

Proposed Expansion of Elective Daycase Activity at Newark Hospital Sherwood Forest Hospitals NHS Foundation Trust

Briefing for Nottinghamshire Health Scrutiny Committee

January 2023

1. Introduction

This purpose of this document is to inform the Health Scrutiny Committee of an opportunity for Sherwood Forest Hospitals NHS Foundation Trust (SFHT) to utilise capital investment to expand elective daycase activity at the Newark Hospital site through the construction of a modular theatre and recovery area. Expanding elective capacity will support delivery of significant reductions in elective backlogs in specialities such as Elective Orthopaedics, Urology and Ophthalmology. This expansion of capacity will help to reduce waiting times, it may improve the experience for our patients and help manage future demand.

Developing the Newark Hospital site provides additional services locally for Newark residents and helps to address health inequalities for these patients. In addition, this proposal secures additional elective capacity away from the main hospital site which avoids the potential impact of cancellation due to urgent care demand. This means that other patients facing long waiting times may also be offered care at Newark.

In order to progress in 2023, SFHT have secured access to £5.6m of NHS capital funds to provide:

- An additional modular Laminar Flow Theatre (to treat orthopaedic cases) and a recovery area
- Two 'Minor Operations' suites to increase capacity
- Capacity for more procedures in the outpatient treatment area

To take full advantage of this opportunity NHS Nottingham and Nottinghamshire Integrated Care Board (ICB) is seeking support from the HSC to proceed with the plans, commence the estate works and mobilise the services in time for the first quarter of 2023/4; this would require the Committee to support the NHS to enact the plan including the instigation of a public and patient information campaign starting in early January 2023.

This is aligned to our Newark Strategy to maximise the potential of Newark Hospital for our local Nottinghamshire population and to achieve our vision that Newark Hospital is a valued and vibrant community asset. The plan reflects the ICS ambition to provide elective care on 'cold sites' to reduce the impact of non-elective activity on elective beds in line with national guidance. This is fully aligned to system plans to develop additional elective activity at City Hospital as part of the Nottingham University Hospital NHS Trust (NUH) long-term strategy 'Tomorrow's NUH'.

2. National context

Backlogs of patients waiting for elective or non-urgent care have grown over the last two years as all NHS Providers were initially required to cease elective activity as a national response to the Covid-19 Pandemic. A challenging winter with increased urgent care demand creates additional pressures for acute providers. Bed occupancy and availability is often impacted by Covid-19 demand, high numbers of medically safe (MSFT) patients waiting for discharge and a rise in patients with laboratory-confirmed influenza.

In order to address long waiting lists, systems have developed 'Elective Recovery' plans that aim to deliver activity at 110% of pre-covid levels in 2022/23 increasing to 130% by 2024/25. National planning guidance has a number of key priorities for transformation to inform these plans including the requirement to fully utilise the recommendations of the Getting It Right First Time (GIRFT) programme to increase elective capacity making best use of resources.

GIRFT is a nationally recognised service transformation programme to support acute trusts to improve their productivity (<https://gettingitrightfirsttime.co.uk/>). This includes maximising day-case opportunities and the movement of clinically appropriate procedures into minor operations suites. A national programme of specialty specific GIRFT reviews including Orthopaedics highlighted that many providers are identifying the increased potential for orthopaedic surgery to be safely and effectively undertaken as day case procedures including orthopaedic procedures such as knee replacements and even some total hip replacements.

A local review by the national GIRFT team was undertaken earlier in the year and clinical leads have committed to developing plans to:

- Ring fence elective capacity on sites that are away from the main A&E (cold sites)
- Default to daycase for elective orthopaedic procedures
- Maximise productivity through better use of theatre and ward areas
- Focus on national recommendations for High Volume Low Complexity procedures

The national High Volume Low Complexity (HVLC) programme includes; Ophthalmology, Urology, Ear Nose and Throat and Elective Orthopaedics; all of which are undertaken at Newark Hospital.

3. Local Context

Seasonal pressures such as surges in non-elective demand combined with key constraints such as workforce availability due to staff vacancies impact on the ability of our acute providers to maintain levels of elective activity. The Nottingham and Nottinghamshire Integrated Care System (ICS) has developed an 'Elective Recovery Plan' to reduce waiting times through increasing activity and productivity. Two important facets of this plan are increasing the level of daycase procedures and focusing on HVLC cases. The system had already been successful in attracting national capital funding of £35m to be invested in an Elective Hub on the City Campus at NUH. Further capital funding was then offered to support SFHT development. An outline business case has been supported by NHS England with confirmation that SFHT will receive £5.6m to be invested in Newark Hospital in Q.4 2022/23.

The investment will support the provision of new theatre and minor operation sessions, creating new additional elective capacity which will reduce waiting lists and therefore contribute to overall elective recovery. With separation of elective and non-elective capacity, Newark Hospital can operate as a predominantly 'cold site' able to maintain year-round elective capacity.

