

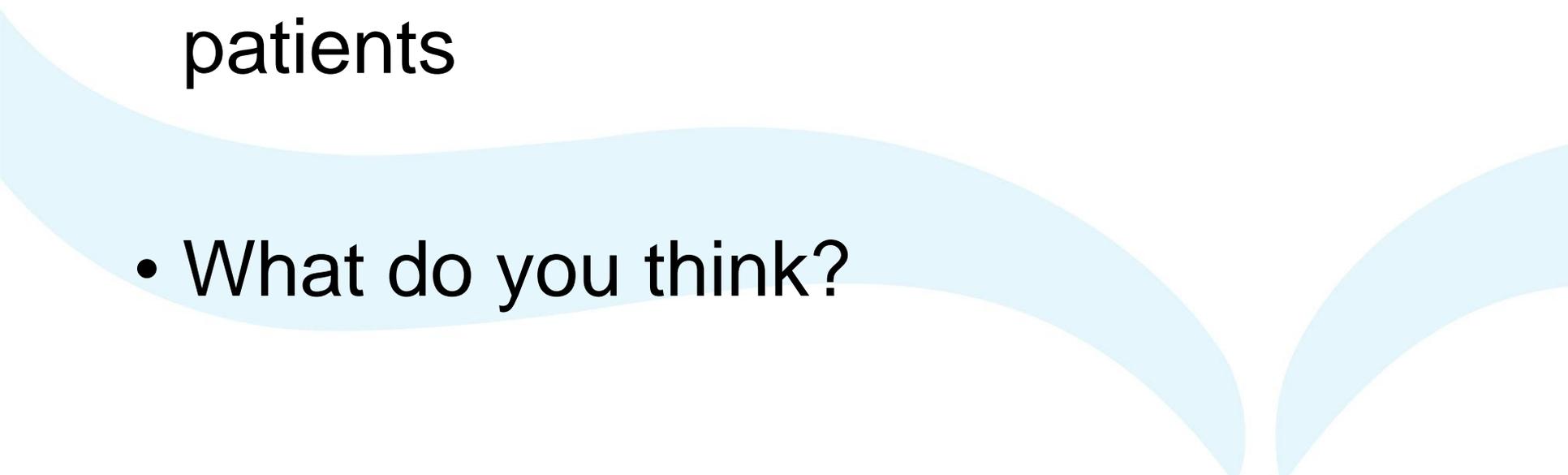
Proposal to move Ward 15 to the Royal Hospital for Children

Public consultation events
Renfrewshire

20 January 2017

Dr Jennifer Armstrong
Medical Director
NHS Greater Glasgow and Clyde

Today

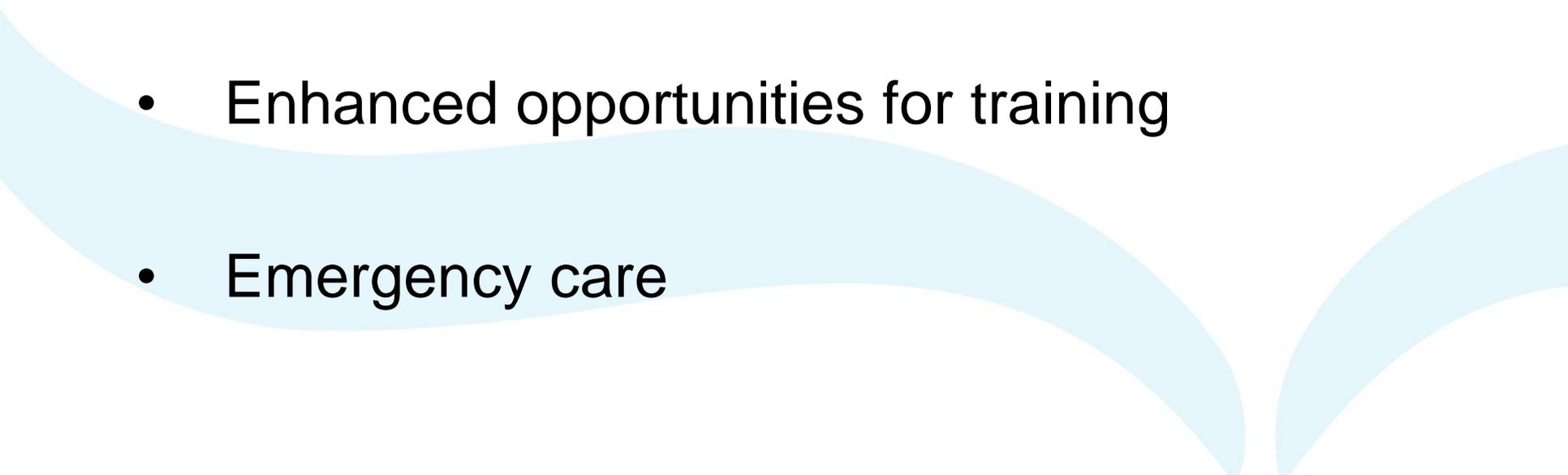
- What we are proposing and why
 - What this would mean for patients
 - What do you think?
- 

The proposal

To move Ward 15 in the Royal Alexandra Hospital to the new Royal Hospital for Children:

- Inpatient care
- Day surgery
- Short stay medical assessment

Why is it being proposed?

