

Hospitals Transformation Programme:

Planned Care – Surgery, Anaesthetics and Cancer Services Focus Group

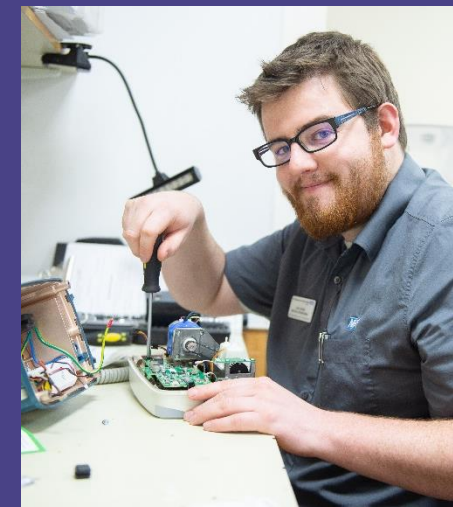
7 March 2023



Integrated Care System
Shropshire, Telford and Wrekin



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What will we cover?

- Recap of the Hospitals Transformation Programme
- Who are we and what will this mean for Planned Care (Surgery, Anaesthetics and Cancer) Services?
- What are your thoughts?
- Current developments at the Princess Royal Hospital site in Telford
- Equality and Health Inequalities Impact Assessment
- Terms of Reference
- Date of the next meeting



Terms of reference/purpose of the group

The aim of the Hospitals Transformation Programme (HTP) Planned Care (Surgery, Anaesthetics and Cancer) Focus Group is to bring a public and community perspective to the Planned Care workstream, helping to shape the future of our hospital services.

The Focus Group is an advisory group involving key stakeholders and community representatives to ensure that the services and the delivery of care are developed in partnership with our local communities. The Group will provide constructive challenge and scrutiny of decisions from a patient and public perspective.



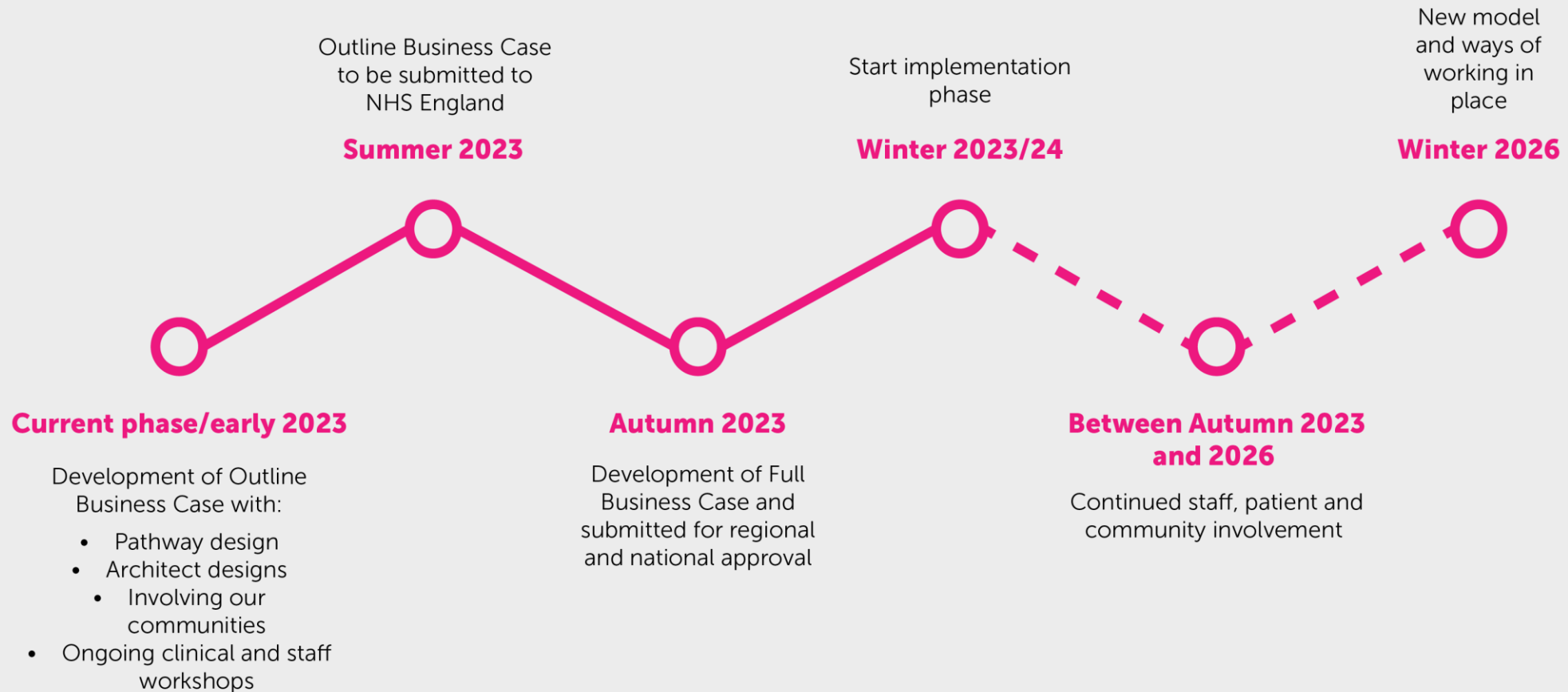
What is the Hospitals Transformation Programme?



