

NORTH YORKSHIRE COUNTY COUNCIL

SCRUTINY OF HEALTH COMMITTEE

21 January 2011

Acute Stroke Services, Trauma and Orthopaedic Surgery Pathways in the South Tees Hospitals NHS Foundation Trust - Engagement Process

Purpose of Report

1. The purpose of this report is to update Members on the feedback which the South Tees Hospitals NHS Foundation Trust has received to date from patients and the public on the above developments.

Introduction

2. Members will recall that on 24 September 2010 the Committee first considered proposals to change arrangements for Acute Stroke Services, Trauma and Orthopaedic Surgery Pathways in the South Tees Hospitals NHS Foundation Trust. These changes had been discussed with, and approved by, NHS North Yorkshire and York and the practice-based commissioning group for Hambleton & Richmondshire.
3. Under the proposals all stroke patients will be taken initially to the hyperacute service in the James Cook University Hospital (JCUH) in Middlesbrough. After three days or when medically stabilised patients will be taken to the Friarage Hospital, Northallerton (FHN) for continued care and rehabilitation.
4. In respect of trauma (patients who have suffered multiple or severe injuries), care would be centralised at JCUH. The FHN would become an orthopaedic treatment centre for elective procedures and the number of procedures at the FHN will actually increase.
5. All trauma surgery will, in future, be performed at JCUH. For patients with serious or multiple injuries, they will be taken directly by ambulance to JCUH. For other patients there will be assessment at FHN and then transfer to JCUH if surgery is required. Patients will be returned to FHN for rehabilitation.
6. Members were informed that both developments are consistent with national policy and there will be no significant impact on Accident and Emergency at FHN.
7. The Committee resolved to support both sets of proposals and invited Jill Moulton, Director of Planning, and South Tees Hospitals NHS Foundation Trust to report back to the Committee on the interim results of the engagement process at the Committee meeting in November. This meeting will give the Committee an opportunity to hear the final results of that process.
8. A report from the Director is attached is attached as APPENDIX 1.

Recommendation

9. That Members consider the comments the South Tees Hospitals NHS Foundation Trust has received to date as part of its engagement with patients and the public on these developments and offers comments.

BRYON HUNTER
Scrutiny Team Leader

County Hall
NORTHALLERTON

12 January 2010

Background Documents: None

NORTH YORKSHIRE COUNTY COUNCIL

HEALTH SCRUTINY COMMITTEE MEETING – 21 JANUARY 2010

REDESIGN OF ACUTE STROKE CARE AND TRANSFORMING TRAUMA AND ORTHOPAEDIC SURGERY - PUBLIC ENGAGEMENT PROCESS

1 Purpose of the Report

As agreed at the Health Scrutiny Committee meeting held on 19 November, the purpose of the report is to update members of the Committee about the feedback received during the public engagement process which closed on 31 December 2010.

2 Engagement Process

Two papers were presented to the Health Scrutiny Committee on 24 September 2010 detailing the proposals for the Redesign of Acute Stroke Care and Transforming Trauma and Orthopaedic Surgery and clinical colleagues were present to answer queries. This report confirmed the support of both NHS North Yorkshire and York and Hambleton & Richmondshire Practice Based Commissioning Board for the changes. This was followed by an update report presented to the November OSC meeting by the Director of Planning and DR. Paul Buckley, Assistant Medical Director (Friarage Hospital) - the reason for bringing this interim position being the Trust's plan to implement changes to Trauma services from January 2011.

As previously outlined, a public engagement process has been undertaken inviting comment from local authorities, Members of Parliament, the Local Medical Committee, Practice Based Commissioning groups, local organisations, Parish Councils and LINKs groups. There has also been media coverage of the changes via

- Northern Echo
- Yorkshire Post
- Radio Tees
- Darlington & Stockton Times
- Evening Gazette

The consultation information has been distributed with the invaluable help and support of Richmondshire District Council and Hambleton District Council.

