

## LEEDS TEACHING HOSPITALS NHS TRUST

**CLINICAL SERVICES RECONFIGURATION****UPDATE TO SCRUTINY BOARD MEETING – TUESDAY 20<sup>TH</sup> JANUARY 2009**

1. This paper is complementary to the accompanying paper from the PCT on the wider engagement issues relating to Clinical Services Reconfiguration.
2. Work is proceeding well on the programme and the Trust is still aiming for the centralisation of childrens inpatient and critical care services at LGI to occur in June 2010.
3. All the enabling schemes have been agreed and 1:50 drawings are nearing completion. The negotiations on capital costs with the Trust's P21 partner will continue up until 13<sup>th</sup> March 2009 and will allow the business case to be agreed by the end of March.

Some enabling schemes have already started and the whole programme will complete by the end of April 2011.

4. There is a significant amount of work ongoing around high level service models and how new relationships, once centralisation has taken place, will work. This work will continue up to centralisation taking place.
5. Staff and user/carer engagement has continued - as described in the previous briefing to the Health Scrutiny board in December 2008. The plan is to continue with this engagement throughout the whole programme and beyond.
6. The key benefits identified so far include:
  - Better adjacencies for different elements of the same specialties.
  - Significant reduction in infection in cystic fibrosis patients.
  - Reduction in infection through more single rooms for older people.
  - Childrens dialysis adjacent to childrens wards
  - Better environment for children currently inpatients at SJUH (better facilities currently already exist for LGI patients).
  - Better facilities for parents who wish to stay overnight by their child's bedside.
  - Privacy and dignity benefits for older people (single sex wards, more single rooms, doors on bed bays).
  - Children not having to stay in hospital inappropriately overnight.
  - Adults consistently being seen by a senior consultant in A&E with quicker diagnosis and treatment.
7. A key issue has been parking and transport between the two sides of the city. The Trust is planning to work with one of the local bus companies to establish a regular route cross city between SJUH and LGI. This will allow a park and ride facility to be established at SJUH. The current congestion of the LGI site will be reduced as a significant number of staff will move to use the park and ride facility at SJUH. There will then be sufficient car parking spaces at LGI for parents.

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