

Northumberland Health and Wellbeing Overview and Scrutiny Committee Report

Relocation of the Whalton unit to Wansbeck General Hospital.

5th November 2019

Purpose

The purpose of the report is to provide an update on the review which investigated the impact of the relocation of the Whalton unit to Wansbeck General Hospital, share the findings from the public engagement and inform the Health and Wellbeing Overview and Scrutiny Committee (OSC) of the decision made by Northumberland Clinical Commissioning Group (NCCG) on the 23rd October 2019.

OSC are then asked to consider whether the decision made by the NCCG is a substantial change in service delivery which would require a full public consultation.

About the Whalton Unit

The Whalton unit has 30 individual ensuite rooms providing consultant led care of the elderly rehabilitation for the residents of south east Northumberland. The service provided is predominantly for frail older people, specialist stroke rehabilitation and post-operative rehabilitation for people after orthopaedic surgery. The unit has also provided palliative and end of life care, which the single room layout lends itself too. The unit also has a rehabilitation gym area, multidisciplinary office to support team working, storage and a dayroom for patients and their families / carers to use.

Background

In November 2018, Northumbria Healthcare Foundation Trust (NHCFT) informed NCCG of the decision to relocate the Whalton Unit from Morpeth to Wansbeck General Hospital, on a temporary basis. This decision was approved by the NHCFT to ensure that the issues experienced with nurse staffing did not lead to quality and safety concerns that were likely to be compounded by expected increases in activity across the winter period. This came into effect on 19 December 2018.

This decision was reviewed in April 2019 by NHCFT and there was an agreement to extend the temporary location pending an updated report to enable a longer timeline for the impact analysis, with a specific focus on the experience of patients.

NHCFT concluded that a permanent move of the Whalton Unit to Wansbeck General Hospital would maintain patient safety and has improved the following aspects since the temporary move took place. The following improvements to patient care are:

- More timely and thorough investigation
- Fewer transfers back to Northumbria Specialist Emergency Care Hospital (The Northumbria)
- Fewer episodes of harm associated with incidents
- More consistent nursing care provided through an improved skill mix across the team.

The Trust also noted that patient experience scores have dipped although still remain high overall. In addition, nursing staff report high levels of satisfaction with the new location.

In July 2019, a full impact assessment with a focus on patient safety and quality of patient experience was presented to the NHCFT Board for the period from 1 January 2019 to 30 June 2019 and subsequently a recommendation was made to NCCG that the Governing Body should consider the impact of a permanent move the Whalton Unit to the Wansbeck site.

At the meeting of the NCCG's Governing Body on 24 July 2019, the Governing Body considered NHCFT's proposal to permanently relocate the Whalton Unit and approved that it would remain temporarily at Wansbeck General Hospital until a period of further engagement had been completed.

