

Report on the position of the Royal Oldham Hospital in the context of local NHS Acute Trust re-organisation.

Saving lives,
Improving lives

Patient and People Focus | Accountability | Continuous Improvement

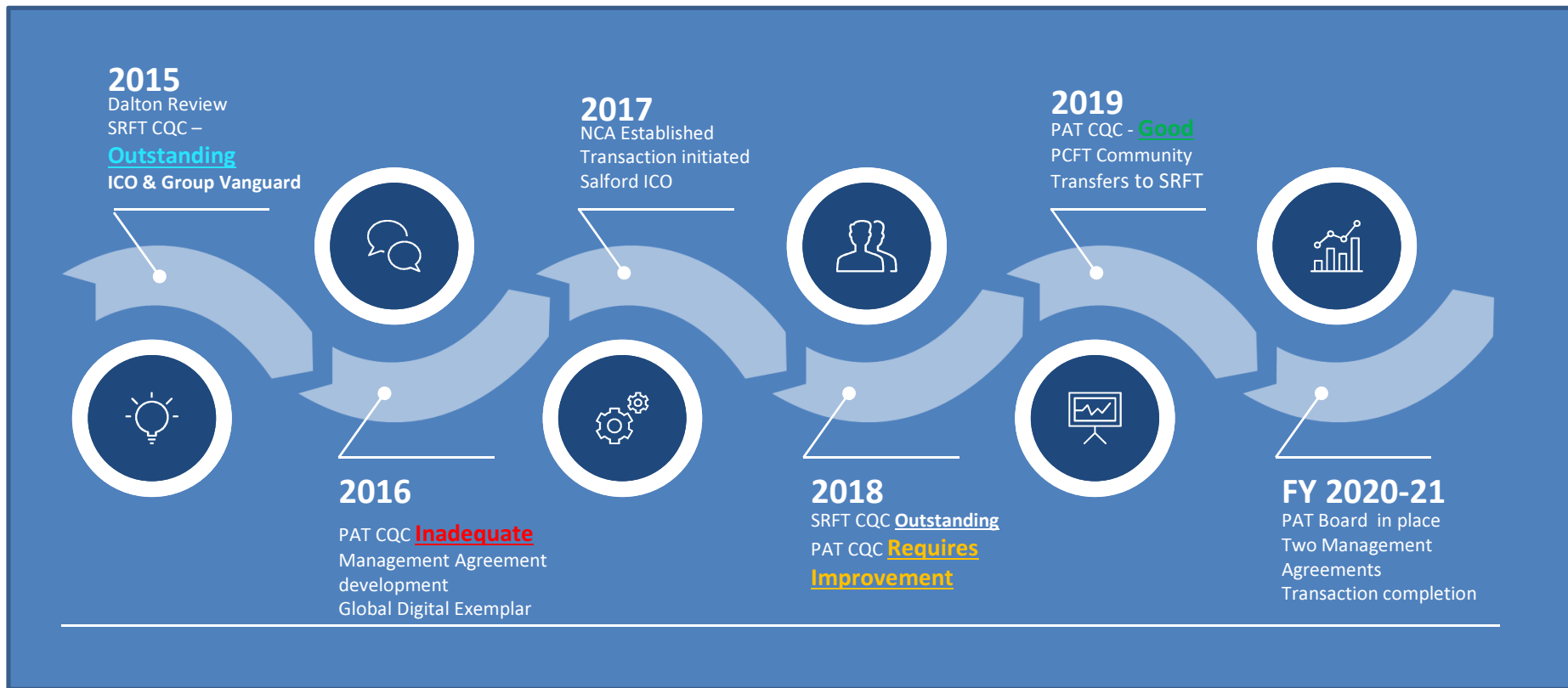
Purpose of this deck

1. A high level update on the overall transaction and the benefits and improvements for the ROH site
2. The wider development of the ROH site
3. Next steps and plans

