



# Establishing a Regional Arterial Centre at UHH

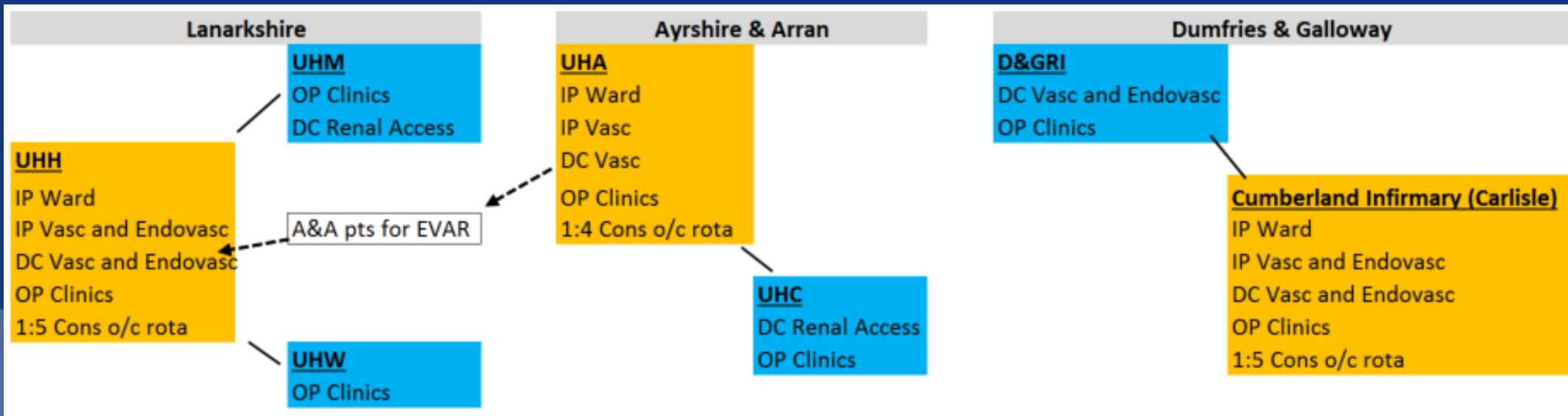
Acute Governance Committee Update – Nov 19  
Cameron Sharkey, Service Manager

