

**NORTH LANARKSHIRE COUNCIL
REPORT**

TO: Social Work Committee	Subject: THE FUTURE OF GLASGOW'S HOSPITAL SERVICES: FIRST PHASE OF CONSULTATION
FROM: Director of Social Work	
DATE OF COMMITTEE: 25th January 2001	
REPORT AUTHOR: Karen Malone	
REF: KM	

1 CONTENT AND PURPOSE OF REPORT

- 1.1 The purpose of this report is to advise Committee of the response which has been submitted by North Lanarkshire Council to Greater Glasgow Health Board in respect of the consultation paper "The Future of Glasgow's Hospital Services: First Phase of Consultation"
- 1.2 The main focus of the response are the proposals for the future of Stobhill Hospital as these directly affect the population within the North Lanarkshire area served by this hospital

2 BACKGROUND

- 2.1 The area of North Lanarkshire covered by Greater Glasgow Health Board (GGHB) accounts for 5% (16,400 people) of North Lanarkshire's total population and includes the communities of Chryston, Stepps, Muirhead, Gartcosh, Moodiesburn and Mollinsburn.
- 2.2 In respect of Health services these communities are served by Greater Glasgow Health Board. Acute hospital services are provided by North Glasgow Hospital Trust.
- 2.3 Historically some other residents of North Lanarkshire, particularly in Cumbernauld, Kilsyth and surrounding communities, choose to access acute hospital services within the GGHB area or Forth Valley NHS Trust. This is of particular relevance when accessing specialist services (e.g. burns and plastics) or maternity services. General Practitioners in these peripheral areas of North Lanarkshire may also choose to refer patients to other health board areas outwith Lanarkshire for provision of acute hospital care.
- 2.4 In April 2000 GGHB embarked on a formal consultation about how best to reshape Glasgow's hospital services. The proposals for modernising acute hospital care within GGHB have been the subject of public consultation. Despite the fact that GGHB held around 30 public meetings none of these took place within the boundaries of North Lanarkshire.

3 PROPOSALS

- 3.1 The stated aims of the proposals are:-
- (a) to provide modern facilities for a better patient experience
 - (b) to create larger specialist teams of doctors in order to assure more continuous availability of specialists
 - (c) where possible to maintain local access for the local population
 - (d) to create a pattern of hospital services that makes sense across Glasgow as a whole.
- 3.2 The proposals recognise that, largely as a result of technological advances, most patients (over 85%) do not stay overnight in hospital, but receive diagnosis and treatment as day cases or out-patients. This is known as "Ambulatory Care". The proposals aim to keep local access to these services and to do so in modern, patient-friendly facilities. Two new "Ambulatory Care Centres" are proposed, to be located at Stobhill Hospital and the Victoria Infirmary.
- 3.3 For in-patient services, the proposals aim to balance accessibility with the provision of facilities on a scale which allows for the creation of larger clinical teams. This will improve the range of specialities available within the teams and allow for conformity with working time regulations. These proposals will result in the concentration of in-patient services at fewer sites, three in total. The only hospital providing Accident & Emergency and in-patient services in the north of the city would be Glasgow Royal Infirmary

4 RESPONSE TO CONSULTATION PAPER

- 4.1 A copy of the full response which was submitted by the Director of Social Work can be found in Appendix 1. Responses to this second phase of consultation were required to be submitted timeously for reporting to a meeting of Greater Glasgow Health Board on 19th December 2000
- 4.2 It is noted in the response that the planned closure of Stobhill Hospital Accident & Emergency Department and in-patient facilities has implications for the future delivery of healthcare services to the population of the North Lanarkshire area served by this hospital. North Lanarkshire Council Social Work Department has particular concerns in relation to the future access to appropriate hospital services for this group of North Lanarkshire residents. The Department has requested to be involved in the next phase of consultation.
- 4.3 The Department have also requested that GGHB organise a public meeting to enable the views of these North Lanarkshire residents to be heard and for them to be kept fully informed on future developments.

5 RECOMMENDATIONS

- 5.1 The Social Work Committee is asked to homologate the contents of this response as the Council's position.



