

## Place Based Leads Briefing – Update from ‘Pennine Acute Transaction Complex Services Disaggregation sub-group’ – phase 3 services.

**Headline:** The final phase of service change proposals which will complete the disaggregation of Pennine Acute Hospitals Trust (PAHT) are being developed and will require approval by the GM ICB, prior to implementation in early 2024. Some elective and non-elective surgery for Orthopaedics and Urology will change the location of delivery to support the creation of safe and sustainable clinical pathways within Manchester Foundation Trust (MFT) and Northern Care Alliance (NCA). Place Based Leads are asked to note the progress and work of the sub-group which is supporting these service change proposals, and endorse the local briefing of the Chairs of Health Scrutiny Committees and/or Executive Lead for Health and Care prior to engagement in September 2023.

**The GM ICB has supported MFT and NCA to assure and enact key service changes intended to complete the disaggregation of PAHT**

When MFT acquired NMGH in April 2021 there was a degree of disaggregation of Pennine services – namely all those services that were delivered solely on the NMGH site. However, a number which spanned multiple sites or with complex operating arrangements have required a longer period to develop safe and sustainable service pathways aligned with each organisation. These sustainable solutions would also have a higher likelihood of impact on patient flows or location of service delivery. The GM ICB has previously agreed the process by which MFT and NCA should develop and gain approval for its complex service changes, alongside establishing a group chaired by Mike Barker, Place Based Lead (PBL) for Oldham, to oversee the work on behalf of the ICB. The process is codified in the ‘Framework for Developing and Assuring Service Change Proposals in Greater Manchester’. This was used to support the previous two phases of service changes considered by the GM Joint Planning and Delivery Committee in July 2022 and by ICB Board in March 2023.

**The delegated sub group has supported MFT and NCA to gain approval for phase 2 service changes which will be implemented in September 23.**

The ‘Pennine Acute Transaction Complex Services Disaggregation subgroup’ referenced above is constituted of nominated Locality leads from Bury, Manchester, Oldham, Rochdale and Salford. The group has overseen NCA/MFT’s development of service change proposals, including the approach to travel time analysis, and production of the substantial variation assessments, as well as ensuring the appropriate level and timing of Locality engagement. Laterally, the group reviewed MFT/NCA service change proposals for Cardiology, Gastroenterology, Rheumatology and Urology (six low volume pathways specifically) and associated substantial variation assessment before they were assessed and agreed by respective Health Scrutiny Committees and the GM ICB in March 2023.

**The final phase (phase 3) of service changes is currently being developed and will complete the disaggregation of Pennine Acute services**

The final phase of specialties will be disaggregated between January and March 2024; these are ENT, consultant referred Dexa Scanning, Orthopaedics and Urology. As with previous phases, clinical teams for each specialty in MFT and NCA are developing proposals which will deliver sustainable clinical services for the populations served, aligned with each Trust’s single services. Dexa scanning is a relatively straightforward change. The other three specialties represent the most complex to disaggregate and have taken an extended period to understand the options and solutions for future service provision. Once disaggregated, while there will remain clinical pathways and services which each trust can rely on the other to support, this will form part of normal business as usual operating.

**Phase 3 service changes are likely to involve changes to the site of delivery for some pathways to ensure safe reliable care for patients**

As previously highlighted, these proposals centre on how clinically sustainable and high-quality pathways can be created and maintained by both organisations in their new form. With each of these specialties this included the development of medical rotas and the delivery of emergency surgery. The high-level service changes are as follows;

**ENT:** This proposal will create additional services at the North Manchester General Hospital site including 23-hr inpatient access, for the North Manchester catchment population. Paediatric pathways will be aligned with Royal Manchester Children's Hospital, while adult services will be part of the MFT ENT single service .

**Urology and Orthopaedics (incl. Trauma) represent high volume specialties with a strong evidence base about how services should be configured to deliver the best clinical outcomes**

**Urology:** These changes primarily relate to the provision of planned and emergency surgery, with both MFT and NCA creating specialist hubs as part of their single hospitals systems. Some specialist surgery for the North Manchester catchment population will be provided at Manchester Royal Infirmary. Commissioners have previously agreed changes to NCA pathways which link Urology pathways in Bury to Salford.

**Orthopaedics:** National guidance and best practice recommends that planned and emergency orthopaedic care is provided at separate hubs. This has been shown to reduce waiting times and improve outcomes. Therefore, MFT and NCA are working up clinical models which link activity at North Manchester General Hospital into one of these hubs. MFT has created an elective hub at Trafford General, residents in the North Manchester catchment area will be able to access this hub instead of the NCA hub at Fairfield General. Trauma pathways for a proportion of NCA catchment residents are currently provided at North Manchester General. In future these residents will receive this at NCA's trauma hubs of Royal Oldham Hospital or Salford Royal.

**Over June 2023 to August 2023 key engagement activities will be undertaken to understand the impact on patients and inform how changes should be implemented**

The next steps for the phase 3 changes are further refinement of the proposed clinical models, alongside the development of service change proposals, including travel time analysis, production of the substantial variation assessments, equality analysis and outputs from patient engagement. Both MFT and NCA are engaging with Healthwatch for each affected Locality to gain insight to inform the implementation of the new service models. Both organisations are also working collaboratively to undertake specific engagement activities with patients currently utilising these services.

**With PBL Support, Health OSCS will be asked to consider the service change proposals and endorse them, prior to consideration by the GM ICB**

Following agreement by the sub-group chaired by Mike Barker, substantial variation assessment and service change proposals for each service change will be taken through the agreed Locality governance. Engagement with relevant Locality Boards will take place during July and August before further engagement with Health Overview and Scrutiny Committees in August and September.

As SRO, Mike Barker plans to brief the Extended Leadership Group at GM, prior to bringing these changes to the GM ICB for approval in Autumn.

**NCA and MFT will continue to work collaboratively to deliver these changes, maximising the benefit to patients**

NCA and MFT are working closely together to support the above and earlier changes. During earlier transfers some data issues, as a result of the implementation of new electronic patient systems, have been identified. This has been escalated through appropriate routes, including the ICB, and are being addressed collaboratively. Any learning will inform the approach to implementing phases two and three.

#### **Schedule for Locality approvals overleaf**

For more information contact Moneeza Iqbal (NCA) or Sophie Hargreaves (MFT), Directors of Strategy

	Forum	July				August				September				October					
		10	17	24	31	7	14	21	28	4	11	18	25	2	9	16	23	30	
Localities	Bury Locality Board			28		7													
	Bury Scrutiny							30	7										
	Oldham Locality Board						24	31											
	Oldham Scrutiny								7										
	Rochdale Locality Board					10			29										
	Rochdale Scrutiny										21								
	Salford Locality Board						14	24											
	Salford Scrutiny								28	6									
	Manchester Locality Board briefing																		
	Manchester Scrutiny							24		6									
ICB Board	ICB Board															18			

For more information contact Moneeza Iqbal (NCA) or Sophie Hargreaves (MFT), Directors of Strategy