



Orpington health services project - update

Presentation to Health Scrutiny Committee
November 2011

Orpington project update

Since Adult and Community Policy Development and Scrutiny Committee on Tuesday 27 September;

- It has been agreed to extend the timeline. This means that any public consultation would not begin until January 2012
- Needs assessment has been used to identify those services required to be delivered locally and those which will benefit from greater efficiency and effectiveness by alignment with secondary care services
- Further discussions have taken place with GP Practices and LBB over additional opportunities to integrate services
- Some solutions for where services might be located are being explored
- Engagement opportunities continue and are described later

Engaging with staff and the public

Patients and the public

- o Public, Voluntary sector and LINKs membership of the Project team.
- A public engagement meeting jointly hosted with Bromley LINks took place with over 100 attendees.
 - Many questions and answers were explored and any further questions were collected. All answers to the questions raised in the meeting have been collated and are to be posted on the website.
- o The Orpington GP meeting on the 13th October considered the direction of travel of the project, gave additional input and challenge coupled with overall support.
- A further event is to be held on 8th
 December, 7pm, Crofton Halls,
 Orpington and additional engagement methods are being explored to maximise the opportunities for questions and input.

Staff engagement

- Orpington staff have been invited to the Project Team through the Trust's Staff side union forum.
- The opinion of clinicians currently delivering services has informed the services review.
- A further staff meeting took place at Orpington Hospital with more than 70 people. A list of the questions and attendees has been recorded. The key staff issues are being fed into the project team meeting.
- There are the usual channels of SLHT's communication processes including SLHT newsletters, CEO bulletins, staff meetings and team briefing cascade.
- A series of drop in sessions for Orpington hospital staff to discuss the process further have been set up in November

Main themes of feedback include

Long term conditions (conversations w stakeholders)

Prevention (conversations w stakeholders)

Intermediate care (approx 2 submissions)

Nursery facility (approx 3 submissions)

Hydrotherapy pool (approx 8 submissions)

Operating theatres (approx 3 submissions)

Patient experience (approx 2 submissions)

Diabetes & colposcopy (approx 1 submission each)

Phlebotomy (approx 3 submissions)

Transport/parking (approx 3 submissions)

Comments on potential service solutions (PHRU) (approx 3 submissions)

The history of the site (approx 2 submissions)

Proceeds of any sale (approx 2 submissions)

Suggestions for alternative uses of the site

- •Could be used as polyclinic/well-being centre with GP surgery
- Orpington Hospital could become a centre for dementia care
- •An additional Minor Injuries
 Unit could be located here
- Could be used for 'overflow' maternity
- Re-establish elective care

Ongoing routes

 As many relevant documents as practical are being displayed in the Orpington section of the public website.

http://www.selondon.nhs.uk/your_local_nhs/bromley/have_your_say/orpington_health_services

For comments

 We continue to offer individual responses from our dedicated email address:

(bro-pct.orpingtonquestions@nhs.net)

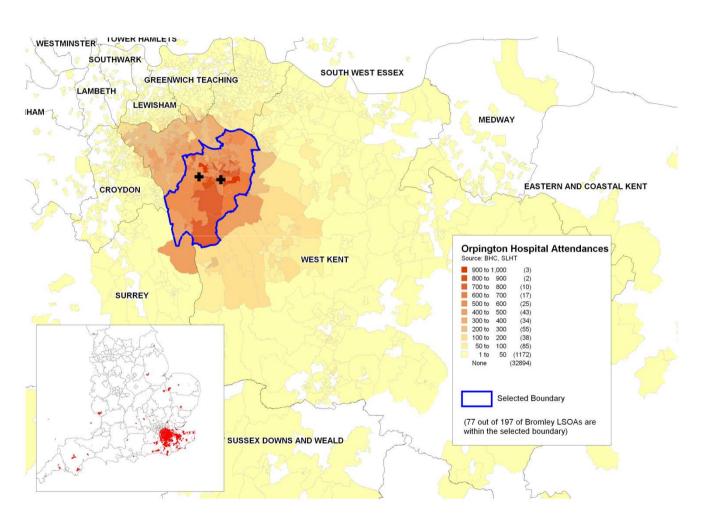
 By post to: Orpington Health Services Project, Bassetts House, Broadwater Gardens, Orpington, Kent, BR6 7UA



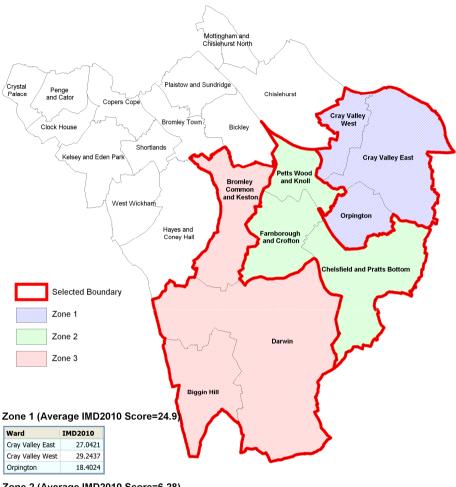


Needs assessment

Frequency of Use of Orpington Hospital Services by LSOA - Significant use from West Kent



