KENT HEALTH OVERVIEW AND SCRUTINY COMMITTEE

THURSDAY 11 NOVEMBER 2021

DEVELOPING CARDIOLOGY SERVICES AT MAIDSTONE AND TUNBRIDGE WELLS NHS TRUST

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Summary

At its meeting on 21 July 2021, Kent HOSC received an update on proposals to improve cardiology services at Maidstone and Tunbridge Wells NHS Trust (MTW), as part of the trust's overarching clinical strategy. Proposals have been developed to change the way specialist and inpatient cardiology services are organised and delivered across the trust. Outpatient services, including clinics and outpatient diagnostic services, would be unchanged and remain as now. HOSC members agreed that they did not deem the cardiology proposals to be a substantial variation of service, but they did think they represented potential significant change. HOSC therefore recommended the trust undertakes a 12-week period of patient and public engagement, but that formal consultation is not required.

The trust has now launched a 12-week engagement period which runs from 22 October 2021 to 14 January 2022. A range of information has been produced to outline the case for change, describe the proposals in more detail, and seek people's views. Activity to inform, engage and involve patients, the public, staff, and stakeholders over the 12 weeks has been planned. At the end of the engagement period a report will be produced analysing the feedback and describing the key themes that have emerged. Maidstone and Tunbridge Wells NHS Trust board will consider and review the feedback from the engagement period alongside other evidence and data (clinical, workforce, estates, financial etc) before making a decision about the way the trust organises its specialist and inpatient cardiology services in the future.

This report has been developed to give HOSC members an update on the progress of the programme and accompanying engagement activity. It covers:

- An update on the indicative programme timeline
- A brief summary of the initial, early engagement activity undertaken
- An overview of the 12-week engagement activity planned and being delivered on the proposals to improve cardiology services – the current phase of the programme's work.

Background

At its meeting on 21 July 2021, Kent HOSC received an update on a proposal from Maidstone and Tunbridge Wells NHS Trust to develop specialist and inpatient cardiology services and improve the quality of cardiology care. This is part of a wider programme of work to develop and implement the trust's clinical strategy which HOSC members also discussed.

At the moment the trust's cardiology outpatient clinics are provided in four locations: Maidstone Hospital; Tunbridge Wells Hospitals; Crowborough Hospital and Sevenoaks Hospital – and this would not change with the proposals being considered. Inpatient beds and cardiac catheter lab services for cardiac procedures are split across the two main hospital sites – Maidstone Hospital and Tunbridge Wells Hospital.

Having specialist inpatient and cardiac catheter lab services on two sites means staff and other resources are thinly stretched and, despite the hard work and expertise of MTW's cardiology team, meeting some of the national best practice recommendations is a challenge in some areas. This impacts on the quality of care that can be provided to patients requiring a procedure in the cardiac catheter labs and patients requiring an inpatient stay. The case for change is set out in more detail in papers discussed and considered with HOSC at the 21 July 2021 meeting (https://democracy.kent.gov.uk/ieListDocuments.aspx?Cld=112&MId=8758&Ver=4). It is also described in the engagement document that can be found on the MTW website at https://www.mtw.nhs.uk/cardiology-engagement/.

After careful consideration of ways to improve care, the cardiology team has identified four potential options for improving the way services are delivered. The proposed changes would *not* affect the outpatient services MTW provides, which will stay as they are now.

The four options are:

- 1) Do nothing leave services as they are and seek to make small incremental 'business as usual' improvements
- 2) Consolidate specialist and inpatient services at Maidstone Hospital by reconfiguring existing space
- Consolidate specialist and inpatient services at Tunbridge Wells Hospital by reconfiguring existing space
- 4) Consolidate specialist and inpatient services at Maidstone Hospital by building a new space and reconfiguring existing space.

In July 2021, HOSC members determined that the proposals represented potential significant change but did not amount to 'substantial variation'. HOSC members confirmed therefore that consultation with HOSC (under section 244 of the National Health Service Act 2006 (as amended by the Health and Social Care Act 2012) and under The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013), was not required.

However, in recognition of the potential significant change outlined in the proposals, members did support a 12-week engagement period with the public. This will build on some early patient and public engagement the trust has undertaken on cardiology services.

MTW has therefore now launched a 12-week engagement period, which runs from 22 October 2021 to midnight on 14 January 2022. The trust wants to know what patients, their loved ones, the public, staff, and stakeholders think about the case for change and the different options to address it.

Programme timeline

The diagram below shows where the programme currently is in the indicative overall programme timeline.

