

Fact finding visit to the Northumbria Specialist Emergency Care Hospital

Mr. M Pritchard MP,
Cllr. A Eade
Cllr. N Dugmore

Visit held on 16th November
2017

Introduction:

Mr Mark Pritchard MP together with Councillor Andrew Eade and Councillor Nigel Dugmore members of Telford & Wrekin Council carried out a fact finding visit to the Northumbria Specialist Emergency Care Hospital at Cramlington in Northumbria.

The visit took place on Thursday 16th November 2017. The group was accompanied by Mr David Sandabch in a professional advisory capacity.

During the visit the group was briefed on the role played by the Northumbria Specialist Emergency Care Hospital (NSECH) and also on the wider range of services provided by the Northumbria Healthcare NHS Foundation Trust.¹

The group was briefed by Mr David Evans.

Mr Evans has recently returned to the role of medical director for the trust having spent two years as the trust's chief executive while the substantive CEO Mr J Mackey completed a national secondment with the Department of Health.

Prior to being appointed as the medical director for the Trust Mr Evans was a practicing consultant obstetrician and was clinical director of the Obstetrics and Gynaecology service.

Mr Evans has been the trusts Caldicott Guardian and lead for risk management; in addition Mr Evans is an assessor for the National Clinical Assessment Authority.

We would like to thank Mr Evans most sincerely for his time and open responses to our many questions. Mr Evans is due to retire from the NHS at the end of November and our group wish him a long and happy retirement.

The first thing Mr Evans said to us when we met for our briefing was that Safety and Quality of service are the key drivers for everything the Trust does.

We note that the Trust has been rated as 'outstanding' by independent health and social care regulator the Care Quality Commission.²

We also note that this CQC rating has never been awarded to any of the provider Trusts who serve the population of Shropshire.

¹ <https://www.northumbria.nhs.uk/our-services>

² <http://www.cqc.org.uk/provider/RTF>

About the Northumbria Healthcare NHS Foundation Trust.

The Trust is one of the country's top performing NHS trusts. It was rated as outstanding by the Care Quality Commission in May 2016.

The trust provides:

- A) Health services in North Tyneside and
- B) Health and social care services in Northumberland.

The Trust looks after the wellbeing of a population of around half a million people.

Services are provided from:

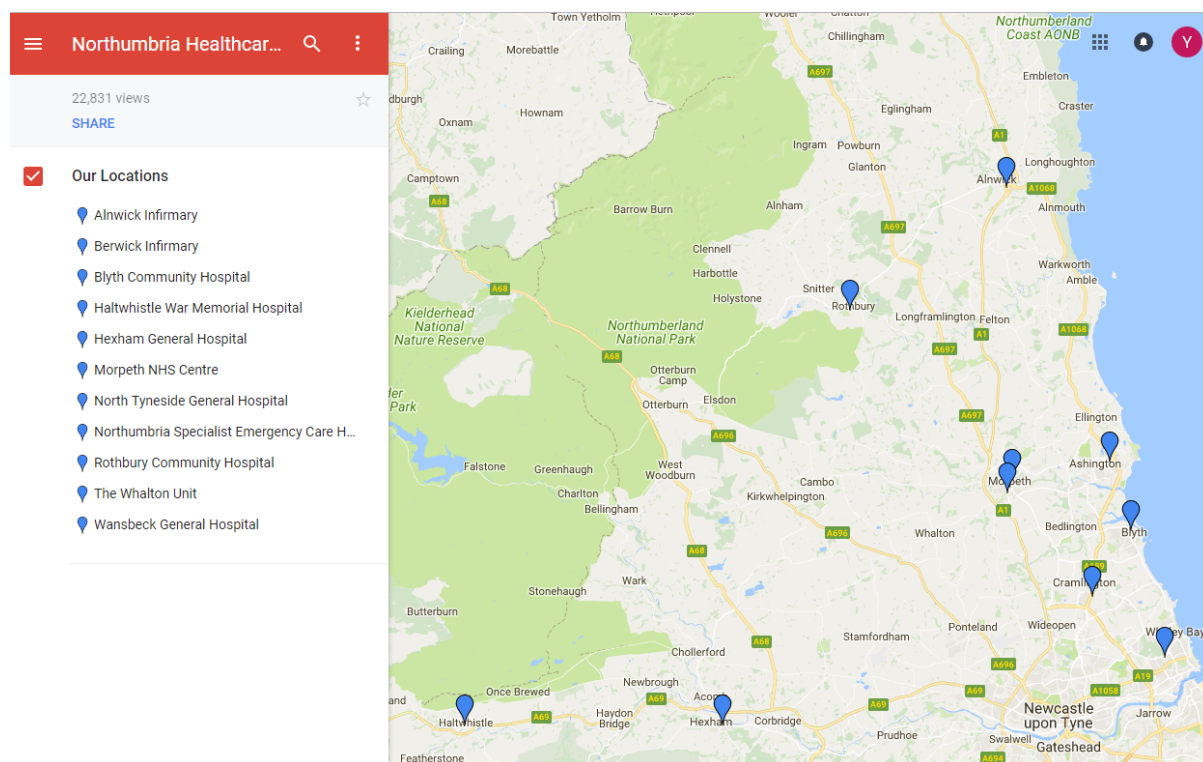
- 1) A new specialist emergency care hospital in Cramlington - The Northumbria
- 2) Three general hospitals - Hexham, North Tyneside and Wansbeck
- 3) Community hospitals at Alnwick, Berwick, Blyth and Rothbury
- 4) An integrated health and social care facility at Haltwhistle
- 5) An elderly care unit, The Whalton Unit, in Morpeth
- 6) Outpatient and diagnostic centres at Sir GB Hunter in Wallsend and Morpeth
- 7) NHS Centre sexual health centres in North Tyneside and Morpeth.

