

Paper 8

Recommendation <input type="checkbox"/> DECISION <input checked="" type="checkbox"/> NOTE	<div style="border: 1px solid black; padding: 2px;">The Trust Board</div> <p>is asked to note the updated provided on Neurology Services</p>
Reporting to:	Trust Board
Date	Thursday 28 th September 2017
Paper Title	Neurology Services Position Statement and Next Steps Summary
Brief Description	This paper provides a position statement on neurology services, an overview of actions taken to date and next steps to secure sustainable neurology service provision for the populations of Shropshire, Telford & Wrekin and Powys
Sponsoring Director	Debbie Kadum, Chief Operating Officer
Author(s)	Carol McInnes, Assistant Chief Operating Officer, Unscheduled Care Wendy Southall, Centre Manager for Medicine, Unscheduled Care
Recommended / escalated by	N/A written for Board
Previously considered by	N/A written for Board
Link to strategic objectives	Patient and Family Safest and Kindest Innovative and Inspirational Leadership Values into Practice
Link to Board Assurance Framework	RR668 RR859
Outline of public/patient involvement	
Equality Impact Assessment	<ul style="list-style-type: none"> ● Stage 1 only (no negative impacts identified) ● Stage 2 recommended (negative impacts identified) * EIA must be attached for Board Approval <ul style="list-style-type: none"> ● negative impacts have been mitigated ● negative impacts balanced against overall positive impacts

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(2000) status**

- This document is for full publication
- This document includes FOIA exempt information
- This whole document is exempt under the FOIA

Neurology Services Position Statement and Next Steps Summary**Trust Board****1.0 Purpose of Report**

1.1 To provide an update on the position of neurology services and a summary of the next steps as of September 2017.

2.0 Background

2.1 The Neurology Service at SaTH has for many years been challenged in terms of delivery due primarily to workforce limitations. This situation is not unique to Shropshire and is being experienced across the country. The workforce limitations at SaTH led to patients waiting on average 30 weeks for a first out-patient appointment at the start of 2017. This position was further exacerbated due to the departure of two specialist nurses who provided additional clinical support in out-patient follow up capacity.

2.2 The service serves the populations of Shropshire Clinical Commissioning Group (CCG), Telford & Wrekin CCG and Powys Local Health Board (LHB).

2.3 Following discussions with commissioners, the service closed to new referrals from 28 March 2017 for a period of six months to ensure patient safety by allowing SaTH to prioritise addressing the backlog position specifically new patients in the first instance and then those past their maximum follow up wait time. During this time, commissioners agreed to work jointly with SaTH to identify and implement a sustainable model for the future delivery of neurology services.

3.0 Current Workforce

3.1 There are currently 2 substantive general neurology consultants in post. This is against a budgeted position of 3.80 wte, leaving a shortfall of 1.8 wte. The national average position is 1 neurologist per 80,000 people which would equate to 6 wte for SaTH's population. Despite numerous efforts to secure additional consultant staff this has not proved successful.

3.2 One locum Doctor was employed to provide additional support to the service from April whom left the Trust on 10 August. A further locum was secured from 4 September 2017 and is now supporting the service.

3.3 The Trust successfully recruited two specialist nurses to support the Multiple Sclerosis (MS) service. However, in July 2017 the more experienced of the two MS nurses resigned from her post, subsequently leaving the service at the end of August 2017. The Trust is currently advertising for a replacement post.

4.0 Summary of key risks

4.1 The following points are the key risk areas:

- Patients currently waiting at 15 weeks for a first outpatient appointment, having originally waited at over 30 weeks prior to the suspension of new referrals;
- Securing substantive consultants given the national shortage;
- Securing a locum consultant within capped rates;
- Managing the levels of demand once the service reopens the front door to new referrals;
- Retaining and recruiting Specialist Nurse provision;
- Patient safety risk for those patients waiting excessively to be seen and/or reviewed. A series of actions have been undertaken to mitigate any risk as outlined in Section 6.0 below.

5.0 Current Position

5.1 The service's Referral to Treatment (RTT) is reported as 24% (end of August 2017). The deterioration in performance is expected as the service is not receiving any new referrals to impact upon the numerator for the performance measure. In addition, the available consultant capacity has had to switch from general neurology to MS, to prioritise support for patients who were on disease modifying therapies (DMT) and were being treated and regularly monitored by the MS nurse who has now left the Trust, and this has therefore reduced capacity.

