



County Hospital Strategic Plan

Making UHNM a Great Place to Work

2024-2026



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What is the purpose of this plan?

There is a valuable and distinct role for County Hospital within the overall UHNM landscape. This plan brings together our key activities relating to County Hospital into one place, showing those we are prioritising for further work over the next two years. It reflects work over the last 18 months and is the first point where it has been possible to describe a longer-term model for County Hospital.

How has this been developed?

The County Hospital Programme is a 'Must do' within the overall UHNM Strategic Framework. As a result, the County Hospital Strategic Programme was established in 2022 with a small number of focused work streams; surgical elective, urgent care, frailty, women's services and diagnostics.

Over the summer 2022, the Chief Executive and Medical Director undertook site wide engagement to help ensure visibility for the work starting on the County Hospital site.

The process underway in developing this plan is just as important as the plan itself. There has been considerable engagement in getting work streams up and running and in starting to understand the future model of care. From the outset, clinical leads were identified to provide clinical leadership in development and delivery, ensuring appropriate level of clinical engagement and ensuring alignment to UHNM clinical strategy and system goals.

The first step has been to agree a preferred clinical model where this was not already clear. The needs of our local population have been incorporated within each workstream and are being considered at every point. We have looked at best practice, gaps in our knowledge, new trends and models.

The use of our Quality Improvement methodology is key and is being actively used to help scope and test different ways for providing care to our local population. It is also helping to ensure that we remain focused on the things that are important for both our patients and people.

In parallel with this, opportunities have been taken to successfully bid for funding to help develop County Hospital. In total over £25m has been secured in the last year. While this is a strategic plan, we are starting to see changes now. There are greater numbers of people being treated electively, theatre utilisation is increasing and we have implemented changes that are improving care for our most frail patients.

April 2023

Recommendation to Staffordshire and Stoke-on-Trent ICB to incorporate an Urgent Treatment Centre alongside existing Emergency provision at County Hospital

May 2023

Roll out of our quality improvement programme at County Hospital starts. Wave 3.

Staffordshire Treatment Suite first phase opened

July 2023

North Midlands Hand Theatre opened.

Approval of £9.8m to create a new surgical day case ward

New workstream identified to scope potential for a medical daycase unit

August 2023

Approval of £13m funding to relocate our Breast services to a new purpose-built unit

Agreement to adopt a spoke diagnostic centre concept for County Hospital to align with the approved Stoke Community Diagnostic Centre

September 2023

Frailty Working Group recommended a preferred model for future frailty care

Agreed priority specialities that will increase services as part of the surgical elective hub

October 2023

Medical working group completed of an options appraisal and recommended a preferred way forward for emergency, urgent care and inpatient care

Roll out of our improvement programme at County Hospital Wave 4



hello my name is...
Daliya
Daliya Maini
Ward Manager

**Safeguarding
Champion**

HEALTH SCHEMATA
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What are the signs of North Wales?
Do you have...
If which are...
Major symptoms
• High Temperature
• New confusion
• Loss of consciousness

INDEX LINE
RANGE

NEUROCONVENTION

Our Clinical Strategy

Our Clinical Strategy sets out that our goal is to be a world-class centre of clinical and academic achievement, where staff work together to ensure patients receive the highest standards of care and the best people want to come to learn, work and research. It describes our vision for the future and our plans to become a successful, competitive partner in the healthcare economy.


For County Hospital, the ambition is to:


- Develop the elective offer at County Hospital building on existing range of outpatient/ diagnostic services.
- Establish an Elective Hub for high volume low complexity surgery.
- Maximise the use of its elective facilities, to cater for a broader range of surgical interventions to safeguard Royal Stoke for more complex and urgent surgery.
- Medically, consolidate the existing medical model for step down medical beds from the Royal Stoke site whilst at the same time continuing to receive admissions for less acute general medical conditions.
- Explore the possibility of step up medical care.
- Improve the current Women's Health services and opportunities for co-location.
- Provide a range of day treatments for oncology and renal patients and develop a dedicated day treatment centre.

Surgical Elective Care

Our plan is to create an externally recognised ring-fenced elective hub at County Hospital, operating to high productivity standards irrespective of winter or emergency pressures, concentrating on specialities that are aligned to the national Elective Hub objectives.

