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**Part 1 Board Meeting, 26 July 2012**

***Re-shaping Strategy – Developing our Clinical Vision***

This paper is intended to update the Trust Board with the current actions in relation to the Re-Shaping Strategies linked to the Strategic Estates Reconfiguration Programme; and to approve the recommendations listed below.

**Presented by:**

Louise Gaffney, Director of Strategy & Infrastructure (Interim)

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**1. Background**

- 1.1 In the March 2012 Board paper entitled '**Reshaping Strategy – Service Redesign**', we highlighted the plans relating to our interim and medium term capacity, and our strategies for actions relating to the various sites. Integrated Health Partnerships, (IHP) have been working for the Trust to assist in both developing the clinical vision, reviewing the resultant estate configurations and will advise on investments required in clinical buildings.
- 1.2 The focus in the last few months has been on the review of the capacity and clinical challenges to inform the clinical strategy and vision, which will lead us forward into the re-shaping of our services across the sites. It is clear there will need to be changes physically and operationally to work differently. Some of this will necessitate an increase or decrease in services and the estate required as appropriate.

**2. Introduction**

The aim is to use this visioning paper as a springboard to widen the debate with other clinical stakeholders, internal and external to the Trust, about service provision. We want to deliver an integrated approach to the patient pathway, building on the changes of roles and responsibilities across the NHS & social care. It will open the debate about the 'fit' with community and primary care services and the clinical adjacencies required in the sense of both physical location and delivery of care for the patient.

The resulting vision stems from the need to re-confirm the principles of services for patients which cohort high quality complex care; protect 'the routine' and planned care; and at the same time keep high volume services local wherever possible.

**Levels of Care and Service Settings**

It is implicit within all discussions that the patient should be at the centre of future planning and decision making and that clinical safety is a given priority in any future changes. Our aims can be summarised as

- improving access to consistently high quality clinical services
- improving the quality of the patient experience
- making effective and efficient use of clinical staff
- providing a safe and pleasant working environment for both patients and staff
- assisting in recruitment and retention of well-qualified staff

In discussion at the Clinical Strategy Group in July with clinicians, senior management and non exec members of the Strategy Committee, the following principles were confirmed in terms of the levels of care and services to be offered:

- District General Hospital "plus" – with only major and complex inpatient cases managed on this site wherever possible; some specialist care; full range of outpatient services and diagnostics;
- Elective Care Centre with enhanced recovery support to increase the complexity of electives;
- Local General Hospital or Community Setting – local services for local people, supporting high

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There was a strong view that the settings for these centres should be as provided now, given the previous strategic decisions agreed. Options were discussed of whether there should be consideration to the Elective Care Centre being co-located with the LGH or swapping of services between sites. However, there was a consensus that this would not be in the best interests of the patient or service improvements. There was consistent agreement that the levels of care described above should be developed in their current settings and find appropriate estate solutions to deliver the clinical co-locations required.

Therefore, the next steps in the SERP work will be to focus on delivery of the DGH “plus” at Watford, the Enhanced Elective Care Centre at St Albans and the Local General Hospital at Hemel Hempstead. These are explained in more detail in Appendix 1. Work will continue on the analysis of scale of change, clinical co-locations and align discussions with the Clinical Commissioning Groups.

It is also clear that the Trust has new opportunities and challenges which will influence the activity levels and market share in a number of more specialist clinical areas:

- **Bowel Cancer Screening Programme** – The lowering of the age for screening will have a significant impact on Endoscopy services. This may result in a 50% increase in endoscopic activity over the next 5 years. There is further analysis underway to assess the conversion rate to surgery identified as this will have an impact on colorectal and GI surgery capacity requirements.
- **Vascular Surgery** – The Eastern region provider of choice for Hertfordshire is proposed as WHHT. As the designated centre for the AAA screening, it will be crucial to understand the impact that these proposals have on services including MRI, CT, ITU, and Theatres. There are already discussions underway about interventional radiology as well as the impact on inpatient bed requirements.
- **Obstetrics and Maternity** – The Trust is actively supporting proposals to develop (above the current cap), maternity and obstetric services which will require significant modelling, capital and space planning to be realised. The PCT are working with the Trust on the impact of demographic and population changes on this.
- **Paediatric A&E** – the current paediatric area within the Accident and Emergency Department needs further work to adhere to the National Service Framework for paediatrics.
- **Pathology Services** – there are significant changes proposed to the delivery of pathology services across the East of England. The Hemel site will see major changes to its current provision, with the hot pathology services likely to concentrate on the Watford site, cold services probably moving elsewhere and a review of how mortuary services are provided for the county.
- **Cardiology** – there is a hub and spoke model emerging for cardiology services in discussion with other Trusts which will see developments and potential partnerships with other specialist providers.
- **Surgery** – the scope for concentrating more services at St Albans with enhanced recovery and more diagnostic capabilities, opens the potential for more slightly more complex planned care at this site.
- **Access** – the new access road funded by the Department of Health will bring new patients to the services at Watford, as improved accessibility naturally brings increased numbers. Added to this will be the increased population locally from the developments planned on the Watford Campus, and also the new rail link.

