

Briefing paper for the OSC on 6 November about the impact of the closure of the Lambert Hospital on managing winter pressures

DRAFT UNDER DEVELOPMENT

Introduction

The Lambert Community Hospital was closed in September due to nurse staffing difficulties and is intended to re-open in mid-January dependant on successful recruitment.

The purpose of this paper is to clarify the current position with respect to the closure and assess the potential impacts during the upcoming winter period.

Current position

The current situation is as follows:

- 6 of the 14 community beds in the Lambert hospital have been re-provided on the Rutson ward within the Friarage Hospital, which already functions as a community hospital. This will help to mitigate the risk of the closure and ensure continued availability of community hospital beds.
- Staff from the hospital have been redeployed to strengthen both community services and acute services at the Friarage Hospital during the period of closure
- Additional beds are temporarily closed on Ainderby and Allerton wards at the Friarage Hospital, but additional capacity has been created in the ambulatory care centre which has moved to a more spacious location and is now receiving both medical and surgical patients. A discharge facility has also been provided on Ainderby ward to support patient flow on the site.
- Discussions have been held between STHFT and local GP practices about the process of admitting palliative care patients to the Rutson and STHFT is developing a Standard Operating Procedure for November
- The Lambert GP practice has been retained through a contract variation during the period of closure and will focus on service development work until January when they will recommence as provider of medical cover to the Lambert
- STHFT is actively recruiting additional staff so as to facilitate the reopening in January. They will have a clearer idea whether this recruitment has been successful by the end of November. 4.2 whole time equivalent registered nurses and 1.6 whole time equivalent nursing assistants are required to re-open the beds.

Impact on the system during winter

The management of the whole system in response to winter pressures is managed through the System Resilience Group which is led by the CCG.

The SRG has a detailed winter plan and comprehensive systems and processes for managing and addressing risk across a wide range of partner organisations.

So far the closure of the Lambert Hospital has not had a significant observed impact on the performance of the system. Delayed Transfers of Care are being identified more systematically within the Friarage Hospital and discussed at a weekly teleconference which involves both NYCC and CHC. These DTOC are due to a range of causes and not specifically availability of community hospital beds.

However, the continued closure of the Lambert Hospital as winter commences does create a significant system risk should demand for beds increase. It also means there is less flexibility in the system. This will be carefully monitored through the System Resilience Group (SRG). A number of mitigating actions are in place:

- The SRG has schemes in place to help manage the system over winter, including an evening Home from Hospital Service, investment in hospice services in Richmondshire
- A discharge steering group operates for Hambleton and Richmondshire at which STHFT, TEWV, NYCC and the CCG are represented. This provides a forum for cross-organisational issues relating to discharges to be identified and resolved so that beds across the system can be made available more efficiently.
- It should also be noted that there is significantly more intermediate care and fast response capacity this winter compared to the previous, which has been funded through the Better Care Fund. This should mean that there is greater capacity in community services to receive patients for either step-up or step-down care.
- Community Hospital beds continue to be available at the Friary Hospital and Guisborough Hospital (for patients of Stokesley and Great Ayton)

Since the temporary closure on 7 September 28 patients who may have accessed the Lambert Hospital if available have been admitted to the Rutson unit at the Friarage Hospital, equating to an average of 5.3 beds on the Rutson unit. The additional activity has had no significant impact on the Friarage site.

Implications / actions for North Yorkshire County Council

North Yorkshire County Council, Health and Adult Services, is in agreement with health colleagues that the closure of the Lambert Hospital does create a significant system risk as winter progresses. At this stage there has been no noticeable impact

on social care services as a result of the closure. This position will be monitored on a weekly basis with health partners via the System Resilience Group (SRG). As is the case now, HAS will work with other SRG partners to ensure that all system wide resources are used in the most appropriate way to manage presenting need. The focus at all times is to ensure that people receive the services that they require to promote their health, well- being and safety.

Conclusion

The closure of the Lambert Hospital does present a risk to the system, but a range of actions have been taken by both STHFT and the SRG which will hopefully help to mitigate the overall risk. This will be monitored carefully over the next few months.