Goals

 Complete remaining physical investments needed to create the surgical hub - Dedicated Day Case unit and Staffordshire Treatment Suite (STS).

 Prioritise specialities to be part of the Elective Hub.

 Achieve NHSE accreditation standard (GIRFT) for County Hospital Elective Hub.

Future Clinical Model

- Low complexity, high volume elective surgery would be completed at County Hospital to maximise capacity at Royal Stoke. Patients would still receive the option for treatment on either site.
- Any procedures that do not require a theatre would be transferred into an ambulatory treatment environment

Current Situation

- The preferred mix between Royal Stoke and County Hospital has not been clear. Currently 13 specialities delivering 74 sessions across 8 theatres does not maximise capacity.
- Specialities have identified potential for up to 33 sessions to be completed at County, with priority specialities narrowed to colorectal, upper GI, orthopaedics, ENT, urology, breast, spinal and gynaecology.
- Approval of £25m NHSE targeted investment funding to support development of elective hub is an important enabler.

Key Tasks

- Agree detailed plans based on working 6 days a week, 2.5 session days.
- Assess County against the 102 GIRFT accreditation criteria with agreed methodology that allows tracking and progress against criteria, split by responsibility area.
- Optimise hand theatre and STS now the capacity is live.
- Complete STS phase 2 and daycase ward by March 2025.

Milestones

In 2024 we will have

- Locked down speciality mix at County Hospital
- We will have agreed our mobilisation plan to provide additional theatre sessions
- Ensured STS has fully ramped up
- We will have a plan in place to achieve GIRFT accreditation
- We will be able to describe the benefit for Royal Stoke.


In 2025 we will have


- Delivered an additional 33 session at County Hospital and freed up capacity at Royal Stoke.
- Completed physical changes to create a dedicated day case unit.
- Received GIRFT accreditation for our elective hub
- We will have created a new breast unit
- We will have plans in place for vacated breast unit space.


Urgent/Emergency Care and Frailty


Our plan is to deliver acute care in the most appropriate setting that meets national standards and access needs of our local population. This will deliver better outcomes for patients, make it easier for staff to provide the best possible care and make services attractive so they can recruit and retain staff.

Goals

 Develop future models of acute care to enable rapid, effective assessment and treatment working in collaboration with system partners to deliver right care, right place, first time.

 Optimise opportunities for same day care.

 Develop safe clinical care pathways for patients who require specialist interventions.

 To sustainably recruit and retain people to provide the model of care we aspire deliver.

Future Clinical Model

Patients being treated at County Hospital would continue to be treated at the site.

- A standalone Urgent Treatment Centre (UTC) supporting adults and minor illness/injury within children [new service]
- Integrated unit delivering Adult Emergency Care / Medical & Frailty Same Day Emergency Care (SDEC) [expanded service]
- Patients requiring admission would be admitted to a reconfigured integrated inpatient Medical Unit (includes Short Stay, Acute Frailty and Step Up)
- Step Up community bed-based care [new service]
- Step Down bed-based care+ repatriation from Royal Stoke [reconfigured service]
- Aligned community provision and pathways [new and expanded services]

Current Situation

- County Hospital is identified as a future UTC location.
- The A&E does not meet national standards. It is restricted to adults open for 14 hours/ day. Medical SDEC is currently provided 5 days week/8 hours day. This is not in line with the national standard 12hours day/7 days week.
- County medical wards are established as speciality based, with a high proportion of generalist locum workforce. Around 80% of the current inpatient bed base at County Hospital is occupied by patients aged 70 and over. This demand is in part as a result of inconsistency and lack of community care provision, which means that people may not be supported in the most appropriate environment.
- Projected population estimates this cohort will substantially increase over the next 7-10 years

Key Tasks

- Refine preferred clinical model and review with ICB colleagues. Align with acute medicine and Frailty GIRFT criteria.
- Make recommendations on gaps in out of hospital service provision so that care is delivered in hospital only when in the best interests of the patient.
- Develop a workforce plan to sustainably recruit and retain a substantive clinical/nursing/pharmacy/ therapy workforce providing the model of care we aspire to deliver for frail older people. This will also incorporate how our workforce could rotate between County Hospital and Royal Stoke and remove current reliance on temporary staffing.

