

Greater Glasgow and Clyde NHS Board

Board Meeting
21 February 2012

Board Paper No. 12/05

Chief Operating Officer, Acute Services Division

REVIEW OF PAEDIATRIC INPATIENT SERVICES, WARD 15, ROYAL ALEXANDRA HOSPITAL

RECOMMENDATION

Board Members are asked to receive this paper which provides an update on the review of the paediatric inpatient service at the Royal Alexandra Hospital (RAH) and approve the recommendation that a full review of the overall service provision should be incorporated into the wider strategic review of clinical services across NHSGGC to ensure that all of the implications in relation to other services are considered within the wider strategic framework.

1 Context

- 1.1 As part of the discussions at the NHS Board meeting in June 2011 in relation to the Financial Plan the Board agreed to explore as part of the process of clinical and financial reviews the potential to consider the relocation of the in-patient paediatric service from Ward 15, Royal Alexandra Hospital (RAH) to the Royal Hospital for Sick Children (RHSC). Any such proposals would only be taken forward with full engagement with stakeholders prior to any launch of formal public consultation and a report back to the NHS Board for approval. At the September 2011 NHS Board meeting it had been reported that discussions were being held which has included a meeting with Renfrewshire Council regarding paediatric services provided from Ward 15 at the RAH.
- 1.2 In reviewing the work carried out to date, it is acknowledged that a number of issues require further consideration. It was initially thought that this proposal involved a discrete ward transfer, however, in undertaking the detailed analysis, a more complex picture of clinical interdependencies has emerged. Some of these interdependencies are linked to regional and/or national clinical service reviews such as neonatology. To take cognisance of the emerging picture it is, therefore, proposed that the work undertaken to date is taken forward as part of the wider strategic review of acute services in NHSGGC during 2012/13 to ensure that all implications in relation to other services are fully considered within that wider strategic framework.

2 Background

- 2.1 By way of background, Ward 15 at the Royal Alexandra Hospital provides paediatric inpatient services to the Clyde area. It consists of 28 bed spaces, made up of 16 inpatient beds, a six bedded area for short stay medical assessment and a six bedded area for day care and planned investigations. Alongside the ward, there is an outpatient department and the PANDA Centre which provides community led child development facilities including

therapies. Following the transfer of Ward 66 from Southern General Hospital (SGH) to RHSC in March 2012, Ward 15 will be the only remaining acute inpatient facility for children in NHSGGC out with the Royal Hospital for Sick Children.

- 2.2 The service and associated activity currently provided in Ward 15 at the RAH, which has been reviewed is set out in the table below:

| Service Provision | Activity |
|---|-----------------|
| Emergency inpatient care | 2000 |
| Elective inpatient care | 600 |
| Short Stay Medical Assessment | 2,200 |
| Day Surgery/Day Medical Care (including planned investigations and treatment) | 825 |
| Total | 5,625 |

- 2.3 Alongside the ward, there is an outpatient department which provides a full range of clinics and sees around 4,500 patients per year. This outpatient service was not part of the review undertaken. Adjacent to the ward is the PANDA Centre which provides community led child development services. As with the outpatient service, this was not part of the service review.
- 2.4 It is recognised that the paediatric inpatient service at RAH interfaces with a number of other services, which require to be considered as part of the wider and more strategic review, including:
- Emergency Department & Adult Medical Services
 - Maternity Unit/Neonatal Intensive Care Unit
 - Surgery and Anaesthetics Directorate, specifically ENT, Ophthalmology, Orthopaedics, General Surgery, Anaesthetics and Critical Care
 - Diagnostic Services

3 Drivers for Change

- 3.1 In terms of quality of care for the paediatric patients the proposal under consideration initially was to transfer all paediatric inpatient services from RAH and to the RHSC in 2012. This would ensure full access to specialist paediatric care for the patients and would involve the transfer of all activity related to inpatient beds, day surgery and day medical investigation facilities to RHSC.
- 3.2 Recognising the challenge of maintaining the current inpatient model, early consideration of the potential changes to service delivery in relation to the new Children's hospital is also required. It is viewed as important that the current planning and redesign for the new Children's hospital incorporates the needs of the Clyde paediatric population to ensure full and equal access to dedicated children's services.
- 3.3 Modernising Medical Careers is a major reform of postgraduate medical education and will have an impact on medical staff provision in clinical areas within West of Scotland Boards with anticipated loss of up to 40% of medical middle grade paediatric trainee doctors. Incremental reductions are already underway, however, the impact of these changes on the paediatric service in NHSGGC will be significant from 2012/13 onwards, when maintaining

the current rota and clinical cover for the existing number of hospital sites for paediatrics, neonatology and maternity services will be very difficult to sustain with fewer doctors. In addition, revised Home Office immigration regulations have led the Directorate to consider the future service configuration to mitigate the impact of reduced numbers of medical staff.

- 3.4 Transferring all inpatient paediatric services from RAH to RHSC in 2012 was estimated to make a saving of around £1m in revenue costs.

4 Process to Date

- 4.1 A review of the current services provided for children at RAH has been carried out by the Directorate. This has involved a detailed analysis of the activity flows and range of services offered to consider the impact of potential changes to the current service model. Work has been undertaken to consider the impact of this activity change in relation to the other services listed above with whom the paediatric service interfaces. This has included discussions with key stakeholders such as the Emergency Department, maternity and neonatology services and the Scottish Ambulance Service (SAS). A number of these interfaces are complex and are difficult to consider in isolation from the wider strategic context.

- 4.2 As this proposal is deemed to be major service change, the process outlined by the Scottish Government in CEL 4(2010) requires to be followed. In line with this requirement, pre-consultation engagement has been carried out, overseen by the Scottish Health Council. This has involved activities to engage with key stakeholders including drop in sessions and sessions with the Community Engagement teams for patients and families as well as staff.

5 Recommendation

Board members are asked to approve the recommendation to incorporate the review into the wider strategic consideration of clinical services across NHSGGC to ensure that all of the implications in relation to other services are fully explored and that a fully integrated solution covering the whole range of services is defined rather than undertaking this review as a single exercise.

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