- The Hospitals Transformation Programme is a project, following on from NHS Future Fit, that will improve hospital services across Shropshire, Telford & Wrekin and mid Wales by changing the way services are delivered (the clinical model) across our two, main, hospital sites:
 - The Princess Royal Hospital in Telford
 - The Royal Shrewsbury Hospital
- We need hospital services that give everyone across Shropshire, Telford & Wrekin and mid Wales (north Powys) access to the best possible hospital care, planned and in an urgent and emergency situation, with the right staff and right facilities being available when they need them.



Our journey to come



Overview of Service Provision





Excellent care, in the right place, at the right time, from the right people



**Dedicated Emergency
Department with
immediate access to
medical and surgical
specialities**

Timely access to the right specialist
consultants

Eliminate 12-hour breaches and
reduced ambulance waiting times

Shorter hospital stays



**Ring-fenced planned care
capacity supporting the
needs of our population**

Fewer procedures cancelled

Improved cancer waiting times

Resilient to peaks in emergency
demand



**Improved
care for everyone**

Modern, well-designed facilities

A better experience of care

Positive impact on staff experience



**Integrated services for
local people**

Simpler and more effective patient
pathways

Working seamlessly with our health
and social care partners

Alleviating the burden on Primary
Care caused by planned care delays



What do we mean by Planned Care – Surgery, Anaesthetics and Cancer Services?



Surgery covers a vast array of specialist services including:

Bariatric Surgery – provides a surgical and medical service for patients who are overweight, have medical problems and need to lose weight to improve their health. Services include Gastric bypass, Gastric sleeve and intragastric balloon. The service also runs a support group for patients who are having or have had or want weight loss surgery.

Breast Services – specialises in the treatment of all breast conditions and breast cancer and breast screening services.

Colorectal Surgery – for patients with symptoms suggestive of benign and malignant diseases of the gastrointestinal tract including colorectal cancer, inflammatory bowel disease (ulcerative colitis and Crohn's) and anorectal conditions such as haemorrhoids, anal fistula and fissures. The service also runs a bowel screening programme.

Ear Nose and Throat – specialising in common conditions including allergies, ear infections and care for ear ailments such as balance disorders, tinnitus, hearing impairment and ear injuries.

Gastroenterology / Hepatology – the service provides diagnosis, treatment to prevent stomach and intestines (gastrointestinal) and liver, gall-bladder, biliary tree and pancreatic disease (hepatology). The service provides endoscopic procedures, a test utilising a long thin tube with a camera inside to look inside the body.

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What do we mean by Planned Care – Surgery, Anaesthetics and Cancer Services? (Cont.)



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Ophthalmology – specialising in conditions and diseases of the eye, such as glaucoma, cataracts, macular degeneration, orthoptics.

Oral and Maxillo-Facial – provides care for patients with irregularities and pathology of the jaws and mouth (soft tissue lesions of the skin in the head and neck region, and abnormal hard and soft intra-oral lesions). Surgical removal of teeth is generally the most common procedure performed.

Upper GI Surgery – is surgery performed to treat pathologies of the upper gastrointestinal tract (small bowel), gall bladder, liver, pancreas or oesophagus (food pipe), the first part of the small intestine and the stomach. The most common GI surgeries include, hernia surgery and repair, gastrointestinal cancer, gallbladder surgery, liver and bile duct surgery, pancreatic surgery.

Urology – provides diagnostic and treatment of disorders of the kidneys, ureters, bladder, prostate and male reproductive organs. The service will manage conditions such as kidney stones, bladder, kidney and testicular cancer, prostate cancer.

