South Yorkshire, Bassetlaw and North Derbyshire Hospital Service Review: Final report from work looking at whether we need to change our services

This easy read report tells you about South Yorkshire, Bassetlaw and North Derbyshire’s work looking at whether Children’s services, Maternity services and Gastroenterology and Endoscopy services needed to change.
Introduction:

Over the last two years South Yorkshire and Bassetlaw (SYB) health and care partners have been looking at how they can support hospital services across South Yorkshire, Bassetlaw, Mid Yorkshire and North Derbyshire.

In 2017 South Yorkshire, Bassetlaw, Mid Yorkshire and North Derbyshire’s health and care groups worked together to look at how they could work better in the future.

This was called the Hospital Services Review (HSR). In May 2018 they wrote a report with lots of ideas about how this could work in the future.

The people who pay for hospital services across South Yorkshire, Bassetlaw, Mid Yorkshire and North Derbyshire looked at these ideas and agreed to work on 3 areas.

1. **Hosted Networks**: creating ways that organisations can work together better.
2. Transformation: making sure we have the right staff to support all of our services across South Yorkshire, Bassetlaw, Mid Yorkshire and North Derbyshire.

3. Changing the clinical model: Looking at how we run paediatrics (children’s medicine), maternity services (services for pregnant women) and gastroenterology (medicine for your stomach and digestive system).

Why does paediatrics (children's medicine) need to change?

Quality – Making sure that children’s medicine works well:

There are 5 hospital trusts across South Yorkshire, Bassetlaw, Mid Yorkshire and North Derbyshire (not including mental health hospitals).

Each hospital has to work to a set of goals to show they are working well. The goals are called the Facing the Future Standards.
Most of the hospitals are doing well in 7 areas – one hospital is doing well in 10 areas.

**Workforce – Making sure children’s medicine has enough staff with the right skills:**

At the minute the hospitals do not have the right number of staff or doctors. People have told us that doctors and nurses often work more shifts to make sure that services are safe and run well.

Some of our hospitals have found it hard to meet the standards set out by the Care Quality Commission (CQC) for children’s medicine.

The Care Quality Commission (CQC) checks services like GPs, hospitals and care homes to make sure they are giving good health and social care to people.

Each A&E department should have two nurses for children’s medicine that are available 24 hours a day 7 days a week.
When the CQC looked at our hospitals they said that 2 of our hospitals need to do better to make sure there are children’s nurses available all of the time.

**Why do maternity services need to change?**

**Quality – Making sure that maternity services works well:**

When the CQC inspected our hospitals, they found that three hospitals need to make changes to the services they offer.

The Care Quality Commission (CQC) checks services like GPs, hospitals and care homes to make sure they are giving good health and social care to people.

**Workforce – Making sure maternity services have enough staff with the right skills:**

All of our hospitals have the right number of doctors and midwives to support pregnant women.
But we are worried that a lot of our midwives are older and will retire soon.

Interdependencies – How different parts of our hospitals work together on children’s medicine:

Maternity services work with other departments like neonatology. Neonatal services support babies who are born early or who need more support and anaesthetics.

One of our hospitals is finding it hard to make sure there are enough staff on duty for both of these areas.

Why do Gastroenterology and Endoscopy services need to change?

Gastroenterology is the type of medicine which looks at your stomach and digestion.

Endoscopy is one of the types of services which doctors uses to find out what is going on inside your body. Usually an endoscopy is when a tiny camera is introduced into your body, for example down your throat, so that doctors can look at what is happening inside your stomach.
**Quality – Making sure that Gastroenterology and Endoscopy services works well:**

When the CQC inspected our hospitals, they found that only one hospital needed to make changes to the way it runs Gastroenterology and Endoscopy services.

The Care Quality Commission (CQC) checks services like GPs, hospitals and care homes to make sure they are giving good health and social care to people.

**Workforce – Making sure Gastroenterology and Endoscopy services have enough staff with the right skills:**

There are not enough key staff in gastroenterology, such as surgeons who specialise in operations on your stomach and digestive system.

Hospitals also need specialist staff who are trained to carry out endoscopies. Endoscopy services do not have enough staff – because of this some of our hospitals are not meeting their waiting times for cancer patients.
What were our ideas for making these services better?

Our ideas for making Paediatrics (children’s medicine) better:

We looked at what would happen if we did nothing and if we changed services and at what would happen if we changed services

For paediatrics (children’s medicine) we looked at whether changing one or two of the Inpatient Paediatric Units (IPs) into Short Stay Paediatric Assessment Units (SSPAUs) would help.

This would mean that the sickest or most ill children are not treated in all hospitals, but in some specialist hospitals which are specially set up to provide the best care for children.

We have also looked at using hosted networks to improve services. A hosted network is where services work together across our hospitals. This would mean that the type of services provided stay the same, but hospitals work together to improve health and care for people.
Our ideas for making Maternity services better:

We have looked at how maternity services could work in the future. We looked at whether all our hospitals should offer all services, or whether we should have some hospitals that just treat women and babies who are more at risk of getting ill.

To support this, we looked at whether neonatology services at some of our hospitals could be run by specially trained nurses.

We have also looked at using hosted networks to improve services. A hosted network is where services work together across our hospitals. This would mean that the type of services provided stay the same, but hospitals work together to improve health and care for everyone.

Our ideas for making Gastroenterology and Endoscopy services better

We have looked at different ways in which we can change the way gastroenterology and endoscopy services can run.
We looked at how hospitals can work together to make sure that very sick patients get care around the clock. Not all hospitals have specialist staff available overnight.

We looked at using the hosted network to find a way for all patients to receive lifesaving treatment any time of the day or night.

**What happens next?**

On the 18th March and the 1st April 2019 all of the managers and commissioners (people who buy services) from across hospital Trusts met to talk about these ideas. Mid Yorkshire have decided to come up with their own plans.

- Everyone agreed that all hospitals should work together. This should happen quickly to make sure that services link together and get better. This will happen through Hosted Networks.
- There should be a clear plan about staff and how each area can work together to make sure that each hospital has enough staff with the right skills to support services. There needs to be a clear plan to check that this is working and that any issues are dealt with.
The group agreed that most services should stay as they are for now; this is because the services are safe and because members of the public had been worried about what would happen if services changed. But the managers and commissioners agreed that if there are risks to patient safety in the future then services would need to change.

The only place this will not happen is at Bassetlaw Hospital. At the moment, Bassetlaw has a Short Stay Paediatric Assessment Unit. Children who are very sick, or become ill overnight, are taken to Doncaster Hospital where there are more specialised services to look after children.

Services at Bassetlaw Hospital were changed in 2017, when there were not enough staff and services were becoming unsafe. The Hospital Services Review looked at whether the services could be made safe and the overnight services reopened if hospitals work together.

The commissioners and providers thought it was unlikely that joint working would make children’s services good enough to go back to a full service at Bassetlaw Hospital.
The review found that working together would not fix the problem at Bassetlaw.

Bassetlaw health services need to work together to come up with a plan.

The hospitals are setting up Hosted Networks so that they can work together better.

If Bassetlaw commissioners think services might need to change at Bassetlaw, they will consult with the public.

If you want to know more about our work you can visit: helloworkingtogether@nhs.net