

HUMBER ACUTE SERVICES REVIEW – UPDATE (SEPTEMBER 2020)

Purpose

1. The purpose of this report is to provide an update on the progress of the Humber Acute Services Review and to provide members with an overview of future plans and next steps.

Background

2. The Humber Acute Services Review is a collaborative review of hospital services across the two acute trusts in the Humber region; Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) and Hull University Teaching Hospitals NHS Trust (HUTH).

3. Work to Date

Case for Change

4. Over the latter part of 2019, an extensive evaluation of the current provision of hospital services across the Humber was undertaken, which highlighted a number of challenges for providing effective care across our region. The details are set out in the published [Case for Change](#) document.

Clinical Senate Report

5. In January 2020, we welcomed a site visit from the Yorkshire and Humber Clinical Senate¹, where they had the opportunity to speak with members of hospital staff and clinicians delivering services to help them better understand the geography, challenges and potential solutions identified as part of the review.
6. The [Clinical Senate report](#) provides useful independent clinical insight and perspective on the challenges facing hospital services locally; and gives us an opportunity to incorporate these views into our future plans.
7. The report also presents a series of recommendations for consideration, including:
 - The need to prioritise frailty pathways within our future clinical models – to ensure effective care for those with frailty in our communities is available across the region.
 - The importance of exploring solutions as a whole system with a focus on increasing care in the non-hospital settings to support proposals for acute hospital services.
 - Improving the compatibility of IT between the two trusts and prioritising digital solutions to support patient care in non-hospital settings.

8. These recommendations are being considered as part of the work to develop future proposals for services.

Covid-19

9. In March 2020, some of the work being undertaken as part of the Humber Acute Services Review was temporarily paused. This was to enable partner organisations to respond to the immediate challenges posed by the Covid-19 outbreak.
10. Part of the response to Covid-19 required our hospitals to make rapid changes to their ways of working and in some cases, physical layout. This resulted in many services being temporarily suspended or delivered in different ways, including through an increase in the use of virtual and telephone consultations. These changes and the continued challenges of delivering acute hospital

¹ More information on the Yorkshire and Humber Clinical Senate can be found on their website.
<http://www.yhsenate.nhs.uk/index.php>

services in a Covid-19 environment, represent a significant change to the context within which the review is now operating.

11. Evaluation of these changes is ongoing, including engagement with patients and the public. Where there is potential benefit from new ways of working implemented in response to Covid-19, we will seek to incorporate these changes into longer-term proposals.

Current work and next steps

12. A presentation will be provided at the meeting to give further detail to members of the work that will be undertaken over the next three, six and twelve months. This includes work to set out our vision for the future of an integrated health and care offer for all residents.
13. The Humber Acute Services Review is taking place across the following related programmes of work that are running in parallel:

Programme one (Interim Clinical Plan)

14. We have identified a number of priority service areas where urgent service transformation is required. The following services were identified as the most vulnerable prior to the Covid-19 pandemic and will therefore be the focus of detailed planning over the coming weeks and months:

- Cardiology
- Dermatology
- Ear Nose and Throat (ENT)
- Gastroenterology
- Haematology
- Neurology
- Oncology
- Ophthalmology
- Respiratory
- Specialist paediatrics
- Urology

15. Changes are needed in these priority services over the next two years, to ensure they can continue to be delivered safely. We plan to develop the changes needed in three stages; and more detail on the Interim Clinical Plan is set out in the attached stakeholder summary.

Programme two (Hospital Services for the Future)

16. Alongside the interim clinical plan, we will continue to define the long-term strategy for hospital services across the Humber region. This will include continuing the options development work started prior to the Covid-19 pandemic.

17. The focus of this work will be on agreeing new and sustainable service models across the key hospital service areas of:

- Urgent and Emergency Care,
- Maternity and Paediatrics
- Planned Care

18. We remain committed to continue our engagement with patients, citizens, staff and other stakeholders in each of the four 'places' (local authority areas) to improve hospitals services and join up out of hospital care.

Programme three (Building Better Places)

19. In addition, we are working with a wide range of partners including local authorities, universities, Local Enterprise Partnerships and development partners on proposals to develop our hospital estate and deliver very significant, wide ranging benefits in each of the four areas across the Humber.