Vascular Surgery – provides treatment for conditions affecting arteries, veins and lymphatics throughout the body and screening for aortic aneurysms. Examples of conditions treated are: aortic aneurysms, carotid disease, leg ulcers, deep vein thrombosis, diabetic foot disease.

Trauma and orthopaedics - common procedures undertaken, the department also surgically manages cystic lesions of the jaw and intra-oral lesions.

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Anaesthetics – there are four main types of anaesthesia to support an individual to not feel pain during a procedure or operation these are known as general anaesthesia, regional anaesthesia, sedation and local anaesthesia. The team facilitate pain-free childbirth, surgery, resuscitate acutely unwell patients and run chronic pain services. Pain Management – SaTH provides an inpatient pain management service. Ongoing pain management is managed through referral by GP to the Community Service to Connect Pain Health

Critical Care – a service that provides treatment and monitoring for those who are very ill and require intensive treatment and close monitoring, or if intensive care can help an individual recover from surgery. The services are also referred to as Intensive Care Units (ICU) or Intensive Therapy Units (ITU) or High Dependency Units (HDU).

Cancer Services – also referred to as Oncology and Haematology Service, incorporating diagnosis, care and treatment of patients with cancer. Treatments include chemotherapy, radiotherapy and palliative care support.

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How will we change under HTP?

Planned Care Site

- Dedicated planned in-patient surgical and orthopaedic activity that does not require Critical Care support
- Adult day case surgery to take place in elective hub, four new theatres and recovery area (operational from 2024/25)
- Orthopaedic trauma rehabilitation / therapy led ward
- Development of a Medical and Surgical procedure suite
- Chemotherapy day centre development

Emergency Care Site

- Surgical emergency services will now be aligned to all other specialties, including Women and Children's
- Amalgamated Critical Care Unit, new 32 bedded unit
- Head and Neck in-patient ward relocated from PRH
- New Oncology and Haematology in patient ward, with increased single room provision
- Paediatric emergency and planned care surgery



Why is this an improved service?



Better outcomes for their emergency care

- Earlier access to specialist consultants
- Improved access to multidisciplinary teams
- Medical and surgical specialities immediately available to the emergency department



Better outcomes for their planned care

- Improved access to planned care with fewer cancellations and delays
- Enhanced access to rehabilitation
- Improved surgical outcomes and fewer complications



Safer, cleaner, brighter facilities

- More access to daylight in new facilities, supporting recovery and wellbeing
- Facilities that are easier to maintain and clean
- A more collaborative professional and teaching environment



More effective and efficient services on both sites

- Separation of patient flows for emergency and planned care – leading to better outcomes and improved resilience
- Integrated service approach, end to end patient management
- Reduction in overall clinical risk to patients



Improved Clinical Safety and Facilities



Improved clinical safety

- Enabling a greater amount of timely consultant delivered decision making and care
- Improved access to key multi-disciplinary teams which will lead to improved patient experience and outcomes
- Separation of emergency and planned care patient flows protecting planned operations from cancellation
- Increased availability of cancer care locally with Chemotherapy day centre development at PRH

Improved Infrastructure

- Modern, fit-for-purpose facilities will improve clinical adjacencies and flows through the hospital and offer greater capacity and space within departments in comparison to present facilities
- Contribute to an enhanced patient experience
- Providing more single rooms to improve dignity and infection control especially for immuno-compromised patients



Examples

- If you are deemed 'high-risk' for planned surgery with a possible requirement for Critical Care support, you will receive your surgery at the Royal Shrewsbury Hospital site where you will have immediate access to all relevant, emergency, surgical and medical specialties. Outpatient appointments will continue at each site.
- If you require chemotherapy, this is currently only delivered at the Royal Shrewsbury Hospital site. Alongside the Hospitals Transformation Programme there are plans to develop a Chemotherapy Day Unit at the Princess Royal Hospital, thus increasing capacity and reducing travel for some patients and their families.





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Questions?



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Questions from us to you



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We would like your thoughts on ...

- 1) What would good look like?
- 2) What do you think are the biggest barriers to achieving this?
- 3) What do you think are possible solutions?

We will email you these questions for your thoughts/feedback.