- The Royal Hospital for Children
 - National clinical standards
 - Enhanced opportunities for training
 - Emergency care
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National Clinical Standards

These standards should be met where possible in all paediatric inpatient units

We can only meet these standards if our paediatric doctors are not spread across two separate children's inpatient units

National clinical standards

1. A consultant paediatrician is present in the hospital during busiest times
2. Every child who is admitted with an acute medical problem is seen by a senior doctor or nurse within four hours of admission
3. Every child who is admitted with an acute medical problem is seen by a consultant paediatrician within 14 hours of admission

National clinical standards

4. At least two medical handovers every 24 hours are led by a consultant paediatrician
5. Children's care should be discussed with a senior doctor or nurse before they are discharged
6. Paediatric assessment units always have access to the opinion of a consultant paediatrician

National clinical standards

8. Consultants work in the same admitting ward for a week at a time
9. All general paediatric training rotas are made up of at least ten staff working to advised shift patterns
10. Specialist paediatricians are available for immediate telephone advice
11. Access to a paediatrician with high level of child protection experience

Paediatric Services Clyde

- RAH Paisley
 - Ward 15 – inpatient care, day surgery, and short stay medical assessment
 - Neonatal unit
 - Outpatient clinics
 - Community & specialist Children's nursing team
 - Child development centre
 - AHP teams
- IRH Greenock
 - Outpatient clinics
 - Community Children's nursing team
 - Child development centre
 - AHP teams
- VOL Alexandria
 - Outpatient clinics
 - Community Children's nursing team
 - Child development centre
 - AHP teams
- Remote and rural areas (7)
 - Outpatient clinics
 - Community Children's nursing team
 - Child development team
 - AHP teams

What would continue to be provided at RAH

- Emergency department
 - Neonatal unit with dedicated team of staff
 - Full range of outpatient services
 - Community and specialist children's nursing teams
 - PANDA child development centre
- 

Keira age 8 with severe asthma and allergies

- Seen in respiratory clinic in RAH
- Respiratory nurse from RAH visits at home and school
- Community children's nurse visits regularly at home and school regarding allergies
- Already attending RHC to see ENT team and for tests such as sleep study
- Previous admissions to intensive care

Keira age 8 with severe asthma and allergies – current system

- Has allergic reaction at school in Paisley
- Taken by ambulance to RAH
- Seen in ED
- Admission to ward 15 if stable
- Transferred to RHC if needs intensive care
- Specialist team covering whole Scotland needed

Keira age 8 with severe asthma – proposed system

- Has allergic reaction at school in Paisley
- Ambulance would take her directly to ED in RHC
- Triage in ED by Children's nurse and then seen by Children's emergency doctor
- Treatment started in ED and continued in ward or Intensive care if required
- Once discharged follow up by Paisley team as before

Jack aged 7 from Johnstone – current system

- Seen by GP with tummy pains and constipation
- Current system sent by GP to RAH
- Seen ward 15 and assessed - ? Appendicitis
- Children's Xray doctor not always available & no children's surgeons in RAH
- Second ambulance journey to RHC

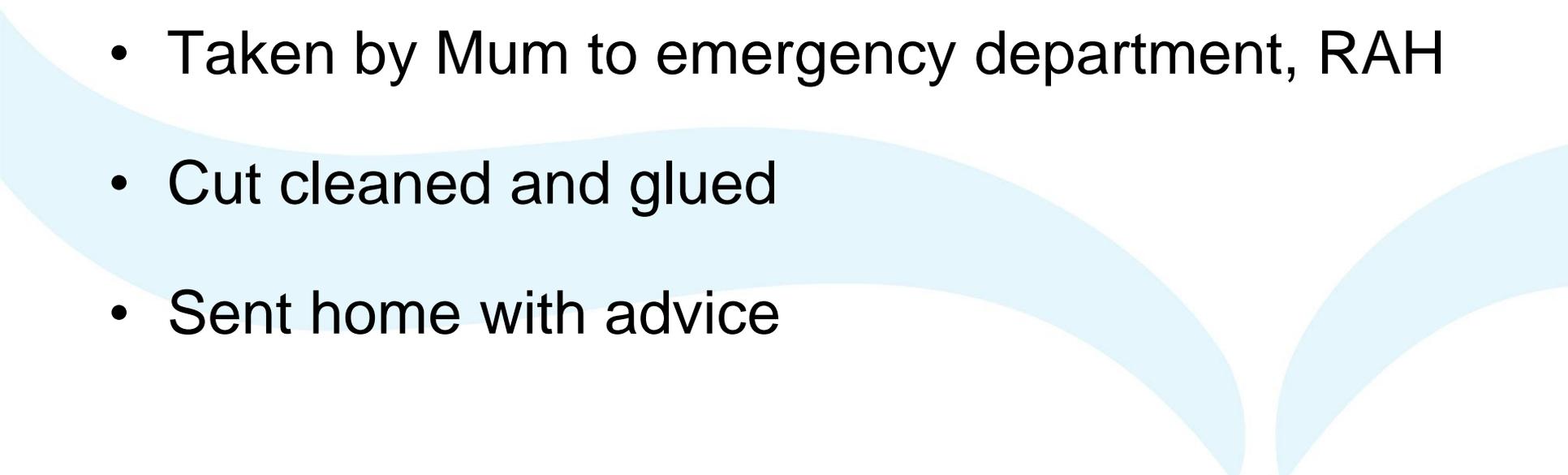
Jack aged 7 from Johnstone— proposed system

- Seen by GP with tummy pains and constipation
- Sent to RHC and seen in children's ED
- Some signs of appendicitis so ultrasound by children's X ray doctor
- Appendicitis on scan – taken to theatre

Cameron aged 9 from Elderslie– current system

- Fall from swing in park
- Deep cut to forehead
- Taken by Mum to emergency department, RAH
- Cut cleaned and glued
- Sent home with advice

Cameron aged 9 from Elderslie – proposed system

- Fall from swing in park
 - Deep cut to forehead
 - Taken by Mum to emergency department, RAH
 - Cut cleaned and glued
 - Sent home with advice
- 

Royal Hospital for Children

- Purpose built ED to manage > 60,000 babies, children and young people / year
- Specialist paediatric emergency nursing and medical teams
- Clinical Decision Unit
- 10 inpatient wards with over 200 beds



Royal Hospital for Children

Immediate access to

- paediatric radiology
- paediatric surgery
- paediatric intensive care
- multiple paediatric specialties



Paediatric intensive care

- ScotSTAR paediatric retrieval service, with a specially trained senior doctor or nurse, take children to PICU
- Service covering whole of Scotland
- Centres in Royal Hospital for Children in Glasgow, and Royal Hospital for Sick Children in Edinburgh

Will there be enough space at the Royal Hospital for Children?

