

Newark Strategy Update

Proposal

We are proposing a strategy to develop Newark Hospital into a Health and Wellbeing village, as an evolution from an acute hospital setting. Recent national guidance and reconfiguration of acute services have led to centralisation of acute service provision around larger DGHs and tertiary centres. Therefore, it is untenable to provide certain services in smaller DGHs safely and it is unsustainable. This gives the opportunity to utilise this capacity to transform hospital services to those that meet the needs of the community, proactively delivering health and care services. The proposed strategy is built on SFHFT's vision of 'Healthier communities and outstanding care for all' and its strategic objectives.

Overview

Newark citizens have a very strong sense of affiliation to Newark Hospital and developing the identity of Newark Hospital is fundamental to its success. The strategy envisages maximising the potential of Newark Hospital based on its geographical location and improved transport links to offer services to residents in neighbouring villages and towns, working in partnerships with other NHS Trusts and care organisations.

Equally, the service offer in Newark Hospital should align with current changes in system architecture. The strategy should complement the ICS Clinical Services Strategy and ICS Estates Strategy. Furthermore, the development of the Mid Nottinghamshire Integrated Care Partnership (ICP) and Newark Primary Care Network (PCN) gives opportunity for Newark hospital to play a key role in delivering the ICS population health management strategy.

Principles

We propose a Newark Hospital Strategy based on developing services under the following principles:

1. A strategy built on four key areas – Urgent care, Elective care, Community services and Health promotion to enable Newark Citizens to remain healthy, independent and in their own community;
2. Continuing to provide high quality safe and sustainable care;
3. Improving patient and carer experience by bringing care closer to home through enhancing the offer on urgent and elective care; and
4. Working in partnership with PCN, council, local authorities, other NHS Trusts, voluntary services and patient groups to establish the hospital as the Newark Health Village – a community hub that promotes healthy lifestyles and prevention.

Urgent Care:

- The Urgent Care Centre will continue to provide high quality safe & sustainable care and deliver urgent primary care services, including integration of GP out-of-hours services and extended access provision;
- This would consist of a streamlined single front door service integrating current urgent care provision and primary care. This gives clarity to Newark citizens and avoids duplication of services. Working in partnership with the Newark PCN this urgent care service provision would be co-designed to include minor illness, minor injuries and home visiting services;
- A broad range of ambulatory pathways/ services and diagnostic capabilities would be developed to provide a 7-day service;
- Inpatient sub-acute care and step-up beds – where it is clinically safe and appropriate, patients should be able to utilise bed space in Newark Hospital for sub-acute 'step-down' and 'step-up' beds. This is in keeping with the principle of providing care closer to home for Newark citizens, avoiding lengthy journey times to hospitals elsewhere;

- 'Step-up' care – admission through primary care or acute services (e.g. current Acute Home Visiting Service), where patients will benefit from a short stay in hospital to avoid deterioration in their condition that might result in an acute admission to another hospital;
- 'Step-down' care – Newark citizens admitted to a hospital bed anywhere should be enabled to return to their normal place of residence as quickly as possible. The bed base in Newark hospital should facilitate this with rehabilitation and reablement as their primary focus;
- End of life care – while supporting terminally ill patients to receive care and die at their preferred place, where it is appropriate when a patient needs treatment and care for a brief episode, to provide this at Newark Hospital, enabling patients, families and carers to have care in Newark.

Elective care:

- Increase diagnostic capability and direct access provision to primary care, thereby increasing primary care utilisation of hospital. There should be a particular emphasis on radiology and endoscopy;
- Transition of clinical capacity from Kings Mill Hospital to Newark Hospital to offer a comprehensive portfolio of outpatient appointments and clinics for a wide range of services and operating capacity for the non-complex procedures that can be delivered at Newark Hospital;
- Day case surgery (non-cancer elective) – this will be non-complex cases not requiring an inpatient stay and increasing the portfolio of medical and surgical day-case procedures;
- Rehabilitation & re-ablement for Newark citizens who have undergone inpatient elective surgery at other hospitals enabling patients to be closer to their community and social circles, and facilitating return to their residence as quickly as possible;
- Day case treatment – providing a broad range of day case treatment, supporting patients managing long term conditions and cancer including intravenous therapy, blood transfusions, injections and chemotherapy;
- Following improvement in transport links to Newark (e.g. A46 dual carriageway), the above services can be extended to neighbouring communities working in partnership with Nottingham University Hospitals Trust and United Lincolnshire Hospitals Trust;

Community Services:

- Hosting therapy services: Newark hospital to provide a broad range of therapy services in the community setting to support for all age groups, including patients with physical and learning disabilities. This would be an integrated approach working in partnership with other NHS organisations and third sector providers supporting, treating and coordinating care of patient groups in Newark;
- The offer from an individual therapy service to be comprehensive to encompass a wide range of physical conditions and patient groups including children, vulnerable, elderly or frail people and their carers;
- In developing a Health Village, the offer of services should include dietetics, dentistry, podiatry, physiotherapy, occupational therapy, optometry, audiology and speech and language therapy.

Health Promotion:

- A community hub for Newark citizens to access health and care needs;
- Focus moved from being an acute hospital setting to one where trust is proactive in health promotion and prevention. This would include supporting Family Planning Services and Children's Services;
- This will need Trust to work in partnership with stakeholder organisations, particularly local authorities and voluntary services;

- Develop as a centre for educational resource for patients, carers and community-based staff with links to Social Prescribing, promoting self-care and healthy lifestyles;
- Develop as a centre of learning for community-based learning for hospital staff, community staff, primary care and other partnership organisations.

Next steps:

To further progress the development of the Newark strategy, the following next steps are planned:

- A visit to Newark Hospital, to identify how the estate can support this strategy, making the most of under-utilised spaces. This includes consideration of opportunities to work with partner organisations within the available space.
- A set of priorities from this paper will be developed, with underpinning proposals for how they should be delivered. Working with and through ICP and PCN forums will be key to achieving this.

The Board is asked to:

- **Note** the progress update provided, outlining the anticipated future direction and opportunities of Newark Hospital
- **Note** the alignment with the national and local strategic direction