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Continued developments at the Princess Royal Hospital



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Investing in Princess Royal

- Not included in original HTP scheme/capital
- Planned Care Hub
- Working with commercial partners to develop retail offer despite relatively low footfall
- Out of date and without facilities for patients, visitors, staff



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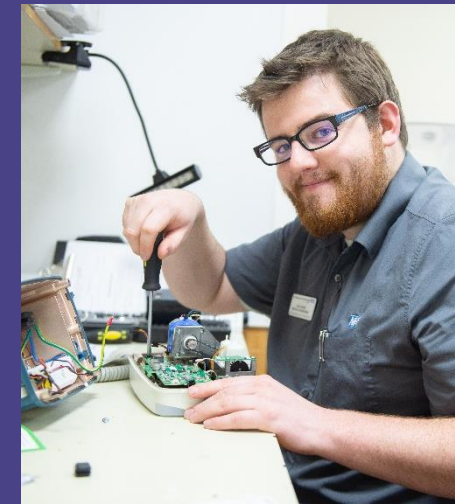
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Planned Care Hub at PRH

The Planned Care Hub will include:

- 4 additional theatres (2 with laminar flow for specific cases)
- 8 Recovery bays
- 16 Day Case trolleys

Existing Day Case unit will continue to be used as at present (often for medical escalation and day surgery provided through temporary unit in car park)



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Artist's impression of PRH front entrance



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- Transforming front door
- Improved reception
- Better access
- Better wayfinding
- Increased retail space



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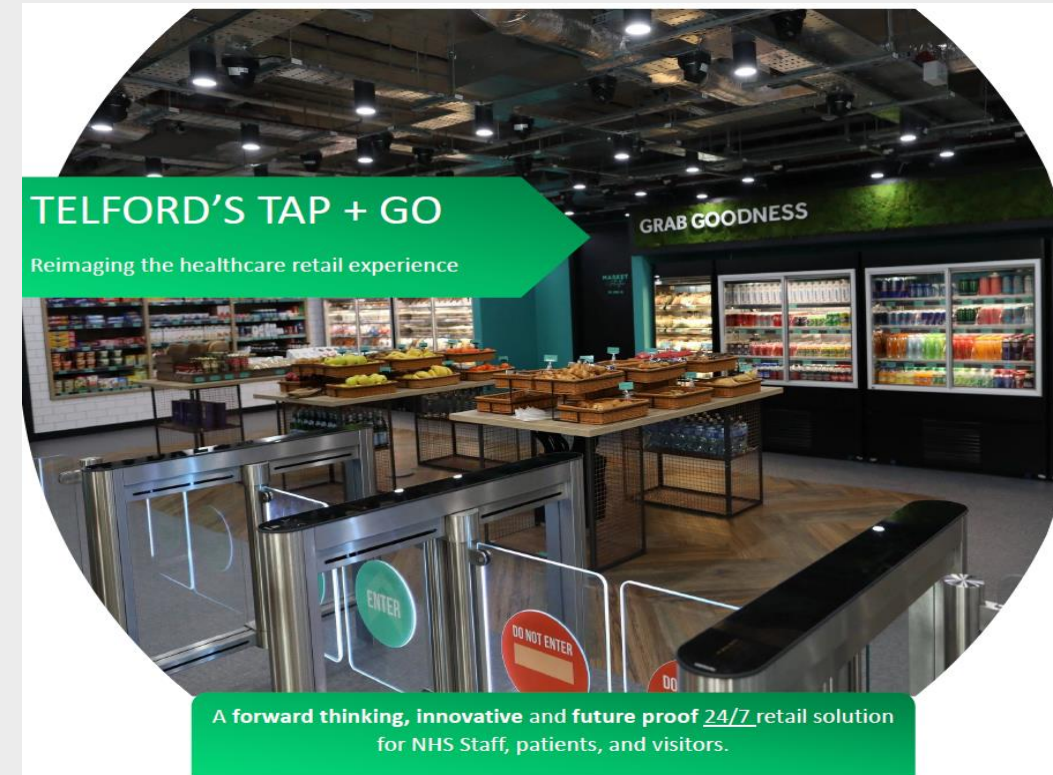


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Credit: Design & Planning Associates Ltd.

