

Bath & North East Somerset Council

MEETING/ DECISION MAKER:	Health & Wellbeing Select Committee	
MEETING/ DECISION DATE:	30 January 2019	EXECUTIVE FORWARD PLAN REFERENCE:
TITLE:	Royal United Hospitals Bath NHS Foundation Trust update on the proposed relocation of the RNHRD's specialised pain services from the Mineral Water Hospital site to facilities on the RUH's Combe Park site.	
WARD:	All	
AN OPEN PUBLIC ITEM		
<p>List of attachments to this report:</p> <p>Appendix 1: Report on the outcomes of Patient and Public Engagement activities on the proposed relocation of the Royal National Hospital for Rheumatic Diseases Bath Centre for specialised pain services from the Mineral Water Hospital site to facilities on the RUH's Combe Park site.</p> <p>Appendix 2: Equality Impact Assessment</p> <p>Appendix 3: Summary Impact Assessment</p>		

1 THE ISSUE

This paper has been prepared to ensure that the B&NES Health and Wellbeing Select Committee are kept up-to-date with the proposed relocation of the Royal National Hospital for Rheumatic Diseases (RNHRD) specialised pain services from the Mineral Water Hospital site to facilities on the RUH's Combe Park site. Indicative timeframe to relocate these services is autumn 2019.

The attached report (see appendix 1) provides the Committee with the outcomes of Patient and Public Engagement activities completed relating to the proposal to relocate the RNHRD 's specialised pain services which include:

- Bath Centre for Pain Services
- Complex Regional Pain Syndrome Service
- Complex Cancer Late Effects Service

An Impact Assessment and Equality Impact Assessment are also enclosed (see appendices 2 and 3).

Committee members have received previous reports and briefings in relation to a phased programme of service relocations following the acquisition of the Royal National Hospital for Rheumatic Diseases, which outlined the rationale for change and provided an update on activities at their July 2015, November 2015, January 2016, July 2016, March 2017 and September 2017 committee meetings. In addition, the RUH Commercial Director invited panel members to suggest any questions they would like asked during patient and public engagement activities in a letter dated 25 October 2018 and circulated via the Committee's Policy Development and Scrutiny Project Officer. Bath and North East Somerset Health and Wellbeing Select Committee members did not indicate that they would like to receive reassurance around any specific aspect of the proposed relocation.

Relocating the RNHRD's specialised pain services represents the final phase in a planned programme of service relocation, following the acquisition of the RNHRD by the RUH in February 2015.

2 RECOMMENDATION

The committee are asked to:

- Note the outcome of the impact assessments and patient and public engagement activities which provided opportunities for patients, staff, stakeholders and the public to provide feedback on the proposed move, and which confirmed that the effects of this change are considered minimal and that there are a number of positive aspects to the change, for current and future patients.
- Endorse the proposal to relocate the RNHRD's Bath Centre for Pain Services, Complex Regional Pain Syndrome and Complex Cancer Late Effects Rehabilitation services from the Mineral Water Hospital site to facilities on the RUH's Combe Park site.

3 RESOURCE IMPLICATIONS (FINANCE, PROPERTY, PEOPLE)

There will be no change in the level of service provision for patients of the RNHRD Bath Centre for Pain Services or Complex Regional Pain Syndrome or Complex Cancer Late Effects Services. The same range of services will be provided and patients will continue to be seen and treated by the same team to the same high standards, only the location would change.

There are no impacts on patient choice as a result of the plan to relocate the services to facilities on the RUH's Combe Park site.

In order to ensure the continued sustainability of the services currently provided at the Mineral Water Hospital site the ability to fully integrate and align services on a single site was a core component of the original business case for the acquisition of the RNHRD by the Royal United Hospitals Bath (RUH). It will improve efficiency and effectiveness, improve patient experience, ensuring continuity of care, and quality of service delivery as well as increasing value for money from the public purse. Clinicians continue to be integral to planning the future of their services to ensure the delivery of high quality effective services.

