

Paediatric Services in Brent

Report for Brent Overview and Scrutiny Committee Meeting – 16th June 2015

1 Purpose

The purpose of this report is to provide Brent Overview and Scrutiny Committee (OSC) with an overview and summary of Paediatric Services provided to Brent residents. The report summarises current paediatric provision in Brent and sets out the potential impact on Northwick Park Hospital of the changes to paediatric services at Ealing Hospital taking place on 30th June 2016.

In particular, this report will address a number of specific information requests from OSC members:

- General overview of the services provided, facilities, usage and funding for paediatric services
- Feedback on actions regarding improvement objectives, any changes planned and savings targets
- Any planned change to commissioning of paediatric services and priorities
- The current paediatric bed occupancy at NPH hospital compared with last year
- Occupancy of the special care baby unit compared with last year
- Numbers of children seen at A&E in the last two years
- Have admissions needed to be transferred due to lack of beds and if so how often?
- Is it anticipated that there will be any additional admissions as a result of the transfer of paediatric services from Ealing Hospital. If so, what steps have been taken to manage this situation (for example additional beds, staffing or new services at NPH)?

2 Overview of current paediatric provision in Brent

Brent Clinical Commissioning Group (CCG) commissions acute and community paediatric services from three main providers:

- Acute paediatric services from London North West Healthcare NHS Trust (LNWHT) and Imperial College Healthcare Trust (ICHT)
- Other specialist acute paediatric provision is commissioned at other hospitals including Great Ormond Street
- Community paediatric services from London North West Healthcare NHS Trust
- Child and adolescent mental health services from Central North West London NHS Trust

The providers are responsible for the facilities from which they deliver the services that Brent CCG commissions. The quality assurance concerning provider facilities lies within the remit of the Care Quality Commission. The contracts which Brent CCG holds with the providers include service conditions and quality standards that ensure appropriate facilities management.

2.1 Acute paediatric services at Northwick Park and Ealing Hospitals

LNWHT provides the following acute paediatric services across the NPH and Ealing Hospital sites:

- **2 General Paediatric departments** at NPH and Ealing Hospital:
 - 16 in-patient beds at Ealing Hospital;
 - 21-24 in-patient beds at NPH (number of beds flexes in line with acuity).
- **1 neonatal department** at NPH – Ealing Hospital neonatal service will close in July 2015 as part of the Shaping a Healthier Future (SaHF) reconfiguration programme
- **Specialist Care Baby Unit (SCBU)** There is a Level 2 Unit at NPH commissioned by NHS England (NHSE). The Level 1 SCBU at Ealing Hospital will close in July 2015 as part of the Shaping a Healthier Future reconfiguration programme
- **Tertiary Haemoglobinopathies Service** NHSE commissioned
- **Paediatric Oncology Shared Care Unit (POSCU) Service** NHSE commissioned

Apart from the transfer of neonatal and SCBU services at Ealing Hospital in July 2015, no other changes are planned until June 2016 when in-patient paediatric services will transfer from Ealing Hospital.

The table below sets out the total annual cost of acute paediatric services commissioned from LNWHT:

	NPH	Ealing Hospital	Overall Expenditure
Total Annual Planned Cost	£5,651,434	£3,186,145	£8,837,579
Actual Cost	£5,154,664	£3,258,324	£8,412,988
Variance Cost	£496,770	-£72,179	£424,591

2.2 Paediatric activity and finance at Northwick Park Hospital

The table below sets out 2014/5 paediatric activity at Northwick Park Hospital. Significant increases in activity are highlighted in red and include:

- Urology
- Audiological medicine
- Clinical Immunology and Allergy
- Dermatology
- Diabetes

