

# East Coast Service Review – Updates on Urology, Stroke and Medical Oncology Services

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# Urology Service

- As a result of staffing challenges, the temporary service model for acute cases involving transfer to York at evenings and weekends and a single Trust acute service rota has been in operation since November 2019.
- An audit of all the cases transferred from November 2019 to April 2020 found that the transfers were appropriate and managed safely following professional clinical guidelines.
- The model received support from the Yorkshire and Humber Clinical Senate who visited in late 2019.
- A survey of the patients transferred found that in general terms the standard of care was thought to be high (30 % rated the experience as excellent and 48 % as good).



# Urology Service

- Following on from the results of the audit and survey, both North Yorkshire and East Riding CCG's are supportive of the Trust recommendation that the temporary acute service change is made permanent.
- Further public engagement is being undertaken in respect of elective (planned) urology, with a focus on the Bridlington service (feedback will be shared in February 2021).



# Stroke Service

- The temporary Stroke service pathway involving the direct transfer of all Scarborough and Bridlington patients requiring acute stroke care to the Hyper Acute Stroke Units in York and Hull has been in operation since May 2020.
- The service change was overseen by a multiagency working group involving clinical and managerial representatives from the Acute Trusts, YAS, CCGs and the Humber, Coast and Vale (HCV) Stroke Network
- There have been no significant clinical concerns reported
- The YTHFT Stroke service recently received an “A” rating as part of the SSNAP audit of Stroke standards for the period July to September 2020 (the audit is undertaken quarterly).



# Stroke Service

- The HCV Stroke Network are conducting a Hyper Acute Services Review across the region (which will include scrutiny of the temporary Scarborough pathway and the involvement of the National Clinical Stroke Director).
- As well as the review of the operation of Hyper Acute Services there will also be consideration of the impact of the development of the thrombectomy service and the flow of more tertiary activity to HUTHT and how best Rehabilitation and Early Supported Discharge services across HCV can be made more sustainable.



# Medical Oncology Service

- The Scarborough Medical Oncology service has historically had Consultant input and leadership from HUTHT with outpatient care and chemotherapy being provided by YTHFT nursing and administration staff locally
- Staffing challenges meant that Consultant input to the Breast Oncology service had to be withdrawn in 2019 and Scarborough residents now travel to York for Outpatients
- With effect from January 2020 as a result of similar staffing challenges, a new temporary model for all tumour site patients was introduced for Scarborough and Bridlington, which also impacted patients in the Scunthorpe area as it was a region-wide change.
- All new outpatient activity for Scarborough and Bridlington patients and discussions regarding critical decisions is now undertaken at Hull. Complex treatment is also undertaken there (as was the case previously).
- Chemotherapy and routine follow up outpatient appointments continue to be provided at Scarborough
- Patients with renal or gynaecological cancers are required to travel to Hull for all aspects of their treatment.



# Medical Oncology Service

- An evaluation of the new service model, co-ordinated by HUTHT as part of the Humber Acute Services Review, is being undertaken.
- This aims to review the interim service delivery model and assess feedback from patients, carers and clinicians affected by the service change.
- Feedback report to be finalised in January 2021
- Anecdotal feedback from Scarborough patients on service change (through YTHFT staff) has been positive
- Provision of specialist and consistent five day service for patients welcomed
- Patients are benefitting from experienced specialist advice and treatment planning by having their first appointment at Castle Hill Hospital
- The model allows for treatment and follow up for the vast majority of patients to continue to be delivered locally, which patients have told us is important to them.