On an average day

- Ward 15 has around 8 inpatients
- The Royal Hospital for Children has between 30-40 free beds.

Ward Nursing and Facilities



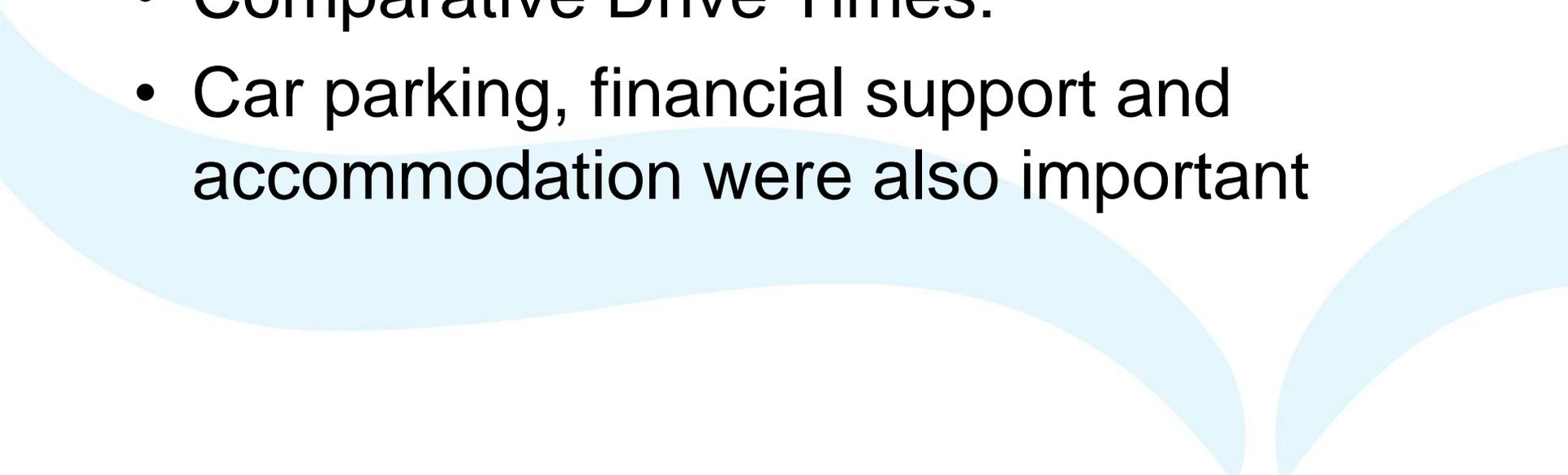


Family Facilities

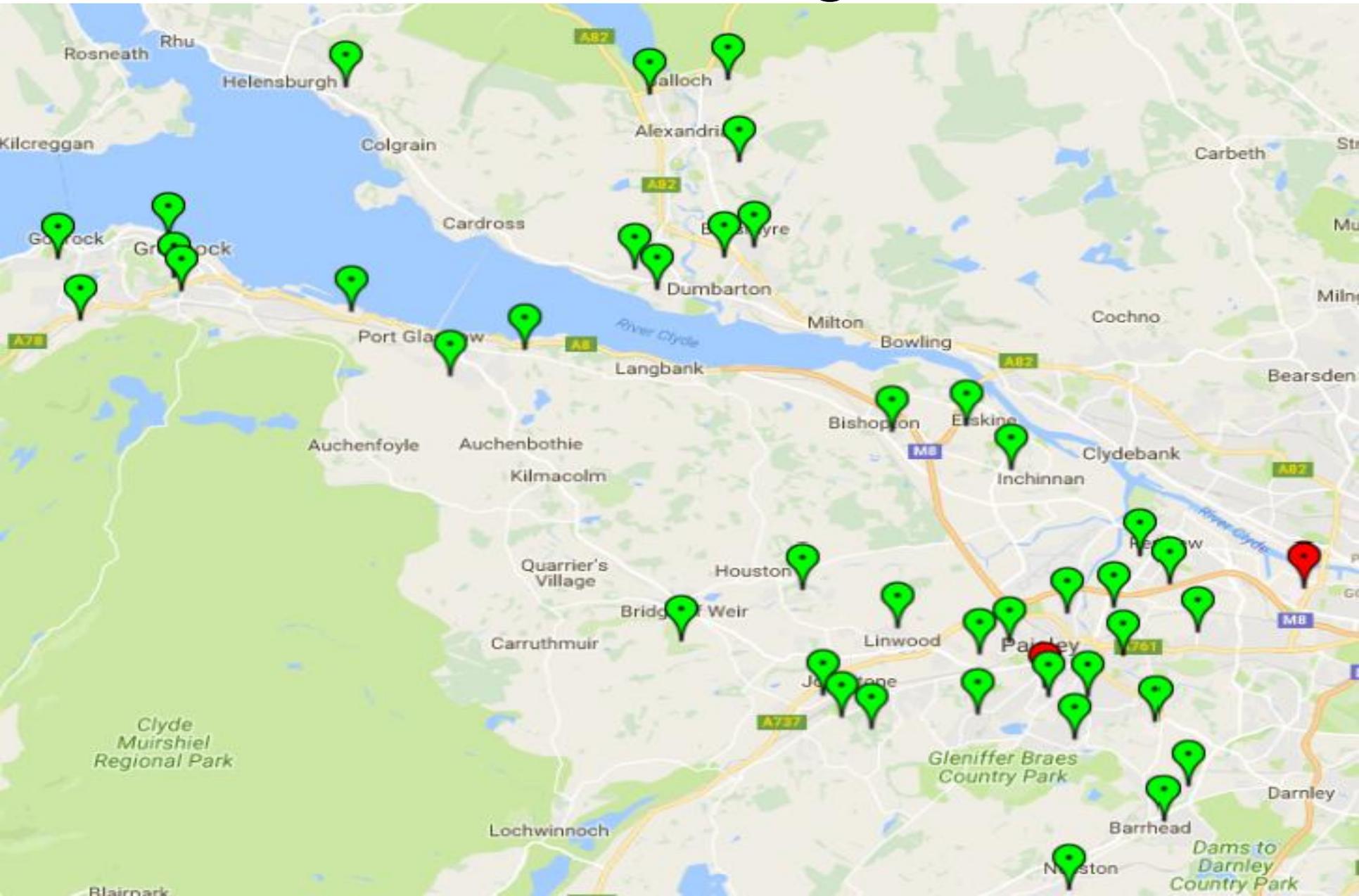




Transport and access