At the 11 September 2017, the service has:

- A list size of 34 (31 English and 3 Welsh patients), compared to 183 at the end of May 2017;
- 11 new routine referrals waiting to attend 1st outpatient appointments following Do Not Attend (DNA) or the cancellation of a previously scheduled appointment, this is compared to 132 waiting over 18 weeks at the end of May 2017 with 12 of these waiting over 30 weeks. All 11 new routine referrals will be seen in clinic by end of October 2017;
- 461 patient referrals are overdue a follow up appointment by an average of 25 weeks. This number was at 478 at end of May 2017. It is anticipated that all patients waiting to access general neurology services will be seen by the end of November 2017.

5.2 It should be noted that the service while closed to referrals from Primary Care is still receiving referrals from inpatient activity. New routine patient referrals are currently waiting 15 weeks for their first appointment and 0 weeks for an urgent referral.

6.0 Actions taken

6.1 To mitigate the clinical risk associated with the delays in time to be seen, it was agreed to close the service to all new Neurology referrals. Referrals stopped being received by SaTH on 27th March 2017 for a period of six months. Following recent discussions, it has been agreed between SaTH and commissioners, to continue with the closure to new referrals for a further three to six months to enable commissioners to complete their work to address the shortfall in capacity for neurology services above the levels that can be provided by SaTH. This may include purchasing capacity from alternative providers and/or the implementation of alternative clinical pathways which will be developed in partnership with SaTH and other local providers.

6.2 A Task and Finish Group, consisting of commissioners from Shropshire, Telford & Wrekin and Powys was established to identify options for the development of a sustainable neurology service for the local population.

6.3 A full review of all viable options was considered by the Task & Finish Group. The preferred option by all was to explore the potential for the development of a 'hub and spoke' model with nearby Tertiary Centres. Discussions were held between SaTH and these service providers however, despite some initial engagement, this proposal has not been supported.

6.4 Further to this, local commissioners requested the submission of a proposal from SaTH about the preferred option for delivery and the level of capacity that could be provided by the current neurology service. Commissioners have requested similar information from other neighbouring Trusts. We have submitted a proposal that states our preferred option for delivery would be a hub and spoke model which the Trust has not been successful in securing with a request to commissioners that they explore this option with providers directly. If this model is not achievable, then the Trust's only option is to provide a service with capped levels of activity whereby our demand is reduced to match our capacity. The proposal also included a request to work in partnership with local commissioners to define the service model required from the specialist nursing teams for neurology over the next few months to ensure their sustainable delivery.

6.5 To support this process, an internal review is being undertaken of the current MS caseload and working practices to determine what elements of service absolutely must be delivered, what elements can be stopped and what elements could be delivered via alternative pathways. The MS nurse in post is also meeting with her colleagues across the West Midlands to understand working practices in other Trusts.

6.6 A joint statement from all commissioners and the Trust has been developed for patients, the public and GPs to inform them of the current service status and the extended closure. This is currently with commissioners and expected to be released on Friday 22nd October 2017.

6.7 At the Telford and Wrekin Commissioning Board in September 2017, the preferred option for future delivery of neurology services was identified as services being delivered from one provider. Scoping of this option will now take place by the commissioning body. Shropshire Commissioning Group and Powys Local Health Board have indicated support to SaTH's proposal that they continue to deliver neurology to the capacity they have available, this will be discussed further at Shropshire's Clinical Commissioning Committee meeting on 20 September 2017.

7.0 Next steps

7.1 The next steps as agreed with commissioners are as follows:

- To actively monitor activity and report weekly the patient waiting list position both internally and to commissioners;
- To await the outcome of the commissioner response to the proposal submitted by SaTH as outlined above, further to their internal discussions;
- To work with commissioners to develop and implement alternative clinical pathways in an effort to reduce demand on acute services;
- To complete the MS service caseload and workload review by mid October 2017;
- To recruit into the vacant MS nurse post;
- To publish a joint public statement regarding the current status of the service;
- Further to receipt of commissioner feedback on the submitted proposal in September a report will be provided to Board outlining the future plan for Neurology Services.

8.0 Conclusion

8.1 The Neurology Service will remain closed to new referrals for a further three to six months. SaTH have advised commissioners of the capacity they can deliver with regards to Neurology Services and advised they would wish to continue the service to the level of demand that the capacity can support. SaTH are committed to working with commissioners to identify alternative pathways of care and new ways of working to support the demand on Neurology Services.

9.0 Recommendations

9.1 The Trust Board is asked to receive and note the contents of this report.