



Consultation to change children's surgery and anaesthesia services in South and Mid Yorkshire, Bassetlaw and North Derbyshire



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Following a review into children's surgery and anaesthesia services in South and Mid Yorkshire, Bassetlaw and North Derbyshire, we are now considering a number of options for the future of these services.

At the moment, if a child needs an operation, they will have a different experience and receive different standards of care depending on where they live. Our doctors, nurses, healthcare staff and clinical experts all agreed that this isn't fair - and have come together to change it.

To help us with our review, between January and April this year, we asked you, patients and the public, what

would matter to you if your child needed an operation.

You said it was important to:

- Receive safe, caring, quality care and treatment
- Have access to specialist care
- Be seen as soon as possible
- Have care close to home - but are willing to travel for specialist care
- Have appropriate facilities for parents and carers with excellent communication when a child is in hospital

All feedback has been used to develop options for the future of children's surgery and anaesthesia services - and we want to know what you think about the proposals.

Between 3 October 2016 and 20 January 2017, you can get involved by filling in the form at the back of this booklet and return it by freepost to:

Freepost COMMISSIONERS WORKING TOGETHER

Or, respond online at www.smybndccgs.nhs.uk

Which services do we mean?

We are proposing to change a small number of services to improve the care of children needing operations in Barnsley, Bassetlaw, Chesterfield, Doncaster, Rotherham, Sheffield and Wakefield.

If a child needs an operation under general anaesthetic (where they are sent to sleep):

- At night, or
- At a weekend, or,
- They need to stay in hospital overnight

For the following services,

- Ear, nose and throat (ENT)
- General surgery (for conditions usually of the abdomen/tummy - eg, appendicitis)
- Ophthalmology (for any condition of the eyes)
- Oral surgery (for any condition of the mouth or teeth)
- Orthopaedics (for any condition of the bones, muscles, nerves etc)
- Urology (for any condition of the groin, genitals or bladder)

We are proposing they are done in a different way.

These are the only services we are proposing to change.

For most services, most of the time, nothing would change. Children would still have operations in their local hospitals for things like:

- Tonsil removal
- Glue ear
- Setting of fractures/broken bones
- Any treatment that requires only a local anaesthetic but not being sent to sleep

We're also not looking to change specialist services for children with very complex or multiple conditions needing care from specialist doctors and nurses. For these services, you would still go to Sheffield Children's Hospital as the only specialist children's centre in our region.

Based on our review of current treatments at all our hospitals, we expect that the number of children affected by the proposed changes in each would be very small compared to the overall number of children needing an operation in South and Mid Yorkshire, Bassetlaw and North Derbyshire.



Why do we want to change children's surgery and anaesthesia services?

1. In our region, some children have better experiences, better and faster treatment and better access to services than others - and we don't think this is fair.

2. Some of our hospital doctors and nurses don't treat as many children as others do.

Why is this an issue?

Children are not 'small adults' and if they need an operation, it is better and safer for them to be seen by a surgeon who is trained to and regularly operates on children.

3. Nationally, there aren't enough healthcare professionals qualified to treat the amount of children who need surgery every year.

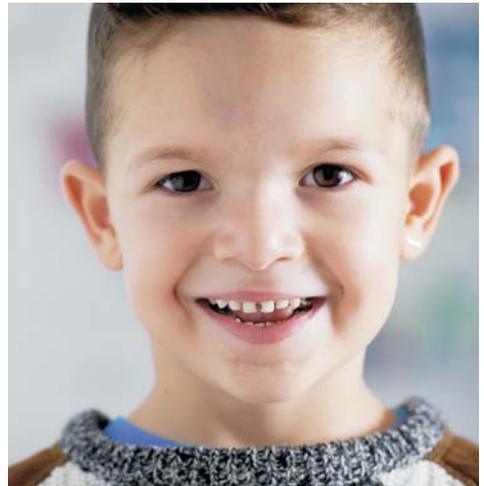
Why is this an issue?