- Analysis of the 41 areas accounting for 80% of admissions in 2015 - 2016
 - Travel survey of visitors to Ward 15
 - Comparative Drive Times:
 - Car parking, financial support and accommodation were also important
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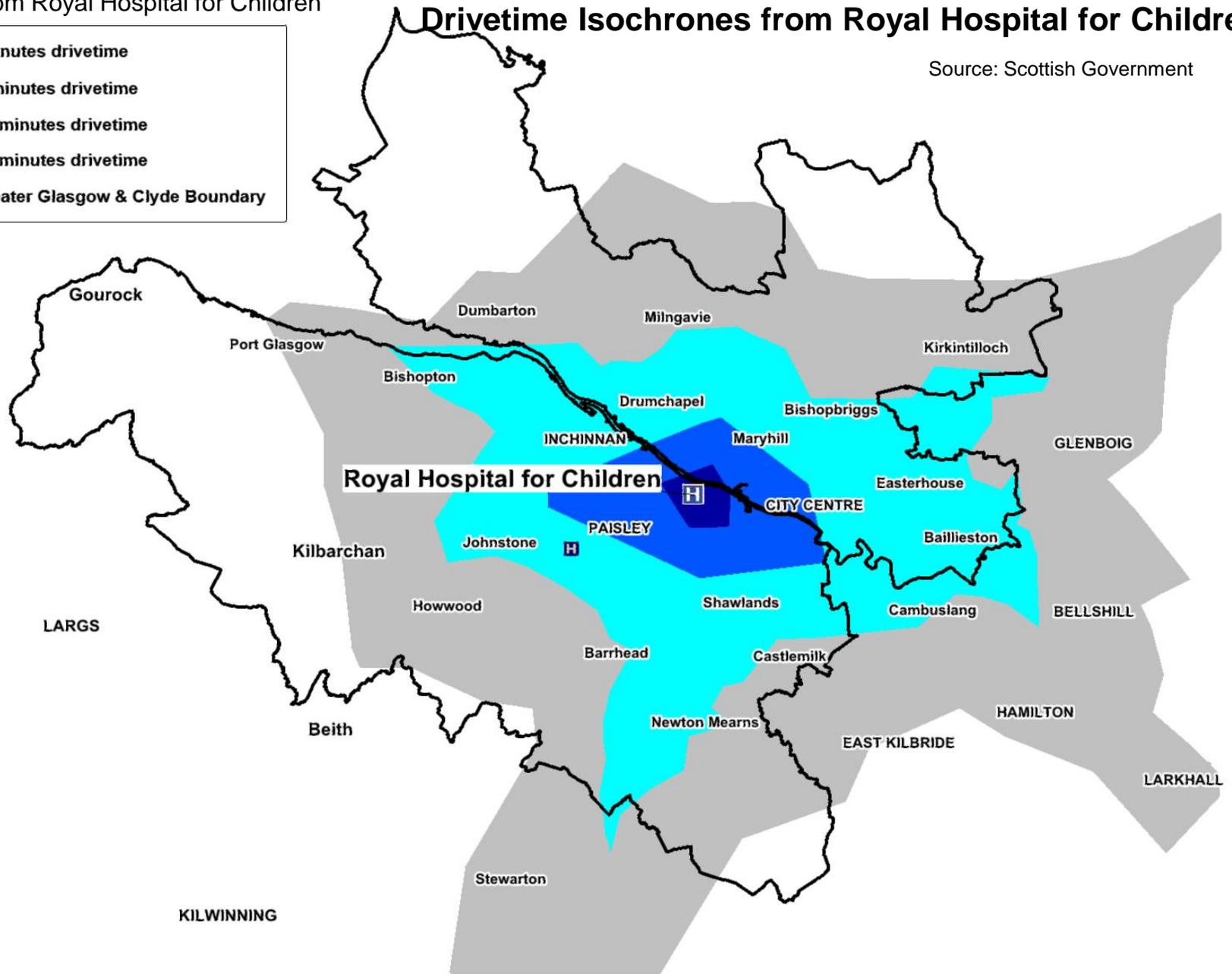
Families accessing Ward 15



