

Part 1 - Open to the Public	ITEM NO.
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REPORT OF

Harry Golby, Assistant Director of Commissioning, Salford CCG

TO

Health & Social Care Scrutiny Panel

ON

6 November 2019

TITLE: SRFT Elective Orthopaedic Update

RECOMMENDATIONS:

Members are invited to consider and comment on the contents of the report.

EXECUTIVE SUMMARY:

Manchester University NHS Foundation Trust (MFT) has served notice on Salford Royal NHS Foundation Trust (SRFT) for the use of the Manchester Elective Orthopaedic Centre (MEOC). SRFT currently use the MEOC, which is on the site of Trafford General Hospital, to deliver some elective orthopaedic surgery. A project has commenced to identify alternative site(s) where this surgery can take place.

BACKGROUND DOCUMENTS:

Paper to Adult Commissioning Committee on 30 September 2019

KEY DECISION: NO

DETAILS:

Introduction

In November 2014 Salford CCG supported a proposal by SRFT to relocate some elective orthopaedic capacity to the MEOC on the Trafford General Hospital site. The primary anticipated benefit was enhanced service quality – there is evidence supporting the development of specialist centres to improve patient experience and outcomes. Ring-fencing elective capacity reduces cancellations when emergency cases take priority. In addition the relocation created capacity on the SRFT site to support other developments e.g. major trauma and stroke.

In 2018 SRFT delivered 2560 surgical interventions at MEOC (1897 as an inpatient and 663 as a day case). This equates to approximately one third of SRFT's total day case orthopaedic activity, and just over one half of the inpatient activity. Most of the rest of the activity currently takes place on the SRFT main hospital site, with some ad hoc use of private sector capacity. Outpatient care for both groups of patients is predominantly delivered in Salford.

On 30th July 2019 MFT served notice on the MEOC service level agreement with SRFT. MFT served notice due to increasing operational requirements and the need to carry out a programme of theatre life cycling on the Trafford and Wythenshawe sites. The agreement covers SRFT use of two theatres, associated inpatient and day-case beds and support services (SRFT surgeons and anaesthetists operate at MEOC but the nursing and other staff are MFT employees).

A project has commenced to review options and establish the alternative arrangements. The CCG is represented on the overarching group as well as a communications subgroup, and updates will be provided to the Adult Commissioning Committee via the Scheduled Care Delivery Board. The group has identified a preferred option that is described in this report.

The original letter indicated MFT expected all activity to cease on 31 January 2020. The re-organisation of a significant elective surgical programme in the middle of January has the potential to add to system disruption during the winter months and it is important to properly engage with patients about the proposed changes. Following further correspondence, on 18 October, MFT sent another letter agreeing to an extension, the revised termination date is 30 June 2020.

Options Appraisal

In April 2017 the Northern Care Alliance NHS Group (NCA) was launched. It brings together five hospitals (Salford Royal, the Royal Oldham, Fairfield General, Rochdale Infirmary and North Manchester General) and the associated community services.

The NCA has established a working group to consider issues and recommend options. The group includes a broad range of expertise, including orthopaedic surgeons, anaesthetists, nurses, operational and strategic managers, facilities and HR specialists, etc. The CCG is also represented.

In total 11 options have been explored and considered using the following criteria:

- Feasible within timescale
- Clinical assessment of suitability
- Estates assessment of suitability
- Capacity released by option and extent to which this meets requirements

- Capital / Revenue costs
- Distance for patients to travel and transport options (it is worth noting that 40% of SRFT's orthopaedic patients are not citizens of Salford)
- Impact on workforce including travel
- Strategic fit

“Strategic fit” is particularly important given further potential changes to orthopaedic services being considered through the Greater Manchester Improving Specialist Care programme. No decision has been made on the ISC programme but it is important for the changes around MEOC to be considered in the context of future possible changes.

None of the options, in isolation, fully address the issue. The working group therefore identified the following which, in combination, form the preferred option:

Site	Activity description	Comments
Salford (i.e SRFT and Oaklands)	Local day case surgery for ‘upper limb & hands’ and for ‘foot and ankle’	Oaklands capacity available SRFT capacity will have knock on effect to other specialties
Fairfield	Inpatient ‘lower limb soft tissue & arthroplasty’, some ‘reconstruction’ and day case ‘list fillers’	Theatre and bed capacity, potential knock on effect to other specialties

Further work is required to firm up the details and the NCA will need to make a formal decision regarding capital funding.

Detailed timescales are being worked up but the early indications is that the changes at Fairfield will not be deliverable before May 2020, this is largely because of time taken to deliver the necessary capital redevelopments (i.e. theatre and ward upgrades).

Patient Engagement

Key highlights from the patient engagement exercises carried out around the time of the establishment of the MEOC included:

- patient transport, especially for people with specific needs or limited income,
- support and information provided pre and post operation,
- clear communications to ensure patients are aware of their options as early as possible in their pathway,
- other factors that affect patient experience (e.g. waiting times on the day of surgery, cleanliness, access for visitors, etc.)

The CCG has offered SRFT support to assist with patient engagement

Now that an option has emerged analysis can be undertaken to understand the patient cohorts and how they will be affected. The analysis will also identify whether the patients have protected characteristics to inform an Equality Impact Assessment. Targeted and broader patient engagement can be undertaken, informed by the results of this assessment as is good practice.

Alongside this patient engagement is the need to develop a clear communications plan for patients and other stakeholders (e.g. referrers). Individual patients should be given clear information to make informed decisions as early as possible in the pathway, ideally at point of referral.

Patient engagement should also inform any reviews after the change has happened. The NCA plans to undertake a 90-day review and a further review by commissioners is also likely to be required.

Next Steps

Adult commissioning committee have considered this matter and identified areas where further work and greater assurance is required. Further updates will be received via Scheduled Care Delivery Board.

The NCA is establishing a governance structure to programme manage the change. The CCG is to be represented on the overarching programme group, and a (patient, staff and stakeholder) communications sub-group.

At the Scheduled Care Delivery Board on 25 October SRFT agreed to undertake data analysis to provide information around the patient cohorts affected. This will inform an Equality Impact Assessment and a plan for patient engagement which SRFT and the CCG will jointly agree.

Recommendations

Members are invited to consider and comment on the contents of the report.

KEY COUNCIL POLICIES:

N/A

EQUALITY IMPACT ASSESSMENT AND IMPLICATIONS:

To be completed, as described above

ASSESSMENT OF RISK:

High – “Failure to achieve national performance targets against constitutional standards” is already rated as a high impact / very likely risk on the CCG’s strategic risk register.

LEGAL IMPLICATIONS: N/A

FINANCIAL IMPLICATIONS: N/A

PROCUREMENT IMPLICATIONS: N/A

HR IMPLICATIONS: N/A

OTHER DIRECTORATES CONSULTED: N/A

CONTACT OFFICER: Harry Golby, Assistant Director of Commissioning
Harry.golby@nhs.net
0161 212 6161

WARDS TO WHICH REPORT RELATES: All Salford (and other localities)