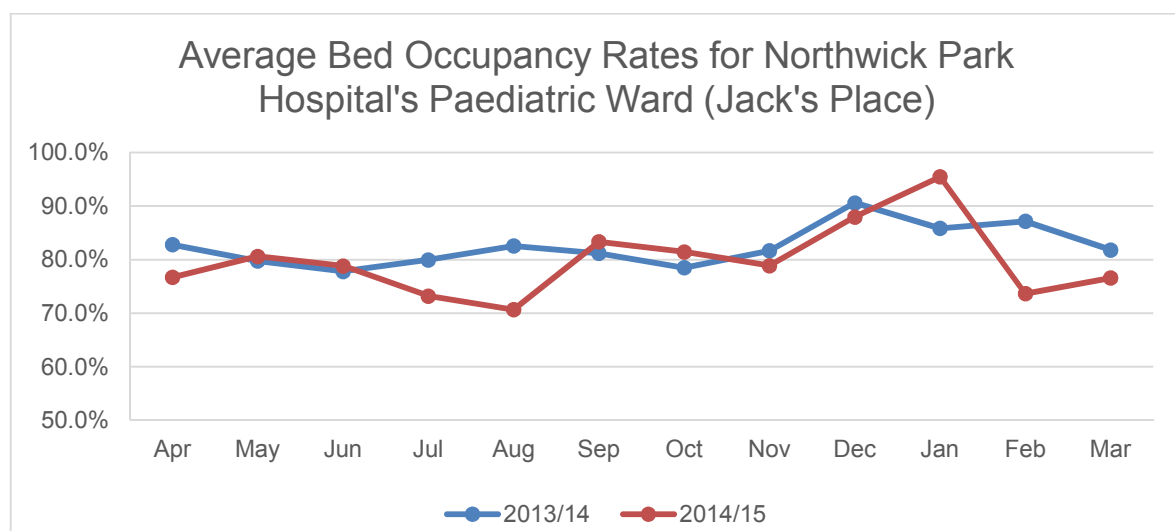
Despite increased activity in some areas there is an estimated underspend of £496,770 against annual cost at NPH.

Northwick Park Hospital - 2014/15 M12 - Paediatric Treatment Functions
Plan vs Actuals - Activity and Cost

Treatment Function Name	Annual Activity	YTD Actual Activity	YTD Variance Activity	Annual Cost	YTD Actual Cost	YTD Variance Cost
Paediatric surgery	68	54	14	£12,806	£8,479	£4,327
Paediatric urology	82	141	-59	£27,979	£55,269	-£27,290
Paediatric gastrointestinal surgery	0	3	-3	£0	£3,700	-£3,700
Paediatric trauma and orthopaedics	163	113	50	£310,232	£268,797	£41,435
Paediatric ear, nose and throat	1,044	756	288	£323,079	£276,670	£46,409
Paediatric ophthalmology	677	621	56	£104,013	£91,951	£12,062
Paediatric gastroenterology	7	13	-6	£6,921	£10,853	-£3,932
Paediatric endocrinology	118	107	11	£32,492	£29,803	£2,689
Paediatric audiological medicine	628	683	-55	£87,188	£66,405	£20,783
Paediatric clinical immunology and allergy service	192	226	-34	£32,017	£36,957	-£4,940
Paediatric infectious diseases	623	284	339	£73,665	£41,810	£31,855
Paediatric dermatology	0	110	-110	£0	£14,991	-£14,991
Paediatric respiratory medicine	108	92	16	£31,295	£26,048	£5,247
Paediatric nephrology	56	63	-7	£9,793	£7,327	£2,466
Paediatric medical oncology	54	14	40	£160,145	£34,732	£125,413
Paediatric rheumatology	76	84	-8	£26,249	£31,907	-£5,658
Paediatric diabetic medicine	214	249	-35	£32,800	£34,147	-£1,347
Community Paediatric	36	12	24	£37,561	£28,539	£9,022
Paediatric neuro-disability	106	93	13	£50,241	£34,630	£15,611
Paediatric cardiology	2	0	2	£1,331	£0	£1,331
Paediatric	7,988	7,967	21	£4,282,510	£4,039,771	£242,739
Paediatric neurology	107	115	-8	£9,117	£11,879	-£2,762
TOTAL	12,349	11,800	549	£5,651,434	£5,154,664	£496,770

