

REPORT TO: Health and Wellbeing Board

Date of Meeting: 27th January 2015

Report of: John Wilbraham, Chief Executive, East Cheshire NHS Trust

Subject/Title: Greater Manchester Healthier Together Consultation

1 Report Summary

- 1.1 The report has been produced in response to a motion proposed by Councillor Brendan Murphy and seconded by Councillor Lloyd Roberts:

“In the light of plans for the development of sub-regional Specialist Hospitals and the consequent downgrading of other Hospitals in the Greater Manchester conurbation, the Council requests the Health and Wellbeing Board to consider the impact that such developments *could* have on the future of Macclesfield General Hospital and, in particular, to ensure that the wellbeing of North East Cheshire residents will not be adversely affected in the event of Stepping Hill Hospital being downgraded as result the changes being currently considered”

2 Purpose of the Report

- 2.1 The Board is asked to note the contents of this report and the work being undertaken by East Cheshire NHS Trust (ECT) with its partners in primary and acute care.
- 2.2 The Board is asked to note the Healthier Together consultation period has ended but no decisions have been made and none are likely until the summer.
- 2.3 The Board is asked to note that the Caring Together Board, of which Cheshire East Council is a member, will have more influence over service provision locally than the Healthier Together consultation as Healthier Together is looking only at 3 service areas.
- 2.4 The Board is asked to note that East Cheshire Trust has close working relationships with Stockport Foundation Trust and University Hospital of South Manchester (UHSM) before the Healthier Together consultation commenced and will continue to work together where necessary for the continued provision of safe and high quality care for patients. This relationship is known as the Southern Sector.

2.5 The Board is asked to note that NHS Eastern Cheshire CCG already commissions services from sub-regional specialist hospitals for the population of Eastern Cheshire, including Central Manchester Foundation Trust, Salford Royal Foundation Trust and University hospital of West Midlands in-line with national clinical standards and to ensure access to specialist services 24/7. Services are provided at these specialist centres (eg Neurology and Spinal surgery at Salford Royal) or by the specialist centres at the Macclesfield site in partnership with ECT.

3 Background To Healthier Together

3.1 Greater Manchester Clinical Commissioning Groups have jointly undertaken a consultation about future service delivery given increasing clinical standards and the challenging financial position. This consultation was entitled Healthier Together and was undertaken during the period July 2014 to September 2014.

3.2 East Cheshire NHS Trust and NHS Eastern Cheshire are not formally part of the programme of work, however given the clinical flows of residents into Greater Manchester it is clear that the work could impact on future service provision for patients and as such both organisations have kept close to the work.

3.3 The consultation posed 5 questions to the public and the majority of these questions are in line with questions being posed through the NHS Eastern Cheshire Caring Together programme in terms of changes in primary care, more care out of hospital and meeting clinical standards.

3.4 The issue raised in the motion refers to possible consequences to Cheshire East residents and East Cheshire Trust should there be changes to services at Stepping Hill. In this regard the 5th question is the relevant one for further discussion. It should however be noted that there are possible changes to UHSM where local residents also currently access services.

3.5 The 5 questions posed in the Healthier Together consultation were:

1. Why Health in Greater Manchester needs to Change

We believe health and care services should be provided to a reliable, high standard every time for you and your family. This requires a change to the way services are provided.

Do you agree or disagree that change is needed.

2. How Primary Care is Changing

Our key aims for primary care include:

- Same day access to primary care services, supported by diagnostics test, seven days a week
- People with long term, complex or multiple conditions cared for in the community where possible
- Community based care focusing on joining up care with social care and hospitals and sharing records
- Residents being able to see how well GP practices perform against local and national measures

Do you agree or disagree that change is needed.

3. How we are joining up Care

Do you agree or disagree with our proposals for a joined up health and care system, delivered in the community where clinically appropriate?

4. How we are joining up Care

Do you agree or disagree that children and young people should be cared for closer to home where appropriate

5. How Hospital services could change

We have already changed the way we treat some specialist conditions such as stroke and major trauma and there is evidence that this has saved lives and improved patient care. We want to do more of this as our senior doctors believe that providing specialist care at a smaller number of hospitals in Greater Manchester will raise standards and save more lives.