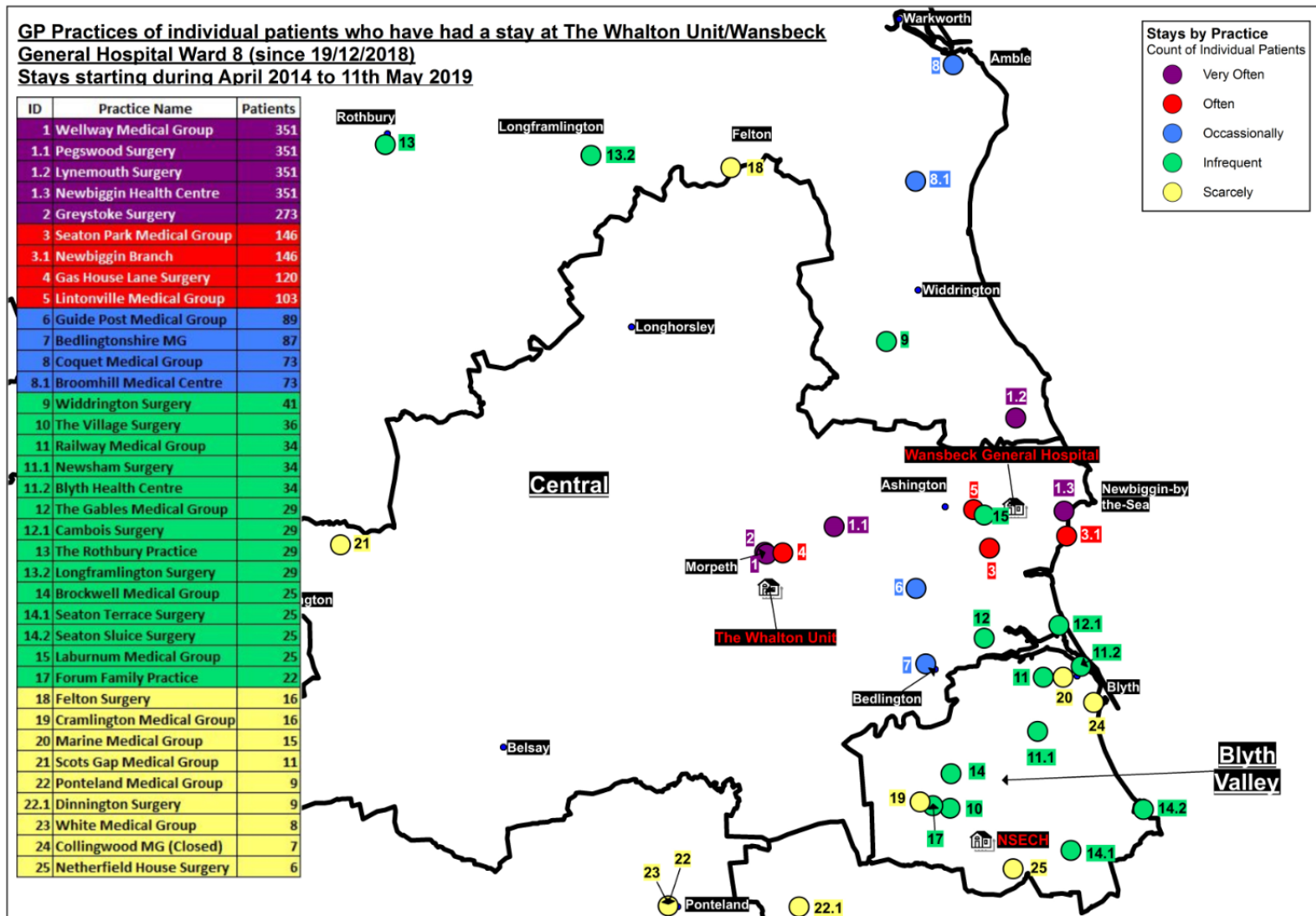
Public engagement began on 4 September and extended over four weeks until 7 October 2019.