2.2.1 Paediatric in-patient bed occupancy at Northwick Park Hospital (Jack's Place) for 2013-14 and 2014-15

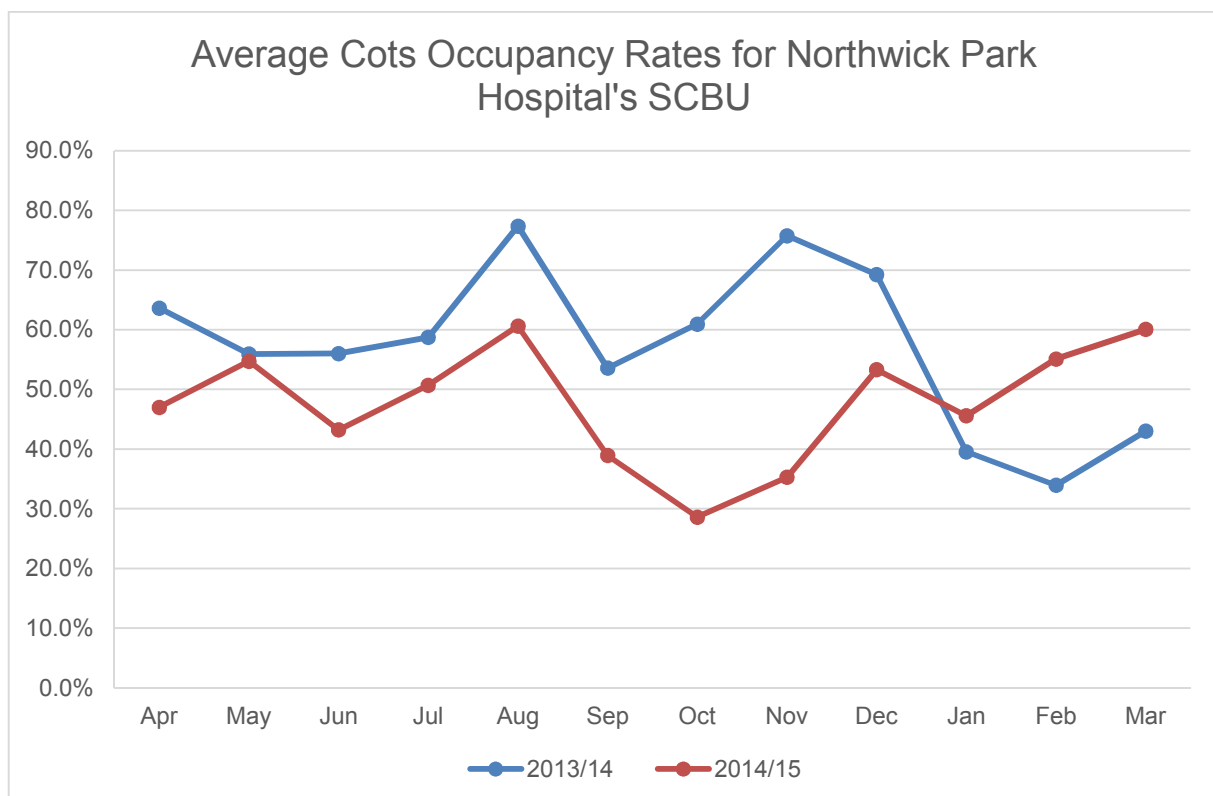
Month	2013/14			2014/15		
	Average Occupied Beds	Total Beds	Average Bed Occupancy Rate	Average Occupied Beds	Total Beds	Average Bed Occupancy Rate
Apr	17.4	21	82.8%	16.1	21	76.7%
May	16.7	21	79.7%	16.9	21	80.6%
Jun	16.3	21	77.8%	16.5	21	78.8%
Jul	16.8	21	80.0%	15.4	21	73.2%
Aug	17.3	21	82.6%	14.8	21	70.7%
Sep	17.0	21	81.2%	17.5	21	83.3%
Oct	16.5	21	78.5%	17.1	21	81.4%
Nov	17.1	21	81.7%	16.6	21	78.9%
Dec	19.0	21	90.6%	18.5	21	88.0%
Jan	18.0	21	85.9%	20.0	21	95.5%
Feb	18.3	21	87.2%	16.9	23	73.7%
Mar	17.2	21	81.8%	17.6	23	76.6%



