

REPORT TO: Healthy Halton Policy and Performance Board
DATE: 9th June 2009
REPORTING OFFICER: Strategic Director, Health and Community
SUBJECT: Halton Hospital Project Phase 4

1.0 PURPOSE OF REPORT

1.1 This report seeks to inform Healthy Halton Policy and Performance Board of the conclusions reached during phase 4 of the review on Halton Hospital.

2.0 RECOMMENDATION

RECOMMENDED: That members note and comment on the report.

3.0 SUPPORTING INFORMATION

3.1 In November 2007, Halton & St Helens PCT, North Cheshire Hospitals NHS Trust and Halton Borough Council agreed to deliver a 'Strategic Vision and Mission Project' for Halton Hospital.

3.2 This report reflects on the findings from earlier stages of the project and summarises the key findings of phase 4.

3.3 Key messages from the initial stages of the project include:

- Uptake and utilisation of existing services is good and has increased over last 12months
- Overall current site is under utilised- unused wards, external buildings and land.
- The financial impact of working time directives, means that it is not financially viable to provide 24hr clinical care on the Halton site
- Any future model will focus on meeting local health needs and providing services that fit with community services and meet a medical need for the wider geographical area not met at neighbouring hospitals
- There is scope for capital redevelopment on the site

3.4 The objective of phase 4 of the project was to prioritise a number of service areas for potential development on the Halton Hospital Campus. Proposals put forward are for additional services over and above what is already being provided on site. (Current services are listed in section 3.2.5 of appendix 1.)

3.5 Using the seven priorities identified in Halton and St Helens PCT

Commissioning Strategic Plan, views were sought from key stakeholders and members of the public on which additional services would best address local health needs and whether these services should be developed in the community or on the Halton Hospital Campus site.

- 3.6 As a result of this consultation, the additional services identified for potential development on the Halton Hospital campus site are:
- Healthy lifestyle promotion/interventions
 - Early detection screening for major illness
 - Short stay rehabilitation/re-enablement
 - Maternity (*not inc. delivery*)
 - Lifestyle and Leisure facilities linked to health improvement, rehabilitation and re-enablement.
- 3.7 The size and scope of the additional services has yet to be established. This will be determined during the final phase, through the development and evaluation of detailed business proposals on each of the prioritised areas listed above.
- 3.8 Halton Borough Council will contribute to the development of all business cases and will take a lead on developing a case for services to enhance the site as a Health Improving Hospital. At this stage the location and size of land available for development remains unclear, as does the availability of health capital/revenue funding. It therefore seems likely that the initial business proposal would be subject to review following the completion of a detailed feasibility study of the site and the surrounding area.
- 3.9 The full report 'Halton Health Campus Development- The Case for Change', sets out in detail the key health needs in Halton and how the PCT and its partners are addressing these needs. In addition to noting the areas for development on the Halton Hospital Campus site it is also worth noting the following planned service developments for urgent care:
- An increased range of urgent care services in a variety of locations by developing assessment services with both the local hospitals and primary care and community staff. This will enable high quality clinical decision making before people go to hospital. This will be achieved by creating Primary Care Clinical Decision Units (PCCDUs) that allow GPs and other clinical professionals to get urgent treatment for some moderately ill people closer to where they live and to provide assessment services closer to and within local communities.
 - An Advanced Practitioner service as part of a "Community A&E service" that for many people will bring A&E type services into their own home. This will reduce the need for many of these people to go on to hospital and allow the A&Es to focus on those

that cannot have their care delivered outside hospital. The PCT currently have no advanced practitioners but plan to have 12 in 2010 growing to 22 by 2013.

- Development of the Rapid Response services, within the Community A&E service concept so that in future a Rapid Response will mean rapid. This 'Immediate Care' service will reduce the workload of GPs as many people needs can be met by other health professionals with appropriate backup and support. This will require a radical redevelopment of the PCTs intermediate services to provide full 24 hour per day access 7 days per week by a full implementation of the intermediate care 'Gold Standard'.
- District Nursing services will develop a 'virtual ward' where up to 30 people at any one time can have hospital level care in their own home. This will require an additional 24 experienced nurses.
- Single Point of Access service review so that people accessing health care or health professionals accessing care for others through the SPA have a clinical decision made about their care at their first point of contact. All urgent care and Community A&E services will be controlled through one hub ensuring that all services are integrated and do not work in isolation.
- Community services and Programmed District Nursing services will be integrated with Social Care Services to provide a fully integrated intermediate care service for those patients who do not have or no longer require acute hospital or A&E needs.

4.0 **POLICY IMPLICATIONS**

- 4.1 Any business case which focuses upon lifestyle/leisure facilities must take into account Halton Borough Council's Sports Strategy.

5.0 **FINANCIAL/RESOURCE IMPLICATIONS**

- 5.1 The potential financial implications to the Council arising out of the development of additional services on the Halton Hospital campus site will be dependent on the type of facility developed and the extent of any subsidy forthcoming from Health. Any resultant business case would be subject to discussion with [Executive Board and Council](#) and considered in the context of the overall Council budgetary position.

- 5.2 The report does reference the following PCT investment and projected benefit gains committed to deliver the seven priorities identified in the Commissioning Strategic Plan:

<i>Reducing harm from alcohol</i>
The PCT plans to increase the funding of alcohol related services by £5.3m in Halton and St Helens over five years. Off set benefits for the whole area, reduce the required additional investment to £3.5m.
<i>Reducing harm from tobacco</i>
There is a planned increase in investment for smoking prevention services to £0.6m in 2012/13 across Halton and St Helens.
<i>Reducing obesity</i>
The PCT plans to invest a further £7.4m annually by 2013 across Halton and St Helens in the weight management services plan.
Early Detection
<i>Major illness -Cardio Vascular Disease, Cancer, Stroke, Diabetes Mellitus</i>
Additional annual investment by 2013 will be £10.5m. A benefit of £1m will be realised giving a total investment requirement of £9.5m.
<i>Depression</i>
The PCT investment is planned to increase by £2.1m by 2012/13. A benefit of £0.4m will be realised giving a total investment requirement of £1.6m.
Improving safety, quality and efficiency of services
<i>Urgent care</i>
The PCT investment of £5.7m in community services is planned to support the reduction of patients receiving treatment in an acute setting. Taking the benefits costs into account, the net effect on investment will be £-11.6m.
<i>Planned Care</i>
Investment of £2.1m is planned for planned care services as a whole. Taking the benefits costs of -£4.8m into account, the net effect on investment will be -£2.7m.

6.0 OTHER IMPLICATIONS

6.1 None at this stage.

7.0 RISK ANALYSIS

7.1 The development of the site is dependent upon the identification of healthy lifestyle services appropriate to the location and which will meet the health needs of Halton residents.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 None