

**Joint Health Scrutiny Committee**

<b>Document Title:</b>	Potential Clinical Service Reconfigurations
<b>Sponsor (Executive Director):</b>	Mike Sharon: Director of Strategy and Organisational Development
<b>Author:</b>	Jayne Dunn: Redesign Director – Right Care Right Here
<b>Date Of Meeting:</b>	12 June, 2013

**Executive Summary:**

On 22<sup>nd</sup> March 2013, Mike Sharon (Acting Chief Executive Officer at the time) and Jayne Dunn (Redesign Director RCRH) attended an informal meeting with the Chairs of both Birmingham and Sandwell Health Scrutiny Committees to give an update on Sandwell and West Birmingham Hospitals NHS Trust's (referred to below as the Trust) current position regarding the Outline Business Case for Midland Metropolitan Hospital (new single site Acute Hospital), the Trust's application to become a Foundation Trust and outlining potential service developments/ changes which may affect the location of services.

These included Bradbury Day Hospice and Clinical Haematology inpatient services. It was agreed that a Joint Health Scrutiny Committee (referred to below as the Committee) would be convened in mid-June to further discuss these proposed service developments/changes. In addition the Committee Chairs asked the Trust to provide an update about progress post Maternity Reconfiguration and in particular whether women were choosing Halcyon Birth Centre and any on-going impact on Dudley Group of Hospital NHS Foundation Trust.

The purpose of this report therefore is to present to the Committee for discussion at its meeting on 12<sup>th</sup> June 2013:

- The potential service change to Bradbury Day Hospice and in particular the drivers for change;
- The potential service change and reconfiguration of inpatient Clinical Haematology services and in particular the drivers for change, options, the process for patient, public and other key stakeholder engagement including involvement in selecting options. In particular the Trust would value a discussion around the level of engagement required and whether formal public consultation may be appropriate.
- An update regarding Halcyon Birthing Centre and impact on Dudley Group of Hospital NHS Foundation Trust.

For the purpose of clarity each of the above items is attached as a separate briefing document. A summary of key points in each report and recommendations to the Committee are:

***The potential service change to Bradbury Day Hospice:***

The Trust delivers a range of specialist palliative and end of life services and support delivered across a range of settings including City and Sandwell Hospitals, community locations and patients own homes. Within this context the Trust provides a specialist palliative day care service at Bradbury Day Hospice for Sandwell residents. The Trust's specialist palliative care and end of life team have been reviewing the services Bradbury Day Hospice is able to provide and what should be provided. This has raised a number of issues and options with the specialist team concluding that alternative service models may be more appropriate than a Day Hospice. The report provides the Committee with details about the Review of Bradbury Day Hospice and the issues relating to the current service provision especially in terms of the limited range of services offered, low level of appropriate referrals, low level of attendances and impact of this on a critical mass of patients and staff to provide a sustainable service. Three options have been identified but further work is required to evaluate these including wider engagement in the process. In addition, the Clinical Commissioning Group are reviewing their commissioning strategy and so the outputs from this will need to be considered in future proposals for Bradbury Day Hospice.

***The potential service change and reconfiguration of inpatient Clinical Haematology:***

The Trust provides a Clinical Haematology service through a small clinical team working across the Trust to provide care for patients including those with haematological malignancies and those with the inherited haemoglobin disorders (haemoglobinopathies - sickle cell disorders & thalassaemia).

The inpatient element of the service is provided at both City and Sandwell Hospitals although for haematological malignancies the inpatient provision is at Sandwell Hospital and for haemoglobinopathies the inpatient provision is at City Hospital. In March 2012 following a peer review visit to the services the resulting report, *External Report on Haemato-Oncology Services to the SWBH Executive Board*, in recognition of the complexities of a small consultant team delivering inpatient services at both City and Sandwell Hospitals made a recommendation that:

*“a strategic discussion needed to take place between the Directorate and Trust Board to explore the feasibility of locating all inpatients on one site.”*

The Clinical Haematology team were in agreement that reconfiguration of inpatient beds may be the way forward in order to improve patient care, strengthen the consultant body and provide better junior doctor support. A review project was set up and has considered the clinical drivers for change and the potential patient benefits. These have been influenced by patient engagement (through small focus groups and interviews) with patients who have haematological conditions.