Do you agree or disagree that:

- Hospital services need to change to meet the quality and safety standards and provide the best care for you and your family
- Providing specialist care at a smaller number of hospitals will raise standards of care to achieve the quality and safety standards
- Doctors and nurses should work in teams that provide care across specialist and local general hospitals as part of a single service

- 3.6 There could be either 4 or 5 specialist hospitals and members of the public were asked to rank their top three from:

Manchester Royal Infirmary, Salford Royal Hospital, Royal Oldham Hospital and Royal Bolton hospital

Manchester Royal Infirmary, Salford Royal Hospital, Royal Oldham Hospital and Royal Albert Edward Infirmary (Wigan)

Manchester Royal Infirmary, Salford Royal Hospital, Royal Oldham Hospital and Wythenshawe Hospital

Manchester Royal Infirmary, Salford Royal Hospital, Royal Oldham Hospital and Stepping Hill Hospital

Manchester Royal Infirmary, Salford Royal Hospital, Royal Oldham Hospital, Royal Albert Edward Infirmary (Wigan) and Stepping Hill hospital

Manchester Royal Infirmary, Salford Royal Hospital, Royal Oldham Hospital, Royal Albert Edward Infirmary (Wigan) and Wythenshawe Hospital

Manchester Royal Infirmary, Salford Royal Hospital, Royal Oldham Hospital, Royal Bolton hospital and Wythenshawe hospital

Manchester Royal Infirmary, Salford Royal Hospital, Royal Oldham Hospital, Royal Bolton hospital and Stepping Hill hospital

- 3.7 Of the 8 options therefore:

Stockport is included as a specialist hospital in 3,

UHSM is a specialist hospital in 3, and

2 options have no specialist hospital in the South of Greater Manchester

4.0 **Impact on Residents of North East Cheshire**

- 4.1 The impact of the Healthier Together programme on local residents is clearly dependent upon any decision made through the healthier together process.

- 4.2 There are 2 options, which if implemented, would result in their being no “specialist Trusts” in the south sector of Manchester and would therefore have the biggest impact on East Cheshire residents as they would need to travel further for some specialised services (most likely to Central Manchester FT). It is important to understand that neither option would however affect the main general hospital services provided by Stepping Hill or Wythenshawe for which eastern Cheshire residents predominantly access (including A&E, Out-patients, etc).

- 4.3 ECT and NHS Eastern Cheshire have highlighted the issue of travel times in their response to the consultation, however both organisations have confirmed their support for the Healthier Together intentions with respect to the raising of clinical standards and improving health outcomes.
- 4.4 The other options would mean residents travelling either to Wythenshawe or Stepping Hill. These Trusts currently serve residents of Eastern Cheshire.
- 4.5 NHS Eastern Cheshire will be ensuring that the Caring Together programme of work oversees any recommendations from the Healthier Together programme and ensure that the best interests of the residents are served.

5.0 **Impact on East Cheshire Trust**

- 5.1 ECT wishes to provide the best care in the right place and it oversees service delivery in 4 tiers. ECT will aim to firstly:
- Provide local services independently where it can meet the required clinical standards and do so within available finance.
 - Where this is not possible, it will provide local services in partnership with other providers (this currently happens in the ENT service with support from UHSMT, cancer services with The Christie).
 - Where this second option is not possible it will work with commissioners to allow other providers to operate locally for the benefit of residents (This currently happens with the provision of Renal Dialysis provided by a private sector organisation through Central Manchester Foundation Trust)
 - Only where all the above options are not possible would we expect patients to travel for their care (for example major trauma services)
- 5.2 The Trust is not a formal member of the Healthier Together consultation nor is its major commissioner NHS Eastern Cheshire. In this regard the consultation has no formal mandate to impose solutions upon the Trust.
- 5.3 The Trust does however wish to continue to provide safe, high quality services and recognises that changes may be required for this position to be sustained given increasing clinical and other standards required by bodies such as commissioners, royal colleges and indeed the public themselves.

5.4 NHS Eastern Cheshire will set these clinical standards and ECT will need to deliver against them.

5.5 East Cheshire Trust uses its £180m of financial resources to provide a wide range of acute and community services whereas the Healthier Together consultation is looking at only 3 areas of hospital work, namely:

Accident and Emergency
Acute Medicine
General Surgery

5.6 It is important to recognise that periodically there have been concerns about sustainability of the A&E department at ECT and it should reassure Board members that the Healthier Together documentation states that every local general hospital will have:

- *an A&E department and only the sickest patients will go to a specialist hospital*
- *an acute medical unit caring for adults who need to receive care from hospital teams*
- *general surgery operations for adults (high risk surgery will be provided at specialist hospitals)*

5.7 In terms of high risk surgery very small numbers of this activity currently take place at East Cheshire Trust reinforcing the point that the services being reviewed under the Healthier Together consultation are only a small proportion of the organisations overall service portfolio.

5.8 ECT, UHSM, Stockport and Tameside have been working together for a number of years identifying how they can best work together to support each other in the delivery of high quality care.

5.9 The Trusts are working together to seek to identify how specialist services can be delivered in the South of Manchester/East Cheshire and it is important that this work continues such that any outcome of the Healthier Together work can be delivered collaboratively across the south sector such that the most local provision of services can be maintained.

6 Access to Information

6.1 The Healthier Together programme has a website:

www.healthiertogethergm.nhs.uk

6.2 The background papers relating to this report can be inspected by contacting the report writer:

Name: John Wilbraham
Designation: Chief Executive, East Cheshire NHS Trust
Tel No: 01625 661500
Email: john.wilbraham@nhs.net