1. Update on the transaction and benefits

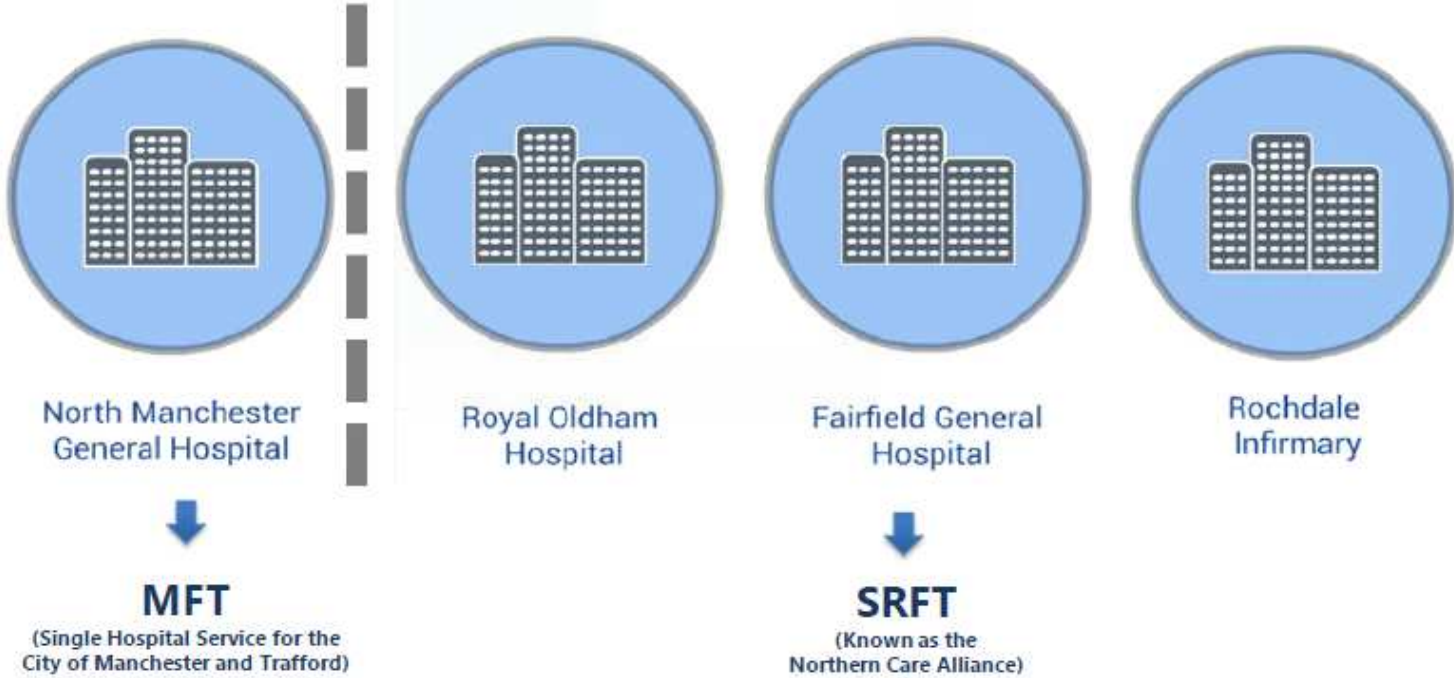
The NCA's journey so far

There's been significant work to get us here



There are two formal transactions separating Pennine Acute Hospitals Trust

- Two legally separate but intrinsically linked transactions.
- To support the future clinical, financial and workforce sustainability of acute hospital services in the NE sector and across GM.



The Improvement has been dramatic

The CQC's assessment in September 2019 means that Pennine Acute's rating and standards of care have improved from 'Inadequate' in 2016 to overall 'Good' in just three years.

Five services at ROH were inspected. Of these 1 service was rated as outstanding, and 4 services were rated good. Across the domains of safe, effective, caring, responsive and well-led those services inspected were rated 92% good or outstanding.

Key



Ratings for acute services / acute trust

2016

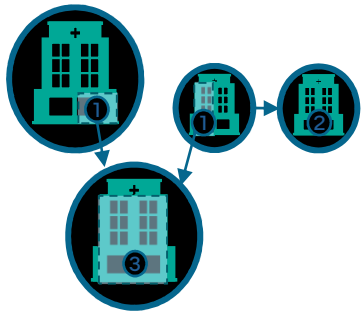
	Safe	Effective	Caring	Responsive	Well-led	Overall
North Manchester General Hospital	Inadequate Aug 2016	Requires Improvement Aug 2016	Good Aug 2016	Requires Improvement Aug 2016	Inadequate Aug 2016	Inadequate Aug 2016
The Royal Oldham Hospital	Inadequate Aug 2016	Requires Improvement Aug 2016	Good Aug 2016	Requires Improvement Aug 2016	Inadequate Aug 2016	Inadequate Aug 2016
Fairfield General Hospital	Requires Improvement Aug 2016	Requires Improvement Aug 2016	Good Aug 2016	Requires Improvement Aug 2016	Requires Improvement Aug 2016	Requires Improvement Aug 2016
Rochdale Infirmary	Good Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016
Overall trust	Inadequate Aug 2016	Requires Improvement Aug 2016	Good Aug 2016	Requires Improvement Aug 2016	Inadequate Aug 2016	Inadequate Aug 2016