20. We are seeking approval to develop a large-scale capital investment plan for our hospital estate across the Humber that will support better clinical care but also make a significant contribution to the wider economic regeneration of the region.
21. More details are set out in the Creating a Healthier Humber prospectus, available [here](#). Further updates on this programme area will be provided in the future.

Engagement and Consultation

22. Our [Commitment to Engagement](#) sets out the Humber, Coast and Vale Health and Care Partnership pledge to stakeholder involvement and engagement across all of our work. We remain committed to this approach and to continuously engage with patients, citizens, staff and other stakeholders as an integral part of the Humber Acute Services Review.
23. Some of our previous engagement work has included:
 - In November 2018, established a Citizen's Panel to ensure the voices of local populations are heard, to help inform the development and approaches for our broader engagement work and patient-facing information.
 - In early 2019, a series of specialty-specific focus groups seeking views from patients, their families and carers who had accessed services within the clinical specialities under review. A comprehensive report detailing the feedback is available [here](#).
 - During October 2019, patient and public engagement seeking feedback, views and opinions on potential clinical models for Urgent and Emergency Care, Maternity and Paediatrics and Planned Care. The feedback report for this work is available [here](#).
 - Throughout 2019, worked in partnership with Humber and Wolds Rural Action to undertake targeted engagement with diverse and seldom heard groups and individuals to ensure they were aware of and able to engage with the work of the review. The feedback report is available [here](#).
24. Currently, we are working closely with the NHS Trusts and CCG colleagues to develop and refine engagement plans to ensure patients and all key stakeholders are appropriately involved in any changes identified through the Interim Clinical Plan (Programme 1). This continuous engagement exercise is expected to continue into the first quarter of 2021.
25. We are also working closely with all partners, including Healthwatch and the Voluntary and Community Sector to develop a detailed and extensive communications and engagement plan to understand patient and public views relation to Hospital Services for the Future (Programme 2). We are also seeking external, independent assurance from the Consultation Institute throughout this process.
26. We will continue to involve, engage and consult (where necessary) with all relevant stakeholders, including local authority Health Overview and Scrutiny Committees on any proposals for specific service changes that may impact on how, when and where patients might access services and receive treatment.

Conclusion and recommendations

27. This report and associated attachments provide an update on the progress of the Humber Acute Services Review, alongside the future plans and next steps.
28. Members are asked to consider and note the details presented and determine any specific future scrutiny activity.

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Background Papers

Humber Acute Services Review: Case for Change (November 2019), available [here](#)

The Clinical Senate report (May 2020), available [here](#)

Creating a Healthier Humber prospectus (May 2020), available [here](#)

Humber Coast and Vale Commitment to Engagement (August 2017), available [here](#)

Hospitals Services for the Future: Humber Acute Services Review, Focus Group Feedback Report (April 2019), available [here](#).

Hospitals Services for the Future: Humber Acute Services Review, Patient Workshop Feedback Report (November 2019), available [here](#).

Humber Acute Services Review: Targeted Engagement Report (February 2020), available [here](#).



**Humber
Acute Services
Interim Clinical Plan**

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Stakeholder
Summary



Background

The Humber, Coast and Vale Health and Care Partnership (the Partnership) was established in early 2016 and includes more than 25 organisations from the NHS, local councils, other health and care providers and the voluntary and community sector. The Partnership believes more can be achieved by organisations working together; including making the best use of the available resources – people, technology, buildings and money.



The Partnership's ambition is for everyone in our area to: 'Start well, Live well and Age well'.

The Partnership's purpose is to improve the health and wellbeing of people across its entire geography, as well as improving the quality and effectiveness of the services provided.



You can read more about the Partnership's vision, ambition and long terms plans [here](#) - including the following four priorities:

- **Helping people to look after themselves and stay well.**
- **Providing services that are joined up across all aspects of health and care.**
- **Improving the care provided in key areas.**
- **Making the most of all our resources.**



The
COVID-19
Pandemic



Since March 2020, work has been taking place across the Partnership to support the overall response to COVID-19. This has been necessary to enable partners to respond to the fast-moving situation.

The Partnership has continued to use the strength of joint working, collaboration and support for the benefit of our communities, patients and staff. A large number of rapid changes and service improvements have been made to ensure we could continue to deliver quality health and care services in a safe manner during these difficult times.

The continued presence of COVID-19 and measures to control its spread, including strict infection and prevention control measures, will continue to constrain the ability of services to increase their activity levels over the coming months.