Milestones

In 2024 we will have

- Agreed the detailed SDEC and ward based model and developed a strategic case to underpin the future approach.
- Finalised mobilisation plans for a UTC with ICB.
- Made recommendations for out of hospital care.
- Describe the benefit for Royal Stoke.


In 2025 we will have


- Started to implement the preferred inpatient clinical model.
- Mobilised a UTC with an integrated emergency and SDEC service.
- Have a resilient and agreed workforce plan in place

Women's Services

Our plan is to ensure women's health services on the County site deliver comprehensive services to women and girls across their whole lives, integrated as part of the wider UHNM clinical model.

Goals

 To develop models of care that explore opportunities to improve services in line with the national Women's Health Strategy, GIRFT and the growing needs of the local population.

 To bring greater equality in access to services across the county for women and girls

Future Clinical Model

- The future clinical model would continue to provide outpatient and treatment services at County Hospital and expand where possible to provide a better equality in service. This would see an increase in services for gynaecology.
- Our plan is to provide a new dedicated unit for breast services, which includes breast imaging and provide an improved environment for these patients.

Current Situation

- Women's health unit co-locates the majority of women's services, with the exception of breast and some gynaecology services.
- Funding has been awarded to County Hospital to relocate breast service to a new unit by March 25.
- The freestanding midwifery-led birthing unit and home birth service remains temporarily closed since the Covid-19 pandemic.

Key Tasks

- Develop a clinical model based on the Women's Health Strategy for England
- Gynaecology and breast surgical services to be developed as an integral part of the surgical hub.
- Engage women to help shape and develop ideas for future service delivery.
- Develop proposals to scope further services at County hospital; menstrual health and gynaecological conditions; fertility, pregnancy, pregnancy loss and postnatal support, menopause, mental health and wellbeing, cancers, the health impacts of violence against women and girls, healthy ageing and long-term conditions.

Milestones

In 2024 we will have

- Developed proposals for women's services, aligned as part of a UHNM women's strategic response.
- Worked with NHSE and our ICB in developing their future model for birthing units across Staffordshire




In 2025 we will have

- Relocated breast services into a new dedicated unit.
- Have agreed mobilisation plans for women's related services.

Diagnostics

Our plan is that the population can access diagnostic services within the most appropriate setting and timescales and develops a Community Diagnostic Hub model that supports our elective recovery

Goals

-  Understand and respond to the needs of other service changes at the County Hospital site (e.g. surgical elective hub, expanded urgent care model)
-  Understand current recovery plans for current diagnostic services and potential impact/limitations on operational delivery
-  Understand and align diagnostic services with the overall strategy for diagnostics across the Trust and ICS, including Community Diagnostic Centre development.

Future Clinical Model

- The future clinical model would ensure that diagnostic services at County Hospital respond to the changes proposed as part of the urgent care and elective care workstreams, in particular changes to hours of operation.
- The County model would align imaging, physiology, pathology and endoscopy services as a spoke of the approved Stoke community diagnostic centre (CDC).

Current Situation

- County Hospital currently provides imaging, endoscopy, physiological science and essential pathology services.
- Physiology estate has not received investment since integration.
- University Hospitals North Midlands in partnership with Keele University is part as Midlands Imaging Training Academy (MITA) hub, to build on the existing expertise for imaging learning and training in the region, based at County Hospital.

Key Tasks

- Review elective and urgent care workstreams to ensure diagnostic requirements are aligned. This may require an expanded service to accommodate 12hour/7 day services.
- Explore the expansion of training academies and networks in line with national strategy, e.g. physiology, following the success of the imaging academy.
- Complete review of physiology model at County, to ensure the service is fit for purpose and aligned to population need.
- Ensure clinical pathways for County patients are reviewed and aligned with the Stoke Community Diagnostic Centre. Promote County as a formal spoke site.

Milestones

In 2024 we will have

- Developed a clinical model that aligns elective and urgent care work streams.
- Scoped a physiology future model
- Aligned diagnostic pathways from primary care
- Developed our diagnostic workforce plan

In 2025 we will have

- Diagnostics services would be in place to support surgical elective and medical models.
- We will have designed fit for purpose physiology estate and sought funding as part of spoke CDC.
- Developed further opportunities to expand our training academy provision.

Medical Daycase Treatment

Our plan is to expand the range of medical ambulatory interventions offered at County Hospital.