Retail offer

- Staffed coffee shop during set hours
- One of first hospitals in NHS to offer “frictionless” retail services (core range of products to be agreed)
- Uses app or credit/debit card plus pre-paid cards available
- Core range of products to be agreed



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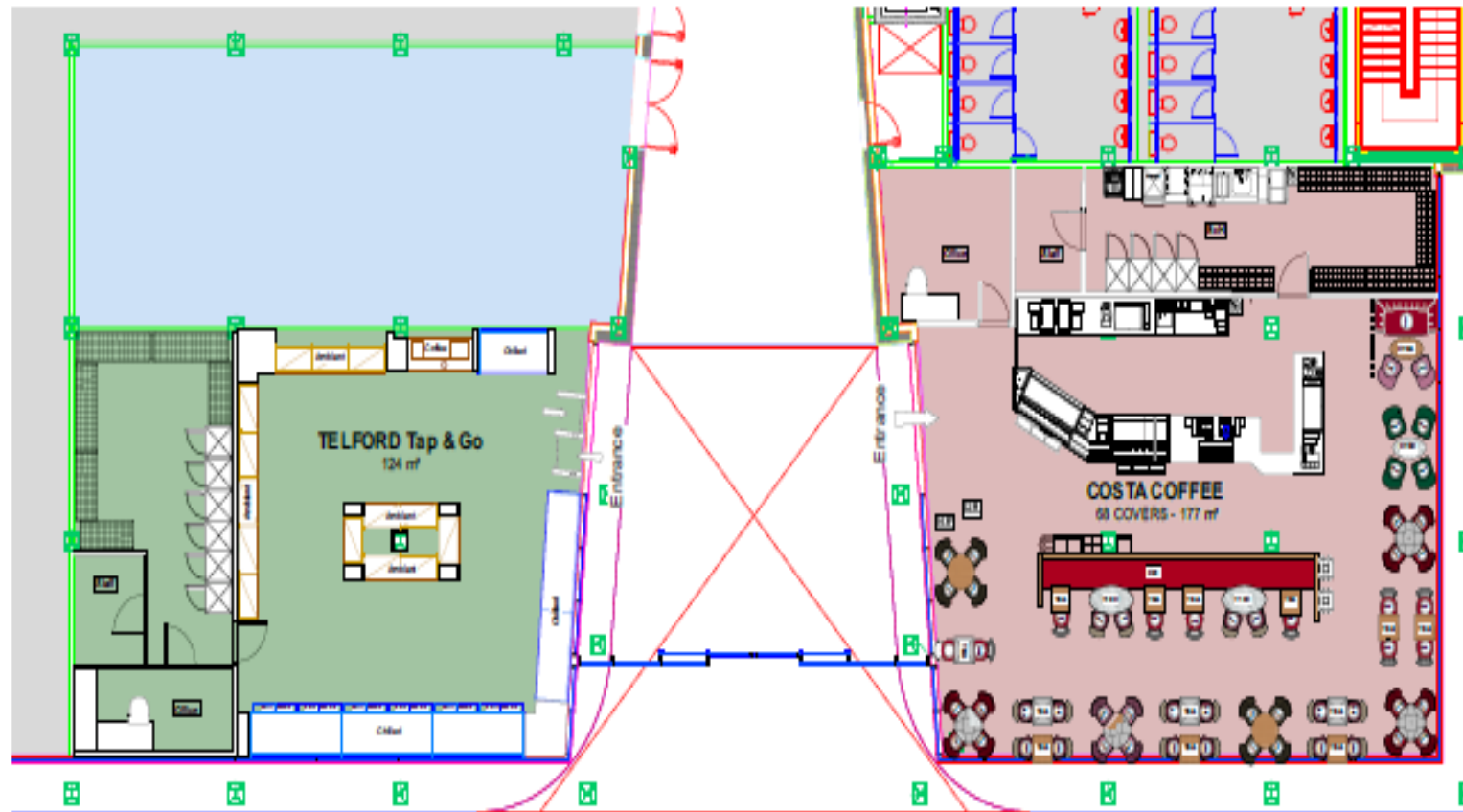


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Indicative footprint



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Next steps

Establish focus group to discuss/comment on;

- Frictionless offer
- Range of products
- Relaxation environment

If interested in taking part please register at sath.engagement@nhs.net



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Looking at travel and transport

- We recognise Travel and Transport is a key issue for patients, visitors and staff.
- We will build on the work of the Travel and Transport Group that was set up in 2018: [Travel and Transport - NHS Future Fit](#)
- A Travel and Transport review has been commissioned to inform:
 - Car parking
 - Ambulance conveyances
 - Patient, visitor and staff transport requirements

Once the outputs of the review are available and we move to progress our plans and move towards implementation we will work with our communities, via:

