

Proposal to move Ward 15 in the Royal Alexandra Hospital to the new Royal Hospital for Children

Frequently Asked Questions

This document contains questions NHS Greater Glasgow and Clyde have been asked about the proposal to transfer the children's inpatient, day surgery and short stay ward (Ward 15) from the Royal Alexandra Hospital in Paisley to the new Royal Hospital for Children in Govan.

If you have any questions at all about the proposal, or would like to comment on it, please do not hesitate to get in touch with Rachel Killick, Patient Experience Public Involvement Manager, on 0141 201 0309 or by emailing public.involvement@ggc.scot.nhs.uk

1. **What is the proposal?**

NHS Greater Glasgow and Clyde are proposing to move the children's inpatient, day surgery and short stay ward (Ward 15) in the Royal Alexandra Hospital in Paisley to the new Royal Hospital for Children in Govan.

2. **What children's services will stay?**

The services provided from the Panda Centre, Paediatric Outpatients, and Community Children's Nurses will remain local.

3. **Why is NHS Greater Glasgow and Clyde consulting on this proposal?**

We think that this change will help us provide even better care for children in the Clyde area. This is for four main reasons:

1. We have a new hospital entirely dedicated to children, with state of the art facilities seeing children from across the West of Scotland. We want children in Clyde to have access to world leading equipment, specialists and environments specifically tailored to children and young people.
2. The Royal College for Paediatrics and Child Health, an organisation who sets the standards doctors should aim to reach, has said that children should be able to see specialist and senior doctors quickly. We can make this happen if doctors are not spread across inpatient wards in two separate hospitals.
3. Our staff currently based in Ward 15 would be able to work with specialist doctors and nursing staff based at the Royal Hospital for Children, and see children with rare conditions they might not have the opportunity to care for in a smaller ward based in an adult hospital.
4. We are working to make sure children only stay in hospital when they really need to. This means we are treating more children at home or in their communities, and children are staying in hospital less.

4. **Is this proposal about saving money?**

We are proposing to move Ward 15 because we believe we can provide even better care for children and young people at the Royal Hospital for Children. The new Royal Hospital for Children provides an opportunity to ensure all children who require hospital admission receive care in a hospital entirely dedicated to children and young people.

Ward 15 in the Royal Alexandra Hospital has an average occupancy of 50% and on an average day this means half of the beds are empty. If the ward moved to the Royal Hospital for Children, staff could help more children in need of their care.

The proposal is driven by clinical concerns but the Board is also obliged to deliver efficiency savings each year to remain within the funds allocated by Government and to ensure that services deliver value for money. We have carried out a financial appraisal of the proposal. The transfer of the ward would release around £840,000.

Part of the money released will enable us to invest in services at the Royal Alexandra Hospital; for example, we will be paying for two new consultants to treat young babies in the Royal Alexandra Hospital's neonatal intensive care unit.

5. **Does the Royal Hospital for Children have capacity to absorb Ward 15?**

Yes.

The new Royal Hospital for Children has been caring for children and young people for over a year. Our day to day experience of managing the wards during this time has shown us that there is enough capacity at the Royal Hospital for Children to treat children who are currently seen in Ward 15.

Ward 15 currently has a total of 26 beds. This includes 4 day case beds (which are used for children who need surgery, but don't need to stay overnight) and an area with 6 beds for short stay medical assessment. Most of the time, this number of beds is more than we need for the number of children who are admitted. On an average day, almost half of the beds are not needed.

The Royal Hospital for Children has the physical capacity of 245 beds. This includes 25 day case beds (used for things like planned tests) and a ward with 22 beds for children who need surgery, but don't need to stay overnight.

It is normal for the number of children using these beds to vary through the day, from day to day. During our busy periods, our current experience shows that around 70% to 80% of our beds are being used which provides the flexibility to accommodate more children as necessary. This flexibility is more than sufficient to accommodate the number of patients we currently see in Ward 15.

We fully expect to be able to care for all children across Greater Glasgow and Clyde who need to be admitted to the Royal Hospital for Children, should the proposal go ahead.

6. Does it take longer to reach the Royal Hospital for Children?

Some parents and children, mainly those who stay very close to the Royal Alexandra Hospital, will have to travel further to access the Royal Hospital for Children.

As the Royal Alexandra Hospital serves patients from a large geographic area, it is anticipated that on average, parents from this wider area would see an increase of less than 5 minutes in travel time to the Royal Hospital for Children.

A transport needs assessment will be made available on our website at www.nhsggc.org.uk/inform-engage-consult/clyde-paediatric

7. Will any staff lose their job?

No

If the proposal goes ahead the majority of staff will be transferred to the new hospital. A small number of staff will remain at the RAH to deliver care to the outpatient patients.

8. Will Ward 15 definitely be moved?

No.

We will report what we have heard during the public consultation to the Board of NHS Greater Glasgow and Clyde in February 2017.

In February 2017, the Board will consider the clinical benefits, and all of the issues raised from the engagement and consultation process, and reach a decision which will be submitted to the Scottish Government for their consideration.