Governing Body Meeting

Date of meeting	25 May 2016	
Title of paper	of paper Chorley A&E Temporary Closure	
Presented by	Mr Iain Crossley, Chief Finance and Contracting Officer	
Author	Author Mr Iain Crossley, Chief Finance and Contracting Officer	
Clinical lead	Clinical lead Dr Matt Orr, GP Director for Urgent Care	
Confidential	No	

Purpose of the paper

The aim of the paper is to explain the background and reasons for the temporary closure of the A&E service at Chorley Hospital.

Executive summary

On Monday 18 April the emergency department at Chorley Hospital was temporarily replaced by an Urgent Care Service and the local GP Out of Hours service was moved to the new facilities at Chorley Hospital. This change was made because Lancashire Teaching Hospitals was no longer able to staff both emergency departments at Preston and Chorley, and continuing to provide a service in these circumstances was an unacceptable risk to patient safety.

Recommendations

The Governing Body is asked to **note** the cause of the Chorley A&E closure and the work being done to ensure it can be safely re-opened.

Links to CCG Strategic Objectives				
SO1	Improve Quality through more efficient, safer services which deliver a better patient experience	\boxtimes		
SO2	Commission care so that it is integrated and ensures an appropriate balance between in-hospital and out of hospital provision			

SO3	Be an integral part of a financially sustainable health economy	
SO4	Ensure patients are at the centre of the planning and management of their own care and their voices are heard	
SO5	Be seen as a well-run clinical commissioning group and the system leader	

Meeting		Date	Outcome	
Central Lancashire System Resilience Group	13/4/1	16	Support for Trust decision to temporarily close Chorley A&E	
Were any conflicts of interest idea	ntified at	previous	meetings	
(mark X in the correct box below)				
Yes			No	
			X	
If conflicts of interest were identif	fied what	were thes	se:	

Implications						
Quality/patient experience implications?	Yes ⊠	No □	N/A □			
(Potential) conflicts of interest?	Yes □	No □	N/A ⊠			
Equality Impact Assessment?	Yes ⊠	No □	N/A 🗆			
Privacy Impact Assessment?	Yes □	No □	N/A 🗆			
Are there any associated risks?	Yes ⊠	No □	N/A 🗆			
Are the risks on the CCG's risk register?	Yes ⊠	No □	N/A □			
If yes, please include risk description and reference number	GBAF 01					

Assurance

The Central Lancashire System Resilience Group (SRG) provides the forum for overseeing the Chorley A&E temporary closure and the work being done to reopen as soon as it can be done safely and sustainably. The project is managed by a senior responsible officer, appointed by the SRG and there is a weekly project group which reports directly to the SRG.

Chorley A&E Temporary Closure

1.0 Introduction

- 1.1 On Monday 18 April the emergency department at Chorley Hospital was temporarily replaced by an Urgent Care Service and the local GP Out of Hours service was moved to the new facilities at Chorley Hospital. This change was made because Lancashire Teaching Hospitals NHS Foundation Trust was not able to staff both emergency departments at Preston and Chorley, and continuing to provide a service in these circumstances was an unacceptable risk to patient safety.
- 1.2 Ambulances responding to 999 calls have been diverted to existing A&E facilities, mainly at Preston and additional ambulance cover was arranged to ensure any transfers from Chorley to neighbouring facilities could be as efficient as possible.
- 1.3 The decision to temporarily close the Chorley A&E was made by the Trust's Chief Executive on the advice of the Medical Director; the decision was unanimously supported by the Central Lancashire Systems Resilience Group. The Systems Resilience Group ensured a smooth transition to the temporary arrangements.
- 1.4 The Systems Resilience Group considered all the options put forward by LTHTR; with the aim of delivering a safe service which optimised the service provision at Chorley and which had the least impact on patients and other organisations.

