergency changes to ensure the safety of patients.

The model of care we are proposing moves:

- Most planned orthopaedic surgery from Worcestershire Royal to the Alexandra Hospital
- Some planned gynaecology surgery from Worcestershire Royal to the Alexandra Hospital
- More planned surgery – eg breast surgery from Worcestershire Royal to the Alexandra Hospital
- More ambulatory care from Worcestershire Royal to the Alexandra Hospital
- More daycase and short stay surgery to Kidderminster Hospital
- All hospital births from the Alexandra to the Worcestershire Royal Hospital
- Inpatient children's services from the Alexandra to the Worcestershire Royal Hospital
- Emergency surgery from the Alexandra to the Worcestershire Royal Hospital

The two Accident and Emergency departments at the Alexandra and Worcestershire Royal Hospitals will be maintained and expanded to include co-located urgent care centres. However, the Accident and Emergency department at the Alexandra Hospital will be for adults only due to the proposed move of children's inpatient beds.

We recognise that some people will not be happy that we are only consulting on one option but we believe it is the only clinical solution for Worcestershire. It has been developed by

clinicians within the county and endorsed by the West Midlands Clinical Senate and we believe it is the best way of maintaining as wide a range of health services as possible across all three acute hospitals in Worcestershire.

We accept that we are not offering local people a choice about what services should be provided at each hospital but we do want to know if we have missed anything or if there are ways in which we could enhance the services we plan to offer.

Proposal 1

To introduce countywide centres of excellence for orthopaedics, breast surgery and laparoscopic benign upper gastro-intestinal services at the Alexandra Hospital and to introduce a women's centre and an ambulatory care centre at the Alexandra Hospital

Patient story

Parvinda (44) from Pershore has been diagnosed with gallstones and needs to have her gall bladder removed. She has had her surgery cancelled twice at the Worcestershire Royal because the hospital has been full of emergency patients and there has been no bed for her. Under our proposals Parvinda would have her operation at the Alexandra Hospital in the specialist elective upper gastro-intestinal centre. She would have her operation in a dedicated planned surgery operating theatre and recover on a planned surgery ward. It is less likely that her surgery would be cancelled.

Patient story

Mike (56) from Malvern needs a hip replacement. Under our proposals he would be given a convenient date to have his surgery at the Alexandra Hospital in Redditch. His operation would go ahead as planned in a specialist orthopaedic theatre which would reduce the chance of him contracting an infection. He would receive his immediate after care as an inpatient in Redditch before being discharged home after 4-5 days. At home he would continue to have physiotherapy from the community team based at Malvern Community Hospital.

Patient story on patient using ambulatory care

Julie from Tenbury example of what would have gone to WRH but will now go to Kidderminster

Proposal 2

To centralise all hospital births in the county at the Worcestershire Royal Hospital where women would have the choice of midwife or consultant-led care.

Patient story

Leesa from Redditch is 17 and she's just found out she is expecting twins. She's young and healthy but because she is expecting twins there is more chance that her babies will be born early, will be smaller than most babies and will need extra support after their birth. As Leesa is considered 'high risk' and needs to be cared for by a consultant obstetrician she has to plan to give birth in a full obstetric unit. The nearest units are Birmingham Women's, Warwick and Worcestershire Royal. Leesa chooses the Worcestershire Royal. She has all her scans and pre-birth check-ups at the Alex and when she goes into labour prematurely she travels to Worcester to give birth. Her twins, Jack and Ollie, are small and need high dependency care followed by special care for two weeks. Leesa stays in hospital and her twins move from the neonatal unit to the transitional care ward where Leesa helps to look after them until they can be discharged home. Leesa and the twins have all their follow up care in Redditch.

Patient story

Lottie (27) from Bromsgrove is expecting her second child. She had no complications with her first baby and she wants a normal birth. She's given the choice of having her baby at home or at the midwife led unit in Worcester which is next to the consultant-led unit. She is warned that even if she wants a midwife-led birth at home she might have to transfer to Worcester if her baby needs consultant intervention such as an emergency caesarean section. Lottie opts for a home birth which proceeds without any complications.

Patient story

Gemma from Redditch is 39 and pregnant with her first baby. She has diabetes and has been told she will need to give birth in a consultant-led unit. All through her pregnancy she has all her scans and check-ups at the Alex and when at 37 weeks she thinks she can't feel her baby's legs kicking, she is admitted to the pregnancy day assessment unit at the Alex for monitoring. The midwives find her baby's heart and she is able to return home. Two weeks later she gives birth to Jack at the Worcestershire Royal Hospital.

Proposal 3

To centralise all inpatient children's facilities at the Worcestershire Royal and to provide better access to home nursing and consultant-led clinics to prevent as many children as possible from being admitted to hospital.

Patient story

Lucy from Redditch is three and has a high temperature and a rash which doesn't fade when her parents press a glass against it. They suspect it might be meningitis and call 999 for an emergency ambulance. The ambulance takes Lucy straight to Worcestershire Royal Hospital where the doctors confirm it is meningitis. She's treated on the children's high dependency unit and her parents are able to stay with her until she is discharged home six days later.

Patient story

James (8) from Astwood Bank has a history of asthma and has been a frequent visitor to the Alexandra Hospital. He's at school when he has his latest asthmatic attack. His mother brings him to the urgent care centre at the Alexandra Hospital where he is referred to the children's outpatient clinic where he is seen by a consultant paediatrician the same day.. James is assessed by the consultant who believes he is well enough to return home with a written asthma management plan to follow. The consultant asks the Orchard Service to review James at home for the next 24 hours.

