

Agenda Item 9

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of University Hospitals of Leicester NHS Trust

Report to	Health Scrutiny Committee for Lincolnshire
Date:	12 September 2018
Subject:	Renal Dialysis Services in Lincolnshire

Summary:

The purpose of this paper is to brief the Health Scrutiny Committee for Lincolnshire on the process and service development to re-provide and expand renal dialysis services for the population of Lincolnshire.

The contracts with private providers for renal dialysis services in Boston, Grantham and Skegness are due for renewal and a tendering exercise will be taking place. Renal dialysis services are also provided at Lincoln County Hospital, but this is not part of the current tendering exercise.

The following are due to attend to present this report:

- Suzi Glover, Deputy Head of Nursing, University Hospitals of Leicester NHS Trust
- Geraldine Ward, General Manager, Renal & Transplant Haemodialysis Unit, Leicester General Hospital
- Siobhan Sodiwala, Matron (Lincoln Renal Unit)

Actions Required:

The Health Scrutiny Committee for Lincolnshire is asked to support the service development and tender process, and note the anticipated benefits for the patients.

1. Background

University Hospitals of Leicester NHS Trust (UHL) provides renal dialysis services for the people of Leicestershire, Lincolnshire, Northamptonshire, and some of Cambridgeshire. As well as its main unit at Leicester General Hospital, UHL also manages renal satellite units at other locations, four of which are in Lincolnshire. The purpose of this paper is to brief the Health Scrutiny Committee for Lincolnshire on the process and service development to re-provide and expand renal dialysis services for the population of Lincolnshire.

In Lincolnshire renal dialysis services are provided in Boston, Grantham, Lincoln and Skegness. The services in Boston, Grantham and Skegness are operated by private providers under contracts, which are due for renewal. The renal dialysis services provided at Lincoln County Hospital are not part of the current tendering exercise.

The forthcoming contract re-provision also includes a satellite unit in Leicester (the Hamilton Unit). For this reason, information in this report covers Leicestershire and Rutland as well as Lincolnshire.

UHL is in the process for planning the future of the service in these areas. The objective will be to:-

- a) To provide and facilitate the delivery of high quality and most cost-effective care for the patients.
- b) Improve capacity and access to local outpatient haemodialysis facilities for patients in Leicestershire, Lincolnshire and Rutland and this includes an improved pathway for inpatients for the population of Lincolnshire and the surrounding area.

There is a 4% growth in the number of people requiring dialysis treatment is forecast and we know that patients treated with dialysis have increasingly complex health and social care needs.

- c) To meet national standards - Patients should travel less than 30 mins from their home to access haemodialysis

Over the last few years UHL has delivered new dialysis units in Northampton, Kettering and most recently Peterborough. From the point of view of Leicestershire, Lincolnshire and Rutland it should also be noted that the wider renal service is also being considered with the plans for reconfiguration being factored into the planning.

Leicestershire and Rutland	
Current Service	Future Service
Leicester General Hospital (UHL)	Reconfiguration Plans –future Kidney centre model in discussion.
Loughborough Satellite Unit	Remain as is with potential to develop a minimal care area within the existing footprint.
Hamilton Satellite Unit, Leicester Private provider fully managed Service	Tender
Heath Lane Surgery, Leicester (UHL)	Self -care facility to remain as is.

Lincolnshire	
Current Service	Future Service
Lincoln County Hospital (UHL)	In patient and day-case service development – clinical pathway to repatriate Lincolnshire patients
Grantham Satellite Unit – Private Provider – Fully Managed Service	Tender
Boston Satellite Unit – Private Provider – Fully Managed Service	Tender
Skegness Satellite Unit – Private Provider – Fully Managed Service	Tender

Expansion Programme

It is proposed that the expansion programme would have two phases to it. The first phase would address the immediate need for increased capacity and the private provider contract which is coming to an end. The second would work alongside the reconfiguration programme to address the longer term capacity issues and some other aspects of the renal service.

