1. Introduction

1.1. This document provides information about the consultation on proposals to improve Older People’s Services in North West Glasgow. This will involve the transfer of rehabilitation beds, related outpatient services and continuing care beds currently located in Drumchapel Hospital to other locations in North West Glasgow.

1.2. At the end of this document we also explain how you can feedback your comments on these proposals.

2. Proposed Change

2.1. This proposal will see the development of an additional 54 Rehabilitation beds – a mixture of single room and 3 bed room accommodation at Gartnavel General Hospital along with expanded Day Hospital and outpatient services for older people, creating a Rehabilitation Centre of Excellence for the population of North West Glasgow at Gartnavel.

2.2. This Rehabilitation Centre of Excellence will strengthen the focus on rehabilitation and enhance our ability to transfer patients back into the community. Patients will be able to receive more extensive input from specialists in rehabilitation from across the full range of Nursing and Allied Health Professionals using specialist facilities which are located within or close to the wards. Working in this way will enable more effective and efficient links with Health and Social Care Partnership Community Teams than is currently possible within Drumchapel Hospital, assisting rapid discharge back to the community.

2.3. The majority of North West Glasgow patients will be discharged from their assessment ward directly home without requiring a longer period of rehabilitation in hospital. This will mean for most people there will be no change from these proposals as their inpatient care will be provided from Queen Elizabeth University Hospital or Glasgow Royal Infirmary.

2.4. However, for around 646 patients per year who require longer term rehabilitation in hospital with length of stay averaging 30 days this would be within Gartnavel Hospital rather than Drumchapel Hospital. This would also impact on 400 new referrals (2 per day) and 1300 attendances (5 per day) to Day Hospital and approximately 827 (3 per day) outpatient episodes, which would be provided from Gartnavel Hospital under our proposals.

2.5. We believe this arrangement will:

   - Enhance the care patients receive by offering better access to the doctors and specialists with expertise in caring for older people
   - Bring the patients closer to investigations for example, x-rays and scans
• Improve patient experience and enhance dignity and respect by reducing number of transfers across sites
• Improve patient stay in fully refurbished and modernised hospital facilities
• Currently in North West Glasgow, Rehabilitation beds are provided from 2 sites:
• 106 beds at Gartnavel Hospital
• 56 beds at Drumchapel Hospital

2.6. Postcode analysis of inpatients using older people’s services at Drumchapel Hospital and Gartnavel General Hospital demonstrates similar catchment areas for both inpatients:

Postcode Catchment of Inpatients at Drumchapel Hospital:
2.7. The aim of the proposed consolidated service is to enable:-

- Early intervention from specialists in the care of older people focussed on frailty assessment, followed by
- Rapid commencement of multi-disciplinary assessment and rehabilitation within appropriate resourced rehabilitation facilities that enable fast access to the full range of investigations and specialist advice as required for patients with multi-morbidity, and
- Early planning for the transfer of care from hospital to community services involving appropriate people.
- Improved ward facilities
- More efficient use of resources

2.8. There are a number of aspects of services which we can improve by bringing together these services on the GGH site:-

- **Maintaining effective cover across all inpatient sites** - each hospital site has doctors in training working during the day and providing an on-call service in the evenings and at weekends. Following changes to the way doctors are trained there are now fewer doctors available to cover all the required duties, and in addition, the introduction of the European Working Time directives reduces the total number of hours that a doctor can work each week. This means that if the number of sites covered by doctors can be reduced, it increases the overall amount of time that doctors can spend on the wards enabling faster access to medical care and thus improving overall quality of clinical care.
• At Drumchapel when patients become ill it is more difficult to manage these patients in the hospital due to there being no 24 hour on site medical care and often patients have to be transferred to the acute receiving hospital. By moving the rehabilitation service to Gartnavel, this site does have 24 hour on site medical cover.

• Some specialist Allied Health Professional staff also work across both sites and a single site would allow increased flexibility in staffing and reduce time spent in travel, thereby giving patients better access to treatment.

• Access to Diagnostic Investigations: Gartnavel Hospital provides a range of diagnostic interventions including X-Ray, CT scanner, MRI scanner and ultrasound as well as having access to a range of other specialist interventions including Cardiology, Respiratory and Endoscopy. All inpatient areas in Gartnavel will have ready access to these diagnostic facilities. Drumchapel Hospital has part-time X-Ray facilities and no access to specialist investigations on site. Patients in rehabilitation wards may require these investigations during their stay in hospital and would have to be transported off site to have these undertaken. In 2014/15 there were approximately 130 journeys taking patients from Drumchapel to Gartnavel Hospital to access other diagnostic facilities. This journey means the patient is away from the ward for a period of time which can subsequently have an impact on their Rehabilitation. There is also a reduction in the ward nurse staffing levels as each patient requires an escort for the journey.

• Our proposals will also improve the Quality of Accommodation - the existing Rehabilitation wards in Drumchapel are in need of refurbishment to bring them up to expected standards in terms of number of single rooms and overall space and facilities. The accommodation proposed at Gartnavel will be provided from a completely redeveloped area and will encompass 54 beds over two wards. Each ward will have 6 single and 7 x 3 bedded areas. Each of these areas will have ensuite wet rooms which allows for improved patient facilities and relevant equipment to be used to support patient care. Adjacent to the two wards will be a Day Hospital and a Rehabilitation Physiotherapy Gym and ADL (Activity of Daily Living Suite). This area is designed to stimulate the home environment.