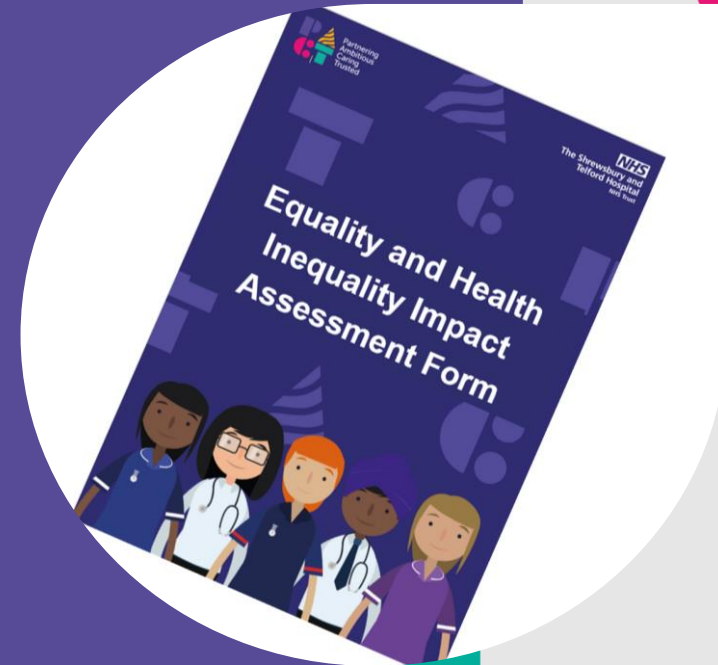
- Dedicated Focus Group
- Public Assurance Forum and;
- Anyone identified as being potentially adversely affected through the EHIA's to identify any mitigating actions and developing potential alternative transport offers and options.



Equality and Health Inequality Impact Assessments

Kate Ballinger
Community Engagement Facilitator

February 2023



What is an EqHIIA?

An Equality and Health Inequality Impact Assessment tool for ensuring that equality, social inclusion and community cohesion issues are considered when drawing up policies or proposals which affect the delivery of services and the employment practice of the Trust.

Assessments are carried out on:

- new services as they are developed
- existing services if we need to change the way they are delivered.

The aim of an EqHIIA is to identify any positive or negative impacts, specifically looking at Health Inequalities and the 9 protected characteristics laid out in the Equality Act:

- **Age**
- **Disability**
- **Gender reassignment**
- **Marriage/civil partnership**
- **Pregnancy and maternity**
- **Race**
- **Religion or belief**
- **Sex**
- **Sexual orientation**



Our EqHIA process?

- Our process for EqHIA for service changes is:
 - All EqHIA are completed by the service operational lead
 - The draft EqHIA is shared with the clinical team and public participation department for comment
 - The draft EqHIA is then shared with public and patient representatives, the focus groups and our Public Assurance Forum for further comment
 - Any negative impacts and mitigations that are identified during the assessment will be included in an action plan, which remains the responsibility of the service delivery lead.
- All EqHIAs are published on our website here: [Services Changes and Developments – SaTH](#)



Get involved

- There will be a range of ways to get involved over the next few years.
- You can help us develop these plans in the best way for the future of local healthcare services.
- The About Health meeting was recorded and is available here: <https://www.sath.nhs.uk/news/htp-about-health-event/>
- Future sessions are being arranged on a quarterly basis and we will write out to you with details and dates.
- Workstream focus groups have been planned over the next two years which will inform the plans as they develop towards implementation. Themes include transport and PRH front end investment. If you are interested in joining any of the groups please email sath.engagement@nhs.net
- We are updating the Equality and Health Inequalities Impact Assessments for each of the services involved and will put in place any necessary mitigating actions, liaising directly with those communities affected.
- We want to ensure that anyone who is interested can get involved in some way.
- If you sign up to become a community member sath.engagement@nhs.net we will keep you updated on how you can get involved and updated on the programme through our monthly update.
- Join the Big Health and Wellbeing Conversation: www.nhsbigconversation.org



One part of the wider plan ...

- The Shropshire, Telford & Wrekin Big Health and Wellbeing Conversation has been launched today (Monday 13 February 2023) which will inform the Joint Forward Plan for health and care over the next five years.
- Over the next 4 months there will be a number of opportunities for the public to input to the design and delivery of primary, secondary and community care services.
- To find out what is happening in your local area, visit: www.nhsbigconversation.org





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The next Surgery, Anaesthetics and Cancer Focus Group will take place on:

Tuesday 6th June 2023 10:00am



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