Overall, there has been a slight decrease in average bed occupancy rate on a monthly basis in 2014/15 from 2013/14 apart from an increase in October 2014 and near full capacity in January 2015.

2.2.2 SCBU occupancy at Northwick Park Hospital for 2013-14 and 2014-15

Month	2013/14			2014/15		
	Average Occupied Cots	Total Cots	Average Cots Occupancy Rate	Average Occupied Cots	Total Cots	Average Cots Occupancy Rate
Apr	12.7	20	63.6%	9.4	20	47.0%
May	11.2	20	55.9%	10.9	20	54.7%
Jun	11.2	20	56.0%	8.6	20	43.2%
Jul	11.7	20	58.7%	10.1	20	50.7%
Aug	15.5	20	77.4%	12.1	20	60.6%
Sep	10.7	20	53.6%	7.8	20	38.9%
Oct	12.2	20	60.9%	5.7	20	28.6%
Nov	15.2	20	75.8%	7.1	20	35.3%
Dec	13.8	20	69.2%	10.7	20	53.3%
Jan	7.9	20	39.5%	9.1	20	45.6%
Feb	6.8	20	33.9%	11.0	20	55.1%
Mar	8.6	20	43.0%	12.0	20	60.1%



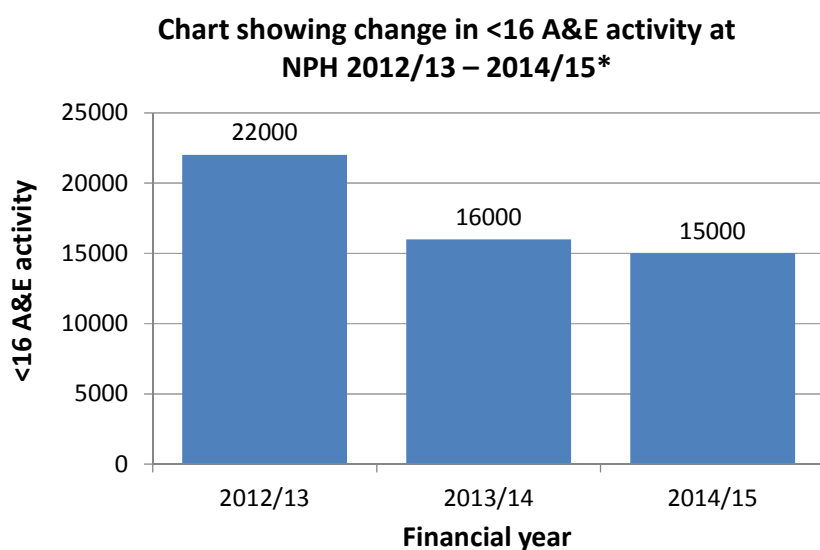
Overall, there has been a marked decrease in average bed occupancy rate from April – November 2014 on a monthly basis compared to 2013/14. However, there was then a significant continual increase from December 2014 to March 2015. However, the highest occupancy rate was only ever 60.6% at its peak.

2.2.3 Transfers due to lack of beds/cots

Occupancy rates as shown in the above graphs demonstrate that NPH currently has sufficient numbers of paediatric beds/cots to manage demand. An additional three paediatric in-patient beds will be in place prior to the planned transition in June 2016.

