

NORTH LINCOLNSHIRE COUNCIL

North Lincolnshire Health
Scrutiny Panel

REPORT TITLE

Haematology Services: Temporary consolidation of NLAG services onto a single site.

1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 Haematology services are currently provided by Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) from each of its three sites in Grimsby, Scunthorpe and Goole. The service had had an under-established workforce for some time, however this position has recently worsened due to the retirement of the substantive Consultant based in Scunthorpe and the subsequent loss of the locum cover. NLaG, in conjunction with Hull University Teaching Hospitals NHS Trust (HUTH) continue to seek locum cover, however there is a national shortage of Haematologists.
- 1.2 Maintaining service delivery across the three NLAG sites is not feasible with the current staffing and therefore temporary consolidation onto a single site is considered to be the most appropriate approach to delivering a safe service.
- 1.3 A full integrated impact assessment has been undertaken to support decision making regarding consolidation to a single site
- 1.4 This report provides an overview of the current issues within the Haematology services provided by Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) and provides a summary of the Integrated Impact Assessment undertaken to inform the decision to temporarily consolidate Haematology services onto a single NLAG site. This change is being made on the basis of patient safety due to the current reduction in medical staffing.

2. BACKGROUND INFORMATION

2.1 Hull University Teaching Hospitals NHS Trust (HUTH) and Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) are working together towards a single service providing safe and sustainable care to patients across the Humber. Difficulties in recruitment and increasing complexity and sub-specialisation within haematology mean that small units are no longer able to provide high quality sustainable services.

Haematology currently provides a service across the Humber including outpatient clinics provided by HUTH and NLaG within four hospital sites; Castle Hill Hospital (CHH) Hull, Diana, Princess of Wales Hospital (DPoW) Grimsby, Scunthorpe General Hospital (SGH) and Goole District Hospital (GDH).

NLaG has delivered the Haematology service with an under- established workforce for some time. The provision consisted of a substantive Consultant, locum Consultant, specialty Doctor and 3 Clinical Nurse Specialists. The substantive Consultant retired from post on 30th June 2020 and although this position was initially covered by a locum from HUTH, this locum gave notice unexpectedly and left post at the end of July 2020. Whilst HUTH is seeking additional locum capacity to replace this post, it is currently vacant. Two potential locums have been identified, however recruitment of these clinicians is not yet confirmed.

Through a joint network, the service has been progressing solutions to ensuring the short and long term sustainability of the service resulting in a number of actions in order to minimise the potential clinical risk posed by the NLaG staffing shortages, these include:

- January 2018: complex outpatient regimes transferred from NLaG to HUTH
- February 2018: Nurse Led Chemotherapy delivery in Haematology services in NLaG
- April 2018: Walk in and Assessment Unit, including single telephone triage line in HUTH
- April 2018: Ambulatory Chemotherapy for Haematology patients in HUTH
- June 2019 to date: Clinical validation of haematology caseload reviewed – with support from Acute Medicine (NLaG), Gastroenterology (NLaG), Nurse Specialists, and HUTH Haematologists
- January 2020: Inpatient provision transferred from NLaG to HUTH supported by treat and transfer protocol for acute admissions
- June 2020: Referral Assessment Service and Advice & Guidance transferred from NLaG to HUTH to manage/ triage new referrals.
- July 2020: All New outpatient attendances (face to face) transferred from NLaG to HUTH

In preparation of the loss of the last substantive Consultant in NLAG and the growing reliance on locum cover, a number of supporting processes have been put in place to support the continued delivery of service to the patients which include:

- Advice and Guidance and the Referral Assessment Service (RAS) provided by HUTH
- Clinical Triage of Haematology referrals through HUTH
- Clinical validation of the NLaG Patient Tracking List (PTL) to identify:
 - Follow up patients that should be discharged
 - Transfer of haemochromatosis and iron deficiency patients to other NLaG specialties such as gastroenterology
 - Transfer of Anticoagulation (North Lincolnshire and East Riding only)

3. OPTIONS FOR CONSIDERATION

3.1 The Trust, in conjunction with the CCGs, considered options of single site delivery from each of the three hospital sites; Diana, Princess of Wales Hospital, Grimsby; Scunthorpe General Hospital and Goole District Hospital. Continuation on all three sites was considered but ruled out as not feasible within the current staffing resource.

