

HEALTH AND WELLBEING BOARD

Date 17 January 2019



Report sponsor: Gavin Boyle, Chief Executive
of University Hospitals of Derby and Burton
NHS Foundation Trust

Report author: Emily Dunn, Communications
Manager, University Hospitals of Derby and
Burton NHS Foundation Trust

ITEM 06

An update on our journey so far – University Hospitals of Derby and Burton

Purpose

- 1.1 The Health and Wellbeing Board (HWB) has previously received updates on the collaboration between Burton Hospitals NHS Foundation Trust and Derby Teaching Hospitals NHS Foundation Trust.
- 1.2 This paper provides an update from the new Trust, University Hospitals of Derby and Burton.

Recommendation

- 2.1 To note the continued commitment and progress being made towards integrating services to benefit patients.

Reason

- 3.1 To ensure the Health and Wellbeing Board remains fully briefed and involved in the ongoing development of University Hospitals of Derby and Burton.

Supporting information

- 4.1 On 1 July 2018 the Trust was formed bringing together the expertise of 12,500 staff across five sites. As a merged Trust, UHDB has 52 operating theatres, 1614 inpatient beds and on average, 1000 patients are seen with in the emergency departments every day.

4.2 Our merger principles were to:

- Sustain clinical services at Queen's Hospital Burton
- Develop tertiary (specialist) services at Royal Derby Hospital
- Make the best use of community hospitals in Lichfield, Tamworth and Derby

4.3 By working with our clinical teams, we identified six priority areas where bringing our people, skills and best practice together would benefit patients. Below is an update on each clinical deep dive:

4.4 **Cardiology**

Diagnostic work from the Royal Derby Hospital is being transferred to Queen's Hospital to reduce wait times for patients.

Patients from Burton requiring Percutaneous Coronary Intervention will be repatriated from University Hospitals of Leicester (UHL) and University Hospitals of North Midlands (UHNM) to UHDB. This will ensure patients are being treated closer to home.

We are recruiting additional cardiologists to work across both main sites.

4.5 **Trauma and Orthopaedic**

We are introducing an acute knee clinic at Queen's Hospital Burton. Patients will be referred directly into the clinic which will provide access to specialist care quicker. The initial plan will include outpatient clinics and operating sessions.

We are exploring the use of the Treatment Centre at Burton to support demand on day case surgery at Royal Derby.

We've introduced spinal clinics at community hospitals.

4.6 **Stroke**

The stroke business case has been shared with commissioners in East Staffordshire to articulate the next steps in progressing towards public consultation.

During the hyper acute phase of stroke, patients will to be seen at Royal Derby for their initial treatment and then repatriated closer to home.

General medical consultants now have access to a Specialist Stoke Registrar out of hours.

4.7 **Renal**

We will be using UHDB consultants to manage dialysis patients at Lichfield. This service is currently outsourced to University Hospital Birmingham.

4.8 Urology (Cancer)

Derby Consultants have been undertaking outpatient sessions in Burton to provide specialist cancer input.

Burton prostate patients are no longer referred to Birmingham; this has ceased, and all patients are now referred to Derby.

Cancer pathways being modelled with Radiology and Pathology input to ensure best practice is available on all sites – including standardisation of biopsy / MR order.

4.9 Radiology

A recent recruitment exercise in India has potentially secured 10 Radiologists to work across the sites – this is instrumental in stabilising the Burton service.

Merger of Radiology Information System (RIS) and Picture Archiving and Communications System (PACS) due to go live in February on an improved platform – this is a key enabler to many patient benefits. A unified system will enable clinicians to see images and reports regardless of site; improving efficiency and safety.

To complement the above patient benefits we have bought together support teams including Finance, Human Resources and Patient Experience. Our aim is still to streamline our services, reduce obvious duplication and create a world-class suite of support services for our outstanding clinical teams.

4.10 We have identified a further six clinical deep dive areas and lead clinicians are working together to explore opportunities for integration in Ophthalmology, Dermatology, Gynaecology, Vascular Surgery, Critical Care and Head and Neck.

4.11 We've made several key achievements during the first six months as UHDB. The Big Conversation was launched, using online technology to engage our 12,500 staff in shaping our vision and purpose. Our Trust board have approved a maternity business case which will see additional investment, and therefore more midwives, maternity support workers, obstetricians and sonographers recruited over the next three years. We've also increased our capacity over winter by building two additional 28 bed modular wards, one at Burton and one at Derby. We have been allocated £21.88m to build a healthcare village on the Outwoods site at Queen's Hospital. The community space will have a nursery, GP surgery and residential accommodation.

Public/stakeholder engagement

5.1 Not applicable.

Other options

6.1 Not applicable.

Financial and value for money issues

7.1 Not applicable.

Legal implications

8.1 Not applicable.

Other significant implications

9.1 Not applicable.

This report has been approved by the following people:

Role	Name	Date of sign-off
Legal		
Finance		
Service Director(s)		
Report sponsor	Gavin Boyle, Chief Executive of University Hospitals of Derby and Burton NHS Foundation Trust	
Other(s)		