THE FUTURE OF YOUR HOSPITALS: Emergency site

We have a real opportunity to shape healthcare in Shropshire for future generations.

Doctors, nurses and other healthcare professionals are shaping proposals which you will have heard about to ensure we have two vibrant and sustainable hospitals for the next 20 years and beyond.

The proposal will ensure both the Princess Royal Hospital (PRH) in Telford and the Royal Shrewsbury Hospital (RSH).

The proposal is to create an Emergency Site at either RSH or PRH, with the other becoming a specialist Planned Care site.

Six out of 10 people who attend our A&E departments would continue to go to their local hospital, as their conditions or injuries would be able to be seen and treated through Accident and Urgent Care Centres.

This booklet provides some meaningful and accurate information about the proposed Emergency Care site, which would include a new 24-hour single Emergency Centre that would treat the more serious emergencies.

The Emergency Centre would be larger than our current small A&Es, helping to attract more Consultants to ensure a sustainable workforce for the future. A state-of-the-art 30-bedded Intensive Therapy Unit and High Dependency Unit would be provided alongside the Emergency Centre.

The Acute Women and Children’s Centre would be on the Emergency Site, although almost all women will receive outpatient antenatal and postnatal care at their local hospital.

Patients needing day case treatment such as Chemotherapy would also get this from their local hospital as services will be provided on both sites.

It’s important to be aware that no decisions have been made and all proposals will be subject to a full public consultation.

All of the options are currently still with the NHS Future Fit Programme Board and there has not yet been a final decision.

Read more about our proposals inside this eight-page information booklet.

All activity assumptions in this booklet are based on 2015-16 data as outlined in the Outline Business Case for these proposals and could be subject to change.
The journey so far: How people have already shaped our preferred option

Since 2015 a number of improvements to The Shrewsbury and Telford Hospital NHS Trust’s (SaTH) proposals thanks to your feedback. These include:

A move to two balanced hospital sites with a substantial bed base on both. Previously the Planned Care Site was proposed to have 20 beds. Now, under our current proposals it will have 350 inpatient and day case beds. This is a significant change.

A Women and Children’s Centre (and many services) will be provided at both hospital sites.

Their proposals are now looking at how we can support more on-going care closer to home.

SaTH’s preferred option now provides more opportunity to bring services back into the county from places like Stoke and Wolverhampton.

A Cancer Centre will be provided at both hospital sites.

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Why change? Separating Planned Care and Emergency Care

Currently planned care (operations, procedures and appointments that are planned in advance) and unplanned care (emergencies and urgent care) are provided across both hospital sites.

Pressures within unplanned services impact daily upon planned care activity. For example, a planned hip replacement may be cancelled because the bed that is needed for that patient is being used by a patient that has pneumonia and has been admitted via A&E.

A lot of the time this means medical patients can be cared for within the ‘wrong’ ward for their needs and that planned episodes of care are cancelled. Both of which have an adverse effect on the patient.

From November 2015 to October 2016, SaTH cancelled 514 surgical procedures due to the unavailability of beds.

Cancelling a patient’s operation often has a negative impact on them and their family.

Creating the right acute bed base and model is crucial to the future of our hospitals and importantly the service we provide for our patients.

Separating planned (elective) and unplanned (emergency) care brings a number of benefits, and our proposals will mean no surgery will be cancelled due to the unavailability of beds.

These are just some of the reasons we need to change the way we deliver these services.
Emergency Department: A new 24-hour single Emergency Centre would be provided to treat the most serious emergencies. It would be 50% larger than our current small A&Es, helping to attract more Consultants to ensure a sustainable workforce for the future.

Critical Care Unit: A state-of-the-art 30-bedded Intensive Therapy Unit and High Dependency Unit would be provided alongside the Emergency Centre.

24-hour Accident and Urgent Care Centres (A&U): 6 out of 10 people, including children, who arrive at our current A&E departments would continue to be seen at an A&U.

Specialist wards: Cardiology (including Coronary Care Unit), Endoscopy, Gastroenterology, Nephrology, Neurology, Stroke, Respiratory and Acute Medicine for patients needing acute inpatient care.

Trauma: Trauma, including orthopaedics and unplanned and complex surgery.

Acute Maternity Services: Inpatient facilities for women, including obstetrics, Neonatal Services, Early Pregnancy Assessment Services (EPAS), Antenatal Care, Outpatients and Scanning, as well as a Consultant-Led Maternity Service. A Midwife-Led Unit would also remain.

