

King's College Hospital NHS Foundation Trust Bed and Capacity Reconfiguration Plan

EXTERNAL ENGAGEMENT PLAN

Background

King's College Hospital NHS Foundation Trust is planning to increase the number of beds across the Trust's hospital sites (Denmark Hill, Princess Royal University Hospital (PRUH) and Orpington Hospital). This will address long standing performance challenges related to the delivery of national access targets for emergency and elective waiting times. An increase in the number of beds will support an improvement in waiting times for non-elective and elective care and enable an improved patient experience. It will:

- Enable swifter admission for emergency patients by increasing the number of beds available which will improve A&E waiting times and improve patient flow through the hospital
- Provide increased ring-fenced bed capacity for inpatient elective activity, reducing waiting times and elective cancellations and supporting the separation of emergency and elective activity.
- Provide a dedicated frailty and step down unit to support improvements in the management of these patients and to free up emergency bed capacity at the PRUH.

The proposed increase in beds represents a response to immediate and significant capacity and performance pressures.

Proposal

The bed proposal is part of the Trust's plans to address an assessed and recognised current 74 bed shortfall across the Denmark Hill (54 beds) and PRUH (20 beds) sites. The bed proposals form part of the Trust's overarching 2016/17 Recovery Plans for A&E and elective waiting times. King's proposes to create 11 beds in this financial year by improving internal productivity and efficiency. The residual bed shortfall will be addressed through the creation of 63 extra beds, as follows:

- The creation of 40 beds at Orpington, which will enable the transfer of 40 beds from the PRUH site to Orpington. These beds will be used to provide a dedicated frailty and step down unit for Bromley and outer south east London residents.
- An increase in bed capacity at the PRUH of 20 beds for acute care, to better meet emergency demand and reduce bed occupancy.
- The provision of an additional 20 beds at the PRUH for elective activity which will support a transfer of elective inpatient cases from Denmark Hill and improve access and waiting times for these patients. All elective activity at PRUH will be undertaken in ring fenced beds, eliminating the risk of cancellation, leading to reduced waiting times in line with the NHS constitutional standard. A robust options appraisal is being undertaken to

confirm the proposed specialties for transfer - the Trust's provisional shortlist includes gynaecology, colorectal, bariatric orthopaedic and respiratory services. Based on this provisional list the proposed service moves would impact approximately 1070 patients across south east London in a year.

- The creation of an additional 23 beds at Denmark Hill, which along with the 20 beds freed up through the transfer of elective in-patient services to the PRUH, will provide increased capacity of 43 beds.

Service Moves

These proposals will require some movement of services between King's sites as follows:

1. AT ORPINGTON HOSPITAL - The freed up space at Orpington Hospital from the move of outpatient Dermatology and Diabetes (provided by Bromley Healthcare) will be converted to a 40 bed Older Person's Assessment and Frailty Unit.
2. AT PRUH – The 40 beds in the Frailty Unit at Orpington will be filled by specially selected patients from the PRUH who would otherwise be occupying emergency beds. Of these 40 "free" beds, 20 will be allocated to medicine to increase emergency capacity and 20 will be used to support the transfer of patients from Denmark Hill.
3. DENMARK HILL– 20 elective beds will be transferred to the PRUH and in addition, a new 23 bed ward for emergency admissions will be created by moving offices out of the 9th floor of the Ruskin Wing.

The moves have to happen in a particular order, with the Orpington Dermatology move happening in advance of the others because of the time needed to convert the space into the new Older Persons Assessment and Frailty Unit.

Communications and engagement rationale

Effective communications and engagement is vital to the development process of the Trust's proposals to increase bed capacity.

Crucial elements that will be supported by this are:

- Ensuring that there is a strong and compelling narrative for why change is needed and why our preferred approach is a suitable way forward
- The new service model arrangements put patients at their centre and the process of development ensures this
- The development process is open and transparent
- All relevant audiences are kept informed about the process and associated developments

- All relevant audiences are listened to and their views considered as part of the development process

This will help to ensure that all our stakeholder audiences:

- Understand why there is a case for change and what this is
- Support in principle the case for change
- Appreciate that the aims of the proposals are to improve overall patient experience and access across inpatient non elective and elective care

Audiences

There are a wide range of audiences we will need to engage and communicate with throughout the process. The list below gives a brief outline of the types of external stakeholders this includes:

- Patient interest (including: patients, their families and carers, patient representative groups, community voluntary sector organisations, community forums and groups, general public)
- Health system (including: CCGs, NHS Improvement, NHS England, Health Overview and Scrutiny Committees, Local Authorities, Healthwatch, Health and Wellbeing Boards, GPs, other providers)
- Political and media (including: MPs, Councillors, local and trade media)

Approach to communications and engagement

To deliver effective communications and engagement on this project, we will need to make use of a wide range of channels and ensure the structure and timing aligns with the operational development process. Further detail of the approach will be included when key milestones of the process are clearer, particularly on timescales for certain enabling work and fuller development of the specifics.

