

**14 July 2021**

**8.**

**Proposals for Acute Urology Services at Walsall and Wolverhampton**

**Ward(s):** All

**Portfolios:**

**1. Aim**

1.1 The aim of these proposals is to ensure safer, and more responsive acute care provision to the residents of Walsall by merging elements of urological emergency and elective (inpatient) procedures from Walsall Healthcare NHS Trust's (WHT's) Manor Hospital to The Royal Wolverhampton's (RWT's) New Cross Hospital site, while increasing the number of low complexity urological day case procedures at Walsall.

1.4 Outpatient procedures and follow-up consultations will continue to be undertaken in Walsall.

1.2 The proposed service model between WHT and RWT will facilitate:

- Walsall residents receiving safer, higher quality and more responsive acute care for urological conditions 24/7/365.
- A focus on health inequalities and actions that can address inequalities in access to, and standards of care.
- A focus on high volume, low complexity urology procedures (the majority of procedures) being undertaken at Walsall Manor Hospital, thus freeing up capacity and theatre space at the Royal Wolverhampton NHS Trust's hospital sites for more specialist/complex cases.
- A reduction in the time patients need to be in hospital.
- Driving continuous improvement in outcomes, with greater opportunities for participation in research, and for combined investment in service developments to deliver care closer to home.
- Maintaining elective throughput to highest possible levels throughout the coming winter period by creating facilities and pathways that are as protected as possible from urgent and emergency care pressures on beds, staff, and theatres.

**2. Recommendations**

2.1 Members of the Committee are asked to SUPPORT THE implementation of the proposals outlined in this Paper, namely:

- 2.2 One urology department operating across Walsall and Wolverhampton dedicated to delivering safe, responsive, high quality care.
- 2.3 Reduce the times patients wait for procedures, and the length of time they need to remain in hospital by further developing high volume low complexity procedures (the bulk of the demand from Walsall residents), at the Manor Hospital.
- 2.4 All urological emergency and inpatient procedures to be undertaken at the Royal Wolverhampton NHS Trust's specialist site. This will ensure that patients with an emergency episode will have access to a specialist urology consultant 24/7/365.
- 2.5 Outpatient procedures and follow-up consultations will continue to be undertaken in Walsall.

### **3. Report Detail**

- 3.1 With only four consultants, the urology service at Walsall Manor Hospital predominantly focuses on high volume low complexity (HVLC) conditions, relevant to the demands of the communities it serves.
- 3.2 National guidance suggests that circa 85% of urological procedures can be, or are being performed in this way. In 2019/20, 55% of elective urology cases were performed as day cases at WHT. With improvements in pathways and the additional specialist resources in place, the number of hospital admissions required, and the lengths of stay for Walsall residents can be reduced.
- 3.2 The low numbers of complex urology cases received at WHT are referred on to specialist sites such as Birmingham, Stoke and Wolverhampton. This has impacted the trust's ability to recruit urology consultants, and registrars, many of whom prefer to work and train in larger specialised units.
- 3.3 Internal and external (Getting It Right First Time - GIRFT) reviews of the urology service identified that the small team at Walsall struggles to safely meet demand and recommended that the trust reaches out for support from neighbouring organisations.<sup>1</sup> This is an action mirrored by national recommendations for a network approach to urology service delivery, and in particular, a focus on a HVLC model of day case procedures. A Urology Area Network is being developed across the four Black Country and West Birmingham NHS Trusts.
- 3.4 In 2019/20 there were a total of 639 emergency admissions to Walsall Manor Hospital for emergency urological conditions and 432 admissions for elective interventions.
- 3.5 Both the Walsall Clinical Commission Group, and West Midlands Ambulance Service (WMAS) have confirmed their support to this proposal, identifying the need for improvements in the sustainable delivery of safe urological care.

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<sup>1</sup> Getting it Right First Time – Walsall Healthcare NHS Trust Review (2018).

WMAS has provided assurance that the emergency conveyance of urology patients to Wolverhampton is safe and appropriate.

#### **4. *Financial information***

- 4.1 There are no intended or perceived commercial gains or losses relevant to these proposals. The priority is the delivery of safe and responsive care to residents.

#### **5. *Reducing Inequalities***

- 5.1 The proposals will improve the safety and care of patients by providing an on call consultant out of hours. Further, they will improve patient outcomes, including reducing the number of residents that need to be admitted to hospital, and reducing the lengths of stay for those patients that are admitted.
- 5.2 As one urology service across both areas, residents of Walsall will have better access to state of the art technology for urological procedures and greater opportunities to participate in regional and national research programmes.

#### **6. *Decide***

- 6.1 WHT has attempted to recruit additional urologists, however, as indicated, the larger specialist centres such as Wolverhampton present a more attractive proposition. Sub-contracting consultant care from an agency would not provide sustainable care, and would not resolve the out of hours access.
- 6.2 The option of transferring only emergency patients to RWT and retaining the inpatient elective cases at Walsall has been considered in detail. However, specialist clinicians have concluded, that the safe option would be to have all emergency and elective inpatients under one roof so that they have access to consultant care 24/7.
- 6.3 As a previously stated, complex care is already referred to Wolverhampton, or other specialist centres.

#### **7. *Respond***

- 7.1 Both trusts stress that these changes are brought about by the need to provide sustainably safe and responsive urological care for the residents of Walsall. Patient engagement has commenced, and will be presented to the Committee.
- 7.2 With the potential of a further surge of Covid-19 in the winter months, both NHS Trusts ask for the Committee's support to complete phase 1 – the transfer of emergency care patients as soon as possible, and to commence arrangements for the transfer of elective patients within this financial year.

#### **8. *Review***

These proposals form part of WHT's Improvement Programme and reports monthly to the Improvement Programme Board, which in turn reports by

exception to the trust's Board. The trust's Board meetings are open to the public and details of how to join are published on the trust's website at [www.walsallhealthcare.nhs.uk](http://www.walsallhealthcare.nhs.uk)

Following the implementation of the proposals a "Closure Report" will be completed. Both trusts will be happy to share the Report with Committee.

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