2019

	Safe	Effective	Caring	Responsive	Well-led	Overall
North Manchester General Hospital	Requires Improvement Feb 2020	Good Feb 2020	Good Feb 2020	Requires Improvement Feb 2020	Good Feb 2020	Requires Improvement Feb 2020
The Royal Oldham Hospital	Requires Improvement Feb 2020	Good Feb 2020	Good Feb 2020	Requires Improvement Feb 2020	Good Feb 2020	Requires Improvement Feb 2020
Fairfield General Hospital	Good Feb 2020	Good Feb 2020	Outstanding Feb 2020	Outstanding Feb 2020	Good Feb 2020	Outstanding Feb 2020
Rochdale Infirmary	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020	Good Feb 2020
Overall trust	Requires Improvement Feb 2020	Good Feb 2020	Good Feb 2020	Requires Improvement Feb 2020	Good Feb 2020	Good Feb 2020

The transaction will further support unlocking key improvements to patient care across Oldham

1 Reconfiguration of services across sites and populations at pace, a place based approach



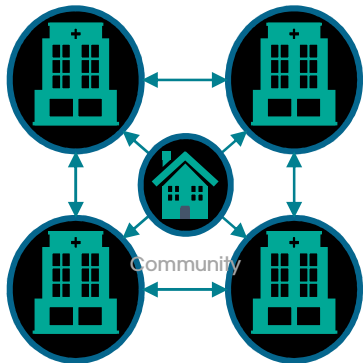
- Will allow implementation and focus on our place based strategy.
- Service reconfiguration is vital for improved patient outcomes & resilience e.g. Healthier Together at ROH.
- Group model removes the boundaries that slow pace of patient improvement.
- Oldham's place based leadership allows us to work more closely within the locality to align to population health agenda.

2 Optimise investment in workforce, estates, and technology and the resulting rate of return



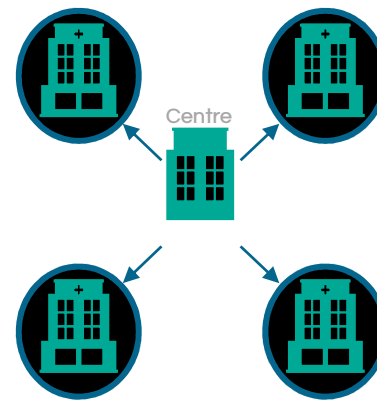
- Oldham has seen significant investment in staff development and career opportunities. Previously fragmented and spread too thin.
- Drive and enable the new digital models driven by COVID-19.
- Fixed costs of technology can be spread across more patient activity, driving needed technology improvements in Oldham.
- At scale investment in estates as seen through the ROH site developments.

3 Standard Operating Models



- Avoiding the costs of "re-inventing the wheel" and the costs of duplicated services, saves time and money.
- Innovations and technology, afforded by a group model.
- Improvements to quality of care and operating models is evidenced by Oldham's CQC report.
- Successful implementation of NASS and quality improvements.

4 Scale enables economies of scale



- Consolidation of functions and services can spread fixed costs across wider activity base.
- Providing a financially sustainable future at the ROH site as well as future investment.
- Without the transaction all sites in a deficit. The transaction will provide financial balance by 2025.

Partnerships and the importance of Place

- We will increase our focus on and positive role in each of our localities, helping local people and communities to thrive.
- Each of our areas differ and we will ensure local leaders, staff and services are better able to reflect their distinct characteristics.
- Integrated care is provided across all our localities, tailored to the local environment.
- We are a significant part of the fabric of local communities and our long-term sustainability is closely linked to the wellbeing of our populations – meaning we are an ‘Anchor institution’ in each Place, as explained to the right.

What makes the NHS an anchor institution?

NHS organisations are rooted in their communities. Through its size and scale, the NHS can positively contribute to local areas in many ways beyond providing health care. The NHS can make a difference to local people by:



Purchasing more locally and for social benefit
In England alone, the NHS spends £27bn every year on goods and services.



Using buildings and spaces to support communities
The NHS occupies 8,253 sites across England on 6,500 hectares of land.



Working more closely with local partners
The NHS can learn from others, spread good ideas and model civic responsibility.



Reducing its environmental impact
The NHS is responsible for 40% of the public sector's carbon footprint.



Widening access to quality work
The NHS is the UK's biggest employer, with 1.6 million staff.

As an anchor institution, the NHS influences the health and wellbeing of communities simply by being there. But by choosing to invest in and work with others locally and responsibly, the NHS can have an even greater impact on the wider factors that make us healthy.