Proposal 4

All emergency surgery to be centralised at Worcestershire Royal Hospital.

Proposal 5

To retain the Accident and Emergency Departments at the Alexandra and Worcestershire Royal Hospitals. The Alexandra A&E would be for adults only. Both hospitals would have new urgent care centres which could treat adults and children 24-hours-a-day.

Patient story

Jane (75) from Studley has asthma, heart failure and diabetes. She is a frail, elderly patient who frequently needs to go into hospital. One night she falls out of bed and her care home calls for an ambulance to take her to the Alexandra Hospital. At the Alex, she is initially seen by a doctor in the Emergency Department. He doesn't think she has fractured her hip but he sends her for an x-ray to be sure. The x-ray comes back clear and Jane is able to return to her care home.

Patient story

Darren (6) from Redditch falls off a swing in the local park and his mum takes him to the Alex. He is assessed by a GP in the Urgent Care Centre which is part of the A&E and sent

for an x-ray which reveals he has a simple fracture. Darren's wrist is plastered and he goes home two hours after arrival. He has his follow up care at the Alex.

Patient story

Julia (47) from Bromsgrove has had stomach pains for several days but they are getting worse. Her partner is worried about her so he takes her to the Alex. She is seen by the GP in the urgent care centre. He suspects acute appendicitis and refers her to the surgical team at Worcestershire Royal Hospital where she is transferred for surgery that night. Three days later she is back home in Redditch

Kidderminster Minor Injuries Unit

The minor injury unit at Kidderminster Hospital would remain. It provides a local service to the population who need treatment for minor injuries such as wounds, burns and broken bones which can be managed without having to stay overnight in hospital.

Transport

Worcestershire is a rural county and its three hospitals are all between 18 and 20 miles apart. Any changes to existing services which alters the site at which a service is delivered will have an impact on travel for staff, patients and visitors.

Specific examples of how we could improve transport are:

1. The 350 bus
The 350 bus runs three times a day between Redditch and Worcester bus stations and it stops at both the Alexandra and Worcestershire Royal Hospitals. Worcestershire County Council has said it would cost £180,000 per year to increase the frequency of the bus to between every 60 and 90 minutes. The current bus ticket between the hospitals is £7 each way. At least 70 people would have to use the 350 bus every day to make it break even. Any shortfall would need to come from existing budgets.
2. Community Transport
Increasing the amount of community-run transport in the county to enable patients and visitors to be taken from home to hospital. Individuals would need to meet the cost of the community transport they used.
3. Providing a minibus service between the hospitals
A minibus could run between the Alexandra and Worcestershire Royal Hospitals or on a continuous loop which would also include Kidderminster. It could be used by patients, visitors and staff. The estimated cost of a minibus is £380,000 per year which would have to be met from existing health budgets.

Worcestershire Acute Hospitals NHS Trust is also looking at the parking available on its three hospital sites.

To help us plan the right transport we need you to tell us what transport you currently use to get to hospital and how you would want to travel if you needed to get to a different hospital in the future. You can do this by filling in the questionnaire on our website www.worcsfuturehospitals.co.uk

Having your say

Your views are extremely important and we are keen to hear from as many people, groups and stakeholders as possible.

In addition we will be working with groups of people in your communities whose views are not always heard: for example, groups representing particular individuals such as older people, or those representing people with a particular health condition.

These are the ways in which you can find out more, get involved and tell us what you think:

Questionnaire

Please fill in the questionnaire online at www.worcsfuturehospitals/questionnaire

Public meetings and events

Public meetings and events are being held to enable anyone with an interest to find out more about the proposals, ask questions and provide their views.

The following public meetings and events are due to take place during the consultation.

- Worcester Racecourse, 29th September at 6.30pm
- Palace Theatre, Redditch, 1st October at 6.30pm
- Kidderminster Town Hall, 7th October at 6.30pm
- Malvern Cube, 17th October at 6.30pm
- BHI Priory, Bromsgrove, 23rd October at 6.30pm
- Sacred Heart Church Hall Droitwich, 5th November at 6.30pm
- Town Hall, Evesham, 10th November at 6.30pm

More public events will be arranged throughout the consultation and a full list can be found on the website www.worcsfuturehospitals/events

Patient and public representative groups

We will be meeting and working with patient and public representative groups such as Healthwatch Worcestershire. You may wish to submit your feedback via these groups. Healthwatch Worcestershire can be contacted at:

Healthwatch Worcestershire
Civic Centre
Queen Elizabeth Drive
Persnore
WR10 1PT

Tel: 01386 550264

Email: info@healthwatchworcestershire.co.uk

www.healthwatchworcestershire.co.uk

Deadline

To ensure your views are considered we must receive your response by no later than midnight on **date**.

Further information

Further information about the plans and this consultation are on the website, www.worcsfuturehospitals.co.uk. The website has all the consultation materials including Frequently Asked Questions.

If you have any further questions about the consultation or would like to request additional copies or alternative versions of this document please contact us on:

- Telephone **number**
- E-mail futurehospitals@worcestershire.nhs.uk

Please note we will be unable to respond individually to the feedback received but all feedback will be considered and analysed as part of the report on the consultation.