4 STATUTORY CONSIDERATIONS AND BASIS FOR PROPOSAL

Patient and Public Engagement (PPE) activities were conducted in line with the Government's Consultation Principles for Public Bodies (October 2013), the Equality Act (2010) and Section 242, Subsection (1B)(b) of the Health Act 2006 (as amended).

5 THE REPORT

A phased approach to support Patient and Public Engagement (PPE) relating to enabling the continued integration of the RUH and RNHRD hospitals has been undertaken over the last three and a half years and is considered most appropriate by the Local Health Economy Forum (LHE), providing general context of the full relocation at the outset but planning and completing each programme of PPE service by service. Relocating the RNHRD's specialised pain services represents the final phase of this programme of engagement.

The Trust has already undertaken public and patient engagement and received endorsement from the Bath and North East Somerset Health and Wellbeing Select Committee on the proposed relocation of the following services, all of which will relocate to the RUH site in autumn 2019.

- Rheumatology Services and Clinical Measurement
- Bath Centre for Fatigue Services
- Therapies Services
- Paediatric and Adolescent Rheumatology Services

The RUH has worked with Clinical Commissioning Group (CCG) and NHS England Engagement leads, and patients to ensure PPE is carried out in line with the Government's Consultation Principles for Public Bodies (October 2013). This phase of PPE activities relating to plans to relocate the RNHRD's specialised pain services is now complete.

There will be no change in the level or range of service provision for patients attending the RUH, patients will have access to the same services and support, provided by the same team.

There is no impact on patient choice, as relocating these specialised pain service does not reduce the number of appointments or clinics available. Satellite clinics will continue in their current location.

A detailed outline of the RNHRD's Bath Centre for Pain Services and Complex Regional Pain Syndrome and Complex Cancer Late Effects services, engagement methods and feedback captured throughout the engagement period can be found in Appendix 1.

Benefits for patients and staff

Relocating provides continuity for the RNHRD's high quality services and patients will continue to receive the same service, from the same team, in an enhanced location.

Patients and staff will have easier access to wider support services on the RUH site and staff will benefit from easier access to training and development opportunities and more opportunities for shared learning.

These are national services, which are accessed by patients across England and Scotland. The RUH's Combe Park site is located less than two miles from the Mineral Water Hospital site, any difference in cost or time associated with travelling should be minimal. The RUH has good public transport links and is accessible via the Odd Down Park and Ride. For some patients the

proposed new location will be easier to access due to the availability of onsite parking. The RUH provides over 600 visitor and patient spaces across the site, and around 70 blue badge spaces. Other than two Blue Badge parking spaces, there is no patient or visitor parking available at the Mineral Water Hospital.

Relocating from the City Centre to Combe Park may bring benefits for some patients – providing a more realistic environment for rehabilitation which more closely reflects their experience at home when accessing local shops and services – e.g. route planning, using public transport, etc.

The proposed new location for the Bath Centre for Pain Services is Bernard Ireland House, an existing building on the RUH's Combe Park site which will undergo significant redesign and refurbishment. This approach was developed in conjunction with staff and patients to ensure an appropriate environment, located on site but separate from the acute hospital building, in keeping with the ethos of the service to help patients live well with ongoing pain. The building will provide flexible residential accommodation to support different patient groups (e.g. single sex, parent and child etc). The building will include treatment areas such as therapy and group rooms, waiting areas and shared day areas as well as a therapeutic courtyard area. Location within a specially refurbished building can provide an enhanced environment with optimal spaces for treatment and accommodation including;

- Reduction of noise due to setting in Combe Park grounds, rather than city centre location
- Art, nature and greenery

The refurbished building will also provide separate accommodation for patients attending the Ankylosing Spondylitis or Complex Regional Pain Syndrome residential rehabilitation programmes.