2.0 Staffing Crisis

- 2.1 Hospital emergency departments are staffed by consultants, doctors, and doctors in training. Since December, it has become increasingly difficult to staff the middle grade doctor rota for the emergency departments at Lancashire Teaching Hospitals Foundation Trust. This issue has arisen because of a number of factors; there is a national shortage of emergency medicine doctors; the Trust has been unsuccessful in attracting enough doctors in training to assist with our staff rotas; and the application of the national agency cap has affected the trust's ability to secure locums to fill gaps in the rota and staff absence and sickness.
- 2.2 The Trust has taken a number of actions to recruit a permanent workforce, including continuous international and national recruitment activities, changing how service works and adapting some job roles to maintain services, and appointing some GPs to provide additional support to the emergency department.

3.0 Systems Resilience

3.1 The System Resilience Group, which oversees urgent care in the local area, is meeting regularly to review the current crisis, assess risks, and consider all the potential options for the future provision of services. A single Senior Responsible Officer has been appointed to manage the current service and the transitional arrangements for re-opening the Chorley A&E facilities.

4.0 Next Steps

4.1 Lancashire Teaching Hospitals NHS Foundation Trust is building up its staffing resources and identifying additional locum staff-cover. Once the staffing levels which existed in December are achieved and the Systems Resilience Group is satisfied this can be maintained; then the phased reopening of Chorley A&E will commence.

5.0 Action

5.1 The Governing Body is asked to note the cause of the Chorley A&E closure and the work being done to ensure it can be safely re-opened.

Mr Iain Crossley Chief Finance and Contracting Officer May 2016

Lancashire Teaching Hospitals MES



NHS Foundation Trust

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Ref: KP/kb

Chief Executive's Office Royal Preston Hospital Sharoe Green Lane Fulwood PRESTON PR2 9HT

6 May 2016

Dear Colleague

Re: Temporary changes to the emergency department at Chorley Hospital

We have committed to keep all stakeholders informed about the progress we are making to reinstate the emergency department at Chorley Hospital. We shared the news release update last week and will be issuing a further release later today. A copy is attached for your information.

We also agreed to keep you informed about the progress we are making to secure the workforce we need to staff the emergency department rotas. We need 14 middle grade doctors to staff the rotas and the System Resilience Group has recently agreed that the split would need to be 75% substantive and 25% locum, which equates to approximately 10 substantive middle grade doctors, with the remaining gaps filled by locums. This level will enable us to provide a safe and sustainable service with adequate capacity to respond to any future fluctuations in the workforce. Our position today is that we have 5 substantive middle grade doctors and 3 locums.

Since the change to service came into effect on 18 April 2016 and despite continued efforts, we have not been able to recruit any permanent doctors. We are continuing our efforts to recruit all of the staff we need, and pursuing both international and national recruitment opportunities.

As we advised, 2 locums commenced on 25 April 2016, both of whom have decided not to continue their placement. Next week we are expecting 3 locums to commence on their trial period. Locums who successfully complete their trial period to test their competence and suitability will be offered both long term contracts and/or a substantive position.

I have also written to Ian Cummings, Chief Executive of Health Education England and I have spoken with Graham Urwin, Director of Commissioning Operations NHS England to seek assurances that we will receive our full allocation of doctors in training in the next rotation to enable us to manage our workforce and plan the rotas. I have also again requested that our allocation is reviewed and increased.





I wish to assure you that our board remains fully committed to reinstating the emergency department as soon as we have sufficient doctors to provide a safe and sustainable service and we will continue to make every effort to secure the staff we need.

Any support you are able to offer to resolve this situation would be welcome.

If you have any further queries please do let me know.

We will continue to provide regular updates and will be in touch shortly to arrange another meeting to discuss the matter in more detail.

Yours sincerely

KAREN PARTINGTON CHIEF EXECUTIVE

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UPDATE

Latest update about temporary change to emergency department at Chorley Hospital

6 May 2016

The Emergency Department at Chorley Hospital was temporarily replaced by an Urgent Care Centre on 18 April 2016. Staffed by a wide range of medical professionals, the centre is able to provide a variety of treatments for many minor injuries, and residents of Chorley and the surrounding areas can access this service whilst plans are being put in place for the reinstatement of the emergency department.