Drivetime from Royal Hospital for Children

Drivetime Isochrones from Royal Hospital for Children

Source: Scottish Government



Royal Hospital for Children



INCHINNAN

Maryhill

Bishopbriggs

Easterhouse

Baillieston

CITY CENTRE

PAISLEY

Johnstone

Kilbarchan

Howwood

Shawlands

Cambuslang

BELLSHILL

Barrhead

Castlemilk

Newton Mearns

EAST KILBRIDE

HAMILTON

LARKHALL

LARGS

Beith

Stewarton

KILWINNING

Gourock

Port Glasgow

Dumbarton

Milngavie

Kirkintilloch

Bishopton

Drumchapel

GLENBOIG

Kilbarchan

Beith

Stewarton

KILWINNING

LARGS

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Kilbarchan

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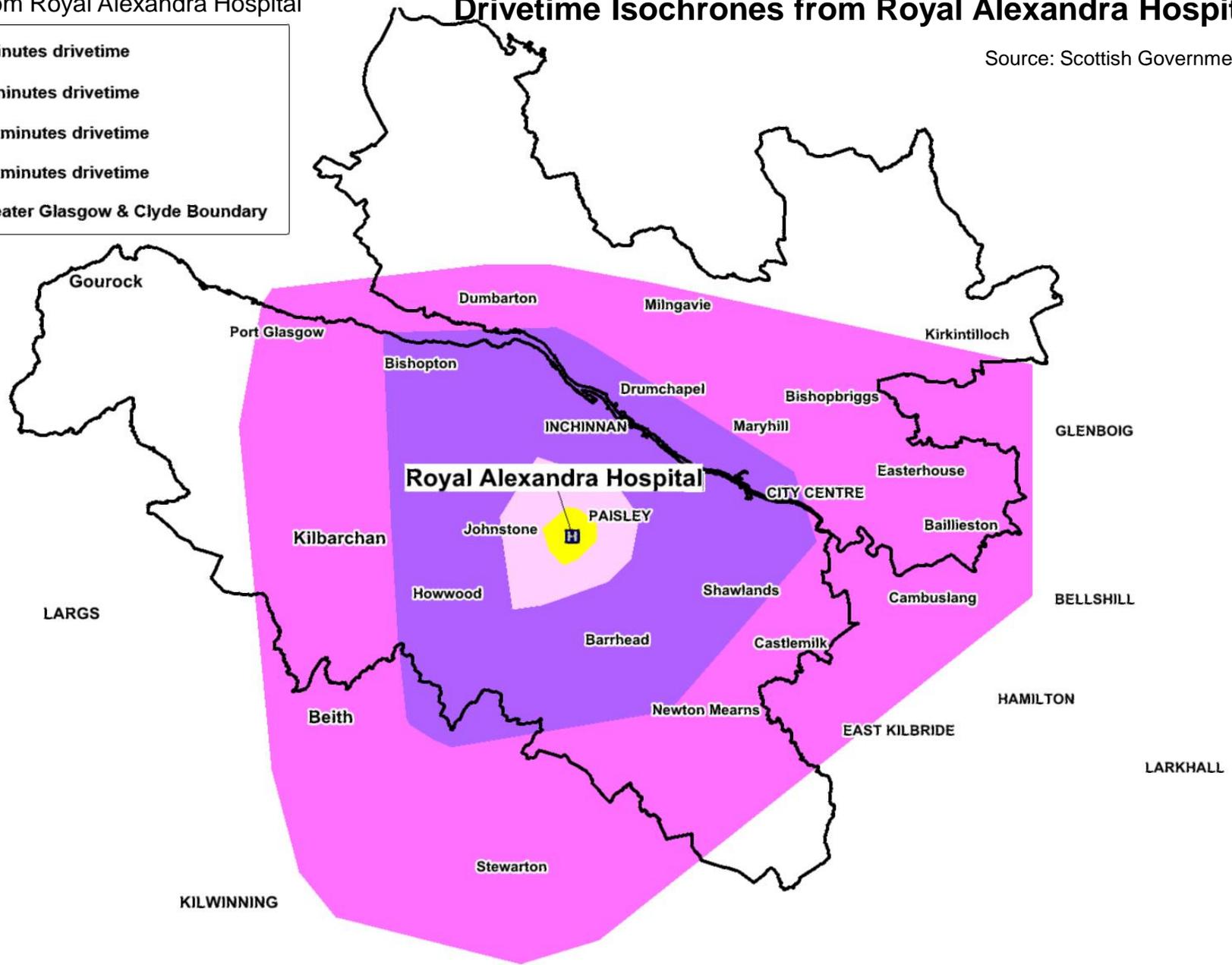
KILWINNING