All these elements provide opportunities and challenges to incorporate into our planning for future services and in our discussions with other clinical providers, stakeholders and commissioners.

### 3. Recommendations

- It is recommended that the Board endorse the proposals in this paper as the agreed clinical vision; and that this is the basis for discussing integration of our services with other health partners, stakeholders and commissioners as part of embedding our relationship strategy.
- It is recommended that site configuration options now focus on the proposals outlined in this paper and do more detailed analysis on options for delivery and affordability as the next stage of the SERP work

<b>District General Hospital</b>	
<b>Current Profile</b>	WGH is at the heart of the Trust's acute emergency services – the core location for inpatient emergency care and for all patients who need the specialist acute facilities (such as intensive care) of a major district general hospital. It provides elective care for higher risk patients together with a full range of outpatient and diagnostic services.
<b>FUTURE PROFILE</b>	Acute DGH+
<b>PROPOSALS / Opportunities</b>	<ul style="list-style-type: none"> <li>• Focus on acute unplanned work</li> <li>• Planned and complex surgical work that requires access to HDU / ITU facilities</li> <li>• Emergency medical admissions</li> <li>• Hot site</li> <li>• Potential for increased women and children services</li> <li>• 7/7 access to support services including physio and OT</li> <li>• Hot site for pathology</li> </ul>
<b>Variant Options</b>	<ul style="list-style-type: none"> <li>• There could be the provision of LGH services that support the Watford community, if it is not able to be provided elsewhere in the locality</li> <li>• Development of Urgent care services to front A&amp;E</li> <li>• Private Patient Unit</li> </ul>
<b>Elective Care Centre</b>	
<b>Current Trust Profile</b>	Elective Care Centre
<b>FUTURE PROFILE</b>	Enhanced Elective Care Centre
<b>PROPOSALS / Opportunities</b>	<ul style="list-style-type: none"> <li>• Increased surgical inpatient services</li> <li>• Greater utilisation of bed capacity</li> <li>• Greater utilisation of outpatient facilities</li> <li>• Options for more one stop clinics for patients</li> <li>• Invest in full range of diagnostic services to support an increase in surgical work across specialties (potential for MRI / CT / Endoscopy)</li> <li>• Increase theatre utilisation rates and develop additional theatre and recovery space identified from future modelling</li> <li>• Review Enhanced recovery model/co-located/in-reach HDU that can support more complex surgical work</li> <li>• Review 7/7 operating including OOH surgical, anaesthetic and radiological cover</li> <li>• Private Patient Unit</li> </ul>
<b>Variant Options</b>	There could be the provision of LGH services that support the Watford community, if it is not able to be provided elsewhere in the locality.
<b>Local General Hospital</b>	
<b>Current Profile</b>	<b>A 24/7 urgent care centre and local healthcare facilities.</b>
<b>FUTURE PROFILE</b>	<b>Local General Hospital (LGH)</b>
<b>PROPOSALS / Opportunities</b>	<ul style="list-style-type: none"> <li>• Range of outpatient services</li> <li>• Local services for managing long term conditions</li> <li>• Local outpatient services for frail elderly</li> <li>• Urgent Care Centre services</li> <li>• Diagnostic facilities (x-ray / plain film / blood tests)</li> <li>• Support wellbeing initiatives</li> <li>• Family health services</li> <li>• Maintains local access to integrated healthcare services</li> </ul>
<b>Variant Options</b>	<ul style="list-style-type: none"> <li>• Space for rehabilitation services</li> <li>• Intermediate care beds managed by Hertfordshire Community Trust</li> <li>• No intermediate care beds</li> </ul>