Goals



Create a dedicated, low complexity, high volume medical elective unit so that patients are not unnecessarily admitted into bed based care or treated in a cancer ward when they do not have cancer.

Future Clinical Model

- To expand the range of medical daycase treatments offered from County Hospital in a dedicated ambulatory treatment unit, which includes specialities such as neurology, cardiology, haematology, oncology and respiratory. This will help ensure that patients are only admitted where needed and that patients that do not have cancer are not treated within a cancer daycase area.



Current Situation

- In 2023 ambulatory heart failure and neurology ambulatory care unit agreed to be co-located within County Hospital. This provides a critical mass to build on within an expanded model.
- Patients are currently treated in a variety of settings; as inpatients, outpatients or within the chemotherapy unit.
- The physical estate has not received investment and was not designed as a daycase treatment area.

Key Tasks

- Agree detailed specialty configuration to maximise number of people treated at County.
- Review Emergency Ambulatory conditions to gain clarity between SDEC and planned treatments.
- Model the impact of chemotherapy capacity that could be released across Royal Stoke and County Hospital through non-cancer patients being treated in a daycase environment.
- Approve preferred model and develop case for mobilisation.

Milestones

In 2024 we will have

- Developed a proposed clinical model that expands the elective medical interventions on County site.
- Reviewed the estate requirements to support an expanded model

In 2025 we will have

- Developed the workforce plan to mobilise and expand the range of interventions.

Other Opportunities Identified

As this plan has developed we are also identifying new opportunities for County Hospital. These do not yet have specific work streams in place, however we will be looking to explore further and scope plans where possible, both in response to local, regional and where possible national need.

Integrated Community Hub (as part of system reconfiguration of primary / community services)

Specialist Rehabilitation

Potential use for vacated Breast Unit

More engagement with patients and other

Green space at the front of County Hospital

Outpatient reconfiguration

What could this mean?

Capacity

This plan is being completed within the context there are bed capacity constraints across both UHNM. Modelling indicates that there could be around 88 bed shortfall at Royal Stoke and 10 bed shortfall at County Hospital in the peak of Winter. One of the working assumptions has been that bed pressure could be relieved through a different model at County Hospital. It is becoming clear that there are opportunities to help reduce this pressure, but other solutions will be required. As we progress our plans, this will develop and be incorporated within our overall Trust bed model.

People

This plan will rely on a reconfigured workforce at County Hospital, with new roles and workforce opportunities provided through the clinical models proposed. This is exciting. There would be greater integration between some services on the site that will require enhanced training. In addition, new models (e.g. advanced care practitioners) will aim to provide better progression and skills development. A key element moving forward is the development of an overarching workforce plan that describes the impact for people working at County and the potential for skills development.

