

Children's Surgery Designation Process

Summary Paper for the JHOSC

Purpose

This report has been compiled to give assurance to the Joint Health Overview Scrutiny Committee of the designation process undertaken by the Children's Surgery and Anaesthesia Managed Clinical Network (MCN) on behalf of the South Yorkshire and Bassetlaw Integrated Care System and associated outcomes in relation to the implementation of the new model of care for Out of Hours Children's Surgery and Anaesthesia.

Background

In June 2017 the JCCCG approved a business case recommending the implementation of a new model of care for Children's Surgery and Anaesthesia, Out of Hours for children living within the South and Mid Yorkshire and Bassetlaw and North Derbyshire area. As part of the approval the Children's Surgery and Anaesthesia Managed Clinical Network was asked to undertake a designation process to assure the JCCCG of the trusts readiness to implement.

Process

The designation process was developed using a similar model to the one used by the East Midlands Surgical Network. Each trust was visited by a panel of 8-10 people which included:

The Network Clinical Lead

The Network Manager

A Surgeon

An Anaesthetist

A Paediatrician

A Nurse

A commissioner

An independent chair (unfortunately due to sickness our independent chair was only able to attend 2 of the visits)

A General Manger

Visits to each of the trusts across the footprint were undertaken between the 15 November 2017 and the 7 February 2018. They lasted for half a day and centred around a self-declaration form, which was updated to take any progress into account. It was based on the surgical standards and service specification developed and agreed by the Y&H Children's Surgery and Anaesthesia Task and Finish Group in 2016. An example agenda for the visits can be found in Appendix A. The agenda allowed for visits to the various relevant departments, for the visiting team to review the findings and an opportunity for Q&A.

Following the visits to the trusts, the findings from each of the visits were collated and reviewed by the clinical lead and network manager and correspondence and associated action plans were developed and circulated to the trusts.

Designation Outcome

Following the designation visits, the decision of the MCN was that it was unable to designate all the hub hospitals at that time. The MCN sought a six month pause to allow for DBH NHSFT to develop an action plan to meet the required standards.

The findings of the designation process can be summarised as follows:

Hubs

- SCH - Designated Tier 3 (tertiary centre)
- Mid Yorks - Designated Tier 2B
- Doncaster - Unable to designate – further work required to designate

Spokes

- Barnsley - Designated Tier 2A
- Chesterfield - Designated Tier 2A
- Rotherham - Designated Tier 2A

The recommendations of the visits were specific for each area. For ENT it was recommended that the current model with existing flows continues to operate. For Orthopaedics it was recommended that the current model continues with transfer to Sheffield Childrens Hospital as appropriate. A 3 hub model was recommended for Ophthalmology with patients referred to the most appropriate hub depending on their postcode. For oral and maxillofacial surgery (OMFS) it was recommended to continue the service as currently delivered with discussion around moving the on call rota to Sheffield as a base for the whole of South Yorkshire to aid sustainability. For the acute abdomen it was identified that further work was required with Doncaster Hospital to enable delivery of the new model with a hub approach. This is now underway. There is also further work ongoing to progress the most appropriate model for testicular torsions. The designation process has indicated that the number of children likely to be transferred for urgent surgery out of hours will as anticipated at this point continue to be small. The process has also highlighted the need to ensure a robust transport plan is in place and work is currently underway on this.

Next Steps

The JCCCG granted a six month pause to implementation on 28 March 2018. The MCN is now in receipt of two of the three action plans and is comfortable that the work being undertaken by those trusts will allow for designation to be granted. A further update was given to the JCCCG on 27 June 2018 and the MCN sought support from the JCCCG in obtaining the action plan from MYH NHSFT and are awaiting further information.

Work is progressing to finalise pathways and protocols for the conditions likely to require transfer to a hub hospital. These are being developed to ensure that children receive surgery as close to their home as possible and only transferring those children who absolutely require surgery out of hours.

Further updates will be brought to the JCCCG in advance of the service commencing and where required the JHOSC.

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