# Background

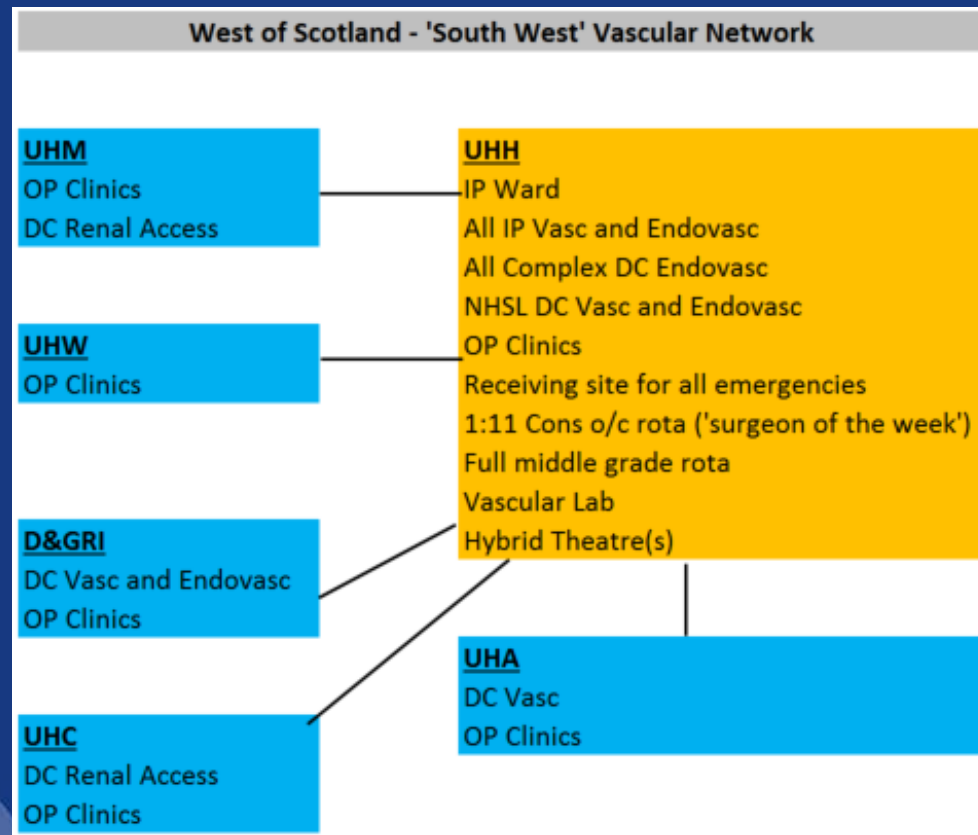


- WoS Vascular Service Review established 2018. All stakeholders recognised need for increased regional working.
- Vision for two 'hub and spoke networks' centred at QUEH (GGC and FV) and UHH (L, A&A, D&G).
- Vision ratified by WoS CE Group in Nov 18.
- QUEH hub operational and precipitated by FV service collapse.
- Phased approach to UHH hub complete by Autumn 20.

# Service Delivery Model – Aug19



# Future Service Delivery Model



# Case for Change

<p><b><u>Safety</u></b></p> <ul style="list-style-type: none"><li>• Alignment of complexity with expertise and resource</li><li>• VSGB recommend population of 800k for arterial centre and &gt;60 AAA procedures per year</li></ul>	<p><b><u>Sustainability</u></b></p> <ul style="list-style-type: none"><li>• Consultant vacancies in all WoS Boards excepting NHSL</li><li>• VSGB recommends 1:6 on call rota</li><li>• Key dependencies with IR service</li><li>• Increasing shift to endovascular procedures reducing need for IP beds (inc. ICU beds)</li></ul>
<p><b><u>People</u></b></p> <ul style="list-style-type: none"><li>• Recruitment and retention of medical and non-medical workforce</li><li>• Maintains delivery of OP and DC care as close to the patient as possible</li></ul>	<p><b><u>Quality and Performance</u></b></p> <ul style="list-style-type: none"><li>• Safeguard patient outcomes linked to increasing volume of complex procedures</li><li>• Levelling of demand and capacity across WoS ensuring timely access</li></ul>

# Phasing

Phase 1	Shared weekend o/c with NHSAA	July 19
Phase 2	24/7 Emergency cover and provision of elective sessions for NHSDG	Sept 19
Phase 3	Hub and Spoke Network with Arterial Centre at UHH	Autumn 20

# Phase 1



Shared weekend on-call with NHSAA

✓ Complete July 2019

# Phase 2 (Plan A)



Continuation of Phase 1 NHSAA arrangements

Shared weekend and OOHs on-call with NHSDG

~60 sessions per year of NHSDG elective activity (previously undertaken at Carlisle) to be undertaken at UHH by NHSDG surgeons



# Phase 2 (Plan B)

Continuation of Phase 1 NHSAA arrangements

24/7 receiving of NHSDG vascular emergencies

~60 sessions per year of NHSDG elective sessions to be undertaken at UHH

Additional NHSDG complex endovascular workload to be accommodated

✓ In progress

# Phase 2 – Next Steps



Sign off of financial tariff with partner Boards

Key additional resource required:

- Theatre sessions
- Nurse co-ordinator post (cf. Trauma Liaison)
- Angio radiographer cover into evenings and weekend
- Additional AHP input to IP beds

Establishment of Attend Anywhere Hot Clinic to prevent admissions

# Phase 3

Regional Arterial Centre at UHH serving NHSL, NHSAA and NHSDG

All vascular emergencies received for region

All vascular IP beds in region

# Phase 3 Enablers

- 1) Provision of additional IP beds
- 2) Provision of additional hybrid theatre capacity
- 3) Creation of fit for purpose repatriation and rehabilitation network

# Inpatient Beds

Dependant on Ortho Trauma centralisation at UHW to release Ward 5 beds

Reconfiguration of surgical floor to co-locate level 1 and 2 surgical (and ?medical) beds in Ward 5, releasing ward capacity elsewhere

Funding for additional beds by means of resource transfer from NHSAA and NHSDG

# Hybrid Theatre



Suitable area identified and design process underway with ISS

Procurement specification drafted

Business case in progress

Staffing funded by means of resource transfer from NHSAA and NHSDG

# Repatriation and Rehabilitation

Establishment of Vascular Rehab Network involving partner Boards

Initial meeting 15<sup>th</sup> Nov seeks to scope agreement on single Rehabilitation Model by mapping of existing pathways and processes with service development plan and actions to deliver regional service.