The proposed new location for the Complex Regional Pain Syndrome and Complex Cancer Late Effects Rehabilitation services is the purpose built RNHRD and Therapies Centre. This will provide better facilities, including enhanced group rooms and improved waiting room facilities. There will be improved physical access, including flat access to the new Centre, and a purpose designed building which can better accommodate those with restricted mobility. Residential accommodation will be provided onsite at the RUH at Bernard Ireland House and appropriate transport will be provided to transfer patients the short distance between their onsite accommodation and the RNHRD and Therapies Centre.

The Centre will provide therapeutic surroundings to support patient recovery, treatment, wellbeing and the management of long-term conditions. The new Centre will continue to promote the RNHRD's trusted brand combining clinical excellence and therapeutic space, in an environment designed in conjunction with patients and clinicians, with the aim of reducing stress and creating a beneficial healing environment for patients and their families.

Disbenefits for RNHRD specialised pain services patients and staff

The RNHRD is more easily accessible from Bath Spa bus or rail station for those who access services in this way or for those whose condition prevents them from driving the distance.

For some patients, easy access to a city centre location is a welcome aspect of their rehabilitation programme.

Scale and scope

At present The Royal National Hospital for Rheumatic Diseases offers a range of services for people with chronic pain - where pain is persistent, disabling and not adequately helped by other treatments. These services are provided from the Mineral Water Hospital site in the centre of Bath.

Bath Centre for Pain Services (BCPS)

BCPS is one of the few providers of residential, group-based pain management programmes for adults, young people and children in the UK. The service aims to achieve significant improvements in patient functioning and self-management, particularly for people with long illness and who have tried many different treatments which have had little or no impact. Where patients attend residential programmes, accommodation is currently provided within the Mineral Water Hospital building.

The majority of activity is delivered in the Mineral Water Hospital building, located in Bath city centre, although residential programmes for adults or adolescents (11-18), outreach assessments and consultancy are available in exceptional cases for those patients who are unable to attend an assessment or for teams treating complex pain patients who would welcome an opinion from the chronic pain team.

As a specialist, national service, patients are referred to these services from CCGs across the country.

The table below outlines the number of patients attending the Bath Centre for Pain Services during 2017/18:

	BCPS
New attendance	534

Complex Regional Pain Syndrome and Complex Cancer Late Effects Rehabilitation Services

Referrals are accepted locally, nationally and internationally, and are recognised as national specialist commissioned services by NHS England.

These services are tailored to those with a diagnosis or symptoms where physical rehabilitation may still be helpful even for those with long-term symptoms. The needs of patients are assessed on an individual basis and patients participate in rehabilitation as part of a residential programme which they continue to adhere to once they leave.

Patients are initially referred as an outpatient before a decision is made as to whether an inpatient programme is appropriate. If appropriate, patients attend a two week residential programme where they receive individual rehabilitation programmes from a multi-disciplinary team with an emphasis on optimising function and promoting self-management, allowing patients to return to activities that are important to them, whether their pain is reduced or not.

Patients are currently provided with residential accommodation within the Mineral Water Hospital Building.

The table below outlines the number of new referrals attending for assessment at the Complex Regional Pain Syndrome and Complex Cancer Late Effects Rehabilitation services on the Mineral Water Hospital site for 2017/18:

	Complex Regional Pain Syndrome	Complex Cancer Late Effects Rehabilitation
New attendance	179	12

As a specialist, national service, patients are referred to these services from CCGs across the county, patient numbers are too low to report on based on individual CCGs.

Impact of proposals to relocate the RNHRD’s Bath Centre for Pain Services, Complex Regional Pain Syndrome and Complex Cancer Late Effects Rehabilitation Services

The Trust is proposing to relocate the RNHRD’s specialised pain services from the Mineral Water Hospital site, to the RUH’s Combe Park site.

Clinicians and staff who work in these services have been involved in the design and planning process to ensure the new proposed new home for these services will continue to support the delivery of high quality effective services.