The changes are detailed on the front page of the Trust website and have been covered in our newsletters, including those sent to the 4,000 members of the Foundation Trust. The Trust's Governors have had detailed information about, and were very supportive of, the changes.

Representatives from the Trust attended a 'target' event held on 2 November 2010, hosted by the Hambleton & Richmondshire Practice Based Commissioning Group, which was attended by representatives of all GP practices where the proposals for stroke and trauma services were again debated and supported.

The Trust has received twenty written responses to the briefing materials circulated. Responses to comments received, with an explanation and reassurance about the background to and impact of the changes, have been provided.

3 Concerns Raised During the Engagement Process

The responses given to the 19 November meeting set out that the principal areas of concern raised through this process in relation to stroke was that North Yorkshire residents suffering a stroke would be disadvantaged by having to travel to James Cook University Hospital (JCUH) for clot busting drugs. The Trust has clarified in the responses that those patients who can benefit from this treatment are already taken to JCUH and that this service has worked very well with excellent outcomes for patients. The impact of the change on the ambulance service was also raised.

The principal issue raised in relation to Trauma was the potential for delay in treatment if patients were to be assessed at the Friarage Hospital and then transferred to JCUH plus the impact on the ambulance service of the extra journeys involved.

The Committee specifically asked at the last meeting for more information about the discussions with the ambulance service and the arrangements that would be adopted to support both service changes.

Following discussions with Yorkshire Ambulance Service (YAS) (which have included discussions between the Assistant Medical Director of YAS and the Trust Medical Director) it has been agreed that the ambulance pathway will change so that patients who clearly require trauma surgery will be taken directly to JCUH. Clear and comprehensive criteria have been developed by the Trust and YAS for use by ambulance crews when deciding which patients go where. The criteria balance the need to ensure patients needing surgery are not delayed unnecessarily with the need to minimise the number of patients brought to JCUH who, on full investigation, turn out not to need surgery. Patients who self present at A&E at the Friarage Hospital will be assessed there and if surgery is indicated will be transferred by ambulance to JCUH.

On the basis of our current analysis of likely patient numbers, YAS have assessed that an additional ambulance, crewed by a paramedic and one other, will be required 0900-1700, Monday – Friday. For the first 3 months, this will be provided by using crew on overtime so that the times and numbers of patients can be monitored and adjustments made to the cover to ensure it is sufficient and most effectively deployed. From April, the support will be provided from within YAS daily crewing provision and discussions are underway between the Trust, YAS and the PCT to finalise the detailed commissioning arrangements. As the Committee was previously informed, the Trust built costs for additional ambulance provision into its plans for this service change.

For stroke services, the pathways for both acute stroke and TIA have been agreed between the Trust, the PCT and the relevant ambulance services. Detailed discussions have taken place about the ambulance support needed to bring these changes into effect which involve additional ambulance resources. The NHS North Yorkshire and York will finalise the operational and financial arrangements and once this is in place an implementation date for the changes proposed to this service can be agreed.

4 Summary

The change to Trauma services was implemented from 4 January with all trauma surgery being performed at the James Cook University Hospital. Initially, in line with the proposals presented to the Committee, all patients are continuing to be brought to the Friarage Hospital A and E in Northallerton by ambulance for assessment. Patients requiring trauma surgery are being transported to JCUH by private ambulance to avoid placing an additional burden on YAS. The Trust has modified its proposals for changes to the Trauma ambulance pathway from those originally presented to the Committee in view of comments received and continuing clinical and operational discussions about best practice during the engagement process - these arrangements are planned to come into effect from 24 January.

Detailed arrangements for the Stroke service change have been agreed and, in line with the original paper presented to the Committee, a 1 April implementation date is being sought for this change.

Director of Planning

January 2010.