The Trust also cares for people in their homes, or as close to their homes as possible, and provide services from facilities in local communities, such as health centres.

The Trust manage adult social care services on behalf of Northumberland County Council, helping to ensure people move between hospital, community health and social care services easily and with continuity of care. The Trust is committed to giving people greater choice and control over their care and helping people to live independently at home and to avoid hospital admission where appropriate.³

³ https://www.northumbria.nhs.uk/sites/default/files/images/corporate_prospectus-nov-15.pdf

Below is a map of the locations the Trust provides services from:⁴



We would like to point out the following quotes from the Trust's annual report⁵:

- Northumbria continues to be one of the best performing trusts in the whole country.
- We are one of a handful of trusts to remain in financial balance and report a surplus for 2016/17 - this is testament to the continued strong and stable direction from the very top of the organisation.
- Our vanguard work to deliver a 'primary and acute care system' in Northumberland has gathered pace and was singled out nationally by NHS England for its major successes in reducing emergency admissions to hospital, improving access to primary care, and proactively planning the care and support for patients with very complex needs.
- We have also made great strides, working together with partners, to develop England's first accountable care organisation in Northumberland which should come into fruition later in 2017.

⁴https://www.google.com/maps/d/viewer?mid=1cRxM_bNlR8UQv6XzD5vGhGE9vyY&ll=55.198247238560114%2C-1.9727039460938158&z=10

⁵ <https://www.northumbria.nhs.uk/annual-report-2017/NORTHUMBRIA-2016-17-Full-Annual-Report-and-Accounts-12-July-v2.pdf>

- Our partnership working with local GPs has also gone from strength to strength with six GP practices now working as part of Northumbria Primary Care Ltd.
- We were also delighted to hear that our 'buddy' trust North Cumbria University Hospitals NHS Trust has come out of special measures, following an inspection by the CQC in December 2016. We have worked extensively over the past few years with colleagues in North Cumbria to help bring about significant improvements for patient care.
- Moving into 2017/18, we are looking forward to another landmark year with the creation of an accountable care organisation which is set to become the first of its kind in the NHS. This will put us in the best possible position to embrace the significant challenges ahead and to continue to embed patient safety and quality at the heart of everything we do for patients.
- I am in no doubt that the changes we made in 2015 to open The Northumbria hospital have enabled us to cope in the wake of these unrelenting pressures and to deliver the very best emergency care for our most seriously ill or injured patients.
- Having specialist consultant-led teams available seven day a week has resulted in fewer emergency admissions, less time in hospital for patients and improved clinical outcomes.
- During year one we recorded a **14% reduction in emergency admissions** to hospital, with almost 7,500 fewer people being admitted, equating to a £6million saving for our local health economy. These results are truly staggering and the reason why dozens of NHS organisations and partners from across the globe have continued to visit us during 2016/17 to see our new model of emergency care for themselves.
- I was immensely proud to receive feedback from the national emergency care improvement team which described our work as pioneering and the commitment of our staff as 'exceptional' and 'epitomising all that is right about care in the NHS'.
- Our extremely close links with community and adult social care colleagues has also, without doubt, helped us during a busy winter period and enabled us to move patients through the system as quickly as possible and have a safe, timely discharge back home.