LARGS

Drivetime from Royal Alexandra Hospital

Drivetime Isochrones from Royal Alexandra Hospital

Source: Scottish Government



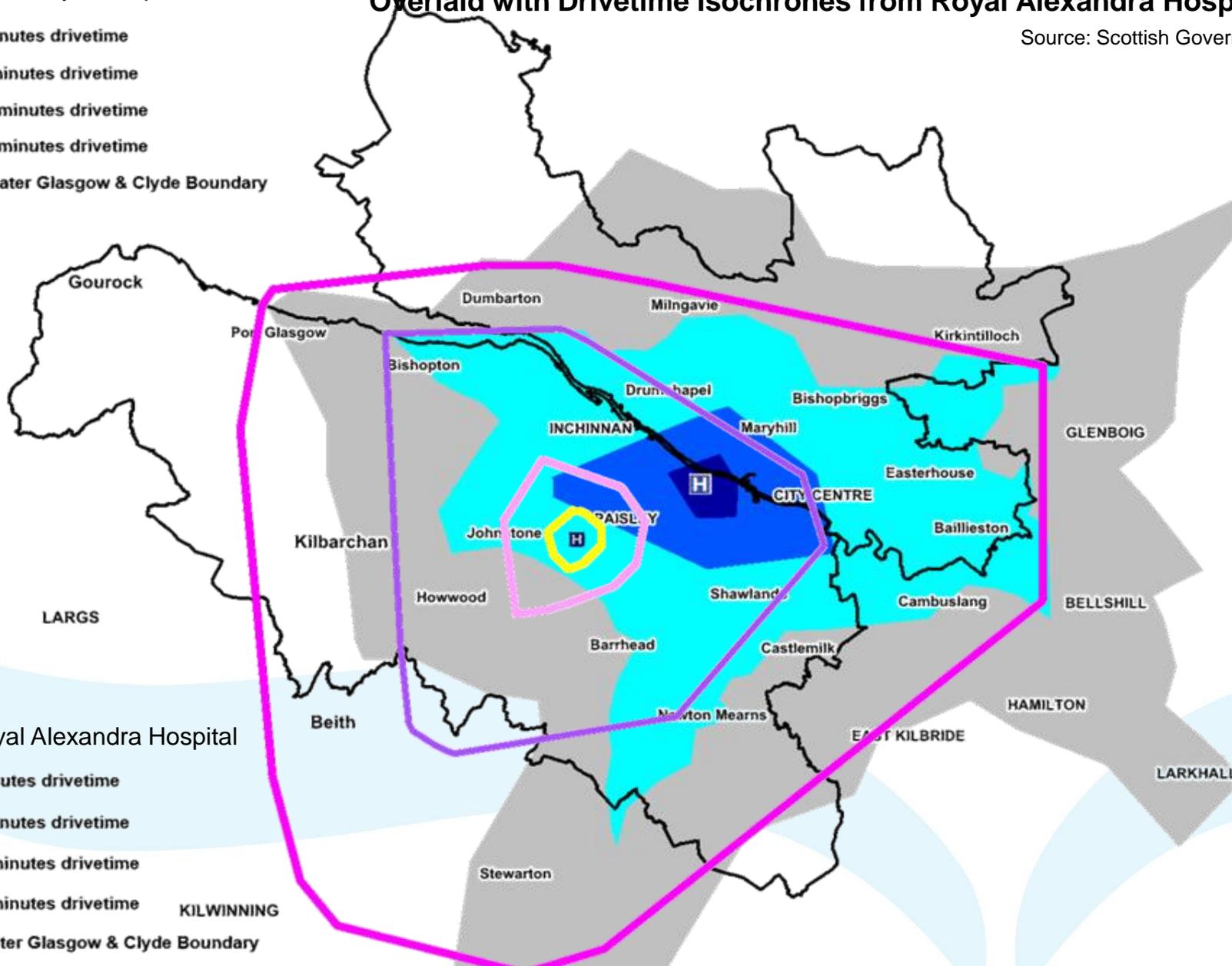
Drivetime Isochrones from Royal Hospital for Children Overlaid with Drivetime Isochrones from Royal Alexandra Hospital

Source: Scottish Government

Drivetime from Royal Hospital for Children



Drivetime Royal Alexandra Hospital



Public transport

- longer from Renfrewshire
- shorter from Argyll and Bute
- longer from East Renfrewshire
- slightly shorter from Inverclyde
- shorter from West Dunbartonshire

Ambulance journey times

On average around:

- 5 minutes longer from Renfrewshire
- 5 minutes shorter from Argyll and Bute
- 5- 10 minutes longer from East Renfrewshire
- No difference for Inverclyde
- 5 minutes shorter for West Dunbartonshire

Scottish Ambulance Service - national targets

- Treatment starts when Scottish Ambulance Service staff arrive on scene
- 75% of life threatening incidents responded to within 8 minutes
- 95% of serious but not life threatening incidents responded to within 19 minutes

Car parking

- Parents are concerned about finding car parking spaces
- New arrangements have been put in place on the QEUH site since mid October 2016
- Since these were introduced, patients or visitors have always been able to get a space

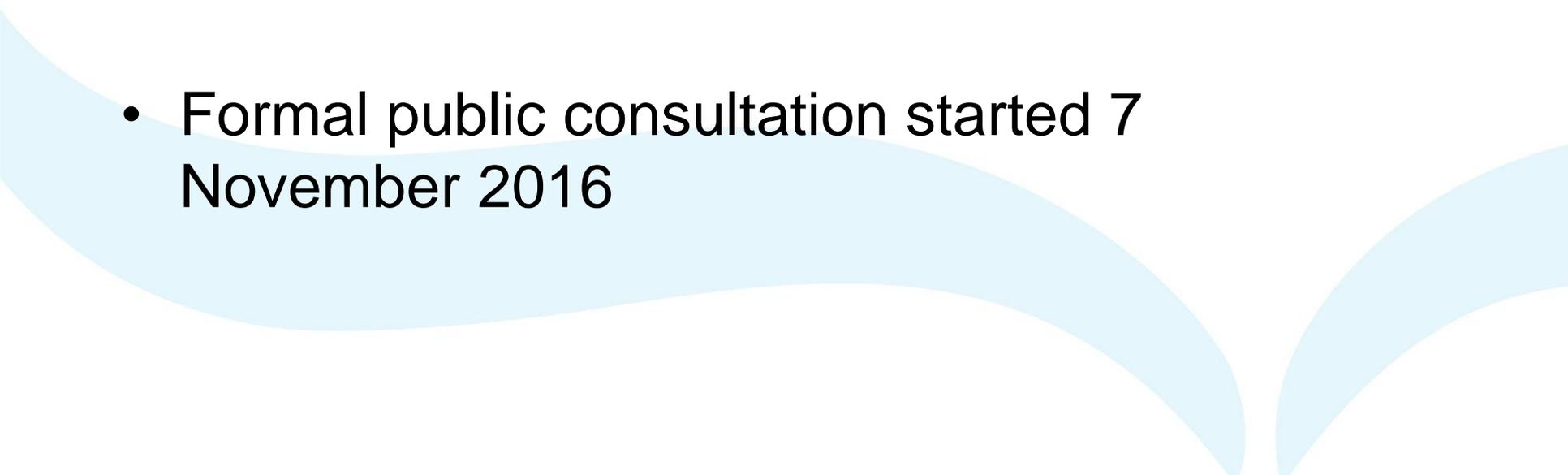
Financial support

- Parents are worried about additional costs when their child is in hospital
- Across NHS Greater Glasgow and Clyde, some families can have travel expenses reimbursed
- A financial support and inclusion service is based at the Royal Hospital for Children