Map of Zones of Interest with IMD Scores



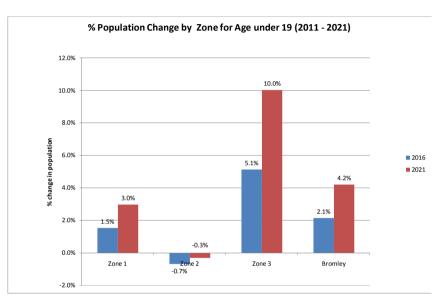
Zone 2 (Average IMD2010 Score=6.28)

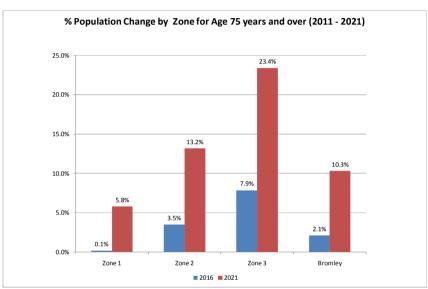
| Ward | IMD2010 |
|------------------------------|---------|
| Chelsfield and Pratts Bottom | 5.98754 |
| Farnborough and Crofton | 7.95029 |
| Petts Wood and Knoll | 4.90377 |

Zone 3 (Average IMD2010 Score=13.11)

| Ward | IMD2010 |
|---------------------------|---------|
| Biggin Hill | 8.93341 |
| Bromley Common and Keston | 15.6768 |
| Darwin | 14.7264 |

Population growth





Growth greatest in Zone 3 for older and young people and greater than Bromley average

Overall the population needs assessment challenges are for

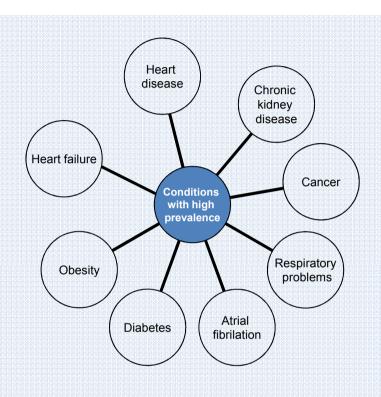
- Older population
- Younger population

Analysis by zone

| Zone 1 | Zone 2 | Zone 3 |
|----------------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| Highest level of deprivation | Lowest level of deprivation | |
| Highest proportion of children/young people | Highest proportion of over 65s and over 75s | Highest projected population growth |
| Gypsy Traveller community | | |
| Lowest life expectancy | Highest life expectancy | |
| Highest circulatory disease and cancer mortality rates | | Higher than Bromley average prevalence of chronic kidney disease, dementia, hypertension |
| Lowest uptake of cancer screening | Highest proportion of intermediate care admissions | Lowest immunisation uptake |
| Highest rate of teenage pregnancy | | |
| Higher than Bromley average prevalence of chronic diseases | Higher than Bromley average prevalence of many chronic diseases | |
| Higher than Bromley average outpatient referral rates for most specialties | Higher than Bromley average outpatient referral rates | Highest rates of outpatient referrals for many specialties |
| High emergency admission rates overall | Highest emergency admission rates for cancer and general surgery | Higher than Bromley average emergency admission rates for many specialties |

Historically, Bromley has had a high level of 1st outpatient referrals ranking 9th highest in London with respect to first outpatient referral rates.

Health needs of local people

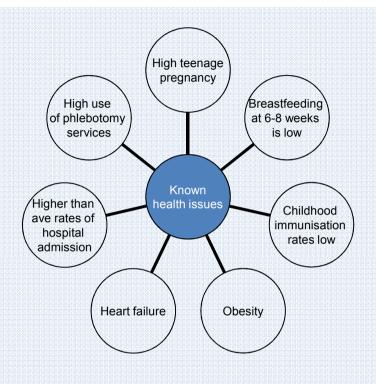


Good services needed for:

Hypertension | Chronic kidney disease | Respiratory Diabetes | Heart Failure

Local high demand for:

Phlebotomy | Dermatology | COPD | Contraceptive



Prevention & education:

Vascular risk assessment

Smoking cessation

Obesity prevention

Screening

Teenage pregnancy & breastfeeding

Immunisation





Our vision for improving health services in Orpington

Opportunities for the future

- Support GPs to ensure that patients do not need hospital services and are treated close to home – especially for long term conditions
- Offer
 - diagnostics to identify conditions
 - Opportunistic and preventative approach
 - Create services which support and integrate with Primary care
 - Put specialist outpatients services in the right environments
- Ensure high-use services are close to users
- Use all local buildings better less space is actually needed

Orpington services for the future?