The continued presence of COVID-19 places more pressure on all health and care services, including hospital care. This reinforces the need for us to take action where necessary, to ensure hospital services are sustainable and continue to be safe for all patients across the Humber.

The Humber
Acute Services
Programme



Established in 2018 this is a collaborative review of services across two acute trusts in the Humber; Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) and Hull Teaching Hospitals Trust (HUTH).

Creating a Humber-wide response to the challenges faced in delivering healthcare across a large geographic area with high levels of health inequalities, deprivation and significant issues in recruiting and retaining staff in some areas.

Working together across a larger area creates opportunities for our hospitals to share and make best use of our resources and provides the opportunity to tackle the following four main challenges:

- **Quality of care** – we know the quality of care a patient receives can vary, depending on when and where they are treated.
- **Healthcare is changing** – we know more patients could be treated outside of hospital and closer to home, via Non Face to face means and digital methods.
- **Workforce** – despite best efforts, we know we still struggle to recruit and keep all the doctors and nurses we need. Many of our buildings are old and not pleasant places to work, which makes it harder to attract staff.
- **Finance** – we know budgets have not kept pace with rising costs and increasing demand for services.

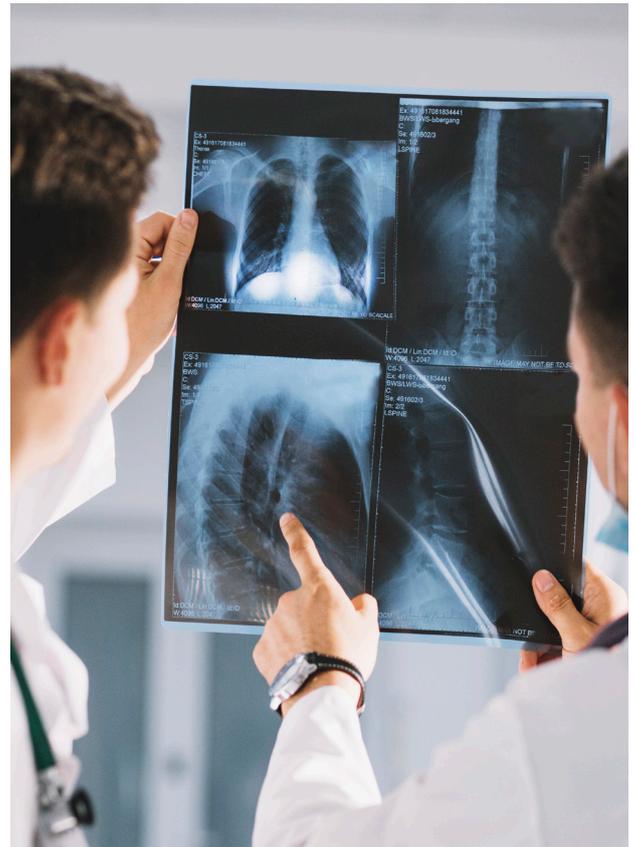
Part of the priority to provide health and care services that are joined up includes securing a long-term, sustainable future for our hospital services. The reasons we need to make changes to hospital services are fully documented in our case for change, which can be accessed [here](#).

Our longer-term ambitions also include securing significant new capital investment in our hospitals across the Humber. More details are set out in the Creating a Healthier Humber prospectus, available [here](#).

The Humber Acute Services Programme remains focussed on ensuring we deliver high quality care and outcomes across the Humber; while supporting our staff through collaborative recruitment and retention; and training and development.

As part of this ongoing work, a detailed examination of hospital services has been undertaken, which showed:

- **People are not getting the healthcare services they need;**
- **Our performance is not as we would like;**
- **We struggle to recruit and retain staff despite being one of the largest employers in the Humber;**
- **Our estates infrastructure does not meet the needs of a modern health care system; and,**
- **We are not making effective use of digital services.**



In summary the Humber Acute Services Programme includes three broad programmes of work that are running in parallel.