The urgent care centre is able to treat:

- Minor nose bleeds
- Minor cuts, bites and stings
- Burns and scalds
- Infections (including abscesses)
- Foreign bodies in wounds, ears and noses
- · Muscular sprains and strains to shoulders, arms and legs
- Fractures to shoulders, arms, legs & ribs
- Dislocations of fingers, thumbs and toes
- Minor eye conditions including conjunctivitis and foreign bodies
- Minor chest, neck and back injuries
- Minor head injuries with no loss of consciousness or alcohol-related
- Minor allergic reactions
- Some minor ailments such as coughs, colds, flu symptoms, sore throat, earache, urinary tract infections and sinusitis
- · Diarrhoea / constipation
- The UCC can also provide emergency contraception

The centre is open 8am to 8pm, seven days a week. Outside of these hours, patients should phone 111 for advice or 999 in a life-threatening emergency.

The change has happened because Lancashire Teaching Hospitals doesn't have enough of the right type of doctor to safely staff its emergency departments.

Professor Mark Pugh, Consultant Anaesthetist and Medical Director of Lancashire Teaching Hospitals NHS Foundation Trust said, "We are continuing to do everything we can to recruit and retain the additional staff required to reinstate the emergency department at Chorley in a safe and sustainable manner.

"Whilst recruitment activities are ongoing, along with our partner agencies we've mobilised the urgent care service. We have made changes at Royal Preston Hospital to accommodate any additional patients and we will continue to provide safe and effective care."

Discussions continue to take place to ensure the safe and timely reinstatement of the emergency department. The System Resilience Group (SRG) met again this week to agree the staffing position that needs to be achieved to deliver a safe and sustainable service and enable the reinstatement of the department at Chorley Hospital.

14 middle grade doctors are needed to safely staff the emergency department. It has been agreed that the department can be reinstated once Lancashire Teaching Hospitals has a workforce that consists of at least 10 permanent staff, with the gaps covered by locums who have successfully completed a trial period. These requirements will ensure a safe and sustainable service can be delivered, and there is enough capacity to respond to changes in the workforce.

Professor Pugh added: "When these staffing levels have been reached, there will need to be a short period of testing the stability of that workforce. Once we are confident the level can be sustained, we will be able to plan for the reinstatement of the emergency department at Chorley Hospital."

Dr Dinesh Patel, Clinical Chair of Greater Preston Clinical Commissioning Group and member of the System Resilience Group said: "The SRG is liaising weekly with Lancashire Teaching Hospitals and other stakeholders to gain assurances that the process for recruiting staff and reinstating the emergency department at Chorley Hospital is progressing. We want to see the emergency department reinstated as soon as possible, but we will ensure that it is only reinstated when the agreed level of staffing can be sustained."

For more information about the temporary change, visit: www.lancsteachinghospitals.nhs.uk/temporary-changes-to-chorley-emergency-department

Notes to editors

The local System Resilience Group comprises Chorley and South Ribble Clinical Commissioning Group, Greater Preston Clinical Commissioning Group, Lancashire Care Foundation Trust, Lancashire County Council, Lancashire Teaching Hospitals NHS Foundation Trust, and North West Ambulance Service.

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Notes to Editors: For further information contact Helen Lea, Communication and Public Relations Officer, helen.lea@lthtr.nhs.uk 01772 523515.

Lancashire Teaching Hospitals NHS Foundation Trust provides district general hospital services to a local community of 390,000, and specialist services to 1.5m across Lancashire and South Cumbria. Services are provided from Royal Preston Hospital, Chorley and South Ribble Hospital and the Specialist Mobility and Rehabilitation Centre, as well as a wide range of services in community settings and at other hospitals in the region.