Help for older people Undiagnosed conditions People living with illnesses Space for health promoting activities

GPs in improved facilities

Voluntary sector advice

Mental health support

Phlebotomy
Physiotherapy
Radiology & Ultrasound
Diabetes with podiatry,
dietetics & retinopathy
Women's health services
Dermatology
Elderly care
COPD

Rapid support close to home?

Potential new services to introduce to the area

High need & high demand must stay in Orpington

Young people's services?

Providing services that young people want to use....

Contraception & sexual health support, parenting & support for teenage mums, breastfeeding support

For further discussion & debate...

Intermediate care beds

The use of these beds is being looked at with LBB – demand may be reducing due to better community support

Hydrotherapy

A facility developed with the support of local people Ongoing clinical question around its benefits compared to other treatments

Rheumatology and Dermatology

Depending on buildings solutions single hub location for each SLHT service needs to be determined

Transferred specialist activity

Knowing the benefits of all transfers, knowing how many patients affected (expected to be limited impact)

Spaces to deliver services

Now we are clearer of the service model we are exploring issues which include

Staying on Orpington Hospital site

Other Local alternatives

Suggestions from the prior scrutiny meeting regarding alternative providers and private providers using the hospital will be explored.

We must consider the financial, service delivery and economic case and many other considerations including

Walking distance to services
Nearest public transport
Bus routes
Car Parking

Some practical issues....

Parking

A major consideration

- Can sometimes be a challenge at Orpington
- Beckenham Beacon is also a challenge (possibility of extra 80 spaces at Sainsburys)

Is there space at the Princess Royal University Hospital?

Current service reorganisations are freeing up space

- Offices being moved off-site
- Some elective (planned) care moved to QMS
- Less space is actually needed than we currently use/have
- Changing clinical standards means that the space that was needed in the past isn't necessarily needed any more

Some practical issues....

Funding of any project

Any money (capital) that is released by reorganising services in the Orpington area is not committed to any other project

- Any money used to deliver services will continue to do so
- Additional money may need to be identified to fund the new services we'd like to introduce
- One-off capital released from changing building usage could be used to invest in our new way to deliver services if a strong argument can be made

Next steps

 Once options have been identified and recommended preferred solutions emerge then the appropriate engagement and agreement process will be agreed with the Scrutiny Committee.

 If substantial changes are recommended then these would be subject to a public Consultation. This would not start before January 2012

Background

Orpington Hospital recent changes

- 'A picture of health' led to changes at Orpington hospital.
- The site can no longer offer optimum care for some services
 - Dermatology, Colposcopy and Intermediate care
- The site is currently under used and expensive.
 - Estimated area of site 13,800 sqm of which 4,000 sqm plant etc
 - Of the utilisable area only 50% used
 - Cost per square meter is at least twice the NHS national average even if the hospital was fully used.
 - Costs would still be in the bottom quarter of the national average if activity at the site were doubled.
- South London Healthcare NHS Trust has given notice that the Trust will be withdrawing its services in their current form from Orpington Hospital.

Orpington Hospital current services

SLHT outpatients

- Rheumatology
- Biological Infusion Suite (as above)
- Orthopaedic
- Dermatology
- Gynaecology
- Urology
- Surgery
- FNT
- Pain Clinic
- Endocrinology
- Plastic Surgery (Supports dermatology)
- Elderly Clinics
- Gastroenterology
- Neurology
- Maxillo facial
- Dental
- Cardiology
- Colposcopy (OP and treatment)
- Clinical neurophysiology
- Breast post recovery clinic
- Colorectal
- Healthcare for the Elderly OPC
- Physiotherapy (elderly stroke and rehab)
- General medicine
- Audiology

Others

SLHT

- Ovarian ultrasound
- Radiology (x-ray and ultrasound)
- Phlebotomy
- Hydrotherapy Pool

Bromley Healthcare

- SALT
- Diabetic OP Service
- Podiatry
- Sexual Health
- Dietetics

SLHT/Bromley Healthcare

• Intermediate care beds (30 currently open)

163,000 outpatient activities per year Inc 62,000 phlebotomy
30 beds for intermediate care

Number of OP Attendees from Selected Areas by Specialties

| Specialty | No of Attendees from Orpington Zones |
|-----------------------|--------------------------------------|
| Dermatology | 8794 |
| Physiotherapy | 5639 |
| Radiology | 4322 |
| Oral Surgery | 3671 |
| Diabetes | 2806 |
| Rheumatology | 2755 |
| Trauma & Orthopaedics | 2498 |
| General Surgery | 2019 |
| Podiatry | 1455 |
| Geriatric Medicine | 1093 |

Also phlebotomy has over 62,000 attendances per annum