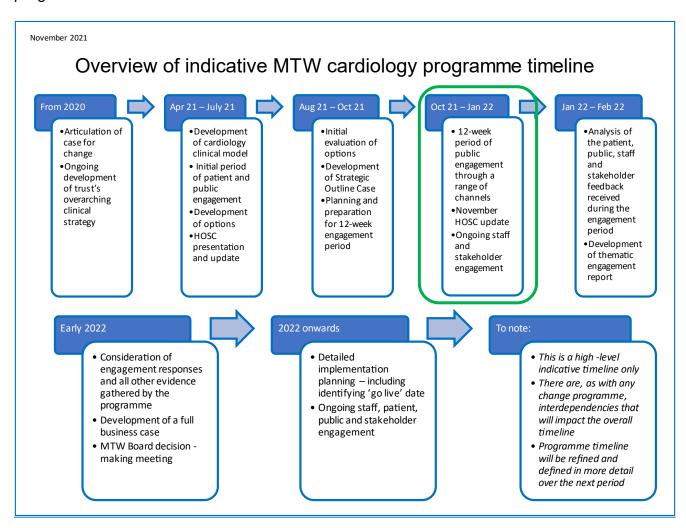


Fig 1: A high-level overview of MTW's Developing Cardiology Services programme timeline

Findings from an early phase of staff, patient, and public engagement

A communications and engagement group and workstream has been established as part of the Developing Cardiology Services programme and its governance infrastructure.

The trust's patient experience team, working with external support from EK360 (formerly Engage Kent), undertook an initial phase of staff, stakeholder, patient, and public engagement in the summer of 2021.

They delivered a number of staff discussions/workshops, a staff survey, a public survey, some face-to-face patient interviews on both the Maidstone Hospital and Tunbridge Wells Hospital sites (with inpatients and with those attending outpatient appointments), and four focus groups. They also raised awareness of the need for change with community and voluntary organisations. Feedback from 220 people was gathered during this phase of work.

Programme leaders continued ongoing stakeholder engagement – for example, discussing the case for change and emerging proposals with commissioners in Kent and Medway Clinical Commissioning Group, with system partners such as SECAmb, with MPs in west Kent, and with HOSC.

Experience on the whole was positive but some of the key themes we have heard about current services include:

- Staff feel facilities could be better and the service is disjointed because it is on two sites. They would like to see a 'centre of excellence' developed
- Patients feel staff are rushed and they don't get enough information about their care or feel listened to
- People feel there are not enough staff available; both staff and patients are concerned about not having 24/7 services and about waiting times for treatments
- Patients are concerned about waiting over a weekend for a cardiac procedure.

This feedback has been taken into account by the MTW cardiology team as they have worked to develop the model of care and potential options that would deliver that model of care. The model of care and the options that could deliver it are outlined in more detail in papers discussed and considered with HOSC at the 21 July 2021 meeting

(https://democracy.kent.gov.uk/ieListDocuments.aspx?Cld=112&Mld=8758&Ver=4). They are also described in the engagement document that can be found on the MTW website at https://www.mtw.nhs.uk/cardiology-engagement/.

An overview of the 12-week engagement period agreed with HOSC (22 October 2021 – 14 January 2022)

Work is underway to build on this initial engagement phase, and to deliver the HOSC recommended 12-week further engagement period with staff, patients, stakeholders, and the public.

Principles:

The following principles underpin our engagement plan and have shaped its content and activity, as well as the approach to evaluating the results. We will:

Engage with people who may be impacted by our proposals

- Engage in an accessible and flexible way
- Engage well through a robust process
- Engage collaboratively
- Engage cost-effectively
- Independently evaluate feedback.

Geographic focus:

We will focus our engagement activity in the following geographic areas:

- The catchment area served by our cardiology service Maidstone, Tonbridge, Tunbridge Wells, Crowborough, Sevenoaks, and Paddock Wood, as well as patients from the East Sussex border
- In the top 20 postcode areas with the highest admissions to the service between 2017-2019
- We also welcome and will seek views from people across Kent and East Sussex.

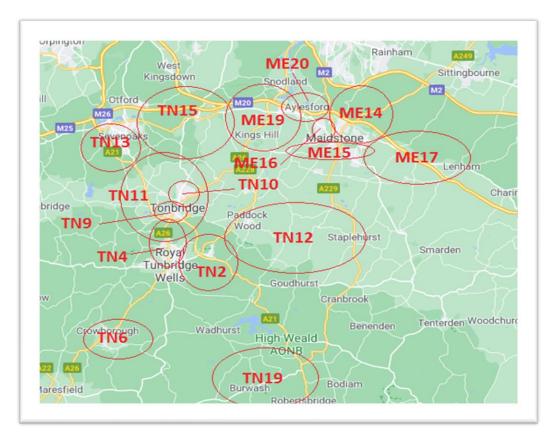


Fig 2: Map of patient population using MTW cardiology services

Engagement aims:

We will undertake a 12-week engagement programme that will meet best practice principles, the legal duty to engage and involve under Section 242 of the Health and Social Care Act (2006), and recognise that for some groups, engagement preferences may have permanently changed due to Covid-19. Our aims for the engagement period are to:

 Raise awareness of the engagement period and make sure appropriate information about it is available and accessible in different formats/places

- Build on the engagement already undertaken to close any gaps and/or further target people most impacted by the proposals
- Provide opportunities to explore more deeply the themes and issues that have arisen, and identify appropriate mitigations
- Engage with staff and professional groups, those with protected characteristics under the equalities' legislation, and those who are seldom heard
- Ensure the MTW board considers the engagement feedback and responses and takes them into account in its decision-making.