Quality and Patient Experience

Although dialysis is a lifesaving treatment for people with End Stage Renal Disease (ESRD), dialysis is also a significant life changing experience for every individual that needs it. For many patients with ESRD, dialysis greatly improves their well-being and their life. However, for some renal patients, it may not be as beneficial due to other health problems.

Patients receiving in-centre haemodialysis attend the dialysis unit for 3.5-4.5 hours of treatment three times each week. In addition there is travel time which many patients find difficult to endure. It is therefore critical to get the planning right when considering service development.

The types of things that influence a good quality haemodialysis (HD) patient experience are as below:

- a) A suitable clean and welcoming environment that allows HD to be delivered efficiently in a calm setting
- b) Suitable appointment times with HD treatments commenced in a timely manner
- c) Flexibility with appointment times to enable patients to attend special events
- d) A unit 'close to home' with minimal travel time without delays (standard is within 30 minutes from home)
- e) Good communication supported by information about their condition and treatment
- f) Continuity of care delivered by competent staff
- g) On-going support to assist them in accepting their life change and adapting their lifestyle as required
- h) Effective 'problem free' vascular access

UHL is in the process of surveying all patients treated with dialysis on a one to one basis. However, UHL has recently hosted a consultation event (13 May) and whilst the number of attendees was a minority they made valid and interesting points highlighting how they felt the service should develop. These include:-

- a) A preference for some dialysis provision to be on the General Hospital site
- b) Direct admission to a renal services, therefore avoiding an admission to an Emergency Department
- c) Communication between the ward and Dialysis unit is important

Taking the above into account the clinical and managerial team have developed a robust service specification.

The UHL Renal and Transplant service develops from a strong position and in particular it:

- a) Is a tertiary referral renal centre serving a population of 2.2 million people.
- b) Is the hub for one of the largest renal networks in the country providing care for over a 1000 people across the network with end-stage kidney disease. The clinical outcomes are good or on a par with comparable services as evidenced by successive renal registry reports.
- c) Has a strong ethos of multi-professional working with nationally prominent figures working in our pharmacy, dietetic, nursing, H&I as well as clinical teams. Clinicians are recognised for holding prominent roles in national bodies such as the Royal College of Physicians.
- d) Is the driving force behind the highly successful East Midlands NIHR CRN research network. The clinical service is vastly enhanced by internationally regarded clinician scientists.
- e) Offers a very good training environment – evidenced by undergraduate and postgraduate feedback as well as consistently attracting high quality trainees from overseas.

The Programme of Work

The Hamilton, Boston, Grantham and Skegness units are fully managed, private provider units. Through procurement process, services will be expanded to deliver a different service model to fit with the change in acuity and case-mix of patients. The location may remain the same or may be in the close proximity. The plan would be a stepwise increase in patient numbers and capacity usage over a number of years.

This would allow us to cater for the predicted growth in numbers as well as cater for the more complex, frail patients requiring the premium middle of the day slots. To meet the required procurement regulations the plan is for the procurement to commence on 25 July 2018.

Outpatient Haemodialysis Provision – Procurement

The following procurement lots have been agreed:

Lot 1: Lincolnshire

- a) Boston (Current) or similar location based on postcode data.
- b) Grantham (Current) or similar location based on postcode data.
- c) Skegness (Current) or similar location based on postcode data.

Lot 2: Leicestershire and Rutland

- a) Hamilton (Current) or similar location based on postcode data.

2. Consultation

The Health Scrutiny Committee for Lincolnshire is being consulted on the future re-provision of renal dialysis services in Boston, Grantham and Skegness.

3. Conclusion

The committee is asked to support the service development and tender process and note the anticipated benefits for the patients.

4. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Geraldine Ward, General Manager Renal & Transplant Haemodialysis Unit, Leicester General Hospital, who can be contacted via
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