The project steering group has identified three options, one of which retains inpatient services for these conditions on both sites (as now), and two of which consolidate these inpatient services on one site. The project continues to develop a more detailed analysis of each option and it must be stressed that at this stage all of the options identified are being developed and considered on an equal basis. Evaluation will only take place following the more detailed analysis. However as part of its planning work the project is proposing an evaluation methodology involving and then combining a financial evaluation and non-financial with staff, patients, GP and other stakeholder engagement in the non-financial evaluation. A set of non-financial evaluation criteria have been proposed.

If after the evaluation of options the Do Minimal option is the preferred option then formal public consultation would not be required as the location of services would remain the same (i.e. on both sites). If however the preferred option involves consolidation of inpatient services onto one site formal public consultation may be appropriate. As part of the project planning work the Steering Group is considering the ongoing level of engagement and whether formal public consultation is likely to be appropriate. This needs to be considered at this stage and before the evaluation as it will influence the timing and format of the next stage of work.

Our initial assessment suggests that whilst robust patient engagement is essential throughout the review, formal public consultation may not be appropriate for a variety of reasons. However it is recognised that if the preferred option involves consolidation of inpatient services onto one site, one group of patients and relatives will have to travel further for inpatient care.

***The update regarding Halcyon Birthing Centre:***

This report summarises the activity within the Halcyon Birthing Centre since its opening in November 2011 and shows the predicted activity level for the first year was achieved but activity has declined since for a variety of reasons and is not currently forecast to meet the year 2 predicted levels. In general women are more aware of the facilities however there are still questions over whether all pregnant women in Sandwell area are fully briefed about the service. Community midwives are the first point of contact and have materials to allow women to see and be informed about the service. We are auditing this by a prospective audit on Serenity Birthing Centre (located next to the main Delivery Suite at City Hospital), by asking all women who are admitted in labour if they were offered the chance to give birth at Halcyon Birthing Centre. In addition to this we have developed a community midwives action plan to support our marketing strategy for the service.

Feedback from women who have used the Halcyon Birthing Centre has been very positive.

The Trust has continued to work in partnership with Dudley Group of Hospitals NHS Foundation Trust to minimise the impact on their services by ensuring Sandwell women referred to their services are aware of and offered the alternative services provided by us and particularly for low risk women, the Serenity and Halcyon Birthing Centres.

### **Report Recommendation:**

The recommendations to the Committee for each report are:

In relation to **the potential service change to Bradbury Day Hospice** the Committee is recommended to discuss and note:-

- the work to date relating to the Review of Bradbury Day Hospice and the issues that this has raised;
- the additional work required before further conclusions can be made about the most appropriate future option.

In relation to **the potential service change and reconfiguration of inpatient Clinical Haematology** the Committee is recommended to:

- discuss and note the clinical drivers for change and benefits, the options identified, the patient engagement undertaken to date and the feedback from this;
- discuss and comment on the proposed non-financial evaluation criteria and the proposed process for non-financial evaluation;
- discuss and comment on the level of patient and stakeholder engagement and consultation proposed and what is appropriate at this stage ;
- discuss and comment on our assessment that formal public consultation may not be appropriate
- note the next steps and related timescales for the project;
- agree to receive a further update once the evaluation of options has been undertaken.

In relation to **the update regarding Halcyon Birthing Centre** the Committee is recommended to discuss and note the content report.

**ACTION REQUIRED** (*Indicate with 'x' the purpose that applies*):

The receiving body is asked to receive, consider and:

Accept	Approve the recommendation	Discuss
		x

**KEY AREAS OF IMPACT** (*Indicate with 'x' all those that apply*):

Financial		Environmental		Communications & Media	X
Business and market share	x	Legal & Policy	x	Patient Experience	X
Clinical	x	Equality and Diversity	x	Workforce	X

Comments:

**ALIGNMENT TO TRUST OBJECTIVES, RISK REGISTERS, BAF, STANDARDS AND PERFORMANCE METRICS:**

This report aligns to our Corporate Objective: Safe High Quality Care

**PREVIOUS CONSIDERATION:**Informal meeting with the Chairs of both Birmingham and Sandwell Health Scrutiny Committees held on 22<sup>nd</sup> March 2013