As mentioned, children receive better care and treatment if they are seen by doctors and nurses who are trained to look after and operate on them. A reduced number of staff nationally,

means there is also less qualified staff locally - and we need to work with the staff and resources we do have to make sure our region's children have the best possible and highest quality care.

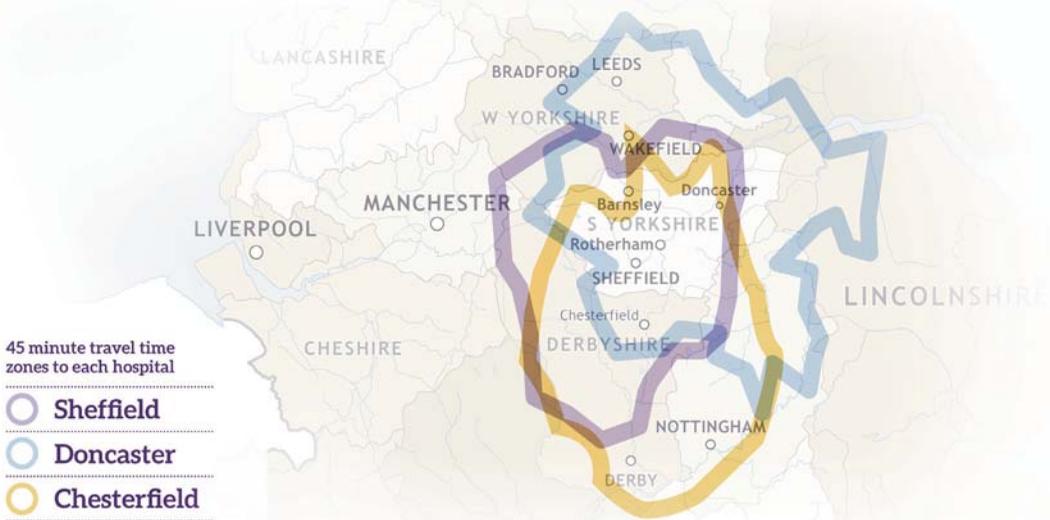
Our proposed changes are not about cutting services or saving money, but using what we have in the best possible way to get the best services for everyone.

By making changes to how children's surgery and anaesthesia services are currently provided, we believe we can better share skills and knowledge and ultimately, provide a much better, equal service to every child across South and Mid Yorkshire, Bassetlaw and North Derbyshire.



What are the options for children's surgery and anaesthesia services?

We are recommending three options for the future of children's surgery and anaesthesia services. For all options, children would be taken to the next nearest hospital. We would like your view on the following options:



Option 1:

If a child needs an operation under general anaesthetic (where they are sent to sleep):

- At night, or
- At a weekend, or
- They need to stay in hospital overnight

For the kinds of surgery listed opposite, they would go to:

- Chesterfield Royal Hospital
- Doncaster Royal Infirmary
- Pinderfields General Hospital in Wakefield
- Sheffield Children's Hospital

- Ear, nose and throat (ENT)
- General surgery (for conditions usually of the abdomen/tummy - eg, appendicitis)
- Ophthalmology (for any condition of the eyes)
- Oral surgery (for any condition of the mouth or teeth)
- Orthopaedics (for any condition of the bones, muscles, nerves etc)
- Urology (for any condition of the groin, genitals or bladder)

Based on current numbers, this would affect 1 in every 10 children needing an operation in Barnsley and 1 in 8 children needing an operation in Rotherham.

Option 2:

If a child needs an operation under general anaesthetic (where they are sent to sleep):

- At night, or
- At a weekend, or,
- They need to stay in hospital overnight

For the following kinds of surgery, they would go to Doncaster Royal Infirmary, Pinderfields General Hospital in Wakefield or Sheffield Children's Hospital.