Who uses the Whalton unit

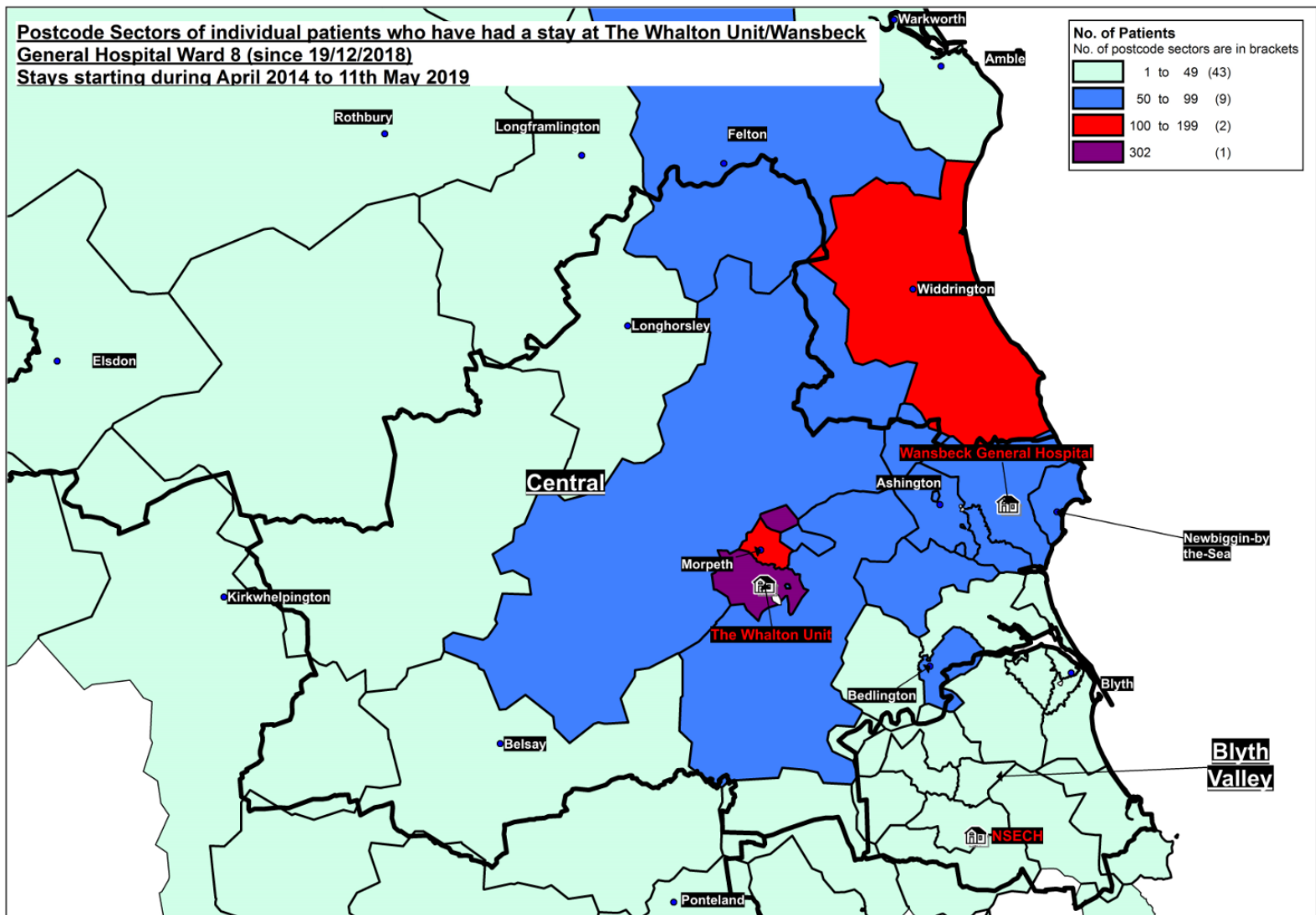
To understand who uses The Whalton Unit the below 2 maps show the number of individual patients who had a stay at The Whalton Unit, Morpeth (1st April 2014 to the 18th December 2018) and on Ward 8 at Wansbeck General Hospital (19th December 2018 to 11th May 2019). The maps show GP practices in which they are registered as well as post code areas.

Map 1 shows the number of patients registered at each practice who had a stay on The Whalton Unit. If a patient had multiple stays and was registered with different GP practice then each practice is counted.

Note: The GP Practice branch surgeries are shown on the map and the number of patients reflect the practice as a whole. The numbers cannot be broken down by each practice site.



Map 2 shows The number of patients by postcode sectors (e.g. NE61 2) of where they were a resident during their stay on The Whalton Unit. If a patient had multiple stays and was resident at a different postcode sector then each postcode sector is counted.



The maps show that the patients registered at Wellway Medical Group (351) and Greystroke Surgery (273) were most often admitted to The Whalton Unit and the majority of the patients admitted to The Whalton Unit were a resident of Morpeth (NE61 2 – 302 patients and NE61 1 – 193 patients).

The postcode sector with the 3rd largest number of patients who have been admitted to The Wansbeck Unit was NE61 5 which covers Pegswood and Widdrington to the North of Ashington. The map would suggest that the majority of these patients are registered at Wellway Medical Group (Pegswood Surgery) and Widdrington Surgery and live closer to Ashington than Morpeth.

The map shows that Gas House Lane Surgery in Morpeth had 120 registered patients who were admitted to The Whalton Unit, but Seaton Park Medical Group and Lintonville Medical Group in Ashington had 146 and 103 patients respectively.

The postcode sectors shaded blue on the map suggests a large number of patient who were admitted to the Whalton Unit, live in between Morpeth and Ashington.

Travel distances and deprivation

Patient postcodes were then mapped against Lower Super Output Areas (LSOA's) which were linked to the 2015 index of multiple deprivations IMD, this enables an understanding of the impact of the relocation in terms of deprivation.

Analysis looked at access by public transport within 30mins. The findings were that a larger number of people were able to access Wansbeck General Hospital in 30mins and therefore fewer people able to access the Morpeth site in 30mins.

The larger numbers of people accessing the site come from a more deprived neighbourhood.

The move was shown however to be detrimental to those able to access from rural and dispersed areas.

For access via a car within 30 mins – numbers able to access the two sites are almost the same.