Our general approach will be to:

- Develop a strong and compelling narrative for the proposed service moves, bed creation and pathway redesign
- Develop overall key messages about the project that are clear and can be used across all elements of the project
- Produce regular and planned updates to key audiences to update them on progress
- Provide a range of face-to-face and digital channels for communications and engagement activity
- Identify specific opportunities to engage and involve staff on the development process

- Identify specific opportunities to engage and involve patients and other local stakeholders ensuring a joined up approach with Patient and Public Involvement and Strategy (Health System Partnerships/Primary Care Liaison) colleagues
- Produce bespoke patient information specific to relevant services
- Work closely with local stakeholders to ensure local intelligence is considered as part of any developed plans
- Ensure that face to face local site based engagement meetings with patients and carers are put in to place as part of the engagement process, to enable questions and issues to be raised and responded to by the Trust.

Patient engagement and communications

The Trust will deliver proportionate pre-engagement activity with patients for key areas of the proposals and liaise with Healthwatch to draw on their advice, expertise and their role to provide patient representation. This will include delivering a level of targeted activity which is aligned to the findings of equality impact assessments as well as establishing local site based meetings for patients and carers.

Communications and Engagement Activity

Our first priority is to deliver an overarching case for change briefing to key stakeholder groups. It is important that all groups understand the context of our proposals. The bulk of the activity will be linked to each specific service move and will include an appropriate combination of information giving and briefing and opportunities for face to face discussion and feedback. The Trust's overarching plan with regards to this proposal is set out at high level in the table below - further detail on the communications and engagement activity set out will be shared with key stakeholder groups as it is developed.

Planned stakeholder engagement activity

	Stakeholders	Lead	Key actions	Supporting actions	Timing
CCGs/CSU	All south east London (SEL) CCGs Any other CCGs impacted by the moves	KCH Chief Operating Officer	<ul style="list-style-type: none"> • Early discussion of considerations • Outline briefing to advise of intentions • Full details of proposed service moves 	Outline briefing includes outline engagement plan	<p>May</p> <p>29 June</p> <p>W/c 5 Sept</p>
Other Commissioners/Regulators	Other commissioner – through established contract meetings and Associate CCG briefings. Regulators – through existing regulatory meetings with NHS England and NHS Improvement.	KCH Chief Operating Officer	<ul style="list-style-type: none"> • Full details of proposed service moves 		W/c 5 Sept
Health Overview and Scrutiny Committees	All south east London OSCs Any other OSCs impacted by the moves	<p>KCH Chief Operating Officer /CCG Chief Officers</p> <p>Support from Corporate Communications as required</p>	<ul style="list-style-type: none"> • Early discussion of intentions • Initial outline briefing to advise of intentions • Provision of trigger template and commitment to regular update reports, covering the engagement process 		<p>June</p> <p>29 June</p> <p>W/c 5 Sept</p>

Health - system wide and internal stakeholders	Healthwatch	Southwark, Lambeth, Bromley/Lewisham others in SEL Any other HWs impacted by the moves	Corporate Communications / Patient and Public Involvement (PPI)	<ul style="list-style-type: none"> • Early notification of considerations • Initial outline briefing to advise of intentions • Full briefing of proposed service moves 	Discuss support from HW to facilitate patient/public discussion meetings – agree format to take forward	W/c 4 July W/c 5 Sept W/c 26 Sept
		All south east London (SEL) GPs Any other GPs impacted by the moves Local Medical Committees (LMC)	Strategy (Health system partnerships/Primary Care Liaison)	<ul style="list-style-type: none"> • Early notification of exploratory work • Articles in GP bulletins/notify LMCs 		W/c 13 June W/c 26 Sept
		Site specific local focus groups to be arranged to enable patients and carers to be briefed directly and to enable questions and issues to be raised and responded to by the Trust. Additionally targeted approach for patient or population groups highlighted in the Equality Impact Assessment.	Corporate Communications / Patient and Public Involvement (PPI)	<ul style="list-style-type: none"> • Patient briefing material • Patient feedback material • General briefing articles in relevant Trust/HW member/patient bulletins • Letters to patients • Website updates 	Early notice/final changes	W/c 3 Oct W/c 3 Oct W/c 3 Oct W/c 14 Nov W/c 28 Nov / Jan 2017

Patient Representative Groups	Where appropriate any patient groups impacted by moves, as part of the overall patient engagement process described above.	Corporate Communications / Patient and Public Involvement (PPI)	<ul style="list-style-type: none"> General briefing material and patient feedback material as relevant 		W/c 3 Oct
PALS		Corporate Communications	Brief PALS and send patient briefing pack		W/c 3 Oct

Political and media stakeholders

MPs	All SEL MPs Any other MPs impacted by the moves	Corporate Communications	Initial briefing of exploratory work/considerations		From July
			Full briefing issued to MPs		W/c 3 Oct
Media	<ul style="list-style-type: none"> Southwark News South London Press Bromley News Shopper Other media outlets as required 	Corporate Communications	Media release issued regarding considerations and engagement with patients/public		W/c 3 Oct
			Media statement issued outlining final outcomes		W/c 21 Nov

***A separate internal communications and engagement plan will be delivered in appropriate alignment with external plan**