Feedback

Focussed clinical and patient and public engagement on the planned relocation ran from 25 October to 20 December 2018, a period of eight weeks, asking people to share their thoughts on the plans to relocate, including any benefits, concerns or anything additional people felt we needed to consider ahead of moving. An engagement questionnaire was developed for stakeholders of the Bath Centre for Pain Services, and a separate questionnaire for stakeholders of the Complex Regional Pain Syndrome and Complex Cancer Late Effects Rehabilitation services.

Information on the proposal including opportunities to provide feedback was made available through a range of channels including the RNHRD and RUH websites, social media, display boards, ‘have your say’ feedback boxes at the RNHRD and display screens at both hospital sites. Information and opportunities to provide feedback was circulated by the RUH and cascaded via relevant individuals and stakeholder organisations. The BCPS and Complex Regional Pain Syndrome/Complex Cancer Late Effects Rehabilitation service leads and Local Health Economy Communications Working Group provided guidance on additional stakeholder groups and individuals to seek feedback from as part of the process. (see appendix 1).

There was very little public or patient feedback provided during the formal engagement period. This may indicate that after a three year phased programme of engagement on plans to relocate RNHRD services (at an overall and service specific level) many stakeholders may already have had any concerns addressed and feel reassured that subject to commissioner intentions, the same high quality RNHRD services will continue and only the location will change. In addition, some stakeholders with experience of/an interest in pain services provided feedback at an earlier stakeholder event held in October 2016.

A total of nine people completed the 2018 engagement questionnaire – three Complex Regional Pain Syndrome/Complex Cancer Late Effects Rehabilitation stakeholders and 6 Bath Centre for Pain Services stakeholders. As there was such a low level of responses, only verbatim responses have been included in this report to give an indication of the views expressed.

There were positive opinions on the proposed relocation:

“This can only be good - the premises at the moment are very old would be great to have new up to date facilities” (BCPS stakeholder)

"More modern building so possibly better shower facilities, hydro pool not having so many issues etc."(CRPS/CCLER stakeholder)

"Don't know until I get there, hopefully everything will be new and easier." (BCPS stakeholder)

"I think that it's a great idea and could benefit the whole hospital and also update the service." (BCPS stakeholder)

"These people know what they are doing and do it well so leave the people who run it to plan and steer it's future development." (BCPS stakeholder)

Mixed with some sadness at leaving the Mineral Water Hospital site:

"Sad to leave town and the loss of the historic building for NHS use is also sad." (BCPS stakeholder)

Respondents could identify a range of benefits as a result of relocating services including newer facilities, better integration with other services, better access and easier parking.

"Purpose built accommodation. Better physio and hydro - when I was an inpatient there were problems with the lift that made me worry would be good to have modern up to date place." (CRPS/CCLER stakeholder)

"better parking. Able to access clinical services on one site. Older building was difficult to get to." (BCPS stakeholder)

"Updated building with working facilities like showers etc." (BCPS stakeholder)

"I can't see any disadvantages - I would be there to use the up to date facilities and hopefully this can only be good." (CRPS/CCLER stakeholder)

Potential or perceived disadvantages raised by respondents and the actions the RUH has taken or will take to address these concerns include:

"Parking at RUH is not good, even with new car park. Will have to drive to the park and ride and then get the bus to the RUH, which is only every 30 mins so will make my appts very long winded." (BCPS stakeholder)

The Trust has taken steps to improve parking facilities on the RUH site and has taken into account the increase in people visiting the Combe Park site when the new Centre is opened. The RUH provides over 600 visitor and patient spaces across the site, and around 70 blue badge spaces.

"keep the service offered to patients as similar as before as the staff all made us feel welcome and the programme runs smoothly." (BCPS stakeholder)

The same services will be provided, only the location will change.

"Removing it from the city centre environment removes the option for "real world" rehabilitation and turns it into acute hospital based rehabilitation which may not carry over into patients real lives when they return home." (BCPS stakeholder)

These specialised pain services will not be delivered from an acute hospital setting. The Bath Centre for Pain Services proposed location is Bernard Ireland House, on the RUH Combe Park site but separate to the acute hospital building.