Impact analysis carried out by NHCFT

NHCFT has reviewed the impact of the relocation which is summarised below.

The following areas have been considered -

- **Activity**

This includes the numbers of patients accessing the unit along with any changes in case mix and levels of acuity. NHCFT reported this remained the same.

- **Quality and Safety**

NHCFT has reported an increase in the number of patients who have accessed diagnostics tests, linking this to easier access to the test, an increase in consultant leadership and improved access to medical support out of hours.

The number of incidents has decreased with fewer accidents that may result in personal injury. This is linked to the layout of the ward and the increase in beds within visible sight of nursing staff.

There has been a significant reduction in transfers to NSECH for more acute care again due to increased medical care and on site out of hours medical cover.

The number of transfers has also been monitored and the move suggests that patients get to their correct location at an earlier point in their treatment pathway than previously.

- **Environment**

The environment at Wansbeck General Hospital is smaller than the footprint of the Whalton unit, and has a layout including 4 bedded bays and single rooms. All the rooms within the Whalton unit were single rooms with ensuite facilities. In addition the unit included a day room, rehabilitation space and team office which support Multi-disciplinary working.

NHCFT has considered the feedback from Patients and staff already and are exploring another ward which has more space which could accommodate the rehabilitation space, shared office, storage and a day room / lounge area. This potential new area is close to another care of the elderly ward assisting services to co locate and strengthen team working. The bed arrangement would remain as described above.

- **Patient and carers**

NHCFT has continued to monitor patient and carer experience and the across all domains measured the unit at Wansbeck overall scores highly. There has however been in slight dip of 0.3 reductions in scores. (9.8 reduced to 9.3 out of a maximum score of 10, when 10 is excellent)

In the latest update of this data for the first time comments linked to the location have been raised by a small number of people. This is linked to ease of access for families visiting and environmental factors linked to layout and TV charges.

Since the relocation there has been no formal complaints received relating to the unit.

- **Workforce**

NHCFT has continued to monitor the impact on staff both from a recruitment and retention perspective and on staff experience.

Since the relocation recruitment of trained nurses has been successful, leaving the team now almost fully staffed, with the added advantage of receiving support from other wards for short notice sickness absence and enhanced observations. The main reason staff are reporting for the improved recruitment is linked to its current location which includes greater medical support, wider team involvement and access to training.

- **Travel**

Since the move NHCFT has provided transport for patients' relatives and carers in recognition of the change in location.

The analysis undertaken in March 2019 showed 52% of patients admitted to the Whalton unit lived closer to Morpeth than Ashington. This has been done again showing a small change of 1%, with 51% living closer to Morpeth than Ashington.

The distance between the sites is 6 miles, NHCFT has looked at the mileage impact and has on average concluded that people would travel, by Car, an additional 3.2 miles per trip.

- **Finances**

The relocation results in a saving of £522,290, based on rental and associated rates, which makes the service cost higher than other wards. This saving also includes some changes in supplies and staffing based on a smaller footprint and improved patient visibility.

As a result of this analysis NHCFT concluded that the relocation of the Whalton unit to WGH should become permanent.

Public engagement

The full public engagement report is included in appendix 1 and includes the full details of the engagement carried out by NHCFT and NCCG as well as the independent engagement carried out by a market research company.

A summary of the findings are shown below.

Approaches adopted within the engagement.

- A series of public drop in sessions hosted by representatives from NCCG and NHCFT were arranged on different days of the week and at different times, to provide as much access as possible. At all the drop in sessions, respondents were asked some general demographic questions before being asked six questions to help focus their thoughts on the Whalton Unit. All comments were recorded by either NHCFT or NCCG representative, in front of the respondent.

- Four separate community groups for older people held in Morpeth and the surrounding area were attended. Representatives of NCCG and NHCFT spoke with attendees on a one-to-one basis using the same discussion guide used in the drop-in sessions. All views were recorded and collated with those from the drop-in sessions.
- Three separate meetings were held to gain the views of: Morpeth GPs and Practice Managers, members of Patient Participation Groups (PPGs) from Morpeth practices, and representatives of Morpeth Town Council.
- Two meetings were held with representatives from the Whalton Unit Campaign Group during the four week engagement period. Furthermore, representatives from the campaign group attended the NCCG's meeting with PPG members and were present at every drop-in session to encourage participation in the process.
- An independent market research company was commissioned to conduct face-to-face and online surveys, a follow up focus group and in-depth interviews.