Children’s Services: Inpatient and Outpatient facilities for children, including a Children’s Assessment Unit, Oncology and Haematology.

Outpatients: Outpatients appointments, including a Fracture Clinic, would still take place meaning patients would still have their appointment at their local hospital.

Diagnostics: Facilities such as X-Ray, Ultrasound, CT and MRI scanning would take place here.

Inpatients: The hospital would have approximately 510 inpatient beds, and a dedicated Ambulatory Care Unit to accommodate 49 patients.

Day Case Renal Unit: Kidney dialysis treatment available for patients at their local hospital.

Cancer Centre: Patients needing day case treatment such as Chemotherapy would get this from their local hospital as services would be provided at both the Royal Shrewsbury Hospital and the Princess Royal Hospital in Telford.

Did you know?

The new Emergency Centre would be 50% bigger than our current A&Es and would include a state-of-the-art 30-bedded Intensive Therapy Unit and High Dependency Unit.

The majority of patients who currently attend A&E would be seen at their local hospital as both site will have Accident and Urgent Care Centres that will be open 24/7.

Cancer services will be available at both hospitals.

By creating a single Emergency Department it will help us keep our Trauma Unit status so we can still care for most patients having accidents in the county.

A state-of-the-art Emergency Centre would help to attract more Consultants to ensure a sustainable workforce for the future.
Staff working at Shropshire’s two acute hospitals say a single emergency centre will provide the best care for people from across the region.

Doctors, Nurses and Surgeons say proposals to make either the Royal Shrewsbury Hospital or the Princess Royal Hospital in Telford an Emergency Site, with the other becoming a dedicated Planned Care site, will mean patients can be provided with a better standard of care.

And they have been joined by patients who agree that change is needed to improve healthcare for more than 500,000 people across Shropshire, Telford & Wrekin and mid Wales.

Mr John Loy, Consultant Surgeon at SaTH, said: “We know, as clinicians, that we can provide the best quality patient-centred care to the half million population that we serve in this region by dedicating emergency services on one site.

“The doctors, the nurses – the people on the ground, working in the hospitals – we see on daily basis individual cases where care could have been provided to a much higher standard if the patients were treated in a single emergency centre.”

Dr Tom Blyth, a former A&E Consultant, at the Trust, added: “If you can bring people more onto one site you will still have the same number of doctors and consultants, plus we should attract even more, and you’ll be better able to treat your patients.”

Under the plans, the single Emergency Department would be supported by two centres providing 24-hour-a-day urgent care, one at each hospital. Most patients would still be seen at the same hospital as they are now.

These centres will see and treat conditions like simple fractures, cuts requiring stitches, moderate respiratory complaints, some abdominal and chest pain, many sporting injuries, minor limb injuries and minor illnesses like chest infections.

Dr Chris Mowatt, a Consultant Anaesthetist in Intensive Care, said: “At both sites you will be able to see doctors in clinics, you will be able to have your investigations done, you will be seen by emergency care doctors so overall, for the vast majority of patients, there won’t be much change.”

Rachel Martin, a sister on the Children’s Ward, added: “It’s the patients we need to put first and that’s who our nurses and our doctors will put first.”

The views of doctors and nurses have been supported by patients, like Graham Shepherd, Chair of the Shropshire Patients’ Group.

He said: “I think we’ve recognised that, for the last few years, the facilities are not adequate to provide the level of service which patients expect.

“For the last five years it has been accepted that any changes we do must be clinically led – take the advice of the experts.”

Clinicians say that change is needed to improve patient care.

Dr Mowatt said: “We all have extended families in and around the area and we believe we’re in it together and this is for all of us.

“This is a process which is not about politics, it’s not about money, it’s not about cost-saving exercises – it’s about our patients; that’s it.”

Mr Loy said: “This whole project is not about a winner or a loser; one hospital gaining over another, one town gaining over another. It’s about creating a vibrant, safe, forward-looking emergency service.”

And Hezron Ottey, a Staff Nurse in A&E added: “This is something big, it’s something fantastic, it’s something wonderful to look forward to.”
At a glance: Women and Children’s services

Woman and Children’s services would be available at both hospital sites. An acute Women and Children’s inpatient facility would be situated on the Emergency Site to ensure our mums and babies do not have to leave the county for highly acute care.

There would be Inpatient facilities for women, including Obstetrics, Neonatal Services, Early Pregnancy Assessment Service (EPAS), Antenatal Care, Outpatients and Scanning, as well as the Consultant-Led Maternity Services, The Midwife-Led Unit would also remain.