➤ Our patient experience is one of the best in the NHS:

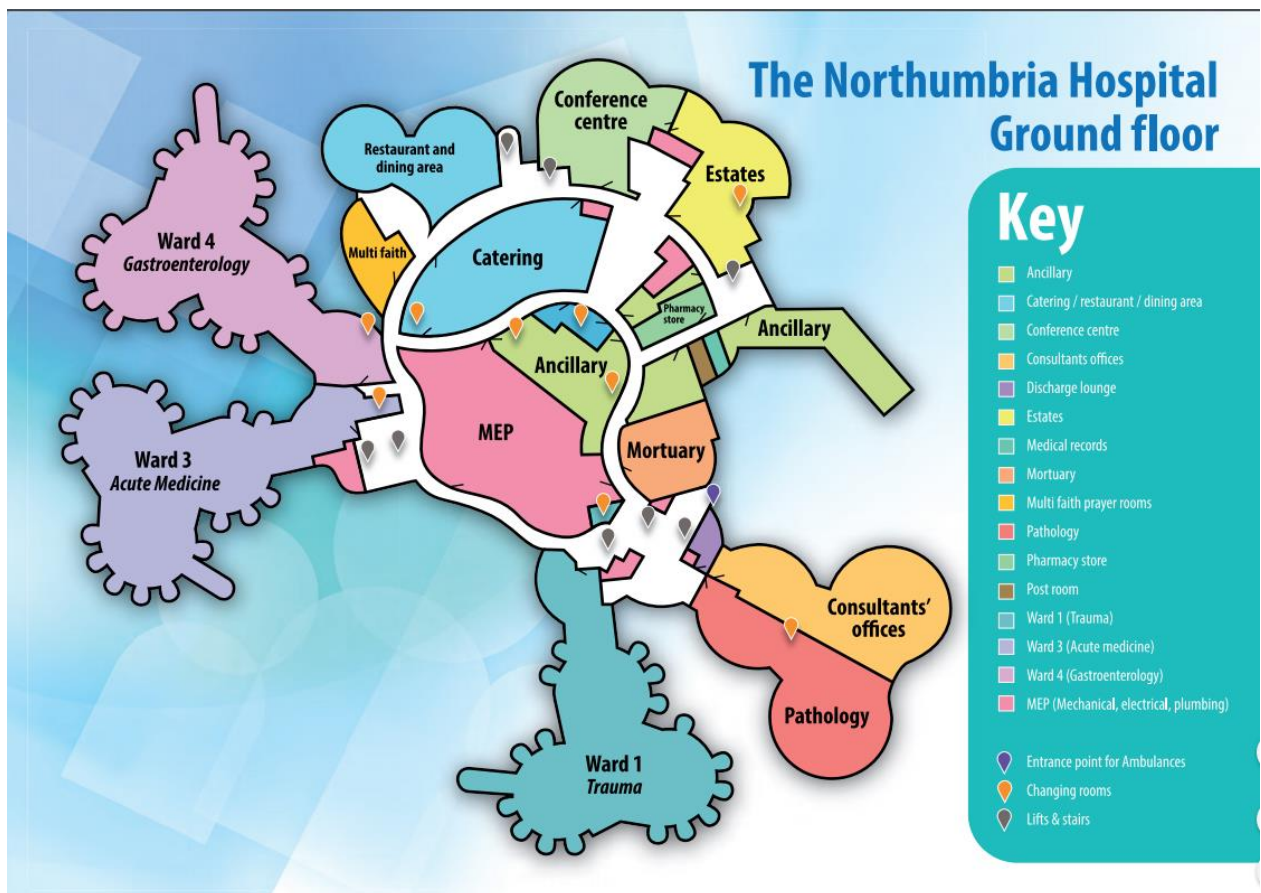
98% of outpatients rate us as excellent, very good or good

97% of patients are extremely likely or likely to recommend us

96% of patients rate care received on our wards as excellent, very good or good, with kind and compassionate care scored 9.9 out of 10.

