

## **The Trust's Clinical Strategy Update For Trust Board**

**January 2014**

### **1. Introduction**

- 1.1 This paper provides an update on the Trust's progress to develop a Clinical Strategy for emergency and planned surgery, emergency care and outpatient services. It also provides a progress report on the Dover Hospital Project and the Trust's longer-term Clinical Strategy.

### **2. Emergency Surgery**

- 2.1 The Emergency Surgery Work Stream continues to progress the development of a clinical strategy for medium and high risk general surgical services.
- 2.2 The detailed analysis of the data for medium and high risk general surgical activity has been completed. This data analysis demonstrates that if the Trust was to centralise surgery in the future a total of 922 patients (11.4% of all patients requiring medium and high risk surgical treatment) would need to attend a hub for their surgical treatment. The remaining 7,176 surgical patients could continue to be treated at the "spoke" sites.
- 2.3 The detailed analysis for low risk surgery is now being progressed and will be ready in the next couple of weeks. This work will ensure the general surgical activity and capacity has been mapped appropriately across the hub and spoke options.
- 2.4 The Surgical Division is continuing to work closely with their colleagues, looking in detail at the impact of clinical adjacencies for each of the options. The pathways will be agreed shortly.

### **3. Emergency Care (medicine, paediatrics and gynaecology services) Work Stream**

- 3.1 The business cases for emergency care services and the surgical assessment unit have been completed and submitted for approval. The emergency care business case seeks almost £4m capital and £7.9m revenue investment over 5 years, providing improved estate and increased staffing for the Emergency Departments. Both business cases are currently following the Trust's internal approvals processes.
- 3.2 Work to implement a range of new ambulatory emergency care pathways this year is also progressing well. Six additional Ambulatory pathways have been agreed and these will be rolled out over the next few months.

### **4. Outpatients Work Stream**

- 4.1 The business case for the Trust's outpatient services was approved by the Trust's Board of Directors at its formal meeting in November.

- 4.2 The proposals for outpatient services are subject to formal public consultation, which is currently underway (see Communications and Engagement Work Stream below).
- 4.3 As clinic scheduling work gets underway, job planning for changes in services is being discussed by the Divisional Directors.
- 4.4 Plans to redevelop Clinic D at KCH to provide a one-stop clinic are progressing and work is scheduled to be completed by July 2014.
- 4.5 The proposal for a 7<sup>th</sup> outpatient site at Sittingbourne is also under consideration. Working with the Trust, commissioners in Swale have been asked to provide the Trust with details of specialties and levels of demand for a sustainable service to be provided in this area in the future. The Divisional Directors have also been asked to comment on the feasibility of offering a range of services in Sittingbourne.

## **5. Dover Hospital Project**

- 5.1 Construction works for the new Dover Hospital commenced at the end of September and the Trust is on-track to complete by the end of February 2015.
- 5.2 A series of meetings are now being held aimed at ensuring the smooth handover of the building from contractor to the Trust. Divisions have almost completed their operational plans that detail how each service will “operationalise” their elements of the project. This has helped to secure good stakeholder engagement.
- 5.3 There are several sub-groups tackling the details of transport and movement on site, workforce, scheduling, moving services and other operational issues.
- 5.4 A web-cam and time-lapse photography are available on the Trust’s website so people can watch the progress of the build and a “virtual walkthrough” has also been produced to demonstrate the internal views of the future building.

## **6. Communication and Engagement Work Stream**

- 6.1 The Outpatient Services Public Consultation was launched on 9<sup>th</sup> December and will run through to the 9<sup>th</sup> March 2014. The consultation is focusing on the Trust’s proposals to implement a new model of care for outpatient services across east Kent including the proposal to provide extended opening hours and one-stop outpatient clinics. The consultation also presents the Trust’s proposals to concentrate the majority of general outpatient services onto a fewer number of sites.
- 6.2 Details of the consultation are being advertised widely through the media and on the Trust’s website, with a link to the CCGs website and any relevant supporting documentation. A separate email address and phone line has been set up to enable stakeholders to leave feedback and comments, together with promotion through social media.
- 6.3 Training has been organised for those presenting at the public meetings and briefing sessions have also been arranged for those facilitating the workshops.

- 6.4 The first five public meetings have now taken place. The first meeting (held in Hythe) had limited attendance which was expected as this area will be little affected in terms of the siting of facilities, by the proposals. The other four meetings (in Whitstable, Folkestone, Margate and Herne Bay) have been better attended.
- 6.5 Members of the public are generally raising issues regarding transport, waiting times and facilities available at the locations on the north Kent coast.
- 6.6 Media releases are being issued after each meeting, highlighting the discussions and promoting the up-coming meetings.
- 6.7 A log of all enquiries is being kept and will form part of the evidence provided for analysis by the University of Kent, who have been contracted to produce the final summary report.
- 6.8 Based on similar consultations we expect to receive between 3-400 responses and after the first month we are on track, having received just over 100 completed surveys forms to date.
- 6.9 The following is a list of the public meetings yet to take place.

DATE	TIME	AREA	VENUE
Thursday 6/02/14	18.00 – 21.00	<b>DEAL</b>	Deal town Hall
Thursday 13/02/14	09.30 – 12.30	<b>FAVERSHAM</b>	The Alexander Centre
Tuesday 19/02/14	14.00 – 17.00	<b>ASHFORD</b>	Holiday Inn, Ashford
Tuesday 25/02/14	14.00 – 17.00	<b>CANTERBURY</b>	St Mary's Bredin Church

## 7. Trauma

- 7.1 The interim Trauma Unit went live at the William Harvey Hospital in April last year and continues to work well.
- 7.2 All Trauma Units in the South East London Kent and Medway Network will be re-visited later this year for reassessment and re-accreditation against the Trauma Unit designation criteria. The Trust is planning to start work re-evaluating its performance against the revised criteria in February 2014.

## 8. Long-Term Clinical Strategy

- 8.1 The Trust has been working on the development of an organisational longer-term clinical strategy. Throughout November and December Strategic Development held a large number of very productive meetings with Divisional Directors, Divisional Medical Directors, Heads of Nursing and other key senior management staff (both clinical and non-clinical) to gather information about how each service may change over the next ten years.
- 8.2 A detailed model has been developed which projects the Trust's future activity, income and expenditure over the next decade. The modelling also includes the effect of known projected changes in demand by age group, demographics and disease specialties.

- 8.3 Using the information gathered from the meetings with key senior members of the Trust, the model can then accommodate a number of initiatives and options around how the organisation might deliver services differently in the future.
- 8.4 A series of different “options” will be produced aimed at testing a range of questions which can then be run through the model to understand their impact.