Our engagement audiences:

Patients, public,	MTW and system	Elected representatives
community	workforce	
 Cardiology patients, former patients, families, carers Kent residents Patient and carer support and voluntary groups – high blood pressure, high cholesterol, diabetes, overweight, smokers, sedentary lifestyles/inactive Healthwatch Kent League of Friends TWH, MH Those who are seldom heard Protected characteristic groups CCG's local health/community engagement networks GP patient participation groups Via local, regional. print, broadcast, and online media 	 MTW staff - particularly cardiology staff, including staffside and trade unions South East Coast Ambulance Service NHS Foundation Trust Kent and Medway Integrated Care System West Kent ICP Provider Alliance General Practice (including GPs and primary care teams) Kent County Council (including social care and public health teams) Via trade media 	MPs – Tunbridge Wells, Chatham and Aylesford, Tonbridge and Malling, Maidstone and the Weald, Faversham, and Mid Kent, Sevenoaks, Wealden Kent councillors
Regulators, Scrutiny	System leaders and partners	Clinical experts and professional bodies
NHS England and NHS Improvement Care Quality Commission Kent Health Overview and Scrutiny Committee (HOSC) Kent and Medway Joint Health and Wellbeing Board	 Kent and Medway CCG governing body Kent and Medway Integrated Care System Partnership Board ICPs in Kent and Medway West Kent primary care KCHFT KMPT PCNs – Malling, Sevenoaks, Tunbridge Wells, Tonbridge, South Maidstone Provider alliance 	 Kent LMC West Kent LMC KSS Academic Health Science Network Royal College of Surgeons Royal College of Physicians Cardiology network

Council officials – Kent Council Transitions	
County Council; Tunbridge Wells, Maidstone,	
Tonbridge and Malling,	
Sevenoaks, Wealdon	
Councils	

Engagement activities and materials:

Engagement activity is a mix of online and face-to-face engagement (working in a covid-safe way and within government guidelines), exploiting digital means to reach people, but also recognising that not everyone can or wants to engage digitally. Anyone who does not have access to the internet can write to or telephone MTW and information can be sent to them.

At the core of our engagement activity is a document (Appendix A) which clearly lays out the basis on which we are engaging, the background, a summary of the data upon which our proposals have been developed and signposting for more detailed technical information if needed. This document is in plain English and designed in an engaging style, seeks feedback, and promotes the various methods by which people can engage with and respond to our proposals.

The engagement document, associated materials and questionnaire are published on a dedicated section of the MTW website at https://www.mtw.nhs.uk/cardiology-engagement/.

As well as the **engagement document** there are **Frequently Asked Questions** (and answers) and an **online questionnaire** on the website. Materials can be sent in printed form to those who don't have internet access. Different formats and translations for those who don't have English as a first language are available on request.

In addition to this, other planned activity includes a series of **focus groups** particularly targeting those who are most impacted by the proposals, the seldom heard, and those with protected characteristics; **online public listening events**; **staff meetings and discussions**; **some public 'pop-up' information stalls in shopping centres**; and some **telephone polling research** with a representative sample of the Maidstone and Tunbridge Wells catchment population. It also includes **outreach to existing patient and community groups and forums**.

There is an additional strand of work to **publicise and raise awareness** of the engagement period through **advertising in printed media** for those who don't want to or can't engage online, through **social media advertising** and through a widespread **cascade to patient and community networks**. Details of public listening events and pop-up information sessions will be posted on the **MTW website**.

Throughout the engagement period we will monitor responses to identify any demographic trends which may indicate a need to adapt our approach regarding engagement activity. An example would be under representation from a particular

demographic group or geographic area, particularly where there is a demonstrable disproportionate impact upon individuals within that group.

Current focus

The programme team's current focus is on delivering the 12-week engagement period, finalising the strategic outline case and beginning to scope the planning and preparation required for the business case for MTW board's decision-making meeting, anticipated in early 2022. At that point, the MTW board will review all the evidence available, including the responses and feedback received in the engagement period, and decide the future shape of cardiology services within the trust.

The trust will continue to keep HOSC updated as this work progresses over the coming months.

Recommendations

Members are asked to:

- Note the indicative programme timeline provided in this report
- Note the feedback from the early phase of staff and patient engagement and that it has supported the work to develop potential options for improving cardiology services at MTW
- Note the 12-week engagement period that is underway and consider any additional engagement or briefing opportunities that may be required by HOSC members.

Lead officer contacts

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Appendices

Appendix A – MTW Developing Cardiology Services engagement document

Background Papers

None