



SHAPING CARE
TOGETHER

Stakeholder
Briefing

December 2020



Care

1. Background

You may be aware that healthcare professionals and NHS commissioners across Southport, Formby and West Lancashire have come together to help shape how hospital services could be delivered in the future to ensure local people continue to receive safe, sustainable and high-quality care.

For over 20 years, Southport and Formby and West Lancashire NHS bodies have been continually reviewing their acute hospital services to ensure that they best fit the needs of the local population. This began with the Shield Report in 1999 which heralded the start of the journey in configuration to address the projected challenges that need to be considered when providing acute hospital services for the future. Many of those recommendations were used to inform subsequent external reviews that have been undertaken by a range of different organisations and expert clinical advisors.

Independent NHS reports completed by two different NHS England Clinical Senates¹ were clear that keeping the current configuration of services is not a viable or safe option. The strong recommendation of all involved is that urgent change is needed to make sure we have safe, affordable, quality services that are future-proofed for local people.

These various and detailed reviews identified a number of challenges across our health and care system. Some challenges have been with us for years while the urgency of others has been exposed during the Covid-19 pandemic. Workforce challenges alongside financial sustainability highlighted areas that need urgent change to enable services to be safely delivered and be fit for purpose.

In response to managing Covid-19 and keeping our patients and staff safe, services have had to adapt and are now being delivered differently e.g., sexual health services, nurse led services, consultant appointments can now be largely undertaken using telephone and video calls.

Some work has previously been undertaken involving hospital clinicians to help understand the current challenges the services face and we are at an early stage of exploring where those services could be improved.

To ensure that this work is done collaboratively and inclusively, we now need to increase this engagement and listen widely to our staff and key partners, patients, carers and the wider public to ask them about their thoughts and experiences. We are committed to working together as a system, taking into account wider stakeholder views, to reach a safe and long-term solution for our population.

2. Working in partnership

The Shaping Care Together programme is led by a partnership of NHS organisations (Southport and Ormskirk Hospital NHS Trust, NHS Southport and Formby CCG and NHS West Lancashire CCG).

We are working as a partnership to look at service transformation as a whole and not as separate parts. This is because we know that working together means a better, more joined up and efficient service that delivers better outcomes for patients.

A programme board which comprises of partners across the NHS system was established in July 2020 to consider how we could improve and deliver better health and care services that are fit for purpose and meet the needs of our population. A joint commissioning committee has also been established and oversees the Shaping Care Together programme and will ensure that we meet our duty to involve patients and our public sector equality duties.

¹ Clinical senates are independent non statutory advisory bodies hosted by NHS England, designed to ensure that proposals for large scale change and reconfiguration are sound and evidence-based, in the best interest of patients and will improve the quality, safety and sustainability of care.

It is important to stress that there are no plans to close either hospital at Southport or Ormskirk and no decisions have been made. We want to keep services as local as possible where it is appropriate and keep our focus on delivering the highest quality clinical care provided by the range of excellent professionals we have working in our local hospitals. At the same time, we also want to explore improved ways of working. We want to create opportunities which puts us in the best position to deliver services and to ensure our existing staff are retained as well as attracting additional staff in the future.

However, hospital services are not standalone services. Our extensive experience in the NHS shows us that long-term hospital care is not always the best way to help people to be as well as they can be. People recover more quickly when care is provided closer to home. While we have lots of good examples of how people are provided with care outside of hospital, these are not widely adopted or routine, which often leads to disjointed care for our residents.

Good examples of care being delivered differently in Southport, Formby and West Lancashire are:

- Local access to care has been improved by providing appointments with services in the community such as doctors and nurses during the evenings and at weekends.
- Local initiatives introduced which are helping to care for people at home and thereby avoiding admissions to hospital. For example, a new medical response car with a paramedic on board is being trialled in Southport, which has already started to have a beneficial impact on patient satisfaction, hospital admissions and length of hospital stay.
- In West Lancashire, a Short Intensive Support Service helps patients to stay at home and avoid hospital admissions by offering intensive support for a 72-hour period.

