

**PATH TO EXCELLENCE PHASE TWO - JOINT HEALTH SCRUTINY COMMITTEE
UPDATE****REPORT OF THE HEAD OF MEMBER SUPPORT AND COMMUNITY
PARTNERSHIPS****1. PURPOSE OF REPORT**

- 1.1 The report provides an overview and update on the Path to Excellence Phase Two and the role and work of the Joint Health Scrutiny Committee in this programme of service development.

2. BACKGROUND INFORMATION

- 2.1 The Path to Excellence is a phased programme of healthcare service development and change across South Tyneside and Sunderland NHS Foundation Trust. Phase One of the programme took place during 2017/18 and looked at stroke services, urgent and emergency paediatrics and maternity and women's healthcare.
- 2.2 The Path to Excellence Phase two is set to carry on the programme of healthcare transformation in Sunderland and South Tyneside. The initial work including a series of documents and information were published during 2018-2019. However, the programme was officially paused in March 2020 to allow the NHS to concentrate resources in providing an operational response to the Covid-19 pandemic.

3. PATH TO EXCELLENCE PHASE TWO – UPDATE AND CURRENT POSITION

- 3.1 Phase two of the programme was restarted in February 2021 with the publication of an updated Draft Case for Change. Phase two of the programme involves the following hospital services:
- Emergency care and acute medicine;
 - Emergency surgery and planned operations;
 - Planned care and outpatients;
 - Clinical support services.
- 3.2 However the Covid-19 pandemic has increased the pressures on staff and services across the NHS. In light of this ongoing challenge the Path to Excellence programme has recognised the need to be realistic and achievable with the timetable for service change. Therefore the programme is focusing on the 'working ideas' for surgery at this time, while providing support and managing the ongoing pandemic.
- 3.3 Surgical services cover two main areas as follows:
- Trauma & Orthopaedics – dealing with bones, joints and muscles;

- General Surgery – covering the majority of operations including emergency procedures.

3.4 The 'working ideas' generally cover the majority of planned operations taking place on one hospital site and are outlined as follows:

- Emergency Operations taking place on the Sunderland Royal Hospital site;
- South Tyneside District Hospital focusing solely on elective 'planned' care;
- Some planned care continuing on the Sunderland Royal Hospital site;
- Outpatient care and diagnostic tests and scans would continue on both hospital sites.

3.5 The aim of the 'working ideas' will be to reduce cancellations and delays to planned operations, prevent and control infection, improve the patient experience, better utilise theatre resources and attract and retain staff.

3.6 Currently the 'working ideas' are being refined through assessment against an evaluation criteria. The criteria have been developed through staff, patient and stakeholder involvement that has taken place over the last four years. The purpose of this evaluation activity is to help identify issues and to triangulate the 'working ideas' by using a variety of key considerations that are important to staff, patients and the public.

3.7 Following this fine-tuning of the 'working ideas' the intention will be for the NHS Foundation Trust to launch a public consultation.

3.8 The other services designated for Phase Two of the programme will, as previously highlighted, require further work once the pressures from the pandemic have eased considerably. In terms of planned care and outpatients, a number of the programmes ambitions are becoming reality as a result of the Covid-19 pandemic and much of the work in this area will continue as part of normal planning/business.

3.9 The South Tyneside and Sunderland NHS Foundation Trust also still retain ambitions for a new Integrated Diagnostic and Imaging Centre.

4. **CONCLUSION**

4.1 The Joint Health Scrutiny Committee with South Tyneside and Durham local authorities remains the statutory scrutiny committee for the Path to Excellence and Members from the relevant Councils will continue to be actively involved in the monitoring of Phase Two of the process.

5.2 Phase Two of the Path to Excellence has seen a greater period of staff engagement providing a more inclusive approach to the clinical design

process and 'working ideas' which can only benefit the process as a whole. The Joint Health Scrutiny Committee, CCG's and NHS partners continue to work together and engage around the Path to Excellence and its process.

5. RECOMMENDATION

- 5.1 The Committee is requested to note the content of this update and agree that further updates will be submitted to the committee as and when appropriate.

6. BACKGROUND PAPERS

Path to Excellence Phase Two – www.pathtoexcellence.org.uk

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