

The Pennine Acute Hospitals NHS Trust

Clinical Service Transformation Update

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Summary

This paper describes The Pennine Acute Hospitals NHS Trust's Clinical Service Transformation plans and the work undertaken to date to develop proposals that will ensure the Trust's clinical and financial sustainability by 2019/20. The plans are clinically led and key principles underpin the Clinical Service Transformation programme including improved patient outcomes, reduced clinical variation and evidence based care pathways that use national and international examples of high quality care. The complete list of key principles for the Clinical Service Transformation programme and the plans for wider engagement are outlined.

1. Local Context

1.1 The Pennine Acute Hospitals NHS Trust covers a population of around 820,000 people. The Trust is already providing a single service model across its four hospitals following major change programmes successfully implemented in recent years to improve patient care and service sustainability (Healthy Futures and Making it Better which were led by local commissioners and implemented following public consultation). For example:

- Primary Stroke Service is also located at Fairfield General Hospital meaning that any patients who require thrombolysis and the unique expertise of a stroke team are taken to Fairfield General Hospital.
- Vascular surgery elective services, where patients will attend their local hospital for out-patient appointments and have their elective procedure at The Royal Oldham Hospital.
- Urology inpatient services where patients will attend out patients at their local hospital and have their elective procedure at North Manchester General Hospital.
- The Pennine Rheumatology Centre offers specialist enhanced outpatient and day case facilities for patients across Pennine at Rochdale Infirmary

1.2 It is important to recognise that North Manchester General Hospital provides services for patients from across the whole of the north-east of Greater Manchester including from Oldham, Rochdale and Bury as well as the immediate local area.

1.3 As part of the Healthier Together plans The Royal Oldham Hospital was identified as one of the four specialist sites in Greater Manchester for specialist abdominal surgery. Healthier Together also confirmed which sites would work in partnership to deliver the single shared service model: the Pennine Acute footprint was recognised as a single shared service. The Pennine Acute footprint includes: The Royal Oldham Hospital; North Manchester General Hospital; Fairfield General Hospital in Bury; and Rochdale Infirmary.

1.4 The Trust is actively engaging in the Greater Manchester Devolution work around health and social care and participating in the development of the Locality Plans and Strategic Plan for Greater Manchester. The Trust welcomes the opportunities that GM Devolution brings to ensure the greatest and fastest possible improvement to the health and wellbeing of the 2.8 million people of Greater Manchester.

2. Clinical Service Transformation

2.1 We know that like other Trust's across the country, The Pennine Acute Hospitals NHS Trust, needs to transform our services and develop new models of care to become clinically and financially sustainable for the future and to meet the needs and best outcomes for our patients and the communities we serve.

2.2 The Trust's Transformation Map, which sets out our vision for the next five years, was developed in the spring of 2014 following 27,000 individual contributions from our staff and also involving our local Clinical Commissioning Groups. The Transformation Map was widely distributed to staff and the public with 15,000 copies produced and made available in leaflet and poster format. The Transformation Map was also made publicly available on our website. The Transformation Map was refreshed and approved by the Trust Board in June 2015. Every member of staff at the Trust received a refreshed Transformation Map and has been reproduced in our Members newsletter which was posted to our 12,000 public members in August 2015. The updated Transformation Map is also available on our website.

2.2 Our Transformation map clearly sets out that we will finalise our clinical services strategy, finalise service reviews consistent with Healthier Together and roll out new models of care for a range of services. We have committed to actively participate in GM Devolution and in the further integration of health and social care across Greater Manchester.

2.3 Despite major service changes over recent years, further change is needed. Our staff recognise the need to develop new models of care so that we can continue to provide high quality services that meet the needs of our patients and that are affordable. Over the past year we have made it clear to our staff and public that in order to become clinically and financially sustainable, the Trust needs to transform the way we provide healthcare services across all of our hospitals and in the communities we serve. Over the last few months we have been discussing a number of possible scenarios for future services with our local councils, NHS commissioners and partner organisations. No decisions have been made and no decision will be

made until public consultation has been undertaken, which will commence in June 2016.

2.4 Senior clinical leaders in the Trust have been working with external partners, supported by McKinsey, to help design the future model of services for the Trust which will deliver clinical and financial sustainability by 2019/20. As part of our Clinical Service Transformation programme, our Trust management and senior clinicians are developing a clinical services strategy which is looking at future plans for each of our hospital sites and our community and integrated services. This will be supported by an estates strategy for each site. Finalised plans will be consistent with Healthier Together and also in the context of positive and further integration and devolution of health and social care across Greater Manchester.

2.5 It is essential we do this to ensure we can provide the appropriate care for our local communities at a time when health and social care resources are most stretched. There is a wealth of evidence to build on coupled with the expertise of our staff, partners and wider communities.

2.6 The Clinical Service Transformation programme is built on a number of key principles including:

- Improved patient outcomes
- Increased standardisation, reduced clinical variation
- Increased use of technology
- Increased efficiency
- New ways of working
- Consolidation
- Maximise opportunities to move inpatients to day cases to community settings
- Increased specialisation
- Increased integrated and partnership working
- Alignment with Healthier Together plans

2.7 These approaches are not new, we have applied them successfully for a number of years and those services now deliver some of the best outcomes locally, regionally and nationally for patients e.g. our Gastroenterology Service at The Royal Oldham Hospital; Urgent Care Service at Rochdale Infirmary; Infectious Diseases Service at North Manchester General and our Stroke Service at Fairfield General Hospital, rated number one in the country.

2.8 A Clinical Case for Change is being developed describing the patient benefits of the Clinical Service Transformation programme.

2.9 At North Manchester General Hospital we are applying for planning permission to build a purpose built intermediate care facility and working with Manchester City Council to integrate health and social care services so that our patients have access to truly joined up services across North Manchester to help them in and out of hospital.

2.10 In support of the transformation priorities outlined in Manchester's Locality Plan Pennine Acute Hospitals NHS Trust is working with University Hospital South Manchester Foundation Trust and Central Manchester Foundation Trust to explore the potential for single shared hospital services. An action plan was shared with Manchester's Health and Wellbeing Board that described how the providers supported a review to identify opportunities to improve outcomes for Manchester residents. The review is being undertaken by an independent project lead and is expected to take 6 months. The review will be considered in the context of the wider transformation work at Pennine Acute Hospitals NHS Trust and existing single shared services provided by the Trust across the North East Sector.

3. Engagement

3.1 Over the last twelve months our senior clinical leaders (doctors, nurses and clinical professions) have been discussing a number of possible scenarios for the future shape and location of our hospital and community services. These discussions have been overseen by the North East Sector Transformation Group, which is a joint meeting between senior Trust and CCG directors and Healthier Together representatives.

3.2 The Trust have held four wider engagement events held between October 2014 and June 2015. We are committed to transparency and ensured that we had wide representation at all of these events. Approximately 80 of our senior clinical staff, senior clinicians and managers from our four CCGs, local council directors and senior managers from other local NHS Trusts and Healthier Together have been present at each event.

3.3 We are currently developing a communication and engagement plan to engage with our staff, patients, public and partners to shape the development of the Clinical Service Transformation plans. Over the coming months a variety of methods will be used to seek feedback from key stakeholders. It is expected that a formal consultation will be undertaken, which will commence in June 2016 and led by our local Clinical Commissioning Groups.

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