

Enriching the services at Newark Hospital and contributing to financial sustainability for SFH

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Planned care

Vision remains to provide the broadest possible range of “diagnostic and treatment centre” services as possible, to enable Newark and district residents to access outpatient consultations, diagnostic tests, low risk surgical procedures and health maintenance activities such as drug infusions for long term conditions.

Planned care

- Waiting times for outpatient clinics and diagnostics at NH are broadly aligned with KMH, with some procedures e.g. podiatric surgery and orthopaedics available very quickly
- There is a significant imbalance in achievement of RTT across the Trust, with major pressure points at KMH and only 6 specialties achieving 18 weeks
- Concerted efforts to publicise the service offer at NH, enable GPs and patients to choose NH for those things available there and actively market to outlying practices have paid off – early stages and more to do but marginal gains

Planned care

- Introduction of primary care referral triage arrangements for some specialties (MSK and Ophthalmology) and the strict enforcement of CCG Restricted and Not Routinely Funded procedure lists has impacted upon Newark day case activity
- Medical day case (infusions etc) offer continues to develop, with further opportunities within chemotherapy and other aspects of cancer care as part of a joint offer between NUH and SFH – this is not an imminent prospect

Planned care

- Outpatients is well utilised, and introducing additional clinics presents an operational problem. However opportunity may exist in development of primary care outreach clinics
- Diagnostics is well-utilised with current patient group, with the exception of CT, where M&A patients are offered NH scanner to ensure it is fully utilised
- Theatres/minor ops is significantly under-utilised, with potential of 40-50% available and an over-representation of podiatric surgery which will potentially migrate to other settings

Planned care

- Proposed action
 - Actively pursue offers of Newark treatment to M&A and Hardwick patients in the relevant specialties to improve SFH RTT performance
 - Continue to pursue cancer service development in partnership with NUH
 - Re-visit dialogue with NUH, ULH, Circle etc to investigate “hosting” some services at NH
 - Explore ambulatory general medicine clinics to contribute to admission avoidance

Urgent care

- Vision remains to closer integrate with primary care and create Urgent Treatment Centre in line with NHSE blueprint
 - SFH can continue to provide the current service model while enhancing quality (introduction of 111 direct booking), maintaining performance and without increasing financial risk

Urgent care

- Proposed way forward
 - Continue to cooperate with NEMS and CCGs in co-designing future operating model
 - Possibility of market testing for primary care partner if NEMS do not deliver

Wards

Vision remains to use the beds at Newark Hospital to provide distinctive intermediate care either as a “step up” to support home based care, or as a short-term “step down” from an acute hospital stay focused upon rehabilitation and reablement but not the instigation or continuation of acute care.

Additional elements

The concept of a health and well-being hub focused upon Newark Hospital, with a range of agencies including primary care, community, mental health and third sector organisations promoting independence