2. ROH site developments

The direction of travel for the future of the ROH site

- ROH will not only be a local general hospital but moving towards becoming a high acuity specialist centre and a designated hub for complex surgery as a result of the Healthier Together decision in 2015.
- Creating the capacity for such work will require some less complex work to be undertaken at other NCA sites.
- To have a good quality, sustainable specialist and hospital services for the future we need to continue to improve services for patients across Oldham.
- Create a system where patients are consistently receive good quality and safe treatment under the right clinical team, in the most clinically appropriate setting, first time, every time, as part of an integrated care pathway.
- Any significant service changes will be subject to commissioner-led public consultations, for which strong evidence of patient benefits and assurances around access will be critical.

Significant investment and on-going work to develop the ROH site



Healthier Together: More Complex General Surgery

- Currently with Treasury (wave 4a)
- Implementation of Healthier Together model
- Approx. £27.9m – two 24 bedded surgical wards, specialist emergency general surgery theatre, reconfiguration of theatres department



Oldham Hospital Transformation

- Wave 4b: Capacity to support commissioner strategic intent, urgent care standards and address areas of backlog maintenance.
- Approx. £87m



IM&T and Energy Schemes

- * IM&T Stabilisation – significant network and server improvement with over £20m of investment secured and sharing of global digital exemplar knowledge.
- * Over £8m invested in NMGH/ROH energy schemes
- * 20/21 GM prioritised £25m for IM&T (£11.9m) and estate funding (£13.1m)

What else is shaping the future of the ROH site

- GM plans for improving specialist services, starting with the implementation of Healthier Together.
- Development of single shared services (for inpatient care).
- Working with Oldham system leaders to develop plans for delivery health and care for the population of Oldham.
- Impact of COVID-19 and recovery plans.
- Disaggregation of NMGH site linked to the transaction.

More about the impact of COVID-19

- We acknowledge the profound consequences of COVID and how this will impact the need to work flexibly.
- We are planning and working differently from business as usual as a result of the pandemic and health care emergency.
- We have implemented IPC management and biosecurity measures which puts additional pressure on the ROH site. This is offset (in part) by moving elective pathways to other NC A sites.
- The direct costs incurred in managing COVID have been reimbursed through our central submissions, there are further and on-going costs to support recovery with a fixed non – recurrent COVID allocation to cover anticipated additional costs for the remainder of 2020/21.
- We are developing a recovery plan with partners across the Oldham system to overcome the challenges created by the pandemic.

3. Looking ahead

The transaction will help create significant further benefits



Partnerships in Place

- Increase local employment across the Group by 750
- Expand strength based approaches
- Achieve the safest healthcare in England
- Reduce “never” events to 0
- Integrated model of paediatric care
- Achieve GM Good Employer standard
- Contribute to GM strategy target of reducing falls
- Create job and educational opportunities for local populations across the Group

Clinical and Operational Excellence

- Development of a one-stop centre for cancer diagnoses – diagnostic access target of 99%
- Year on year reduction in unwarranted variation
- Roll out further Standard Operating Models
- Reduction in RTT (Referral to Treatment) times
- SHMI (Summary Hospital Mortality Indicator) less than 100, and in the top quartile nationally
- Reduce DNA (Did Not Attend) rates through digital systems
- Further clinical time savings through Trendcare
- Deliver 85% cancer performance

Caring For and Inspiring Our Staff

- Continue rollout of coaching approach
- Increase % of staff wellbeing reporting measures by 5%
- Reduce reported stress related absence by 10%
- Recruitment and retention strategy to reduce turnover
- Clinical workforce transformation to reduce unwarranted variation
- 10% vacancy reduction in medical and nursing posts as a result of health and wellbeing strategy
- High performance management system for operational managers

Digital, Research and Innovation

- Utilise digital technologies to automate functions where possible to improve productivity
- Stable network and infrastructure
- Digital Control Centre to support decision making and automation
- Increase Quality Improvement Programme across Sites and Group
- Embed innovation and research across specialties
- Enhance and support patient care through digital technologies such as video care and 3D printing

Sustainable Futures

- Crucial investment into sites, services, people and IM&T.
- £13.1m benefits expected for 2020/21 beyond those managed by Care Organisations.
- Estates masterplan to consolidate services to meet the need of the expanded organisation
- Consolidation of services to single sites
- Generation of savings from standardisation and rationalisation
- Bringing outsourced services back in-house
- Royal Oldham Hospital Healthier Together build

New Models of Care

- Consolidate elective activity from Salford Royal to Fairfield General Hospital – 1000 anticipated bed day savings
- Royal Oldham Hospital as GM hub for general surgery
- Standardised pathways into communities
- Development of further clinical shared services to drive further efficiencies and improve outcomes
- Development of training academies
- Consolidation of radiology, pathology and pharmacy services
- Networked critical care model