



Ashby and Lutterworth

Background information for the Community Health Services Review

June 2008

Introduction and purpose

This information accompanies the PCT's public consultation document about community health services. Its aim is to provide an update on progress with proposals for Ashby and Lutterworth as they are not in the first phase of the public consultation, running from 16 June to 5 October 2008.

The PCT has been reviewing its community health services, including its community hospitals. We wanted to put together a ten year strategy for the PCT to ensure that by 2018 people will have access to services which are as local as possible, provided this can be done safely and cost effectively. We have reviewed how we could bring care closer to home, to prevent patients having to travel long distances or visit big acute centres unnecessarily, in line with national policy direction. We have looked at how future models of care fit with our current estate – our buildings and land. Our principle is that care should be designed around patients rather than around buildings. We have also assessed the health needs of our population to understand the demands and help people to live healthier lifestyles.

Our proposals have been developed alongside clinicians, staff, patients and other stakeholders¹. This process has enabled us to agree some overall principles for community services as well as some specific proposals for the localities that have community hospitals. However, at this stage these proposals do not include Ashby and Lutterworth.

What have we done so far in Ashby and Lutterworth?

Over the past year, Ashby and Lutterworth have been through the same process as all the other localities in the PCT. This has included:

- Establishing a site group¹ to look at how the services work now and develop recommendations for their area
- Understanding population growth and health needs over the next 10 years
- Reviewing our services and facilities, including buildings and land
- Reviewing the capacity of each hospital
- Understanding the current running cost of each hospital
- Exploring where services could be provided in the community instead of an acute hospital

We considered several proposals for development at Ashby and District Hospital, and Feilding Palmer Hospital, Lutterworth.

In Ashby, they were:

1. Keep inpatient beds at Ashby Hospital with increased outpatient activity and diagnostic facilities in a purpose built unit together with GP surgeries or in refurbished/non refurbished Ashby and District Hospital
2. As above, but without inpatient beds
3. New GP practice to replace the current Ashby Health Centre, and include outpatients and diagnostics and refurbish the inpatient facility on the current Ashby and District Hospital site
4. Do nothing

¹ Include representation from GPs, local hospital staff, the PCT, patient representatives, Adult Social Care and Mental Health Services.

In Lutterworth, at Feilding Palmer Hospital, they were:

1. Increase outpatients in refurbished building
2. Keep front of building with complete new building behind, including all services (including inpatients at current bed numbers) but without a minor injuries unit
3. Keep front of building with complete new building behind, including all services, with no inpatient beds and no minor injuries unit, but increased provision for services such as diagnostics
4. Dispose of site and extend the services within the neighbouring medical centre
5. Do nothing

However, in March 2008, we decided with local clinicians that in these two places we needed a longer period of time to understand some of the issues the review raised. It was therefore agreed that Ashby and Lutterworth should not form part of the first phase of consultation. Instead, we will continue to look at possibilities for future care in these areas and then develop proposals for consultation. During this time we will work with local clinicians, patients and other local bodies.

What are we going to do and who will be involved?

In Ashby and Lutterworth we will be 'piloting' an alternative model of health and social care. We will do this alongside the current services, which include care by district nurses or intermediate care teams, or care in community hospitals.

We will work very closely with local GPs, clinicians, patients and carers and our health and social care partners to develop and test out new ways of providing services that could be an alternative to community hospital beds. Whatever we put in place will be rigorously tested with academics.

In addition, in Ashby, we will continue to explore the options available for land on which to develop a new primary care centre to replace the current Ashby Health Centre.

Why are we doing this in Ashby and Lutterworth?

The review of community health services identified some key issues related to Ashby and Lutterworth that require some further work. Although there are some variances between the two localities, the key issues are broadly:

- **Estate (buildings and land)** - Both of these hospitals are very old and will not continue to be fit for delivering health care services in the 21st century. Specifically:
 - **Ashby and District Hospital** – our estates review concluded that the initial proposals we looked at presented difficulties. The amount of proposed activity was too much for the current site, due to land and planning restrictions, and the income for this activity would not cover running costs. If there was redevelopment, the financial loss would be even greater, because of increased overheads, and there would be considerable upheaval whilst development was going on.
 - **Feilding Palmer Hospital** – our estates review concluded that the proposals considered for this site are possible, although planning permission would need to be achieved and there would be considerable upheaval whilst development was going on. Feilding Palmer Hospital currently breaks even financially. However, if the site is redeveloped it would make a significant deficit because of increased overheads. In addition, GPs in nearby localities have said they may not send patients to Feilding Palmer.
- **Models of care** – we need to ensure that services are planned around individual patient needs, not around the buildings that we currently have. Local doctors and other clinicians are willing to test out new models of care to achieve this.
- **Service quality** – we need to ensure that our services are safe and effective, and that safety and quality are not impeded by the environment in which care is provided. We also need to keep pace with advances in technology.

Dr Orest Mulka, GP from Measham Medical Centre and member of the working group, said: *"I want my patients to benefit from having the widest possible range of services available locally so that they only have to travel into the acute hospitals such as those in Burton and Leicester for specialist treatment. The extent of the services we can realistically provide will determine the facilities we need to provide them from. There is no doubt that Ashby and the surrounding area is growing and needs improved health facilities, and I hope that this work will lead to us getting them in the not too distant future."*

Dr Graham Johnson, a GP from the Wycliffe Medical Centre and member of the Lutterworth working group, said: *"I believe there is plenty of scope to bring more services into Lutterworth. The age of the hospital and the space on site present some restrictions on the types of care we can realistically provide, but there is potential to increase the amount of tests and outpatient clinics available locally. The working group is really enthusiastic about improving care for local people and I hope local residents will take the opportunity to feed their views into our plans over the coming months."*

What will happen next?

We are appointing clinical leads to progress the programme of work and have some short term project support to get the project started. The planning phase will operate from May until September.

How can I be involved?

The PCT and working group will hold staff briefings, and produce regular updates in internal communications such as PCT News, and the Community Health Services bulletin. Additionally, there may be specific bulletins about Ashby and Lutterworth. Information will also be posted on the PCT's website. The local media will also be kept informed via media releases. At the end of the process details will be available in the stage two public consultation document.

We welcome the input of patients and the public. If you are interested in being involved at a more detailed level, then please contact the PCT's engagement team in the first instance.

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