Promotion of the Engagement Activity

- Briefings on the engagement activity were sent to key local stakeholders, including a telephone briefing with the local MP, Ian Lavery, representatives of Northumberland County Council, Morpeth Town Council, parish councils, Healthwatch and the community and voluntary sector. Copies were also sent to Trust Governors and members of My NHS (an electronic database with members of the public who have an interest in local NHS services).
- Representatives of the Northumberland County Council Care and Wellbeing committee (the overview and scrutiny committee) and the Health and Wellbeing Board were briefed prior to and during the engagement period.
- Posters to raise awareness of the period of engagement and to promote the drop-in events were distributed around local shops, public houses, the leisure centre and the Town Hall in Morpeth.
- Two hundred post card sized information cards were distributed at the drop-in sessions to promote the independent online survey.
- Opportunities were taken to use digital media to promote the engagement. There was a dedicated section about the engagement on NCCG's website, this included some background information, a link to the online survey and information about the drop-in sessions. A number of tweets and facebook posts about the engagement were shared throughout the four week engagement period.

- The NCCG also distributed two press releases during the engagement period (September 4 and September 17), initially to announce the start of the process and share information about the drop-in sessions and online survey and secondly to inform people of the additional drop in sessions and to remind people they still had time to share their views. These both featured in the Morpeth Herald in print and online.

Results from the drop-in sessions and community groups

A series of public drop in sessions were held so that local people could call in at any point and talk to NCCG or NHCFT staff about the temporary relocation of the Whalton Unit and to share their views on the proposal to permanently move to Wansbeck General Hospital. Four sessions were initially arranged on the following days:

Wednesday 11 September	Morpeth Town Hall, 10am – 2pm
Wednesday 11 September	Morpeth Town Hall, 4pm – 7pm
Thursday 12 September	Morpeth NHS Centre, 10am – 12noon
Friday 13 September	Morpeth Leisure Centre, 11am – 1pm

After evaluating the progress of the engagement after the first two weeks it was decided to arrange some additional sessions, to ensure the community had sufficient opportunities to have their say. These were held at the following times:

Tuesday 24 September	Morpeth Leisure Centre, 10am – 12noon
Thursday 26 September	Morpeth NHS Centre, 12.30pm – 2.30pm
Tuesday 1 October	Wansbeck General Hospital Main reception, 10am – 11am Whalton Unit, 11am – 12noon South entrance, 12noon – 1pm
Thursday 3 October	Morpeth Town Hall, 3pm – 7pm

A total of 241 people were seen by either a NCCG or NHCFT representative during the engagement period. 190 of these attended a drop-in session, 24 were seen at a community group meeting and eight were patients on the Whalton Unit at Wansbeck General Hospital. The location of the discussions held with 19 respondents was unrecorded.

Over half the respondents (64%) were over 65 years of age and the majority lived in the NE61 postcode area (79%). 64% of respondents were female, 25% were male and the gender of the remaining respondents was not recorded.

Engagement themes

The themes and a brief summary that came from the engagement are listed below.

Convenience

- The Whalton Unit is more convenient to get to, particularly for Morpeth residents and the elderly who want to visit friends and family.

- Wansbeck General Hospital is inconvenient, especially if people cannot drive.

Travel

- The Whalton unit is easy to travel to in comparison to travelling to Wansbeck, which requires two buses.
- Taxis are expensive.
- A few respondents also commented that getting to Wansbeck would not be a problem.

Parking

- Easy parking at The Whalton unit which is free
- Parking at Wansbeck is difficult, and a long walk to the ward.

Environment, facilities and services

- The Whalton unit was described by one respondent as 'Home from Home' compared to the Wansbeck viewed negatively as a result of being a ward.
- No communal room available and having to pay to watch television.
- Some suggested that Wansbeck would be safer for patients.

Isolation

- Some respondents suggested that patients would be isolated in Wansbeck because of difficulties for visitors due to increased travel.

Privacy and Dignity

- Respondents commented positively on the individual beds at The Whalton Unit at Morpeth, which was better for recuperating or at end of life.

Palliative care

- The Whalton unit was highly regarded for the palliative care it provided and the support for friends and family being close by.
- A number of respondents commented they wanted a palliative care provision returned to the town.