2.9. There is one ward with up to 28 continuing care beds available at Drumchapel. NHS Continuing Care has been a term used for a package of long term care provided to people that is fully funded by the NHS. Due to the level of specialist treatment required, NHS Continuing Care has been provided in a hospital ward, hospice or a contracted inpatient bed which may be in a care home. The Scottish Government issued new guidance in May 2015 on how NHS Continuing Care should be provided. This new guidance will bring significant change to how care is provided in the future. These changes will affect a small number of patients at Drumchapel Hospital (as of October 2015 there were 14 patients currently classed as NHS Continuing Care) and we will work individually with each patient and their families to assess their specific needs and agree a best way forward for them.

3. Engagement and Consultation Process

3.1. The NHS Greater Glasgow and Clyde Patient Experience and Public Involvement Team and managers from the South Sector Directorate and Planning Team have worked with the Scottish Health Council to develop an engagement process to facilitate the participation of a range of stakeholders in the discussions concerning these changes to older peoples’ services in North West Glasgow.
3.2. The programme of engagement has sought to:

- Build relationships with interested groups
- Ensure that all aspects of engagement are conducted in an inclusive, sensitive and values-based manner
- Ensure that patient and carer input is considered in all aspects of the review

3.3. This work has been carried out between September and October 2015. The work commenced with the formation of a Stakeholder Reference Group (SRG). The programme of engagement also included:

- A presentation to North West Glasgow Public Partnership Forum
- Information and invites to over 400 contacts
- Engagement event workshop with 70 participants. Round table discussions sought to:
  - Provide information on the possible changes to the location of Older people’s rehabilitation services in North West Glasgow
  - Offer opportunity for discussion and clarification on issues, thoughts and concerns
- Drop in sessions at Drumchapel hospital to speak to patients, carers and relatives
- A open meeting organised by Drumchapel Community Council

4. Issues from the engagement so far:-

4.1. Access: a number of concerns about access were raised. We have concluded a detailed review of this which can be accessed on the consultation web site. It is important to emphasise that as the current Drumchapel service covers the whole of the North West the numbers of patients actually from the immediate area are small. We will review car parking on the site to see if there are issues we can address.

4.2. Impact on the Wider Hospital Site - With the transfer of a number of acute medical and surgical inpatient services from Gartnavel Hospital to Queen Elizabeth University Hospital, this has freed up areas that have been identified for development. Gartnavel General Hospital is already planned to undergo extensive refurbishment to both upgrade existing in and outpatient areas and a new build to provide accommodation for those Outpatient, Minor Injury and GP Out of Hours services currently provided from the Western Infirmary. The proposed Rehabilitation wards at Gartnavel Hospital are only a small part of the overall site and the location of these at Gartnavel has no detrimental effect on any other service at Gartnavel.

4.3. Social Work services: our proposals do not include any change to social work services but we recognise the concerns raised about delays and the range of services available and will work with local Health and Social Care Partnership to look at how these can be addressed.

4.4. Future of the site: NHS Greater Glasgow and Clyde will work with the city council and local community council to discuss future use of any surplus land/buildings on the Drumchapel site. The Glenkirk and Surehaven Centres and Almond View/Court Care Homes would remain on the Drumchapel site. These proposed changes may have implications for the GP Out of Hours service based at Drumchapel Hospital – this will need to be considered separately.
4.5. Impact on staff: All staff providing inpatient, outpatient and Day Hospital services will transfer to Gartnavel General Hospital. Staff using office accommodation on the Drumchapel site will have suitable alternative provision if required.

4.6. GP Out of Hours service: if these proposals proceed we will need to consider the options for the future location of this service and engage with local interests. It is important to note that access to the GP OOH service is through NHS 24 and is by appointment not open access.

4.7. Financial position – the costs associated with this proposal have been considered and if this proposal was to go ahead it is estimated this would generate a saving of £1.4m

4.8. Activities for patients: concern was noted about a potential reduction in the range of patient activities at Gartnavel General Hospital. We recognise the importance of such activities and as part of this redesign it is proposed to enhance the range of activities for patients. We are currently in the process of recruiting additional Activity Co-ordinators to support this.

5. Consultation process

5.1. A leaflet summarising the proposals and the information contained within this document has been widely distributed. If you would like a copy of this you can either download it directly from our website at http://www.nhsggc.org.uk/about-us/inform-engage-and-consult/ or you can call 0141 201 5598 during normal working hours for a copy to be posted out to you.

5.2. If you would like copies of this document, or the summary leaflet, in alternative formats such as audio tape, British sign language or Braille or would like translations of the documents into languages other than English, please call 0141 201 5598.

5.3. This public consultation on our proposals runs until Tuesday the 8th December 2015. Comments on all aspects of our proposals are welcome by that date.

5.4. You can do this in a number of ways, as an individual, group or organisation by:

- Calling: 0141 201 5598
- Emailing: PatientExperience@ggc.scot.nhs.uk.
- Writing to: Patient Experience Public Involvement Team 4th Floor, Outpatients Department, Victoria Infirmary, Glasgow, G42 9TY

6. What Happens Next?

6.1. Once we have received comments from all interested parties, we will carefully review all we have been told. Our aim is to take a final proposal to the NHS Greater Glasgow and Clyde Board on 15th December 2015. The proposal will contain details of the public consultation process and a full summary of all comments received during the consultation period. NHSGGC will assess the comments it receives during the consultation and these will influence the Board’s decision on where these services should be located. This outcome will then be communicated by mail and email to all people and organisations taking part in the consultation.