- Ear, nose and throat (ENT)
- General surgery (for conditions usually of the abdomen/tummy - eg, appendicitis)
- Ophthalmology (for any condition of the eyes)
- Oral surgery (for any condition of the mouth or teeth)
- Orthopaedics (for any condition of the bones, muscles, nerves etc)
- Urology (for any condition of the groin, genitals or bladder)

Children's operations for these services would no longer be provided in

- Barnsley
- Chesterfield
- Rotherham.

Based on current numbers, this would affect 1 in every 10 children needing an operation in Barnsley, 1 in 16 children needing an operation in Chesterfield and 1 in 8 children needing an operation in Rotherham.

Option 3:

If a child needs an operation under general anaesthetic (where they are sent to sleep):

- At night, or
- At a weekend, or,
- They need to stay in hospital overnight

For the following kinds of surgery, they would go to Pinderfields General Hospital in Wakefield or Sheffield Children's Hospital.

- Ear, nose and throat (ENT)
- General surgery (for conditions usually of the abdomen/tummy - eg, appendicitis)
- Ophthalmology (for any condition of the eyes)
- Oral surgery (for any condition of the mouth or teeth)
- Orthopaedics (for any condition of the bones, muscles, nerves etc)
- Urology (for any condition of the groin, genitals or bladder)

Children's operations for these services would no longer be provided in

- Barnsley
- Chesterfield
- Doncaster
- Rotherham hospitals.

Based on current numbers, this would affect 1 in every 10 children needing an operation in Barnsley, 1 in 16 children needing an operation in Chesterfield, 1 in 7 children needing an operation in Doncaster and 1 in 8 children needing an operation in Rotherham.

Which option do we prefer?

We prefer option 2. This is because with careful planning to ensure we have the right staff in each hospital, and to make sure patients could get to one of the hospitals within 45 minutes (as a national standard), we believe that option 2 would give all patients in South and Mid Yorkshire, Bassetlaw and North Derbyshire access to the same quality and standard of children's surgery services.

We don't think that option 1 would be sustainable as we would not have enough doctors or nurses to provide cover across all sites meaning we would risk facing further safety and quality problems.

We also think that option 3 would be challenging in terms of the increased amount of patients going to only one of two places.

I live in Barnsley / Chesterfield / Rotherham - where will I go if my child needs an operation?

In the future, you may need to go to Doncaster Royal Infirmary, Pinderfields General Hospital in Wakefield or

Sheffield Children's Hospital if your child needs a specific operation that is no longer provided at your local hospital at night or at a weekend - but at the moment, nothing will change.

What if my child needs an emergency operation?

At the moment children would go to their local hospital, where depending on their needs, they may be transferred to Sheffield Children's Hospital for care. If you live in Sheffield already, you would go straight here. This won't change.

Ambulance services would continue to operate in the same way as they do now.

How have we developed the options?

We developed the options with clinical and managerial NHS staff who provide children's surgery and anaesthesia services in our region's hospitals and the NHS staff who 'buy' and monitor the standards of the services. A group and expert panel was set up to support and oversee the review and has been meeting regularly.





Who are Commissioners Working Together?

Commissioners Working Together is a partnership between the eight NHS clinical commissioning groups (CCGs) in South and Mid Yorkshire, Bassetlaw and North Derbyshire. NHS clinical commissioning groups pay for local health services in their region and our aim is to provide better services for everyone by working together.

They looked at:

- **Getting to a hospital** - can patients easily access these services, either independently or by ambulance within 45 minutes?
- **Number of patients** - if services changed, would hospitals be able to treat the potential higher number of patients being seen?
- **Impact on other areas** - would changing services in our region affect services and patients in neighbouring areas?
- **Patient experience** - based on what our pre-consultation told us was important to people (access to expert, quality care etc), would the proposed options deliver this and improve current patient and carer experience?
- **Number of staff** - how could we use our current workforce in the best way to meet the needs of our patients?