Proposed Service Changes for Stroke & Trauma - Log of comments resulting from engagement plan

DATE RECEIVED	FROM	METHOD	TOPIC RAISED – STROKE SERVICES	TOPIC RAISED – TRAUMA SERVICES	TOPIC RAISED – NHS GENERAL	RESPONSE DATE
8.10.10	Private individual	Tel Call	Concern re travel time and possible delay in administration of drugs	Military view of changes	NHS cutbacks in general & effect on rural services	15.10.10 and 22.10.10
12.10.10.	Personal Individual	Email		Query provision of surgery to patients with raised BMI		21.10.10
12.10.10	Topcliffe PC	Letter	Broadly supportive. Query re actions to improve detection of TIA and referral times.	Broadly supportive Concern over timescale for assessment & treatment of elderly patients with fracture.		18.10.10
13.10.10	Personal Individual	Email	Concern re travel time and possible delay in administration of drugs			21.10.10
13.10.10	Personal Individual	Email	Concern re travel time and possible delay in administration of drugs		General dissatisfaction with perceived lack of investment at FHN	22.10.10
19.10.10	Personal Individual	E-mail	Concern re travel time and possible delay in administration of drugs			21.10.10
20.10.10	Personal Individual	Letter	Praised services – personal experience of excellent system working as it should.	Welcomed proposal and drawing attention to work done by the Trauma Csar Keith Willets.		
3.11.10	Easingwold Town Council	Letter	Support for changes to service.	Support for changes to service		
3.11.10	Castle Bolton with East & West Bolton	Letter	Support for integrated TIA	Proposal for centralisation of expertise for major	Concerns raised about the distance from isolated	

DATE RECEIVED	FROM	METHOD	TOPIC RAISED – STROKE SERVICES	TOPIC RAISED – TRAUMA SERVICES	TOPIC RAISED – NHS GENERAL	RESPONSE DATE
	Parish Council			trauma & multi discipline treatment supported.	community and possible delays in treatment.	
5.11.10	Cllr CEA Duff Richmondshire District Council	Letter	Support for service change.	Concern at proposed changes.		15.11.10
8.11.10	Personal Individual	E-mail	Concern about travel time and delay in receiving drugs		Concerns raised about the distance from isolated community and possible delays in treatment.	16.11.10
10.10.10	Cllr Blackie	E-mail			Concerns raised about consultation response deadline/additional ambulance service	Holding response sent 12.11.10 Final response sent 18.11.10
11.11.10	Hambleton Over 50 Forum + Richmondshire Senior Forum	E-mail	Concern about travel time.	Concern at proposed changes.	Concerns about perception of lack of good news about FHN	16.11.10
02.12.10	Marrick Parish Council	Letter	Query re possible reduction in A& E Services at FHN, travel problems and the need for increased ambulance services.			15.12.10
28.11.10	Rt Hon W Hague MP (on behalf of constituent)	Letter	Various issues relating to changes			15.12.10
04.12.10	Aysgarth & District Parish Council	Letter	Welcomed proposed improvements but requested assurance re increased ambulance services			15.12.10

DATE RECEIVED	FROM	METHOD	TOPIC RAISED – STROKE SERVICES	TOPIC RAISED – TRAUMA SERVICES	TOPIC RAISED – NHS GENERAL	RESPONSE DATE
23.12.10	Personal Individual	Letter		Concerns re trauma services – closure at FHN and the impact on ambulance services / ability of family & friends to visit JCUH		23.12.10
24.12.10	Personal Individual	Letter	Requesting the reintroduction of the 24/7 stroke service			04.01.11
28.12.10	Cllr J Blackie Chairman of Hawes & High Abbotside Parish Council	Letter	General Support but outlined remaining concerns about : - the downgrading of A&E Services at FHN, - financial problems of the PCT and possible impact on the ability to commission A&E Services at FHN in the future - travel mileages involved, - additional ambulance resources required and current ambulance failure to reach the national standard response times			11.01.11