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 our hospitals are sustainable 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) are sustainable for the future.

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 the 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 planned care site, which would perform around 28,000 planned day case or inpatient procedures per year, should the preferred option be implemented.

The Planned Care site would also provide specialist services for Bariatric Surgery, Breast Surgery and Cancer Services.

The Shrewsbury and Telford Hospital NHS Trust’s (SaTH) proposals would bring a lot of benefits for patients and staff:
- Shorter waiting times
- No cancelled operations due to the unavailability of beds
- More clinical space
- More consultants

The aspiration is also to create Centres of Excellence 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 the proposals inside this eight-page information booklet about the proposed Planned Care site. 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 the preferred option

Since 2015 a number of improvements have been made to SaTH’s proposals thanks to 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 the 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.

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

Accident and Urgent Care Centres will now be open 24 hours a day 7 days a week with full access to diagnostics (such as x-rays). Previously they were due to close at 10pm.

A Cancer Centre will be provided at both hospital sites.

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

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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.
Planned Care site: What services would be based there?

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.

A number of our mums and children would still access women and children’s services at the Planned Care site which would continue to provide the majority of local services including . . .

- **Maternity Services**: Midwife-Led delivery Unit (MLU), Early Pregnancy Assessment Service (EPAS), Antenatal Care, Outpatients and Scanning.
- **Children’s Services**: Outpatients services.
- **Women’s Services**: Gynaecology Outpatients appointments.

**Elective and day case surgery**: The majority of adult planned inpatient surgery would take place at this site, as well as most adult day surgery.

**Orthopaedics**: The vast majority of planned Orthopaedic appointments.

**Endoscopy**: A purpose built Endoscopy facility for day case patients.

**Centres of Excellence**: The Trust aspires to create Centres of Excellence in Bariatric Services and Breast Services, which would be housed at PRH.

**Medical beds**: There would be medical beds available for ongoing acute care and rehabilitation.

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

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

**Inpatients**: Approximately 350 inpatient and day case beds. This would include beds for Elective Orthopaedics, Breast Service, Frailty and Elderly Care, rehabilitation and ongoing medical care.

**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 will be provided at both the Royal Shrewsbury Hospital and the Princess Royal Hospital in Telford.
**At a glance: Women and Children’s services**

Woman and Children’s services would be available at both hospital sites. A 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 also be a Women and Children’s Centre on the Planned Care site. It would include:

- Maternity Outpatients
- Maternity Scanning
- Maternity Day Assessment Unit
- State-of-the-art Midwifery

“We’re looking at providing care closer to home at the antenatal stage.”

Unit including delivery suite and ward

- Specialist midwifery support services for feeding, teenage pregnancy, vulnerable persons, public health and screening
- Community midwifery teams
- Neonatal outpatients
- Neonatal outreach care and teams
- Children’s outpatients
- Children’s outreach care and teams
- Early Pregnancy Assessment Service (EPAS)
- Gynaecology outpatients
- Gynaecology procedures
- Gynaecology day case operations

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 will be provided closer to home offering a one-stop shop bringing services together around the needs of women and their families.
Women & Children’s Services at the Planned Care hospital site

7 out of 10 Women & Children’s Services at the Planned Care hospital site

250 Number of contacts that will remain at The Shropshire Women and Children’s Centre at the Planned Care site

The number of children who would be able to have their first outpatient appointment at the Planned Care site each week. They would also be able to have their follow up appointment at the Planned Care site

Children would be able to be treated for their accident and urgent care needs at the Planned Care Site — more than 200 children every week

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), Gynaecology Outpatients

There would be Midwife-Led Units at the Planned Care site and the Emergency Centre Site.
Breast Services: Bringing more effective and timely treatment

The Breast Team’s vision for improving the Breast Service on one site would result in a more effective and timely treatment of patients. The Breast Service would be based at the Planned Care site. The aspiration is that this would lead to a single centre of excellence which would improve patient experience, preserve the service and be attractive for recruitment and retention of high quality staff. Currently Breast services are provided on both sites which is proving increasingly difficult to sustain in terms of personnel and diagnostic support. Currently not all patients with a suspected cancer who require an image guided biopsy can have it on the same day. This means that for some patients we are unable to meet the latest 2016 National Institute for Health and Care Excellence (NICE) guidelines that stipulate that all biopsies should be carried out at the same appointment. This would be possible if it was all on the planned care site. In addition to the benefits and improvement for patients, this would also result in a more cost effective use of resources with rationalisation of imaging equipment and reduction in servicing costs. Patients diagnosed with breast cancer will have access to Outpatients, Surgery and Chemotherapy at the Planned Care site. The Trust is working hard to ensure that the mobile breast screening service would be provided around the area we serve for people to access it close to home.

Cancer Services: There would be two Cancer Centres

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, it is only for complex cases that they transfer patients to more specialist units. The results they achieve at the Trust rival some of the leading centres in the country. However, currently 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 Royal Shrewsbury Hospital (RSH).

Therefore SaTH proposes building a new state-of-the-art Cancer Centre at the Princess Royal Hospital (PRH) in Telford, meaning there would be Cancer Centres at both RSH and PRH. Currently there is only a Cancer Centre at RSH.

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

Bariatric Services: We could double number of people benefiting from surgery

SaTH’s preferred option would bring benefits for Bariatric Services, which would be based at the Planned Care site. Our surgeons believe that by separating emergency and planned care the number of life-changing weight loss surgery procedures in Shropshire could double, meaning more people could be treated in the county. Currently SaTH has three Bariatric Consultants who carry out surgery procedures for just over 160 patients every year. By having Bariatric Services on the Planned Care site it would allow the service to grow, providing life-changing surgery to around 300 patients per year. Bariatric Surgery procedures can prevent multiple medical problems associated with weight, and even reverse diabetes, which is seen as a growing national problem. Currently the service has access to theatres and clinics which are shared by a number of specialties, which means the service is restricted in how many patients it can help. Their plans would lead to a dedicated theatre on one site which would double the number of patients who could be seen, and would mean they could be treated in Shropshire, rather than having to travel out of the county. Providing all Bariatric Surgery and support on the one site would be great for patients, for staff and for the service.
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&Us 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 Centre created for the region, therefore giving us more emergency capacity — increasing the number of clinical spaces from 39 to 64.

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 out of the county for such treatment.
How will patients benefit from hospital proposals?

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.
- **Almost all women** will receive their antenatal and postnatal care at their local hospital.
- **Majority of patients** will attend their outpatient appointments at their local hospital.
- **30% More critical care beds**
- **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**
- **Cancer services** will be available at both hospitals.
- **No more cancelled operations due to lack of beds**
- **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**

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](http://www.nhsfuturefit.org)