Our partners are:

NHS Barnsley CCG
NHS Bassetlaw CCG
NHS Doncaster CCG
NHS England
NHS Hardwick CCG
NHS North Derbyshire CCG
NHS Rotherham CCG
NHS Sheffield CCG
NHS Wakefield CCG

We have therefore reviewed children's surgery and anaesthesia services in the following hospitals:

Chesterfield Royal Hospital
Barnsley Hospital
Doncaster Royal Infirmary
Pinderfields General Hospital, Wakefield
Rotherham Hospital
Sheffield Children's Hospital



As this document has outlined, the quality of care across a region can be variable. We believe that to improve care for people, health and care services need to work more closely together, and in new ways to meet people's changing needs, often using new and emerging treatments.

Over the last few months, patient groups, the voluntary sector, hospitals, GPs, local councils, commissioners of services and the universities have come together to look at what more needs to happen to improve care for people in South Yorkshire and Bassetlaw. Together, we are in the very early stages of looking at how we can address the challenges facing our health and care services and improve the health of our population.

Our thinking starts with where people live, in their neighbourhoods focusing on people staying well. We want to introduce new services, improve co-ordination between those that exist, support people who are most at risk and adapt our workforce so that we are better meeting the health and care needs of people in their homes and clinics. We want care to flow seamlessly

from one service to the next so people don't have to tell their story twice to the different people caring for them, and everyone is working on a shared plan for individual care.

At the same time, we agree that everyone should have better access to high quality care in specialist centres and units and that, no matter where people live, they get the same standards, experience, and outcomes for their care and treatment. We will do this by working together more closely, by developing a networked approach to services.

The proposals to change how we provide children's surgery and anaesthesia services is one area where we know improvements are needed. In the coming months, we want to talk with staff and the public about getting involved in shaping what happens next.



Let us know what you think!

If you would like the form in an alternative format, or would like help in completing the form, please let us know: **helloworkingtogether@nhs.net** or call: **0114 305 4487**

Postcode

Do you agree or disagree with our proposal to change the way we provide children's surgery and anaesthesia services?

Agree Disagree Don't know

Please let us know why:

(Comments)

At the moment, some people have better experiences, better and faster treatment and better access to services than others - and because we want to make sure everyone has access to the same high quality care, we have developed the following options with feedback from our doctors, nurses and members of the public who took part in our pre-consultation. Which of our proposed options do you prefer?

Option 1

Option 2

Option 3

Why do you think this is the best option?

(Comments)

Do you think there is another option we could consider?

Yes No Don't know

If you answered yes, please describe this below and say why you would prefer this option

(Comments)

What happens next?

Between 3 October 2016 and 20 January 2017, we are asking people living in South and Mid Yorkshire, Bassetlaw and North Derbyshire to let us know what they think about our proposals to change children's surgery and anaesthesia services.

The results of this consultation will be presented to the Commissioners Working Together (joint CCG) board who will make a decision on how children's surgery and anaesthesia services will be provided in our region.

When making a final decision, we will consider:

- All patient and public feedback
- The impact on access to services, including travel times
- The impact on quality and safety of the service

We expect a decision to be made in February 2017.

Equality monitoring form

As part of taking part in this consultation, please complete our equality monitoring form.

Why we need this information?

In completing this form, you will help us understand who we are reaching and how to better serve everyone in our community. You do have a right not to disclose the information; however, by doing so you may impact our ability to ensure equality of opportunity.

All details are held in accordance with the Data Protection Act 1998 with

the information you provide being anonymous and will not be stored with any identifying information about you.

The information that we need, as outlined in the 2010 Equality Act, includes information about age, disability, gender reassignment, marital status, maternity, race, religious belief, sex, and sexual orientation.

Please select the boxes which are relevant to you

Ethnicity

Please select what you consider your ethnic origin to be. Ethnicity is distinct from nationality.