2.2.4 <16 years old A&E activity at Northwick Park Hospital

Paediatric activity at NPH A&E has fallen by 30% since 2012/13. Patients who self-present at NPH A&E are streamed through the Urgent Care Centre. The Urgent Care Centre is able to see and treat more patients as a proportion of the activity in the emergency department which is a factor in reducing levels of paediatric A&E activity at NPH.



*Assumptions: NWL commissioned activity from SUS used – assumption that NWL commissioned activity accounts for 78% of total activity. 2012/13 activity extrapolated from 3 months of data.

2.3 Paediatric activity and finance at Ealing Hospital

The table below sets out 2014/15 paediatric activity at Ealing Hospital. The way in which activity is recorded by Ealing Hospital is not as detailed as at Northwick Park Hospital. All their activity is recorded collectively and not under the different headings (though their services will cover the same conditions). In-patient Quality Innovation Productivity and Prevention (QIPP) relates to quality improvements that have achieved improved productivity. These gains act as a surplus figure. Significant increases in activity are highlighted in red.

There is an estimated overspend of £72,179 against annual cost at Ealing Hospital.

Ealing Hospital 2014/15 M12 - Paediatric Treatment Functions
Plan vs Actuals - Activity and Cost

Treatment Function Name	Annual Activity	YTD Actual Activity	YTD Variance Activity	Annual Cost	YTD Actual Cost	YTD Variance Cost
Paediatric Inpatients	2330	2403	-73	£2,185,323	£2,222,828	-£37,505
Paediatric Inpatients QIPP	-24	0	-24	-£18,355	£0	-£18,355
Paediatric Inpatient XBD	182	233	-51	£63,317	£82,837	-£19,520
Paediatric Out Patients	5144	4808	336	£974,324	£916,120	£58,204
Paediatric Out Patients QIPP	-296	0	-296	-£58,977	£0	-£58,977
Paediatric OP Procs	228	209	19	£39,865	£36,539	£3,326
Paediatric Tele	24	0	24	£648	£0	£648
TOTAL	7589	7653	-64	£3,186,145	£3,258,324	-£72,179

3 Planned improvements to paediatric services for children in Brent

- **New community based services** – As part of a wider programme of community service re-design, community-based paediatric asthma and paediatric phlebotomy services will be improved. Brent CCG is also participating in a pan-North West London programme to review the provision of community-based paediatric services.
- **Child and Adolescent Mental Health Services (CAMHS)** - Brent CCG in partnership with the North West London Collaboration of CCGs, has recognised the need to improve out-of-hours CAMHS provision and has invested an additional £140k as part of a £1.1m pilot which is aimed at improving the urgent care response to children and young people with a mental health crisis. The pilot will be undertaken during a comprehensive review of CAMHS in 2015/16 to inform the future service developments required.
- **New Paediatric Epilepsy service** to reduce need for travel to tertiary centres
- **Opening of specialist feeding investigations service** to reduce travel to Great Ormond Street Hospital to provide care closer to home.
- **NHSE/CCG co-commissioning of Paediatric High Dependency Unit (HDU)** to critical care level 2 to reduce impact of un-commissioned HDU activity in Jack's Place.
- **Completion of Jack's Place refurbishment by Winter 2016** – all CQC actions included plus SaHF reconfiguration requirements.
- **Development of Paediatric Assessment Unit** in the NPH Paediatric Emergency Department Observation area (SaHF reconfiguration requirement) to facilitate 12 hour discharge.

4 Care Quality Commission review of paediatric services at Northwick Park Hospital

The August 2014 Care Quality Commission inspection report identified a number of areas where the Trust must make improvements, specifically related to children in Jack's Place were:

- The environment is suitable and that appropriate equipment is available, safe and suitable in paediatric services at Northwick Park Hospital.