Resources

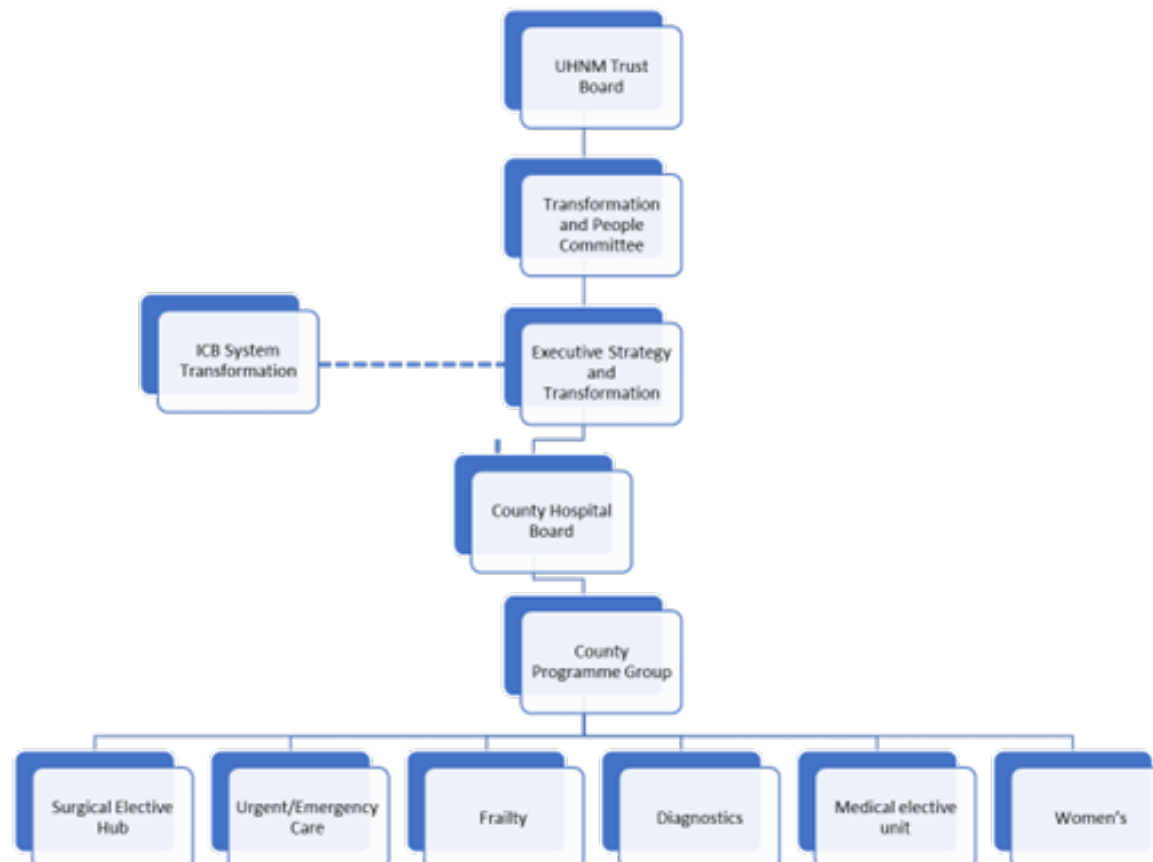
At each step of the way our plans will be tested to ensure it is affordable and sustainable. The intention is to evidence better utilisation financial envelopes and reduce reliance on agency and premium spend before seeking additional investment. It may be that some plans require some funding to transfer from other sites. The plans will seek to better utilise the County Hospital footprint and we will look to identify sources of capital that could be bought to County in the same way that capital has been awarded for the Elective Hub development. Only at the point where this is not possible would a case be made for additional investment in line with the wider trust process and priorities. Some services (e.g. Urgent Treatment Centre) are new and would require ICB investment.

Workstream	County	Royal Stoke
Elective Hub	20 beds (reconfiguration of wards 6 & 7). Theatre capacity maximised.	Potential to release theatre and bed capacity at point Trust has recovered from Covid-19 backlog.
Urgent & Emergency Care	11 bed reduction based on no change to community provision (this is likely to be greater once work has been completed to redefine community model)	No impact assumed (however further work required to review potential for any population shift)

County Hospital Programme Governance

There is a governance structure in place to support the delivery of this plan. The County Hospital Strategic Programme Board has been formed as a senior stakeholder group to oversee the establishment and delivery of a County Hospital Development Programme reporting to the Executive Strategy and Transformation Group.