3. Clinically led service review

The services within the Shaping Care Together Programme are:

- Frailty
- Urgent & Emergency Care (adults)
- Paediatrics (including Urgent and Emergency Care)
- Maternity and Neonatal services
- Gynaecology and Sexual Health services

Throughout September 2018 to October 2019, a series of workshops were held to review and explore the existing models of care in relation to the services within the Shaping Care Together programme. A wide range of stakeholders were engaged and involved, including: North West Ambulance Service, GPs, clinicians, commissioners, nurses, voluntary community faith sector (VCFS), allied health professionals, public health, neighbouring NHS providers and NHS England and NHS Improvement.

The hospitals provide many services that are a critical part of any treatment and care pathway which may influence or be affected by these models of care such as planned care, diagnostics, anaesthetics and critical care. Planned care describes the services which support all of the models of care as many patients require follow-up appointments and/or subsequent admissions as part of their treatment. Our engagement activity will also seek people's views on their experiences of accessing planned care.

No decisions have been made at this stage of the review. We want to listen to our staff, patients and public to inform and influence any decisions being taken in the future. We need to work with doctors, nurses, other clinicians along with patients, carers, public, Healthwatch organisations, community, voluntary and faith sector, local authorities, social care and those who provide care in community settings to work out what the best solutions to the problems we face might be. At this stage, we are interested in hearing and capturing your views and ideas for improving services.

Over the coming months, we are taking a staged approach to engagement. Firstly, we will listen to our stakeholders to capture views and experiences of services as they are now and how things could be improved. A report based on the feedback will be produced. We will then involve all interested parties' in



exploring solutions and create an evaluated list of viable options upon which we will undertake formal consultation should this mean significant service change is required.

4. Listening to local people and our partners

It is vital that the voices of local people are at the heart of our work so we can shape services together. Engagement activity will take place over several months as part of our commitment to ongoing dialogue with all stakeholders to ensure that their input can influence and shape the decision-making process.

It is important to note that this is a listening exercise and not a formal consultation, this programme is at an early stage and no decisions have been made. The purpose of the listening phase is to understand what works well now and what needs to be changed in relation to the services and to gather views and experiences of patients, stakeholders and staff to develop potential solutions to the problems identified.

The information set out below describes the engagement activity:

- **October:** further engagement with hospital clinical staff began as part of the listening phase
- **November/December:** we started to engage directly with a wider range of staff at the Trust delivering these services via a series of online discussion groups
- **December-April:** hospital staff engagement activity
- **January-August:** public engagement will commence in the form of an online survey. A paper-based survey will be made available to those that request one and/or follow up telephone conversations for those who do not use internet and prefer to talk to us rather than fill in survey forms.
- **January-April:** As part of our conversations with the staff and providers of healthcare, we will also be engaging with GPs, primary care colleagues, community-based providers, social care partners and public health as part of the engagement activity. Details will follow.
- **January-August:** working with the community and voluntary sector to reach groups whose voices are seldom heard
- **January-August:** engaging with children and young people. Targeted work will commence to inform our communication materials and engagement plans.

Robust equality and health inequality analysis will be undertaken to consider where there are opportunities to improve outcomes for different profiles of people and to reduce the chance of negative impacts if service changes are made.

5. Keeping you informed, engaged and involved

We will produce regular briefings so you can read about the latest developments. In the new year we will be letting patients and the public know about how they can get involved. The COVID-19 restrictions in place do not allow us to hold public meetings. Therefore, we have to work differently to engage and involve you as one of our key stakeholders. In the new year, we plan to launch a dedicated website where people can have their say, share their stories and participate in surveys. We will also be flexible in how we engage with you e.g., attending virtual meetings, 1-2-1 discussions and holding briefing sessions.

We will be promoting these involvement opportunities via established communication channels and networks so we can reach communities across West Lancashire, Southport and Ormskirk and neighbouring areas. We will ask our partners (e.g., Healthwatch, Councils for Voluntary Services, voluntary community and faith organisations, clinical commissioning groups, and Southport and Ormskirk Hospital NHS Trust) to advertise the engagement opportunities using their existing networks, communication channels as well as sharing information at their existing/planned meetings.

Your support would be greatly appreciated as we embark on this journey of Shaping Care Together.

If you have any questions: please email us at shaping.caretogether@nhs.net

Sent on behalf of:

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