Strategic Programme Board Wednesday 19th December 2012

Provider Capacity

1. Introduction

The New Deal for Trafford proposes significant changes to Trafford General Hospital. Whilst the activity modelling data shows up to 75% of current patients attending A&E and associated services will still attend and receive the same treatment, should the recommendations for change be adopted, 25% of patients are likely to attend alternative providers.

It is essential to ensure local acute hospitals can appropriately manage any additional patient activity arising from any changes proposed or realised in Trafford General Hospital. As part of the consultation process, key alternative providers were requested to identify whether additional activity could be absorbed within current facilities. Provider responses are attached as part of this paper.

2. Provider responses to the New Deal for Trafford

The three local acute providers most likely to be affected by activity changes in Trafford are; University Hospital South Manchester NHS Foundation Trust, Central Manchester University NHS Foundation Trust and Salford Royal NHS Foundation Trust. All three of these providers responded as stakeholders to the consultation on New Deal for Trafford and these can be found at **Appendix 1 – 3** (UHSM – Appendix 1, CMFT – Appendix 2, SRFT – Appendix 3).

All three providers have confirmed in their responses that they could manage the likely increases in activity and case mix estimated to result of a recommendation to move to Model 2; the introduction of an Urgent Care Centre at Trafford General Hospital. University Hospital South Manchester NHS Foundation Trust outline that this is provided that the NHS Trafford deflection strategy is achieved in full. However, all three providers all state that a subsequent move to Model 3; the provision of a Minor Injuries Unit only at Trafford General Hospital can only be accommodated subject to the successful full implementation of Integrated Care servicesacross the borough of Trafford.

Additional provider responses were received from Greater Manchester West NHS Foundation Trust (GMW, the local mental health provider – **Appendix 4**), Trafford Provider Services (**Appendix 5**) and Bridgewater Community Healthcare NHS Trust. All of these confirmed they did not have any concerns over the move to Model 2 although GMW has raised the outstanding issue of the management of patients with acute mental health problems (who might require the use of a 136 suite). This issue has already been discussed by the Integrated Care Redesign Board (ICRB) and is subject to on going discussions with CCG Trafford and the Trust.

3. Conclusion

The New Deal for Trafford pre consultation and consultation process has produced considerable evidence surrounding the recommendation for Trafford General Hospital. This paper summarises the likely impact of moving to Model 2 locally through a summation of local provider responses as well as describing the assurance process for ongoing monitoring and reporting of performance both locally and by the SHA.

4. Appendicies

Appendix Number/Name	Document
1 – UHSM response to consultation	UHSM response 20121030123509060
2 – CMFT response	CMFT Letter to Leila Williams re Trafford ci
3 – SRFT response to consultation	SRFT response New Deal for Trafford.doc
4 – GMW response to consultation	GMW williams 23.10.12[1].pdf
TPS/Bridgewater response to consultation	Paper copy available on request