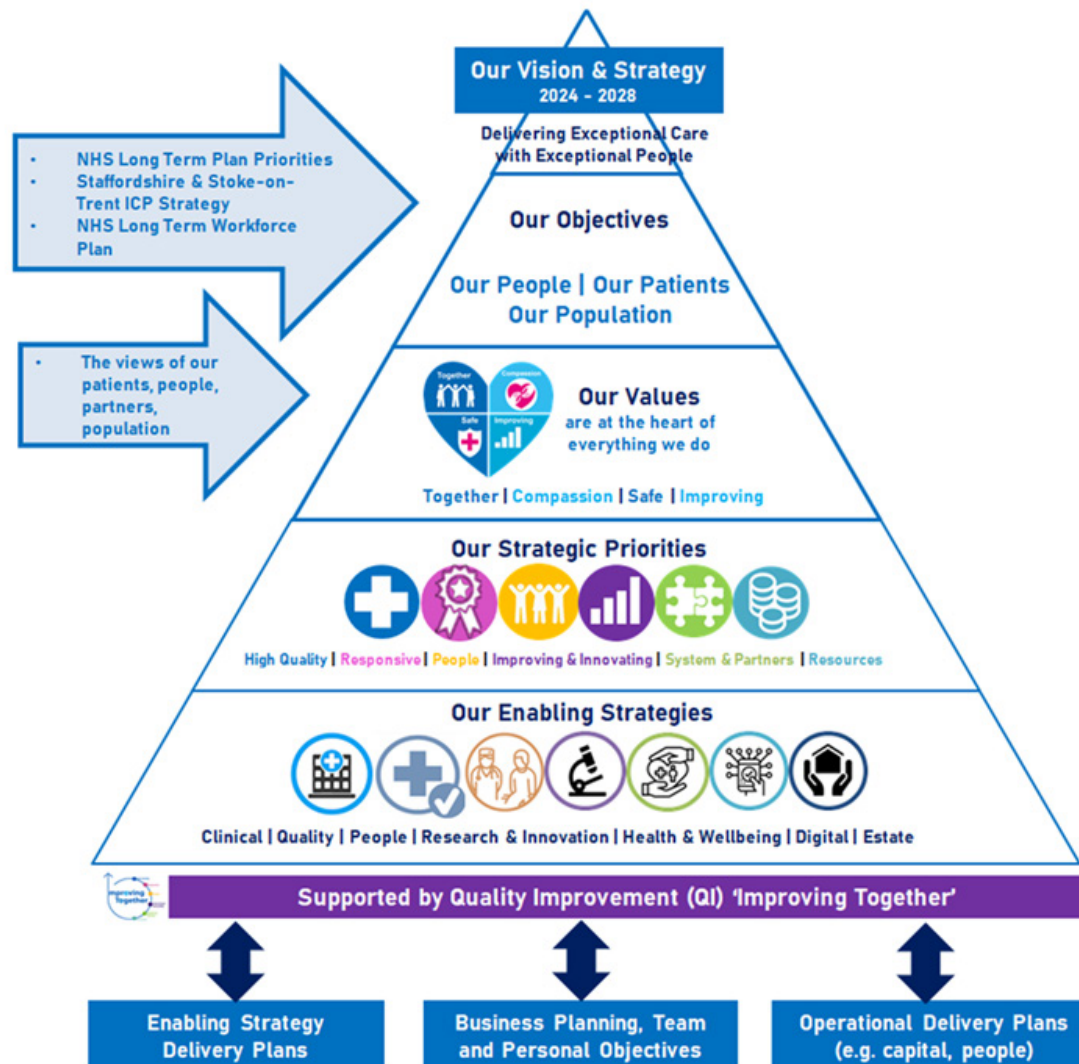
The Programme Board is not intended to be a permanent function of the Corporate Governance Structure as its focus is strategic; it is envisaged that the Programme Board will discharge its responsibilities once the County Hospital becomes a matter for operational delivery. Working groups have been established where needed, with arrangements continually reviewed through the County hospital board, with corporate support provided for workforce, communications, strategy and transformation.





Links with our Enabling Strategies

In addition to our clinical strategy, this plan has direct links with our wider Trust Strategy. The proposed new models of care described within this plan help to support our enabling strategies (people, quality, health and wellbeing, digital ,research and estates). As the plan develops this should also result in more opportunities being identified for County Hospital.



People Strategy

- Look after our people
- Create a sense of belonging where we are kind and respectful to each other
- Grow and develop our workforce for the future
- Develop our people practices and systems

Research & Innovation Strategy

- Develop a Trust-wide culture of research and innovation.
- Grow the Trust's capacity for research
- Develop a robust, sustainable and transparent financial model for research and innovation.
- Support and enhance research and innovation through a robust governance framework.

Quality Strategy

- Develop consistent positive practice environments recognising our staff are safety critical
- Deliver consistently safe and reliable care
- Prevent avoidable delay in patient assessment, treatment and discharge
- Ensure that our patients have access to services and/or treatments that meets their needs and delivers positive outcomes and experiences.

Digital Strategy

- Deliver of a mature clinical digital system
- Ensure our staff can access our digital systems with modern devices which are underpinned by excellent support services.
- Deliver data insights to clinical and operational staff
- Do the initiatives that make sense to do together, together.
- Empower patients and staff to make the most of the technology available and to confidently get involved in the future of digital healthcare.
- Optimise business and communication systems to improve efficiency.

Estates Strategy

- To deliver the planned capital schemes at County and in doing so provide an estate that supports the delivery of the Trust's strategic objectives, at the same time as reducing back-log maintenance and optimising the use of the existing estate.



**University Hospitals
of North Midlands
NHS Trust**