

Date of Meeting: 22/01/2013	Agenda Item No: 7.4	Enclosure: 10
Intended Outcome:		
For noting ✓	For information	For decision
Title of Report: West Cumberland Hospital Redevelopment and Clinical Vision		
Aims: To provide the Trust Board with a brief update on the redevelopment of a WCH clinical vision delivery plan and the revised structure and governance arrangements for the WCH redevelopment.		
Executive Summary:		
<p>The aim of this paper is to update the board on the implementation of the Clinical Strategy for the re-developed West Cumberland Hospital.</p> <p>An update is provided for the 4 current work streams.</p> <ol style="list-style-type: none"> 1. Transfer of patients on either a high risk surgical or medical pathway. 2. Increased range of sub-specialisation and increased elective care closer to home, 3. Enhanced efficiency of care. 4. Transfer of acute care to a community hospital setting. <p>The paper also includes the revised structure and governance arrangements for the WCH redevelopment.</p>		
Specific implications and links to the Trust's Strategic Aims:		
Ensure we provide high quality, safe and effective care for all our patients including meeting essential standards of safety and quality as set out by the CQC		✓
Develop a viable integrated clinical strategy for secondary care services which is sustainable and affordable		✓
Develop a new healthcare facility in West Cumbria that is fit for the 21st century		✓
Achieve sustainable financial balance through the delivery of the Trust's internal Cost Improvement Programme, securing a viable contract income from our GP commissioners and contributing to the system wide cost reductions		✓
To develop and implement a successful merger or acquisition plan that enables the Trust to become part of an existing NHS Foundation Trust		✓
Recommendations:		
The Trust Board is asked to note the update on the implementation of the WCH clinical vision and approve the revised structure and governance arrangements for the WCH redevelopment		
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**WEST CUMBERLAND HOSPITAL
REDEVELOPMENT UPDATE
JANUARY 2013**

1. INTRODUCTION

The aim of this paper is to update the board on the implementation of the Clinical Strategy for the re-developed West Cumberland Hospital and to describe the project structure and governance arrangements for the WCH redevelopment.

The four key work streams currently active are:

1. Transfer of patients on either a high risk surgical or medical pathway.
2. Increased range of sub-specialisation and increased elective care closer to home.
3. Enhanced efficiency of care.
4. Transfer of acute care to a community hospital setting.

Work-stream 1: Transfer of patients on either a high risk surgical or medical pathway.

Clinical Business Units are developing a detailed service plan and timetable for the delivery of this change. The Surgical Business Unit used its January Board to work through the implications of this change by specialty and then pull together a detailed plan for implementation of the change by specialty.

Medicine continues to work through the detail of number of cases by specialty an initial feed back session is arranged for end of January.

Both Business Units will be presenting there first formal update to the WCH Clinical Reference Group at its next meeting on 19th February 2013.

Work-stream 2: Increased range of sub-specialisation and increased elective care closer to home.

There is an excellent opportunity for a range of services to increase the sub-specialisation of care to match that available within Northumbria, where appropriate, and for more patients to receive their elective treatment at West

Cumberland Hospital. Business Units continue to develop their plans and will present these to the Board as they are finalised.

Work-stream 3: Enhanced efficiency of care.

Further work is required by the Emergency Care and Medicine Clinical Business Unit across North Cumbria to match the higher efficiency and quality standards of Northumbria and a challenging improvement plan is being implemented and we continue to look forward to a transformation of key pathways over the next 12 months. It has proved particularly challenging to clinical teams over the last 4 to six weeks with a significant surge in emergency activity.

Work-stream 4: Transfer of acute care to a community hospital setting.

The multi agency group tasked with scoping the work needed to deliver these changes had its first meeting on 8th January and has its second meeting this afternoon. The original time table was to complete the scoping work in seven weeks from the middle of December 2012 the late start in January 2013 means this is now 3 to 4 weeks behind schedule. This group's work is critical to the effective running of the redeveloped WCH with its reduced bed base and pressure needs to be maintained get this work delivers in a timely manner.

2. REVISED WCH REDEVELOPMENT PROJECT STRUCTURE AND GOVERNANCE ARRANGEMENTS

Attached to this paper, as an appendix is a presentation outlining the revised WCH project structure and governance arrangements. This has already been discussed and approved by the Senior Management Team and the WCH Project Board and comes to Trust Board for their information and approval.

3. RECOMMENDATION

The Trust Board is asked to note the clinical vision update and approve the revised WCH project structure and governance arrangements.

LES MORGAN
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