

# Proposed future arrangements for hospital and community health services



**Travel and Transport Working Group  
12<sup>th</sup> May, 2017**

# Case for Change

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- Quality and Safety
- Demand and demographics
- Workforce shortages
- Financial challenges

**Too many people are dying in our  
hospitals**



# Three inter-related phases

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## Phase 1

Strengthen existing community services in line with the new model of care

## Phase 2

Enhance community services – likely to move more services closer to home

**Phase 3**  
Hospital changes

# Scope of the consultation

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Our new model for hospital and community health services has six themes – five for hospitals, one in the community:

- Emergency and acute services
- Urgent care services
- Maternity services
- Paediatrics service
- Planned care services
- Community health services

# Proposed future arrangements

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Services at both hospitals:

- Day case surgery
- Outpatient services for adults and children
- Midwifery-led maternity unit
- Diagnostics
- Therapies e.g. physio
- Community services

They would also have an Urgent Care Centre.

open 24 hours a day, 7 days a week, staffed by doctors and emergency nurse practitioners.

# Proposed future arrangements

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## **CRH would also have:**

Emergency Centre For patients with very serious or life-threatening illness or injury

Paediatric Emergency Centre - bringing together all medical and surgical services for children

## **In Huddersfield there would also be:**

Planned Care Centre For routine operations like hip replacements, knee replacements

Medical Day Cases & Endoscopy

# Benefits and Outcomes

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- Patients treated sooner and more effectively
- Improved management of patient flow
- Resources (staff and equipment) located to provide optimal service and meet fluctuations in demand
- Decisions about treatment are made earlier
- Reductions in average Length of Stay

Leading to:

- Improved Outcomes for Patients
- Improved levels of Quality and Safety
- Better Use of Resources





| RIGHT CARE | RIGHT TIME | RIGHT PLACE

# Any Questions?



# Travel and Transport

## Key themes



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## Key message from local people

***‘Any barriers to parking, travel and transport should be addressed with a clear plan which takes account of diversity and locality when planning services’***

# What else do we know?

Patient transport survey March 2015

Engagement April –July 2014

- Travel and transport needed further consideration as people could neither afford the time to travel; the cost, or find suitable parking on premises. People want services to be based locally
- Participants were generally in agreement that they want services closer to home, delivered by the right staff in the right setting with transport and estates considered.

# Pre-consultation Engagement

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- Targeted engagement activity:  
Those groups who represent a particular characteristic as set out in the equality act, a local area and or a service
- Engaging with key stakeholders:  
On services received in hospital & the care they may receive in a community setting.
- This engagement covered any services in Phases 2 and 3 where we had gaps in our engagement to date.
- In line with the principles set out in the CCG's Patient Engagement and Experience Strategy
- Assurance provided by the Consultation Institute

# What local people told us

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- **Local** As many services as possible close to home in local settings, e.g. doctors surgeries with better waiting and appointment times
- **Individual** Services coordinated & focused around a person's needs
- **Caring** Staff who are caring and competent and treat people with dignity and respect
- **Quality** Services properly planned and resourced, with quality maintained and a reduction in delays and waiting times
- **Prevention** More information about looking after themselves including mental health
- **Access** Services everyone can access, responsible and flexible, using technology to support people
- **Without Boundaries** remove any organisational boundaries that exist between different agencies providing care.
- **Transport** address travel and transport.



# Travel and transport considerations

## **Urgent care:**

- 41% under 15 minutes,
- 56% 15-60 minutes (42% wanting under 30 minutes)

## **Planned care:**

- 32% under 15 minutes,
- 60% 15-60 minutes (31% wanting under 30 minutes)

## **How people travel - on average across all three responses:**

- 80% use a car or taxi – concerns about cost of parking or journey cost
- 35% use public transport - concerns about getting to early appointment, services not on bus routes, cost
- 20% supported transport – concerns about access including wheelchair access, long journeys

# Consultation Key Themes

- Greater Huddersfield respondents particularly worried
- Impact of increased travel times on patient safety
- Main concern – Elland Bypass congestion
- Access to and cost of public transport
- Car parking at Calderdale Royal Hospital

# Top 5 themes by services area

Emergency	Urgent	Planned	Maternity	Paediatrics	Community
<b>Travel</b>	Implementation	<b>Travel</b>	Implementation	<b>Travel</b>	Access
Implementation	Operational	Implementation	<b>Travel</b>	Operational	Operational
Estates & Buildings	Staff	Estates & Buildings	Patient Experience	Access	Staff
Putting Lives at risk	<b>Travel</b>	Operational	Operational	Implementation	Implementation
Consultation Process	Access	Finance	Finance	Staff	Finance



# Emergency

Top 5 key themes	Sub themes
Travel	<ul style="list-style-type: none"> <li>• Travel Times</li> <li>• Travel Access</li> </ul>
Implementation	<ul style="list-style-type: none"> <li>• Feasibility of proposal</li> </ul>
Estates & Buildings	<ul style="list-style-type: none"> <li>• Proposal for services to remain</li> <li>• Proposed site capacity – meeting demand</li> </ul>
Putting Lives at risk	<ul style="list-style-type: none"> <li>• Putting lives at risk</li> </ul>
Consultation Process	<ul style="list-style-type: none"> <li>• Concern with how decisions were made</li> </ul>