4. ANALYSIS OF OPTIONS

4.1 Integrated Impact Assessment on proposed changes

This paper sets out the Integrated Impact Assessment for this proposed temporary change and the proposed consolidated site. Noting the new outpatient attendances have already transferred to CHH, this impact assessment retrospectively includes the analysis of the impact this transfer has had on the NLaG service.

4.2 Key messages from the Integrated Impact Assessment

4.2.1 Quality impacts

Patient Safety

Consolidation onto a single site will ensure equality of clinical services for all patients regardless of current site during any period of reduced staffing. This should impact positively on patient safety and quality standards. Changes will also ensure greater consistency of service delivery through the adoption of a single set of service standards across all patients

Clinical Effectiveness

The current service delivery model is not fully compliant with best practice and national guidance. There are a significant number of patients managed by this service who do not require ongoing specialist haematology input and should be

discharged back under the care of their GP. The new model reduces this variation in patient care and will ensure consistency of service delivery moving towards best practice.

Patient Experience

Consolidation onto a single site will impact on those patients currently seen at the other two sites. The number of patient impacted will be dependent on the site on which services are consolidated.

On consolidating the service to a single site, patients from two of the three current sites will be required to travel further in order to access the service. Patients already in the service do not have opportunity to choose provider based on location and therefore will be impacted. Work is ongoing to assess the scale of impact and any required mitigating actions.

4.2.2 Equality Impacts

There were no identified inequalities associated with the protected characteristics, however there are potential impacts associated with the need for some patients to travel further to access care. This may have greater impact on those patients who are older or who have a disability.

The section below outlines the characteristics of the local populations across East Riding, North Lincolnshire and North East Lincolnshire, which may impact on their ability to travel further for care. Similar data is not yet available for Lincolnshire CCG. The majority of Lincolnshire CCG patients using NLAG Haematology services currently use Diana, Princess of Wales Hospital for their care.

Age Profile

One of the most prominent trends is the ageing population of the East Riding, North Lincolnshire and North East Lincolnshire. East Riding population has the greatest proportion of people over 65 years of age, with all three CCG populations having an age profile significantly older than the England average.

Age	NL CCG	NEL CCG	ERY CCG	England
<18 years	19.80%	20.70%	17.90%	20.40%
65+	20.90%	19.80%	25.60%	17.40%
75+	9.20%	9.10%	11.50%	8.00%
85+	2.50%	2.60%	3.20%	2.30%

Travel

The journey from DPoW to SGH is approximately 30 miles, with GDH a further 28 miles east from Scunthorpe. This gives a journey of either 58 miles from Goole to Grimsby via Scunthorpe or 49 miles via the Humber Bridge (with toll).

Car Ownership

Data from the 2011 census demonstrates significant variation in car ownership across the three counties. East Riding of Yorkshire has the highest level of ownership per 1000 population at 570 (ranked 140/314), and North Lincolnshire at 534 per 1000 population (rank 176/314). Car ownership in North East Lincolnshire is significantly lower at 443 per 1000 population and ranked 276/314.

Unemployment

Whilst unemployment levels within North Lincolnshire and East Riding are better than the England average, North East Lincolnshire has a significantly higher rate of unemployment. Within each county are areas of higher deprivation. This includes Goole in East Riding and particular wards within Grimsby and Scunthorpe town.

	NL CCG	NEL CCG	ERY CCG	England
Unemployment	3.40%	4.70%	2.00%	3.80%

Disability

The percentage of the East Riding population with a long-term health problem or disability is 19.1%.

In North Lincolnshire, 19.3% of the population had some form of day-to-day activity limiting disability, compared with 18.9% and 17.6% for Yorkshire and Humber and England respectively.