Recommendation / Finding	Action taken
<p>Jack's Place: The design of the ward meant that many areas were not observable from the nurses' station, or the reception desk, which posed a safety risk when children were playing in the ward. <i>Regulation 15 (1) (a)</i></p>	<p>Review of ward configuration undertaken with options scoped and costed. Refurbishment starts in July 2015 and will be completed by October 2015</p>
	<p>All compliance actions complete and ongoing monitoring across services both at NPH and Central Middlesex Hospital</p>
<p>Neonatal unit A fridge in the neonatal unit was iced up and there were gaps in the temperature recording. <i>Regulation 16 (1) (a)</i></p>	<ul style="list-style-type: none"> • Fridge defrosted • Out of date samples disposed off • HCA to add to rota of temperature recordings

5 Impact of Shaping a Healthier Future reconfiguration on Northwick Park Hospital paediatric services

5.1 Shaping a Healthier Future (SaHF) overview

The 'Shaping a Healthier Future (SaHF) programme, led by local clinicians, proposed changes to services in North West London (NW London) that would safeguard high quality care and services for the local population. The principles behind this are: putting the patient at the centre of the NHS; providing more accessible care; and establishing centres of excellence so that more expertise is available more of the time.

Under SaHF proposals, maternity, neonatal and paediatric in-patient services will be consolidated at fewer sites, resulting in the closure of some services at Ealing Hospital.

These changes have the unanimous support from all medical directors in NW London, who have written to the Health Secretary setting out that 'there is a very high level of clinical support for this programme across NW London' and that these changes will 'save many lives each year and significantly improve patients' care and experience of the NHS.'

SaHF proposed the consolidation of paediatric in-patient services from six sites to five sites to incorporate paediatric emergency care, in-patients and short stay facilities. The five sites are aligned to the five major Trusts to allow a full array of support services including diagnostics and surgery:

- Chelsea and Westminster Hospital
- St Mary's Hospital (part of Imperial College Healthcare Trust)
- Hillingdon Hospital

- West Middlesex Hospital
- Northwick Park Hospital

Consolidating paediatric services at fewer sites will enable Trusts to improve levels of consultant cover. Consistent presence of senior clinicians will:

- Enable NW London to provide consistent 7 day services
- Reduce paediatric Serious Untoward Incidents (SUIs)
- Reduce paediatric emergency admissions
- Reduce mortality rates
- Increase patient satisfaction
- Expose trainees to a wider range of complex cases
- Provide a platform for Out of Hospital services

On 20th May 2015 Ealing CCG Governing Body agreed that:

- Maternity and neonatal services should close at Ealing Hospital on 1st July 2015, with activity re-distributed in NWL.
- Paediatric inpatient services should close at Ealing Hospital on 30th June 2016, 12 months after the maternity transition.

Over the next 12 months, detailed implementation planning work will be undertaken in preparation for the paediatric changes. Regular checkpoints have been built into the process to enable commissioners to monitor progress and intervene as necessary.

5.2 Anticipated impact on paediatric services at NPH

The changes at Ealing Hospital will have implications for hospital sites elsewhere in North West London. Detailed activity modelling has been undertaken to establish the likely flow of patients to alternative sites. This modelling is based on a 'highest case' scenario, resulting in the re-provision of current Ealing paediatric activity with a contingency of 27% above current activity, ie 127%. The 'highest case' scenario approach ensures that sufficient contingency is built into the system to account for unexpected increases in demand. The activity model will be refreshed in the coming months using the latest available data. Paediatric activity is currently falling at Ealing Hospital, so it is likely that the amount of additional capacity built into the system will exceed the 27% already planned and accounted for.

It is anticipated that Northwick Park Hospital will receive an additional 500 paediatric inpatient admissions per year as a result of the changes at Ealing Hospital. This includes significant contingency (additional 27% system-wide over-provision referenced above) and translates into a need for 3 additional paediatric inpatient beds at Northwick Park Hospital. London North West Healthcare Trust (LNWHT) have secured funding from the Shaping a Healthier Future programme to create 3 additional inpatient beds via an expansion of Jack's Place. Work has already commenced and it is anticipated that the new physical capacity will be in place by winter 2015.