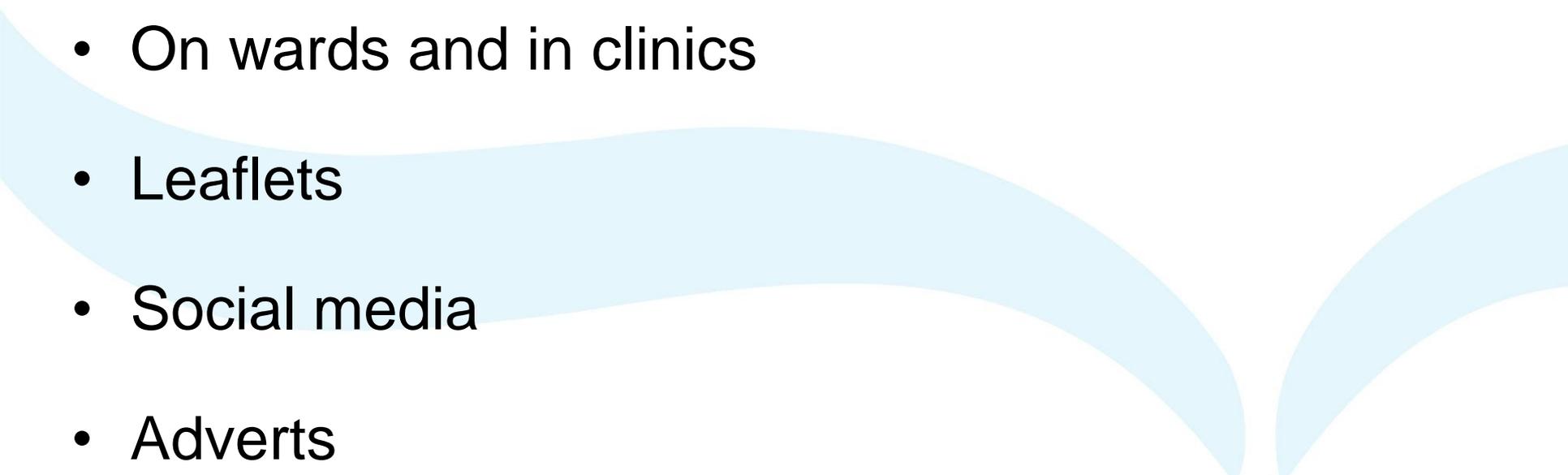
Short Summary of Issues Raised

- Downgrading of hospital
- Risk of further travel in an emergency
- Write up not complete
- Concerns about nurturing and psychological impact
- Should invest and improve ward 15
- Only one option
- Delays and issues at RHC
- Paisley big enough to have the service
- Local versus big and distant
- Travel issues not fairly represented

History of this proposal

- Extensive engagement, and option appraisal in 2011
 - Re informing and engaging in Autumn 2016
 - Formal public consultation started 7 November 2016
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Consultation stage so far

- Stakeholder Reference Group
 - Press releases
 - Extensive email network of community contacts
 - On wards and in clinics
 - Leaflets
 - Social media
 - Adverts
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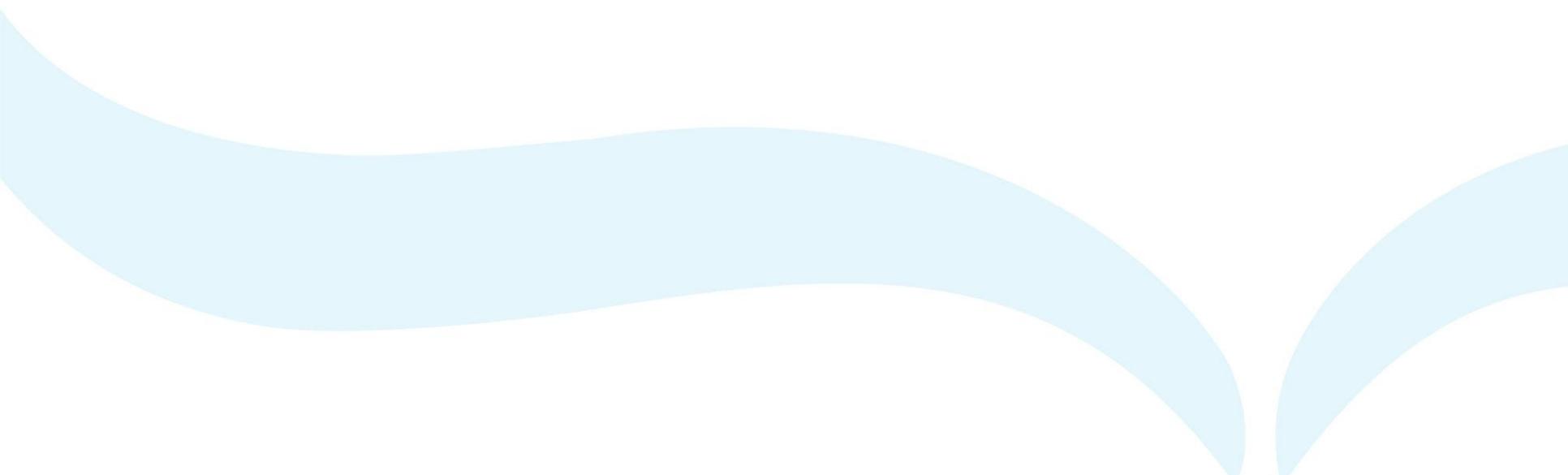
Next steps