Figures for August 2017 show 5910 people claiming ESA or IB equivalent equates to 3.46% of the total population, which is lower than Yorkshire and Humber figures (3.65%), and higher than the national rate (3.22%).

In North East Lincolnshire, an estimated 9.3% of the population felt that their daily activities were significantly limited due to a health condition or disability. An estimated 26.8% of all households in NEL had at least one person with a long-term health problem or disability (2011 census).

Figures for November 2014 show 7,430 people claiming ESA or IB equivalent, equating to 7.48% of the working age population, compared to 6.66% in Yorkshire and the Humber and 6.05% in England. This is significantly higher than the rate in North Lincolnshire

Data on people with a long-term health condition also identifies that rates within the area are higher than the England average, again with the highest rate in North East Lincolnshire. This is reflected in the higher proportion of the North East Lincolnshire population claiming EAS or IB equivalent

Data demonstrates that all three CCG geographies have a greater number of people in carer roles than the England average. This is highest in NEL.

Carer responsibilities	NL CCG	NEL CCG	ERY CCG	England
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	17.30%	20.10%	18.1	16.90%
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5. FINANCIAL AND OTHER RESOURCE IMPLICATIONS (e.g. LEGAL, HR, PROPERTY, IT, COMMUNICATIONS etc.)

5.1 The communication of service change to affected patients is planned and will be undertaken during September.

6. OTHER RELEVANT IMPLICATIONS (e.g. CRIME AND DISORDER, EQUALITIES, COUNCIL PLAN, ENVIRONMENTAL, RISK etc.)

6.1 None

7. OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)

7.1 Consolidation of the service onto the GDH site would affect the most patients. Whilst there is not a significant difference in the number of patients impacted by consolidation on the DPoW or SGH sites this is more significant when considering number of attendances where DPoW has a considerably higher number of attendances.

The data demonstrates that compared to North Lincolnshire and East Riding, the population of North East Lincolnshire has higher levels of unemployment, carer responsibilities and either disability or long-term condition along with lower level of car ownership. These factors may impact on the ability of North East Lincolnshire residents to travel to another site for care.

Consolidation of services away from Scunthorpe General Hospital may create challenges for North Lincolnshire patients in accessing services. However, whilst additional travel arrangements were put in place following the transfer of oncology services to Grimsby in December 2019, utilisation of this appears to have been very low. A full review of the impact of oncology changes is currently underway and will be reported back to Scrutiny.

In considering both numbers of people affected and the local demographics the impact on patients would be lowest if the consolidation is onto the DPoW site.

The Trust is limited in its ability to deliver locum capacity across both DPoW and SGH sites within the current locum contract. Changes to work bases would require consultation and is highly likely to result in the loss of the locum capacity through resignation. Current attempts by HUTH to identify additional locum capacity

demonstrates the challenges of recruitment currently. This situation further drives the rationale for the preferred consolidated site.

8. OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED

8.1 Public and patient engagement and consultation has not been undertaken at this stage. Determination of the future Haematology model forms part of the Humber Acute Services Review and as such public and patient engagement will be undertaken. The planning of this next stage has commenced.

9. NEXT STEPS

9.1 Based on the assessments undertaken, NLaG, East Riding, North and North East Lincolnshire CCGs have approved the proposal of temporary consolidation of Haematology Outpatient services on the Diana, Princess of Wales site at Grimsby, as this population is likely to experience the greatest impact on access if this service is not available locally.

NLaG is currently working with HUTH to ensure all patients who require follow-up can access this whilst the consolidation onto the DPoW site is completed. It is expected that the temporary service move will be completed by end September 2020.

Chief Operating Officer, NL CCG
Chief Operating Officer NLaG

Health Place
Wrawby Road
Brigg
North Lincolnshire
DN20 8GS
Author: Jane Ellerton, NL CCG
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Background Papers used in the preparation of this report –
Integrated Impact Assessment, NL CCG