

Briefing

June 2019

Better Care Together – the partnership of six NHS organisations working alongside the three principle local authorities in Leicester, Leicestershire and Rutland (LLR) -- are working to improve the way local people are cared for.

This briefing provides an update on a significant programme of work which includes a proposal to enhance services in the acute hospitals in Leicester.

We have also recently launched a [video and brochure](#), available on NHS websites and YouTube which tells people about the plans.

Acute and maternity services at Leicester's Hospitals

Proposals are awaiting approval to reconfigure acute and maternity services at Leicester's Hospitals, to achieve the best patient outcomes, modernise facilities and make services more efficient.

It is proposed to move all acute care to the Leicester Royal Infirmary and Glenfield Hospital, whilst enhancing the care provided to critically ill patients. We will retain some non-acute health services on the site of Leicester General Hospital.

Our plans will see an overall increase of 54 beds and a doubling of intensive care capacity for the most unwell patients. Provision of care will be enhanced in the place that people call home or in the community closer to where they live, so that in the future there will be less reliance on beds in an acute hospital.

Under the current configuration, patients attending hospital for an outpatient appointment experience delays and cancellations, as emergency cases take priority for beds. Maternity services are spread across units at Leicester Royal Infirmary and Leicester General Hospital and it is challenging to maintain adequate staffing over these sites. Meanwhile, the Midwifery Led Birthing Unit in Melton Mowbray is isolated, inaccessible for most women in LLR and is seeing a reduced number of births each year. It is not close to medical support if someone experiences complications whilst giving birth.

The following changes are proposed to the three sites:

Glenfield Hospital

- A 'super Intensive Care Unit' will support the growth in demand from services.
- A new surgical hub will incorporate elective orthopaedics, hepatobiliary, renal (medicine) and urology services (currently at the Leicester General Hospital).
- A new £138 million Treatment Centre will allow patients receiving outpatient care to have their treatment in one day and in one place. This will create the necessary separation of planned from emergency care and free up capacity at Leicester Royal Infirmary.

- The renal and haemodialysis services will move to Glenfield Hospital.

Leicester Royal Infirmary

- A new dedicated £88 million Maternity Hospital will locate specialist obstetric led births, a co-located midwife led unit and neonatal services all in the same building. This means women could choose a less 'medical' delivery, but close to the staff and equipment that can support them if circumstances make this necessary.
- A £35 million dedicated Children's Hospital will bring all children's services into one place in an environment that is suitable for children.
- One of two 'super Intensive Care Units' are planned to double the intensive care capacity.
- The Brain Injury and Neurological Rehabilitation Unit will relocate to Leicester Royal Infirmary from Leicester General Hospital, within adult medical services.

Leicester General Hospital

A community campus will be created at Leicester General Hospital to serve people living in the East side of the city and county, including a primary care hub providing extended hours GP services and diagnostic services. A range of other services would be provided on the site including: the Leicester Diabetes Centre of Excellence, a dedicated GP Access Imaging Hub, stroke rehabilitation, administration and education, services which do not need to be on the acute sites and a midwifery-led unit (dependant on the outcome of public consultation).

The spare land this change would create will be freed up and sold for affordable housing which we would hope key workers would be attracted to. The money from the sale would be reinvested into the hospitals.

Next steps

As with any significant change to services, it is essential that we consult local people about the plans. Under NHS rules, we can only do this when the capital funding, which is in excess of £400 million, to support the work has been approved by Government. In the meantime we are continually having conversations with all our communities to understand what matters most and how changes may impact them.

The video can be watched by visiting <http://www.bettercareleicester.nhs.uk/the-bct-plan/acute-and-maternity-reconfiguration/> or visiting Better Care Together on YouTube - <https://www.youtube.com/channel/UCcxnYSIBP-B5qBnYwtMNvdA>

For more information please visit www.bettercareleicester.nhs.uk