Staffing

- The Staff on The Whalton Unit received a great deal of praise from respondents.
- Issues raised by NHCFT regarding staffing / recruitment were mistrusted.

Finance

- A small number cited finance as their perceived reason for the relocation.

Criticism of the engagement process

- Clarity regarding which organisation was carrying out the engagement.
- Insufficient opportunity for full time workers to be involved.
- Inconsistency of approach within the team interviewing, some people reporting that their opinions had been challenged.

Key considerations

The below table includes a summary of the key considerations gathered from the whole review period. It includes areas highlighted by NHCFT, from the public engagement and from NCCG analysis.

	Areas to be considered	Whalton Unit in Morpeth	R A G	Whalton Unit in Ashington / Wansbeck General Hospital	R A G
1	Recruitment of Nursing staff	Difficulties recruiting nursing staff, advertised over 2 years several times. Impact results in patient safety concerns.		Able to recruit and full nursing compliment in place. Site enables wider cover over any short term sickness cover.	
2	Patient experience	Service very valued and patient experience very high.		Patient experience has dipped by 0.3 (The score is out of 10, 10 being excellent, 9.8 to 9.3) so still remains high.	
3	Patient quality and safety	Some delays in investigation, as patients needed to be transported bac to Wansbeck General Hospital, more patients transferred to NSECH for acute support / interventions.		Faster diagnostics, fewer transfers, improved OOH medical cover. Patients at higher risk of falls are now able to attend the rehabilitation ward.	
4	Palliative care	The individual rooms lend themselves to meeting the needs of patients and families at the end of their lives, providing privacy and a quieter environment.		The ward at Wansbeck has individual rooms although only 3 and the ward environment does not allow for as much privacy at end of life for patients or carers.	
5	Travel - Car	No change in terms of time travel by car based on the patients using the unit.		No change in terms of time travel by car based on the patients using the unit.	
6	Travel– Public transport	Fewer people able to access the Whalton Unit in Morpeth with 30 mins on Public transport.		Greater number of people able to access the Ashington sites within 30mins and more from deprived locations.	
7	Travel - Impact raised through engagement.	The Whalton unit had free parking on site and was in close proximity to a bus stop.		Wansbeck General Hospital has car parking charges and parking is a distance away from the ward. The site does provide disabled parking bays. 2 buses are needed when travelling from Morpeth to Ashington	

8	Environment (privacy)	All single ensuite rooms provided private space for patients and carers.		Limited number of single rooms, layout mixed with 4 bedded bays and single rooms.	
9	Environment (Safety)	All single rooms reduces the visibility of patients and had an impact on patient skill mix.		A mix of layout supports both the rehabilitation needs of patients and families and option for single rooms when increased privacy is needed.	
10	Environment (space)	The environment had larger footprint including a rehabilitation gym, MDT office and day room for patients to socialise.		Current unit does not have the same rehabilitation space and MDT office although another ward has been located at Wansbeck which will support these requirements.	
11	Financial	The unit carries an increased cost due to rent and rates. Also additional staffing linked to the larger footprint.		Cost in line with other rehabilitation wards within NHCFT.	

Conclusion

NCCG concluded that the below three areas were the key summarised impacts –

- Workforce and staffing
- Travel
- Environment especially in relation to Palliative care

NCCG on the 23rd October 2019 approved the proposal to permanently relocate the Whalton Unit to Wansbeck General Hospital with the full agreement from NHCFT that the below recommendations would be met.

Recommendation

The permanent relocation of the Whalton Unit to Wansbeck General Hospital was approved by NCCG with the following recommendations.

- NHCFT staff will continue to offer Transport support for families and carers to visit the Whalton Unit at Wansbeck
- NHCFT staff will improve the environment to include rehabilitation space and Multidisciplinary working.
- Together NHCFT and NCCG will jointly invest in more community Matron's to support the impact of additional nursing home beds within Morpeth.
- Together NHCFT and NCCG will jointly invest in Allied Health Professionals to support the CATCH model and rehabilitate frail elderly patients to remain within their own homes both to prevent unnecessary admissions and to support earlier discharges home.
- Together NHCFT and NCCG will jointly develop a palliative care bed model which would enable patients to receive palliative care within local nursing homes, with expertise from specialist nurses working into the home to ensure the right levels of expertise are available.

Finally support the end of life strategy development to fully explore the best care and support to palliative and end of life care for the whole of Northumberland.

Appendix 1 : Engagement feedback report.