- Consulting until Monday 6 February 2017
- Report to the Board of NHS Greater Glasgow and Clyde on Tuesday 21 February 2017
- If the Board decide to go ahead with the proposed transfer, their decision will be submitted to the Cabinet Secretary for Health, Wellbeing and Sport for approval

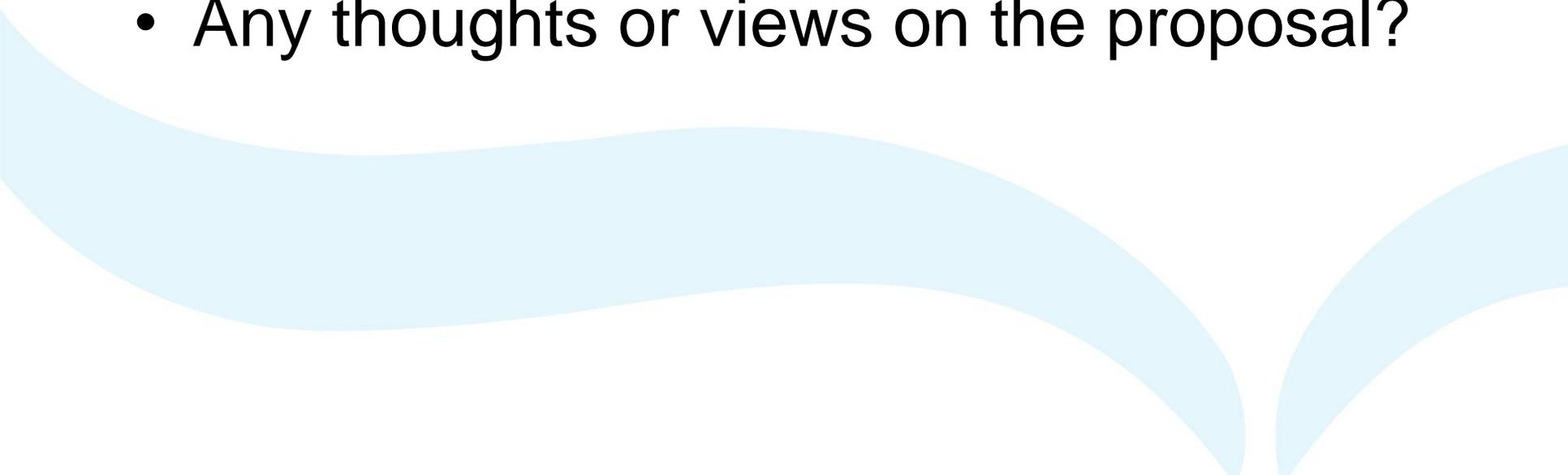
Summary of expected benefits

- Access to state of the art facilities at the Royal Hospital for Children
- The ability to meet national clinical standards to improve clinical care for children in Clyde
- Better access to bigger clinical teams and senior clinical decision making round the clock
- Continued access to high quality local services for children

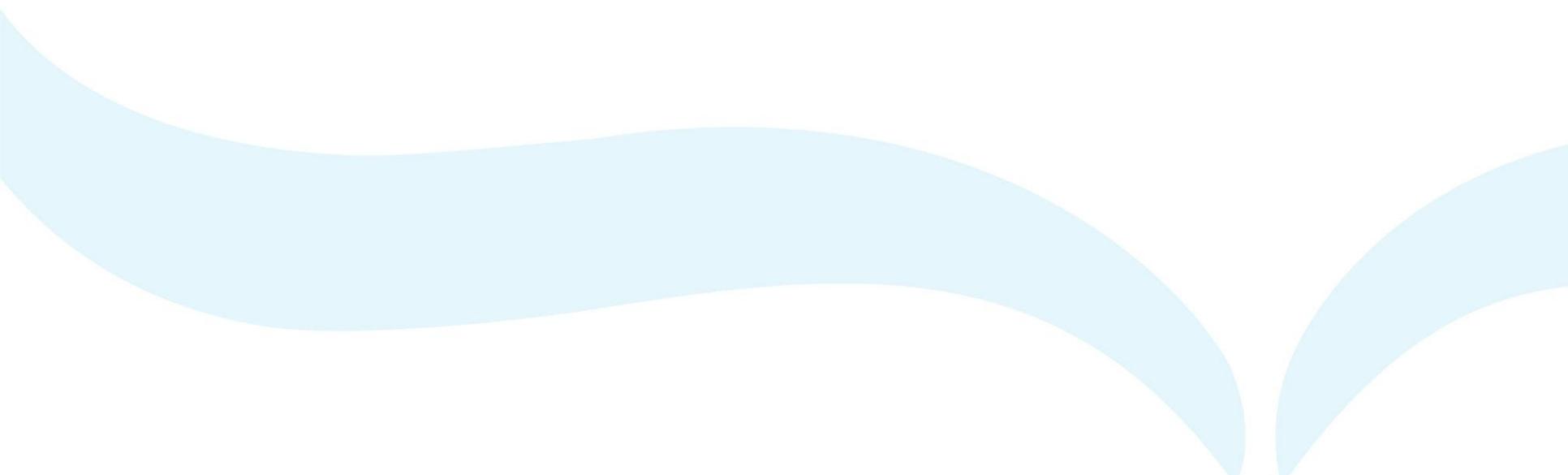
Any questions?



Feedback

- Is there anything we haven't covered?
 - Any thoughts or views on the proposal?
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What have we heard?



Thank you

If you have any further questions or feedback, please do not hesitate to get in touch:

Email

public.involvement@ggc.scot.nhs.uk

Freephone 0300 123 9987