About our meeting with Mr Evans

We met with Mr Evans Trust Medical Director at the Specialist Emergency Care Hospital in Cramlington, Northumberland. During the meeting we toured the hospital. The layout of the building can be seen below:



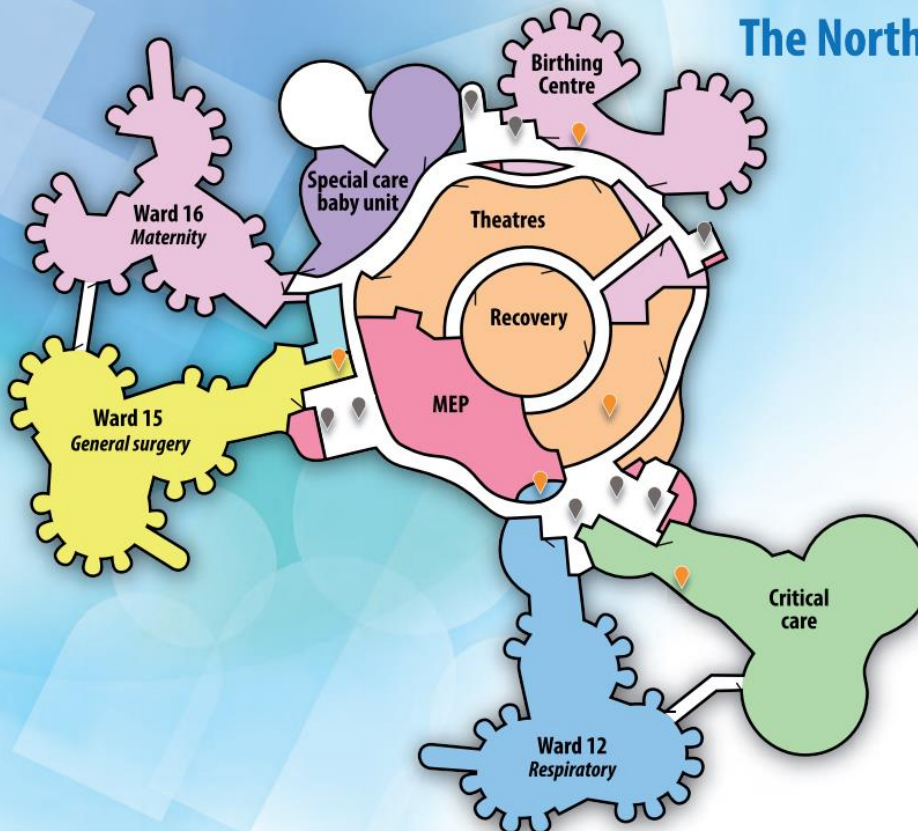
The Northumbria Hospital First floor



Key

- Emergency department
- Red zone
- Green zone
- Orange zone
- Resuscitation rooms
- Ambulance deck
- Children's unit
- Main reception
- Ward 6 (Ambulatory care)
- Ward 7 (Short stay and hyper acute stroke)
- Ward 9 (elderly care and stroke)
- Ward 10 (cardiology and cath lab)
- X-Ray
- MEP (mechanical, electrical, plumbing)
- A&E reception desk
- Changing rooms
- Entrance point for ambulances
- Entrance point for staff
- Lifts & stairs

The Northumbria Hospital Second floor



Key

- Critical care
- Maternity (Birthing Centre & Ward 15)
- Rest rooms
- Special care baby unit
- Theatres
- Ward 12 (Respiratory)
- Ward 15 (General surgery)
- MEP (mechanical, electrical, plumbing)
- Changing rooms
- Lifts & stairs

Apart from a four bedded bay in the Stroke Unit all patients admitted to the hospital are allocated a single room with en suite facilities.

During our tour of the hospital we noted that the noise level in the wards and in the maternity unit was low and the atmosphere quiet and calm.

The Specialist Emergency Care Hospital was made possible by closing three A&E departments in Hexham, North Tyneside and Wansbeck.

The cost of building was £100,000,000. Funding came from the following sources:

£75,000,000 from a 25 year government loan and £25,000,000 from the Trust's own capital resources and a loan from the Northumbria County Council.

NB the loan period in the PCBC is 60 years.

For a virtual tour of the hospital please [click here](#)



For a virtual tour and information about the Maternity unit [click here](#)

The bed numbers at the emergency hospital are as follows:

- 210 in-patient beds
- 18 intensive therapy beds
- 34 Maternity beds

Mr Evans told us that the average length of stay for emergency admissions is 36 hours.

We note that the CCGs in Shropshire have accepted, in their Pre Consultation Business Case, a 72 hour average length of stay for patients who are admitted to the emergency site.