# Urgent Care

Top 5 key themes	Sub themes
Implementation	<ul style="list-style-type: none"><li>• Feasibility of proposal</li></ul>
Operational	<ul style="list-style-type: none"><li>• Concerns with GP capacity</li><li>• NHS 11 concerns</li></ul>
Staff	<ul style="list-style-type: none"><li>• Levels of staffing</li><li>• Access to staff</li></ul>
Travel	<ul style="list-style-type: none"><li>• Travel access</li><li>• Travel times</li></ul>
Access	<ul style="list-style-type: none"><li>• Waiting times</li><li>• Importance of access to care/services</li></ul>

# Planned Care

Top 5 key themes	Sub themes
Travel	<ul style="list-style-type: none"><li>• Travel access</li><li>• Travel times</li></ul>
Implementation	<ul style="list-style-type: none"><li>• Feasibility of proposals</li></ul>
Estates & Buildings	<ul style="list-style-type: none"><li>• Proposed site capacity- beds</li><li>• Proposed site capacity- meeting demand</li></ul>
Operational	<ul style="list-style-type: none"><li>• Urgent/ Emergency Care impacts</li></ul>
Finance	<ul style="list-style-type: none"><li>• Funding Concerns</li></ul>

# Maternity Care

Top 5 key themes	Sub themes
Implementation	<ul style="list-style-type: none"><li>• Feasibility of proposal</li></ul>
Travel	<ul style="list-style-type: none"><li>• Travel times</li><li>• Travel access</li></ul>
Patient Experience	<ul style="list-style-type: none"><li>• Inadequate Care</li><li>• Lack of improvement</li></ul>
Operational	<ul style="list-style-type: none"><li>• Service reduction</li></ul>
Finance	<ul style="list-style-type: none"><li>• Personal care budgets</li></ul>

# Paediatrics Care

Top 5 key themes	Sub themes
Travel	Travel times Travel access
Operational	NHS 11 concerns Wider services- more support Concerns with GP capacity Wider services
Access	Access to staff
Implementation	Feasibility of proposal
Staff	Staff levels

# Community Care

Top 5 key themes	Sub themes
Access	<ul style="list-style-type: none"><li>• Waiting time</li><li>• Importance of access to care/services</li><li>• Access to staff</li></ul>
Operational	<ul style="list-style-type: none"><li>• Concerns with GP capacity</li></ul>
Staff	<ul style="list-style-type: none"><li>• Staff- levels</li></ul>
Implementation	<ul style="list-style-type: none"><li>• Feasibility of proposal</li></ul>
Finance	<ul style="list-style-type: none"><li>• Funding concerns</li></ul>

# Healthwatch & Stakeholder Event

## Key Findings



**Dawn Pearson**

[www.rightcaredtimeplace.co.uk](http://www.rightcaredtimeplace.co.uk)

# Healthwatch

## Q1. How will the proposed changes affect you and your family?

- Further to travel
- Risk to personal health
- **Bad traffic/roads**
- **Transport issues**
- Difficult from certain locations
- Overloaded services

Overarching theme from responses is accessibility



## Healthwatch cont...

**Q2. Please tell us any other thoughts you have about these proposed changes?**

- PFI is to blame
- Risk to personal health/ delay to critical care
- **Bad traffic/ Roads**
- Huddersfield- needs/wants it's A&E
- Proposed changes not fully costed / considered

# Stakeholder Deliberation Event

Key messages/ green flags

- Communication
  - Case studies and stories
  - Explain the difference between EC and UC
- Impact on GP services
- Travel concerns
- Workforce planning

# Solutions

- Sufficient car parking
- Park and ride schemes, including improvements to the shuttle service
- Improved bus service or dedicated service
- Road improvements – Elland bypass is the main concern and requires a solution to provide confidence it will improve
- People need assurance on ambulance journey times and confidence from the ambulance service it can work

# Solutions

- Solutions to travel for people having planned care needs consideration – parking spaces, time of appointments and procedures and visiting
- Need to be clear on travel that we address both travel for urgent and emergency in an ambulance and routine travel to receive a service – different issues
- Relax parking charges
- Reduce the need to attend hospital and ensure care is closer to home or technology is an option for patients i.e. facetime/skype

# Travel and Transport Advisory Group



**Travel and Transport Working Group  
12<sup>th</sup> May, 2017**

# Monday 19<sup>th</sup> June 2017

## Brighthouse Civic Hall 10:30-1:15pm

- Accessible venue with good transport links
- Stakeholders invited – people who have been part of our journey to date
- Purpose of the meeting:
  - Provide an update of where we are with our proposed changes
  - Present the public views on travel and transport that we have so far. This is information we have gathered as part of our engagement and consultation process
  - Identify the best approach to developing an advisory group

# Agenda

- 10:45 - Welcome and introductions – Chair
- 10:55 - Update on hospital and community services
- 11:15 – Setting up an advisory group – table discussion and feedback
- 11:45 – comfort break
- 12:00 – What have people already told us, what else do we need to do?
- 12:30 – Round table discussions and ideas board
- 1:00 – Close and thanks
- 1:15 – Lunch and networking