Asian/Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background

Mixed/multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed/multiple ethnic background

Black/African/ Caribbean/ Black British

- Caribbean
- African
- Any other
- Black/African/Caribbean background

White

- English
- Northern Irish
- Scottish
- Welsh
- British
- Irish
- Gypsy/Irish traveller
- Any other White background

Other ethnic group

- Arab
- Any other ethnic group

Rather not say

- Rather not say

Age

- | | | |
|----------------------------------|----------------------------------|---|
| <input type="checkbox"/> 10 - 14 | <input type="checkbox"/> 25 - 34 | <input type="checkbox"/> 55 - 64 |
| <input type="checkbox"/> 15 - 19 | <input type="checkbox"/> 35 - 44 | <input type="checkbox"/> 65+ |
| <input type="checkbox"/> 20 - 24 | <input type="checkbox"/> 45 - 54 | <input type="checkbox"/> Rather not say |
-

Sex

- Male (M)
- Female (F)
- Rather not say

Sexual orientation

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Heterosexual | <input type="checkbox"/> Bisexual |
| <input type="checkbox"/> Gay man | <input type="checkbox"/> Other |
| <input type="checkbox"/> Lesbian | <input type="checkbox"/> Rather not say |
-

Gender re-assignment

Have you gone through any part of a process (including thoughts or actions) to change from the sex you were described as at birth to the gender you identify with, or do you intend to? (This could include changing your name, wearing different clothes taking hormones or having any gender reassignment surgery).

- Yes No Rather not say
-

Religion / belief

- | | | | |
|--------------------------------------|---------------------------------|---|---|
| <input type="checkbox"/> No religion | <input type="checkbox"/> Hindu | <input type="checkbox"/> Sikh | <input type="checkbox"/> Rather not say |
| <input type="checkbox"/> Buddhist | <input type="checkbox"/> Jewish | <input type="checkbox"/> Atheist | |
| <input type="checkbox"/> Christian | <input type="checkbox"/> Muslim | <input type="checkbox"/> Any other religion | |

Disability

The Disability Discrimination Act 1995 (DDA) defines a person as disabled if they have a physical or mental impairment which has a substantial and long term (i.e. has lasted or is expected to last at least 12 months) adverse effect on ones ability to carry out normal day-to-day activities.

Do you consider yourself to have a disability according to the above definition?

- Yes, limited a lot Yes, limited a little No Rather not say

If you selected yes, please indicate your disability:

- | | |
|--|---|
| <input type="checkbox"/> Vision (e.g. blindness or partial sight) | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Hearing (e.g. deafness or partial hearing) | <input type="checkbox"/> Stamina or breathing difficulty |
| <input type="checkbox"/> Mobility (e.g. difficulty walking short distances, climbing stairs, lifting and carrying) | <input type="checkbox"/> Social or behavioural issues (e.g. neuro diverse conditions such as Autism, Attention Deficit Disorder or Asperger's Syndrome) |
| <input type="checkbox"/> Learning, concentrating or remembering | <input type="checkbox"/> Other impairment |
| | <input type="checkbox"/> Prefer not to say |

Carer responsibility

Do you look after, or give any help or support to family members, friends, neighbours or others because of either:

- Long-term physical or mental ill-health / disability
- Problems related to old age

- Yes No Rather not say

If you selected yes, please indicate your caring responsibility (select all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Primary carer of a child/children (under 18) | <input type="checkbox"/> Primary carer of disabled adult (18 and over) |
| <input type="checkbox"/> Primary carer of disabled child/children | <input type="checkbox"/> Primary carer of older person (65+) |
| | <input type="checkbox"/> Secondary carer |
| | <input type="checkbox"/> Rather not say |

Freepost COMMISSIONERS WORKING TOGETHER



For more information and to give your views
please visit the website
www.smybndccgs.nhs.uk
email us at helloworkingtogether@nhs.net
or call 0114 305 4487