Briefing Paper for Birmingham and Sandwell Joint Health Overview and Scrutiny Committee

Clinical Services Model

Subject: Acute Care Model

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1 Purpose

1.1 To provide an update to committee members of the ongoing work transforming Clinical Services ahead of the opening of the Midland Metropolitan University Hospital in Spring 2024.

2 Overview

- 2.1 When Midland Metropolitan Hospital opens, our new hospital will bring together all critical and emergency care services that currently take place at City and Sandwell Hospitals.
- 2.2 The hospital design strengthens our ability to deliver the best standards of care alongside an opportunity to transform some clinical services to maximise the opportunity the new estate provides the Trust.
- 2.3 Our journey to Midland Met involves us transforming our services before we open our doors. Our acute care model has 12 key transformation schemes based on clinical pathway improvements to streamline patient care. Several changes will happen before we move into our new hospital, and these improvements will continue once we open.
- 2.4 The 12 major transformation programmes focus on redesigning our emergency care pathways so that patients are seen and diagnosed rapidly, by senior decision makers, in the most appropriate hospital setting.
- 2.5 We are also concentrating our efforts on delivering care for more patients away from the hospital setting, in their own homes or closer to home. Right sizing our community bed facilities and home-based care services will help us achieve this.
- 2.6 There is collaborative work underway between SWB, acute and community services, primary care, social care, mental health, ambulance and third sector partners. This collaborative approach will help us to secure the most patient-focused outcomes.

3 Recommendations

- 3.1 The committee are requested to:
 - Note the contents of Appendix 1 detailing work to date
 - Acknowledge ongoing work:
 - Continuous and extensive GP, public and patient engagement as detailed pathways develop across the transformational programmes

- Further development of EQIAs and QIAs as transformation work progresses
- Collaborative working with commissioners and key stakeholders
- Ongoing work with peer clinical reviewers during service refinements
- Delivery of the key transformational changes
- Monitoring and sharing of the benefit realisation

4 Appendices

Appendix 1: Midland Metropolitan University Hospitals Clinical Services overview