The workforce implications of the changes are being worked through as part of the implementation planning process. It is anticipated that the majority of Ealing staff will be redeployed to receiving sites in line with activity. The Shaping a Healthier Future programme is also working with Health Education North West London (HENWL) to increase the number of paediatric doctors available in North West London overall.

The closure of paediatric in-patient services at Ealing Hospital on 30th June 2016 will mean that in some cases, Ealing A&E will be required to stabilise, assess and transfer paediatric

patients as paediatric specialist input will no longer be available on-site. To ensure that sufficient contingency exists across the system, activity modelling does not take into account Ealing A&E's retained ability to manage children, or the benefits of new services (such as the Paediatric Rapid Access Clinic and improved Urgent Care Centre). Again, patient flow assumptions are based on a scenario in which activity is significantly higher than current activity levels (plus 27%). In practice, the true volume of transfers will be lower. Under this 'highest case' scenario, Northwick Park Hospital plan to receive an additional 4-5 A&E attendances (for under 16 year olds) per day from June 2016. LNWHT has confirmed that they have the physical space within the new Northwick Park Hospital A&E to absorb this additional activity with the additional three in patient beds.

5.3 Preparing patients and the public about these changes and the Assurance Process

The SaHF reconfiguration programme underwent a full statutory public consultation process. In February 2013 the Joint Committee of Primary Care Trusts agreed to proceed with the SaHF proposals. This included the consolidation of maternity units in North West London from 7 to 6 (the remaining 6 maternity units will be Chelsea and Westminster Hospital, St Mary's Hospital (part of Imperial College Healthcare Trust), Hillingdon Hospital, West Middlesex Hospital, Northwick Park Hospital, Queen Charlotte's and Chelsea Hospital (part of Imperial College Healthcare Trust) leading to the closure of Ealing Hospital Maternity Unit.

In October 2013, the Secretary of State endorsed these plans, although no decision was made on the timing of the transition of maternity services.

In late 2013 Ealing Hospital raised concerns to the Medical Director of NHS England (London region) regarding the issue of a reduction in deliveries for the Trust and the risk this posed to the quality of care. In response to the concerns raised by Ealing Hospital, on 19th March 2014 Ealing CCG Governing Body made a decision to invest in contingency plans for the transition of maternity and neonatal services from Ealing Hospital by 2015.

Ealing CCG Governing Body met again to discuss the issue in October 2014 and agreed to plan for the implementation and assurance of these changes. The Governing Body considered the initial outputs of the first phase of assurance at its meeting in March 2015 and agreed that further work was required.

Ealing CCG Governing Body met on 20th May 2015 to consider the outputs of this assurance work and decided that a date could now be set for the transition. The Governing Body considered a range of documents and heard from clinical leaders regarding this change.

All of the papers for this meeting are available to view on the Ealing CCG website at:

www.ealingccg.nhs.uk

- The case for change (maternity & paediatrics)
- An overview of the new North West London (NWL) model of care for maternity
- Feedback from a review undertaken by the London Clinical Senate
- The modelling of activity following the transition (maternity and paediatrics)
- Readiness for the proposed changes
- Outputs of the assurance processes undertaken by CCGs in North West London, NHS England and the Trust Development Authority (TDA)

- An implementation plan for the changes which would be enacted following the CCG decision on timing
- An overview of the communications, engagement and equalities work planned

The Ealing Governing Body took questions from the public before its decision on whether to set a date for this change.

6 Conclusion/Summary

In summary and as approved by Ealing CCG Governing Body, maternity and neonatal services are planned to close at Ealing Hospital on 1st July 2015, with activity re-distributed in NWL. Paediatric in-patient services should close at Ealing Hospital on 30th June 2016, 12 months after the maternity transition.

Brent OSC is asked to note the planned changes to services, the approach to preparing patients affected and the public about these changes and the assurances being undertaken by Ealing CCG (on behalf of the 8 NWL CCGs including for Brent) to ensure a safe and smooth transition.

Brent CCG and LNWHHT will provide further updates on progress.