



Hampshire and Isle of Wight Elective Hub Update Briefing

1. Introduction

In January in response to the backlog created by COVID-19 pandemic, Hampshire and Isle of Wight NHS leaders came together and agreed that the construction of a new dedicated 'elective hub', a facility to provide more capacity and allow more operations to take place, was the best approach to addressing the backlog in the system. A programme was established with the purpose of developing proposals to secure funding and allow construction of the new facility to begin.

2. What will the hub provide?

If approved, the hub will offer a central location for adults across Hampshire and Isle of Wight who require operations for urology (kidney, bladder and urinary), Ear, Nose and Throat (ENT) and orthopaedics (such as hip and knee replacements). Operations taking place at the hub would be in addition to surgery already taking place at our hospitals across Hampshire and Isle of Wight, and eligible patients would be offered the choice of having their operation at their local hospital or the hub.

The Isle of Wight has confirmed its commitment to the hub and its risk share of capital requirements based on its original allocation of two all day lists. However, at this time the Island have indicated that they would rather be able to use the centre on an ad hoc basis. The Hub will be able to provide capacity at a future stage if and when this is required.

It is proposed that the hub will provide pre-operative assessment, theatre, day case and inpatient facilities for the three selected specialties mentioned above. It would provide four operating theatres and 44 beds, staffed by a multi-disciplinary team to allow patients to access a full range of services.

The hub would operate six days a week (but with inpatient facilities operating over seven days) and accommodate weekends and extended weekdays to maximise the capacity available.

Patients will be referred by their GPs to their home Trusts and, if patients are then identified as requiring an elective procedure and they meet the criteria, they will be offered the choice to be treated at the Hub. If patients elect to have their procedure undertaken in the Hub, their pre-assessment will be managed by the Hub. In approximately 90% of the cases this pre-assessment will be undertaken remotely.

Following their procedures any follow up required will be undertaken by the patients originating home Trust. Consultants from the current acute hospitals will be operating on their patients that chose to have their procedures in the hub to ensure continuity of care.

3. The key benefits

The proposed elective hub has the following key benefits:

- **Significantly improve patient care** – The hub will reduce the time some patients have to wait for their operation and in doing so will reduce the impact waiting can have on their physical and mental wellbeing. Capacity needs to be expanded to ensure that our patients can receive the right interventions, at the right time to achieve the best outcomes.
- **Strengthen clinical practice** – A single hub operating across the whole health and care system in Hampshire and Isle of Wight will draw on and feed into care pathways across all organisations. By acting as a model of best practice and evidencing the value of a standardised approach, the facility can add value to patient care that will extend beyond the hub.
- **Enhance resilience across the system** – The hub will provide additional capacity and so will be able to provide resilience when our hospitals and services are under pressure (such as during the winter period).
- **Deliver better value for money** – The hub will allow NHS organisations to make better use of their resources through higher levels of productivity and economies of scale. For example, it is hoped that clinicians will not have to cancel lists due to unexpected, unplanned demands.
- **Strengthen integration** – NHS organisations have been working together with partners to improve services and transform how we deliver care. As we have formally established the Hampshire and Isle of Wight Integrated Care System, the proposed elective hub will expedite and add to the improvements already underway.

4. Location

The proposed location for the new facility is on the site of the Royal Hampshire County Hospital in Winchester. Plans and designs are well underway, and the Programme is working with the contractor Integrated Health Projects (IHP) and AD Architects to develop the building specification. The plans involve refurbishing a floor within Burrell Building to create four theatres and a short stay ward and a five-storey building to house the inpatients wards, a new orthopaedic outpatient and x ray facility and associated plant.

5. Timeline

NHS England are supportive of our plans in principle, and the next step is for the proposals to be formally approved following the submission of an outline business case and a full business case. We anticipate that we will know whether our plans can proceed by December 2023. A high-level timeline has been prepared (see Appendix A) which would enable construction to start at the beginning of January 2024 and anticipating the new facility being fully operational by June 2025.

6. Seeking the views of local people on our plans

In preparing the plans for the Hub the programme has been working with the four Healthwatches across Hampshire and Isle of Wight who have supported us to seek the views of local people on the potential elective hub to inform the development of our plans for the service and the design of the building. This has included directly promoting the survey to those currently on waiting lists as well as more widely.

Over 2,100 local people shared their views which are being analysed. Highlighted themes are:

- Many people are prepared to travel to Winchester if they can be seen/receive treatment more quickly, including residents on the Isle of Wight who shared that to do this they would need some help from the NHS
- Many people felt the amount of time they will need to wait to be seen is okay/as expected
- There is acknowledgement/understanding of post pandemic delays and staff pressures
- Some respondents were given good, clear information and advice whilst they waited, such as condition specific information, support to lower their BMI, etc
- Many reported that long waits were causing anxiety, upset or deterioration in their condition
- Long waits are impacting on family, personal and working life
- Some respondents have decided to seek private treatment instead
- Some felt information they were given was irrelevant, too late or they didn't get any at all with many doing their own research
- Many cited delays in the referral process, not the wait for actual treatment
- When asked what the NHS could do to help with patients who choose to go to the elective hub, suggestions include providing support at the Elective Hub such as interpreters and carers if usual carer wasn't available, transport to and from the hub, help with cost of travel, easy/free car parking, clear information about the facility and staff, good wheelchair access, opportunity to meet staff before receiving treatment, appointment times that take into account travel time or need for a relative to drive to the appointment.

The feedback is being used to help shape the plans for the Elective Hub. We are also planning to hold several focus groups with local people to explore the feedback themes in more detail. The feedback will also be used to determine how we are supporting people whilst they are waiting and improvements, we can make to this.

7. Next steps

We continue to develop our outline business case for submission which will then be followed by a full business case as detailed in our timeline.

Appendix A

Programme Overview Timeline V6

KEY
 ● Milestone
 ▾ Current Position
 ▭ Deliverable