The Complex Regional Pain Syndrome and Complex Cancer Late Effects Rehabilitation services proposed location is the RNHRD and Therapies Centre – a dedicated day patient centre.

The vision for the new RNRHD and Therapies Centre and Bernard Ireland House is to create a supportive environment with dedicated facilities for providing high quality care. The buildings are being designed in conjunction with clinicians and patients. The RNHD and Therapies Centre will operate exclusively as a day patient centre, with a separate entrance to the acute hospital. The interior design will sensitively reflect its heritage and the specific needs of its patient groups. The environment is an integral part of the design to reduce stress and ensure a healing environment, for patients and their families, acknowledging the importance of addressing psychosocial needs and will include:

- Use of natural light – to give bright, spacious interiors not dependent on harsh artificial lighting.
- Reduction of noise – (including ventilation and plumbing) and use of sound absorbent surfaces.
- Art, nature and greenery – appropriately located for a positive impact on patient recovery.
- Garden areas – creating an ‘oasis’ and offering a calming view / place to sit, reducing stress and providing a sense of normality.
- Improved staff links with research centres.

Engagement Events

We recognise that for many of these patients, due to the nature of their condition, travelling to and attending a feedback session can be a significant challenge. We took advice from service leads on the best way to engage with their patient group which centred on making patients aware the proposal and highlighting opportunities to provide feedback during their programme.

An outline of PPE activities and feedback can be found in the BCFS PPE Briefing Report.

Next steps:

Subject to the Committee’s endorsement of the plan to relocate the RNHRD’s Bath Centre for Pain Services and Complex Regional Pain Syndrome and Complex Cancer Late Effects Rehabilitation services to the RUH’s Combe Park site, services will relocate in autumn 2019.

6 RATIONALE

This paper has been prepared to ensure that the committee are kept up-to-date with the outcomes of impact and equality impact assessments and Public and Patient Engagement activities completed relating to the proposed relocation of the services from their current location. The rationale for this relocation is both to enable delivery of the promised benefits of acquisition of the RNRHD and provide opportunity to realise benefits of co-location with RUH services.

7 OTHER OPTIONS CONSIDERED

As part of the original business case for acquisition of the RNHRD, options were considered in relation to services continuing on the Mineral Water Hospital site or relocating services. The ability to integrate and align services on a single site, was a core component of the original business case for acquisition and sustainability of services.

8 CONSULTATION

The service related public and patient engagement activity outlined in this report to support proposed service relocations was agreed by the RUH, the Local Health Economy (LHE) Forum, which comprised Executives from B&NES, Wiltshire and Somerset Clinical Commissioning Groups (CCGs), NHS England and RUH Governor and patient representation, to agree the process for communication and engagement activities to support the relocation of clinical services from the Mineral Water Hospital Site.

To support this activity, the RUH established an LHE Communications Working Group (which is comprised of RUH and NHS England and CCG communications and engagement leads and a patient representative) to ensure all service related PPE is conducted in line with the Government's Consultation Principles for Public Bodies (Oct 2013).

9 RISK MANAGEMENT

An integration programme governance structure is in place to ensure that any programme issues are identified and, if required, added to the RUH risk register.

Contact person	<i>Clare O'Farrell, Deputy Chief Operating Officer, RUH</i> <i>Tracey Cox, Chief Officer, NHS Bath and North East Somerset Clinical Commissioning Group</i>
Background papers	<i>Update to Health and Wellbeing Select Committee 29th July 2015</i> <i>Update to Health and Wellbeing Select Committee 25th November 2015</i> <i>Update to Health and Wellbeing Select Committee 27th January 2016</i> <i>Update to Health and Wellbeing Select Committee 20th July 2016</i> <i>Update to Health and Wellbeing Select Committee 22nd March 2017</i> <i>Update to Health and Wellbeing Select Committee 27 September 2017</i>
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