Jim Dickie
Director of Social Work
19th December 2000

For further information on this report please contact , Head of Development (K. Somers)
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**NORTH
LANARKSHIRE
COUNCIL**

Our Ref: MW/CC
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Director of Social Work
Jim Dickie

Mr John C Hamilton
Head of Board Administration
Greater Glasgow Health Board
Dalian House
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350 St Vincent Street
Glasgow G3 8YZ

Dear Mr Hamilton,

Acute Hospital Services Strategy for Glasgow: Phase 2 - Public Consultation

I apologise for the delay in forwarding to you a response from North Lanarkshire Council in relation to the above.

I would ask that you note that the attached response is still to be approved by Committee in January 2001 with the result that it may be subject to amendment.

I would welcome the opportunity to be involved in any future consultation on the Acute Hospital Services Strategy with particular regard to any proposals in respect of the services provided by Stobhill Hospital and Glasgow Royal Infirmary.

Yours sincerely,

Jim Dickie
Director of Social Work



NORTH LANARKSHIRE COUNCIL: RESPONSE TO THE FUTURE OF GLASGOW'S HOSPITAL SERVICES - FIRST PHASE OF CONSULTATION

The following paper has been prepared by North Lanarkshire Council in response to the report "The Future of Glasgow's Hospital Services: First Phase of Consultation". While Greater Glasgow Health Board (GGHB) arranged a series of public consultation meetings prior to preparing this report, it should be noted that none of these took place within the boundaries of North Lanarkshire Council.

The main focus of this response is the proposals for the future of Stobhill Hospital as these directly affect the population within the North Lanarkshire area served by this hospital.

1. BACKGROUND

The report proposes that all in-patient services currently carried out at Stobhill Hospital are to be relocated to Glasgow Royal Infirmary (GRI) with a small proportion being transferred to Gartnavel.

It is important to recognise that within this report the sector referred to as North and East Glasgow includes an area within North Lanarkshire Council with a population of 16,400 who live in or near the following communities or villages - Auchinloch, Stepps, Cardowan, Chryston, Muirhead, Mount Ellen, Gartcosh, Moodiesburn, Mollinsburn and part of Millerston. The main issue in provision of acute health care services for this population, who are included in the GGHB area, is access.

2. CLOSURE OF STOBHILL HOSPITAL ACCIDENT & EMERGENCY DEPARTMENT

It has been proposed that this facility would be changed to a Minor Injuries Unit possibly staffed by Nurse Practitioners but it is not clear whether this would be a twenty four hour facility and what, if any, arrangements would be for medical staff cover on a 24 hour basis.

It is proposed that all people with major injuries would attend Glasgow Royal Infirmary, but it is not clear how the public will self-assess whether their injury is major or minor. This could result in individuals attending the wrong hospital and cause crucial time wasting in an emergency.

The report states that 20% of the total A&E attendances at Glasgow Hospitals were at Stobhill, (data extrapolated from 1998 one week survey). If the majority of these patients were to attend GRI as proposed, albeit with additional resources planned, it is not clear that the result would not be longer waiting times and a poorer quality of service.

3. GEOGRAPHICAL DISTANCE BETWEEN STOBHILL HOSPITAL AND GRI

The report gives details of ambulance travel time for many of the individual areas served by the South Glasgow hospitals comparing journey times to the Victoria Infirmary v Southern General Hospital. There appears to be little such comparative data for the North to provide information in respect of any time deficit that may occur if Stobhill A&E were to close and

consensus within Glasgow NHS that there should be two in-patient centres within North Glasgow (page 72).

While we acknowledge the advantages in organisational terms of centralising specialist in-patient services, the same cannot be said of general medicine and surgery. In fact in order to give support to the new Ambulatory Care Centre it would be more advantageous to keep general medical and surgical in-patient beds on site.

If the transfer of general medical and surgical beds to GRI were to go ahead, it is possible that the relocation will not necessarily be to a modern facility. This raises doubts about the wisdom of closing beds in one old building, only to move them to another. Keeping general medical and surgical in-patient beds at Stobhill Hospital would undoubtedly make access easier for the local population.

CONCLUSION

The planned closure of Stobhill Hospital A&E Department and in-patient facilities has implications for the future delivery of healthcare services to the population of the North Lanarkshire area served by this hospital. North Lanarkshire Council Social Work Department has particular concerns in relation to future access to appropriate hospital services for this group of North Lanarkshire residents.

We understand that a further phase of consultation is planned in respect of these proposals in which this Department would wish to be involved.

J Dickie
Director of Social Work

14/12/2000