We also note that the CCGs are aware of the standards achieved at the Specialist Emergency Hospital in Northumbria.⁶

Northumbria - In 2015, Northumbria Healthcare NHS Foundation Trust opened England's first purpose-built, dedicated, specialist emergency care hospital, transforming urgent and emergency care services across Northumberland and North Tyneside. With the opening of The Northumbria hospital, changes were made to the trust's former A&E departments at Hexham, Wansbeck and North Tyneside general hospitals. These became 24/7 urgent care centres, led by highly experienced emergency nurse practitioners who care for walk-in patients with less serious problems, minor injuries and ailments. There are no emergency hospital admissions at the trust's three general hospitals as these are now centralised at The Northumbria.

In terms of results one year on, Northumbria Healthcare was one of only a handful of trusts nationally to meet the four hour 95% performance standard in 2015/16. This is against a backdrop of a 15% increase in urgent and emergency care attendances. Despite the huge increase in urgent and emergency attendances during 2015/16, since centralising specialist emergency care onto one site at The Northumbria, the trust has recorded an average of a 14% reduction in emergency admissions to hospital.

There are three Urgent Care Centres in Northumbria based in hospitals at Hexham, North Tyneside and Wansbeck. The number of patients attending the specialist emergency centre is on average around 250 per day of which 9% could have been dealt with at a GP surgery.

Planned Orthopaedic surgery is centred on the Wansbeck hospital site. This site has a one day hip and knee replacement program for selected patients.⁷

Mr Evans also advised us that the Trust had introduced 7 day working in 2004 i.e. well before the idea had become an NHS policy objective. 7 day working is a key component in the provision of a consultant led service.

Mr Evans said that an Urgent Care Centre co-located next to a centralised emergency hospital is a good idea and a site has been identified on the Cramlington site should the CCG in Northumbria wish to pursue this option.

⁶ Page 64 Pre Consultation Business Case.

⁷ <https://www.youtube.com/watch?v=e8QSAAtSGTog>

NB the PCBC has a model of service with a UCC co-located next to the proposed centralised emergency service and an UCC at the planned hospital site.

The national target for Delayed Transfer of Care is 3.5%. The emergency hospital in Northumbria achieves 0% DTOC performance. This is because the hospital could not function properly with the possibility of blocked beds and as a result a range of possibilities for discharge to ensure a flow of patients have been put in place.

During our meeting we were made aware of the fact that a variety of services are provided from Newcastle based hospitals e.g. vascular surgery emergencies, some cancer treatments needing a tertiary referral and ENT services.

Where appropriate, consultant staff at the Trust attend multidisciplinary clinical meetings with their colleagues in Newcastle via video link and on a face to face same location basis.

Recently Intensivists at the hospital have started to supervise sick patients out of hours in the other acute hospital in the Trust using video conferencing onto the ward. The equipment used is an iPad.

We also heard that:

- A) The Trust is to sign a memorandum of understanding with a hospital in Valencia. The hospital in Valencia is trying to reduce their bed base by 30% using a virtual out of hospital delivery system.
- B) The orthopaedic service at Wansbeck Hospital has started a virtual fracture clinic using video conferencing for patients who live in Berwick upon Tweed.
- C) Moves are also in hand to deliver services in nursing homes along the lines of a project in Liverpool. The Liverpool video conferencing service reassures staff of the resident's wellbeing and treatment, helps to avoid unnecessary unplanned hospital visits, with hub nurses also able to request a prescription from the registered GP during the video call (if medication is needed).

Mr Evans told us that during the consultation on the provision of a Specialist Emergency Care Hospital at Cramlington the overwhelming majority of people 90%+ agreed to this change in emergency care service location.

Cont

Our conclusions

Our visit to the Specialist Emergency Care Hospital based in Cramlington and our research into how well the Northumbria Healthcare NHS Foundation Trust is organised raises a lot of questions.

In particular why do people in Shropshire not get the quality of service enjoyed by the residents of Northumbria?

We wish to make the following recommendations which we hope will receive support from all members of Telford & Wrekin Council, Shropshire Council and MPs in the county:

- 1) The Pre Consultation Business Case which was recently submitted to NHS England should be amended to include the provision of a standalone Specialist Emergency Care Hospital between Telford and Shrewsbury.

We believe this is the right thing to do because members of the public deserve to see an alternative option to the one currently under consideration.

- 2) The Strategic Transformation Plan and the Out of Hospital plan should take on board the numerous lessons which were learnt over many years by NHS colleagues in Northumbria.