- **Programme one (Interim Clinical Plan) – putting new and sustainable arrangements in place in priority service areas.**
- **Programme two – agreeing new and sustainable service models across the key hospital service areas of Urgent and Emergency Care, Maternity, Paediatrics and Planned Care.**
- **Programme three – seeking approval to develop a large-scale capital investment plan to develop our hospital estate and deliver very significant, wide ranging benefits in each of the four areas across the Humber.**

Interim Clinical Plan

There are some services where we need to take action now in order to keep providing them safely and effectively. This work forms the basis of our Interim Clinical Plan, which will fast-track improvements in priority areas as part of the broader Humber Acute Services Programme. This will take place alongside work to develop our longer-term plans in order to:

- Ensure we can deliver sustainable high quality services to the people we serve in the long term.
- Improve access and outcomes for our patients.
- Transform how we deliver services, harnessing some of the changes delivered during COVID.
- Invest in our staff, develop new roles, innovate our training programmes and enhance our partnerships with academic and training bodies.
- Invest in our estates infrastructure.
- Deliver our services more economically and efficiently.



We have identified a number of priority services to form part of Programme 1 – our Interim Clinical Plan. Changes are needed in these priority services over the next two years, to ensure they can continue to operate safely. We plan to develop the changes needed in three stages.

Stages of the Interim Clinical Plan		
Stage 1	Stage 2	Stage 3
Haematology	Cardiology	Respiratory
Neurology	Gastroenterology	Specialised
ENT	Urology	Paediatrics
Dermatology	Ophthalmology	
Cancer pathways (scoping)		
Oncology (review)		

The high level objectives of our Interim Clinical Plan will continue to support the overall aims of the Humber Acute Services Programme by ensuring services are safe and sustainable.

High level objectives of Interim Clinical Plan are to:

- **Ensure** safe and sustainable hospital services.
- **Accelerate** the pace of change and delivery for priority services.
- **Improve** patient experience and clinical outcomes.
- **Provide** workable solutions for services in the short to medium term.



We believe failing to take decisive action now will lead to these services becoming increasingly unsustainable, our performance will continue to deteriorate, our patients will not receive the services they need and we will not recruit and retain high quality staff across services.

**Supporting
our long-term
ambitions**

To help support our long term ambitions, we must work together in a consistent way and make the best collective use of our available resources and expertise.



We must:

- Increase the pace of delivery as a result of the COVID-19 pandemic.
- Establish a single Medical Lead, Nurse/ Allied Health Professional (AHP) Lead and Managerial Lead for each identified service area.
- Complete the work once; pooling clinical and managerial teams where it makes sense to do so.
- Ensure equity of access and timeliness of treatment for all patients across the Humber.
- Use a single patient treatment list (PTL) for patients across specialties.
- Ensure we make full use of all our estates for Beds, Theatres and Outpatients across all 5 hospitals sites and community places.
- Ensure any proposals are clinically driven and supported.
- Ensure any changes are financially sustainable for all partners.
- Ensure any proposals are consistent with our Out Of Hospital (OOH) programme – including Primary Care and Community Services.
- Make sure any proposals are consistent with and support our longer-term developments.
- Ensure appropriate communications and engagement with all stakeholders is undertaken throughout.

Benefits

Delivering our Interim Clinical Plan will provide a number of benefits and improvements across the priority services.

To ensure services remain safe and sustainable for the future, we will need to think about how and where some services are provided; which may impact on specific patients and staff groups. Full assessments of these impacts will be carried out and evaluated during the development of proposed options for services.

The assessments and the evaluation will be in addition to the requirements to involve, engage and consult (where necessary) with all relevant stakeholders. This includes local authority Health Overview and Scrutiny Committees, where any substantial service change or development are proposed.

Benefits will include:

- **Improved clinical outcomes and patient experience.**
- **Better access to services and shorter waiting times for patients across the Humber.**
- **Services performing better against national targets.**
- **Improved recruitment, retention and development of staff.**
- **Better use of our buildings for beds, theatres and outpatient services.**
- **More stable services, so we can develop wider change in the future.**



Our Approach

This first stage of the Interim Clinical Plan is to develop joint management and clinical governance arrangements for the priority service areas. This will help services work in a joined up manner across all localities and start to develop an effective Humber-wide approach to delivering that service, making the best use of all available resources (workforce, buildings and money).

Any agreed hosting and clinical management structures put in place relate only to the management and clinical governance arrangements for any given service. Any such arrangements are not about where services will be delivered and how patients will access those services.

Any proposals for specific service changes that may impact on how, when and where patients might access services and receive treatment will be developed as part of the overall Interim Clinical Plan. Where this is the case, we will involve, engage and consult (where necessary) with all relevant stakeholders, including local authority Health Overview and Scrutiny Committees.