Development of facilities and improved infrastructure at Newark Hospital will provide capacity to deliver an additional 2,634 elective cases in 2023/24. In addition, it will also enable movement of clinically appropriate procedures to be undertaken as minor operations outside out of the main in

line with national guidance as part of the GIRFT programme. Activity will be predominantly high volume low complexity cases, providing timely access to consistently high quality elective care.

Key clinically led plans include:

- **One additional modular Laminar Flow Theatre and recovery area to provide Trauma & Orthopaedic surgical activity.** This will deliver approximately 840 additional cases per year as a minimum. Orthopaedics makes up 41% of patients waiting for an operation at SFH and 48% of orthopaedic patients are waiting over 40 weeks for their procedure. The theatre capacity could be further expanded in line with GIRFT recommendations to operate 10 hours per day, 6 days per week to support backlog reduction.
- **Implementation of an Air Handling Unit within Minor Operations Suite on Minster Ward with associated Ophthalmology equipment to repatriate Cataracts from theatre into this suite.** This will provide theatre space for other specialties to utilise main theatre space and support the repatriation of work from NUH to support backlog reduction in ENT and Urology. This would deliver approximately 542 cases per year.
- **Implementation of lead lining within the Minor Operations suite on Minster Ward to enable X-Ray guided injections to be delivered.** This will deliver approximately 202 additional cases per year.
- **Additional Minor Operations procedures – In the Outpatient Treatment area.** Options under consideration subject to clinical review include flexible cystoscopy, template biopsy and injections. This will deliver approximately 756 additional cases per year.

4. Impact on Patients

One of the key stipulations of the NHS England capital funding (also known as the Targeted Investment Fund) is a reduction in Health Inequalities. Nottingham and Nottinghamshire ICS Health Inequalities Strategy 2020-2024 supports this by seeking to restore health and care services inclusively, so they can be accessed by those in greatest need paying particular focus to those from the most deprived (20%) neighbourhoods. The 2021 National Census identified the South West of Newark as having one of the highest rates of deprivation in Nottinghamshire across the four categories of education, employment, health and housing.

The Midlands Decision Support Network (comprising of 12 integrated intelligence functions across the Midlands region including Nottingham and Nottinghamshire System Analytical Unit) commissioned the 'Strategies to Reduce Inequalities in Access to Planned Hospital Procedures' Report which highlights the need for the equitable distribution of service. This is intended to ensure that a patient with a given level of need in one subgroup has the same chance of accessing a service as their counterparts with a similar level of need in other subgroups. Expanding elective activity at Newark Hospital also provides closer geographical access to elective services for the wider Newark population. This reduces the need to travel which can be a barrier to treatment for those in the most deprived groups. With excellent transport links around Newark, this will mean that many people who rely on local transport and services for much of their NHS care, can easily receive care from Newark Hospital.

These additional services will be offered for Nottinghamshire patients who may have previously had to travel to Kings Mill Hospital for treatment. The expansion of elective activity will enable repatriation of patients and address health inequalities in this area. Data from Nottingham and Nottinghamshire ICS System Analytical Intelligence Portal shows that system wide the least deprived quintile is statistically significantly over-represented on waiting lists and inpatient admission for Elective Orthopaedics, Breast Surgery and Urology and the most deprived quintile

significantly under-represented as inpatients for Breast Surgery and Urology services. We anticipate that this health inequality is representative of waits for treatment at SFHT. This proposal for additional capacity helps to close this gap particularly in relation to Urology and Elective Orthopaedics.

The proposal does not mean the removal of services from King's Mill Hospital so there is no reduction in patient choice of where they access their care.

An equality and impact assessment (EQIA) has been undertaken. The impact of this was assessed by the EQIA panel led by the ICB Quality team on 22nd December. This was considered in full in line with our commissioning process and a small number of recommendations for action have been made to strengthen plans. These recommendations have been accepted by SFHT and the EQIA Panel will seek final assurance that actions are sufficiently robust on 5th January 2023.

Information will be provided to patients (from early January) to ensure timely access to care in the most appropriate setting.

5. Impact on Sherwood Forest Hospital staff

The addition of a modular theatre and upgrading of the minor operations unit will provide new capacity on the Newark Hospital site which will require additional staff. The Trust has developed a recruitment plan to support current staffing vacancies as well as additional staffing requirements for this additional activity.

A workforce task and finish group is in place with a remit to work through the requirements based on the procedures that will be delivered within the different areas outlined in the proposal. Training requirements will be confirmed following recruitment with further detailed operational plans.

6. Conclusions and recommendations

These proposals are fully aligned to the national direction to increase the level of procedures undertaken as day case and to move more cases to minor operations units where clinically appropriate. It is also in line with national and local plans to offer elective care away from the main hospital site to reduce the risk of cancellations due to increased non-elective demand. These plans will increase overall elective activity at Newark Hospital supporting the reduction of waiting times with significant benefits to our patients and public.

It is recommended that the Health Scrutiny Committee:

- Approve the proposed plans described above.
- Endorse the start of a public and patient information campaign from early January 2023.