

## Securing sustainable NHS services

Consultation on the Trust Special Administrator's draft report for South London Healthcare NHS Trust and the NHS in south east London



# Draft recommendations

## Summary

The draft recommendations put forward in the TSA's report propose a response to the long-standing issues at South London Healthcare NHS Trust (and its predecessor Trusts) and the sustainability challenges that are forecast to be facing the wider south east London system in the future. The recommendations are set in the context of the need to move towards a model of healthcare that ensures continued improvement in life expectancy and quality of life while addressing the challenges of an ageing population, the growth in the number of people with long term conditions and constrained levels of funding to the NHS. Only through a response to all of these dimensions can safe, high quality, affordable health services be secured for the population of south east London in a sustainable way.

The scale of change required both in the Trust and across the wider health economy is significant and cannot be delivered instantly. A three-year transformation programme is recommended. Through this, the NHS in south east London will be able to deliver services within the resources available by the end of the financial year 2015/16. At this point of the UPR process, it is proposed that the transformation programme has six elements to it:

1. The operational efficiency of the hospitals that make up South London Healthcare NHS Trust needs to improve so that the Trust's costs are in line with strong performing NHS organisations.
2. Queen Mary's Hospital Sidcup should be developed into a Bexley Health Campus providing a range of services to the local population, including day case elective surgery, endoscopy and radiotherapy. The facility should be owned by Oxleas NHS Foundation Trust and services should be provided by a range of organisations.
3. Vacant and poorly utilised premises should be exited (leases) or sold (freeholds). The NHS should engage with the local authorities in Bromley and Bexley in the



process of selling surplus estate to ensure its future use maximises regeneration opportunities.

4. On an annual basis until the relevant contracts end, the Department of Health should provide additional funds to the local NHS to cover the excess costs of the PFI buildings at Queen Elizabeth Hospital and Princess Royal University Hospital.
5. In line with commissioner intentions to improve the quality of care for the local population, there should be a transformation in the way services are provided in south east London. Specifically, changes are recommended in relation to community-based care and emergency, maternity and elective services:
  - Community Based Care – The Community Based Care strategy for south east London should be implemented to deliver improved primary care and community services in line with the aspirations in the strategy. This will enable patients to receive care in the most appropriate location, much of which will be closer to, or in, their home.
  - Emergency care – Emergency care for the most critically unwell patients should be provided from four sites - King's College Hospital, St Thomas' Hospital, Queen Elizabeth Hospital and Princess Royal University Hospital. Alongside this, services at University Hospital Lewisham, Guy's Hospital and Queen Mary's Hospital Sidcup will provide urgent care for those that do not need to be admitted to hospital. Emergency care for those patients suffering from a major trauma (provided at King's College Hospital), stroke (provided at King's College Hospital and Princess Royal University Hospital), heart attack (provided at St Thomas' Hospital and King's College Hospital) and vascular problems (provided at St Thomas' Hospital) will not change from the current arrangements.
  - Maternity care – There are two options under consideration to ensure that a high quality of care is provided for women needing to be in hospital during pregnancy and for women when giving birth. Obstetric-led deliveries could be centralised in line with critical emergency care across King's College Hospital, St Thomas's Hospital, Queen Elizabeth Hospital and Princess Royal University Hospital; alternatively, there could also be a 'stand-alone' obstetric-led delivery unit at University Hospital Lewisham. All other maternity care will continue to be provided in a range of locations across south east London.
  - Elective care – An elective centre for non-complex inpatient procedures (such as hip and knee replacements) should be developed at University Hospital Lewisham to serve the whole population of south east London. Alongside this



elective day cases procedures should continue to be provided at all seven main hospitals in south east London; complex procedures should continue to be delivered at Kings' College Hospital, Princess Royal University Hospital, Queen Elizabeth Hospital and St Thomas' Hospital, and specialist procedures at Guy's Hospital, King's College Hospital and St Thomas' Hospital. Outpatient services should be delivered from a range of local locations.

6. In order to deliver this transformation programme, South London Healthcare NHS Trust should be dissolved and other organisations should take over the management and delivery of the NHS services it currently provides. In addition to the proposals for Queen Mary's Hospital Sidcup outlined above:

- The Queen Elizabeth Hospital site should come together with Lewisham Healthcare NHS Trust to create a new organisation focused on the provision of care for the communities of Greenwich and Lewisham.
- There are two options for Princess Royal University Hospital. The first is an acquisition by King's College Hospital NHS Foundation Trust, which would enable the delivery of service change, enhance the services offered at the site and strengthen the capacity of the site to deliver the necessary operational improvements. This is the preferred option at this stage. However, an alternative option is to run a procurement process that would allow any provider from the NHS or independent sector to bid to run services on the site.
- It is important that these new organisations are not saddled with the issues of the past. To this end, it is recommended that the Department of Health writes off the debt associated with the accumulation of deficits at South London Healthcare NHS Trust. By 31 March 2013, this is estimated to be £207m.

Taken together, this proposed set of actions should improve outcomes for patients, resolve the financial issues within South London Healthcare NHS Trust and, more broadly, secure financial sustainability across the wider health economy.

However, delivering this is a considerable task that will require strong leadership and implementation capacity. Further analysis will be undertaken to define the transition and implementation requirements before completion of the final report in January 2013 and in conjunction with the consultation process. However, it is already clear that transitional support will be required to allow time to implement change.

The TSA's draft report that outlines the recommendations in full can be downloaded from:

[www.tsa.nhs.uk/document-downloads](http://www.tsa.nhs.uk/document-downloads)