Implementing the Interim Clinical Plan is expected to span two years, with the work on Stage 1 commencing immediately. The following table provides a summary of some of the desired outcomes for Stage 1. These will continue to be monitored, refined and updated as the work progresses.

STAGE 1

AGREE

- The hosting, governance and reporting arrangements for the Programme 1 services.
- The scoping and modelling work of cancer pathways through a clinically led assessment to deliver safe and sustainable services for the future.

COMPLETE

- The managerial transfer of the Haematology service from Northern Lincolnshire and Goole NHS Foundation Trust to Hull University Teaching Hospitals NHS Trust.
- A review of any temporary arrangements introduced for the identified priority services.

DEVELOP AND DESCRIBE

- An improved diagnostics service for the Humber, including key locations where diagnostics can be provided.
- The agreed Humber clinical model and prioritised transformation plan for the Stage 1 services.

Work across Stage 2 and Stage 3 will commence in due course, however further work is needed to set out some of the work involved in more detail.

The following table provides an outline of some of the anticipated outcomes for Stage 2 and Stage 3. These will be refined and updated as the work on the Interim Clinical Plan progresses.

STAGE 2

AGREE

- The hosting, governance and reporting arrangements for the Stage 2 services.

COMPLETE

- Any agreed managerial transfer of services from Stage 1.
- A review of any temporary arrangements introduced for the identified priority services.
- The scoping and modelling work of cancer pathways, through a clinically led options appraisal, with recommendations for the future delivery of services.

IDENTIFY AND DEVELOP

- Proposals for any further hosting arrangements of any additional (not at risk) service areas that supports and enables the wider transformation of services across the Humber.
- Scoping of the Humber Gastroenterology service with recommendations for future hosting arrangements.
- Any potential scope for the transition of Stage 1 specialties across the broader footprint of the Humber, Coast and Vale Integrated Care System (i.e. involving York Teaching Hospital NHS Foundation Trust).

STAGE 3

AGREE

- The hosting, governance and reporting arrangements for the Stage 3 services.

COMPLETE

- Any agreed hosting and/or managerial transfer arrangements of services from Stage 2.

COMMENCE

- The development and implementation of any additional hosting arrangements of any (not at risk) service areas that supports and enables the wider transformation of services across the Humber, identified during Stage 2.

IDENTIFY AND DEVELOP

- The basis for further discussion, potential scope and hosting arrangements (including governance and contracting details) for any further service areas to be considered on a wider ICS footprint.

**Overseeing
the Interim
Clinical
Plan**

Existing governance and decision-making structures are already in place across the Partnership – including joint decision-making arrangements. Any additional governance arrangements will support implementation and delivery of the Interim Clinical Plan and will be finalised once they have been agreed with partner organisations.

The aim of any additional governance arrangements will be to build on existing joint decision-making arrangements across the Hospital Trusts, Clinical Commissioning Groups, local authorities and governing bodies to report into the Partnership.

**Summary
and
next steps**

As part of our ongoing Humber Acute Services Programme and to ensure hospital services are sustainable and continue to be safe for all patients across the Humber, we have completed a detailed examination of all acute services across Hull University Teaching Hospitals NHS Trust and Northern Lincolnshire and Goole NHS Foundation Trust.

We have identified the following priority services as part of our Interim Clinical Plan, where changes are needed over the next two years.

Stages of the Interim Clinical Plan		
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Cancer pathways (scoping)		
Oncology (review)		

We have agreed to continue to work together to deliver the Interim Clinical Plan, with the hosting and clinical management of the identified services by either North Lincolnshire and Goole NHS Foundation Trust or Hull University Teaching Hospitals NHS Trust. Work on the Interim Clinical Plan will be undertaken across three stages.

Any agreed hosting and clinical management structures will only relate to the management and clinical governance arrangements for individual services – and not where, when and how patients will access services.

Work is in the very early stages of development and we will now start to develop options for each service, and will make use of any recent stakeholder engagement outcomes where it makes sense to do so.

We recognise there is potential scope for change to services; and we remain committed to continuing to involve patients, the public and other stakeholders throughout this work.

How to
keep informed
For more information on the
Humber Acute Services Review,
please visit the
Humber, Coast and Vale's website.

If you have any questions, please contact the
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