These women and children’s services would be at both sites

- Maternity Outpatients, Maternity Scanning and Maternity Day Assessment Unit
- State-of-the-art Midwife-Led Unit (including delivery suite and ward), Specialist Midwifery Support Services and Community midwifery teams
- Neonatal Outpatients, Neonatal Outreach Care and Teams, Children’s Outpatients and Children’s Outreach Care and Teams
- Early Pregnancy Assessment Service (EPAS) and Gynaecology Outpatients

There would also be a Women and Children’s Centre on the Planned Care site. For the greatest impact on birth outcomes, we’re looking at providing care closer to home at the antenatal stage. At this critical stage community hubs would be provided closer to home offering a one-stop shop bringing services together around the needs of women and their families.
New Accident and Urgent (A&U) Care Centres in Shropshire would be open 24-hours-a-day, seven-days-a-week and be available to treat the majority of patients in the same hospital as they visit now if proposals to improve emergency and critical care services in the county go ahead.

The A&U Centres would also provide patients with access to the many services they might need, such as X-Rays.

The majority of patients who visit the county’s A&E Departments at the Royal Shrewsbury Hospital (RSH) and Princess Royal Hospital (PRH) in Telford do not need the life-saving intervention that an old-style A&E provides – and in the future these A&U Centres would be able to diagnose and treat their conditions, if plans to create them become a reality.

The Shrewsbury and Telford Hospital NHS Trust (SaTH) proposes creating two new A&U Centres – open 24-hours-a-day, seven-days-a-week – one at RSH and one at PRH under proposals which would also see a new single site Emergency Department created for the region, therefore giving us more emergency capacity — increasing the number of clinical spaces from 39 to 64.

“The majority of patients will still go to their local hospital in Telford or Shrewsbury.”

Six in ten patients who currently attend our A&E Departments would still be able to be seen at their local hospital under our proposals.

New 24-hour A&Us could treat conditions including:

- Simple fractures
- Cuts requiring stitches
- Moderate respiratory complaints
- Some abdominal and chest pain
- Many sporting injuries, such as sprains
- Simple eye complaints
- Minor limb injuries
- Minor illnesses like chest infections

More serious conditions, such as injuries caused by car crashes or people suffering a stroke, would be treated at the proposed new Emergency Centre.

In addition, the Trust’s aspiration is to bring treatment for victims of most heart attacks back into the county from places such as Stoke and Wolverhampton. Currently patients need to travel to hospitals outside of the county for such treatment.
Cancer Services: There will be a Cancer Centre at both sites

For any illness, but perhaps particularly for cancer, patients want to know that they can be treated in a timely, effective and safe manner, ideally as close to their homes as possible.

At SaTH, they do that and it is only for complex cases that patients are transferred to more specialist units. The results we achieve at our Trust rival some of the leading centres in the country.

However, at the moment the Trust only has one Cancer Centre—at the Royal Shrewsbury Hospital (RSH)—which means patients from Telford & Wrekin have to travel to receive treatment.

Last year nearly 700 patients from the Telford area had to receive their chemotherapy at the RSH.

Therefore we propose building a new state-of-the-art Cancer Centre at the Princess Royal Hospital (PRH) in Telford, meaning there would be Cancer Centres on both sites regardless of which become the Emergency Site and which became the Planned Care site.

SaTH are committed not only to maintaining the cancer services that we have currently, but also to improving provision and access to treatments.

“Under our preferred option the majority of patients from the Telford area would receive their chemotherapy at a Cancer Centre at PRH.”
No decisions have been made and the proposals will be subject to a full public consultation.
NHS Future Fit has the full list of options at www.nhsfuturefit.org

NHS Future Fit proposes creating a single Emergency Centre at one site. The other hospital would be a planned care site with an Accident and Urgent Care Centre.

**Majority**

- Of patients currently attending A&E would be seen at their local hospital in Accident and Urgent Care Centres.
- There will be 64 clinical spaces to treat patients at the new Emergency Department and Accident and Urgent Care Centres. We currently have 39 spaces in total.
- Almost all women will receive their antenatal and postnatal care at their local hospital.
- Cancer services will be available at both hospitals.
- Majority of patients will attend their outpatient appointments at their local hospital.
- We hope to create Centres of Excellence.
- There will be 753 (plus 49 Ambulatory Emergency Care) clinical spaces. At the moment we have just 736.

**30%**

- More critical care beds.