

Nuffield Trust Review of Acute Services at Daisy Hill and Craigavon - Recommendations

The Nuffield Trust was invited to undertake a review of acute services at the Daisy Hill site, with the intention of making these more secure and sustainable. As part of this, the Nuffield Trust also reviewed services at the Craigavon site over two days in February 2023.

We found that both sites are currently experiencing problems with overcrowding in the Emergency Departments (EDs), poor flow through the hospitals and in the recruitment and retention of staff. It should be noted that the increase in medical capacity at the DH site did not improve Emergency Department overcrowding or flow through the hospital. This demonstrates that the focus should be understanding and improving systems and processes across *both* organisations. A brief overview of our recommendations is as follows:

1. Public commitment to the DH Site

The Southern Trust needs to urgently demonstrate a commitment to the Daisy Hill (DH) site and to develop a coherent longer-term plan for the two sites. It is appreciated that matters are somewhat stuck due to the current political situation, but issues around services and staffing cannot be addressed while major uncertainty remains about the future of the DH site. The Pathfinder project was previously very successful in helping with solutions for the DH site and we would recommend a second version of this.

2. Make Southern Trust (especially Daisy Hill) a great place to work

Successful organisations have a clear mission and sets of intentions. We would suggest that the Southern Trust develops a mission brief and embeds this at the heart of all care. We would suggest that Southern makes itself an outstanding employer by addressing human resources and workplace environmental factors that improve the recruitment and, more particularly, the retention of staff.

3. Creating Appropriate Models of Care

By standards across the UK, both DH and CAH are 'smaller hospitals' and there will always be constraints on the numbers of consultants and the types of services provided. Moreover, the local catchment has a significant proportion of patients who are older, more complex and require a holistic approach to care. For these reasons, we believe that more generalist models of care, coupled with timely access to specialist review, are appropriate for both the hospitals and the local population.

4. Restore flow (at both sites)

Systems and processes at both organisations need to be carefully reviewed to shorten patients' length of stay, improve follow-up and reduce friction in the system. This should help to create more capacity, relieve the pressures on staff and improve the care of patients.

5. Grow the workforce

The Trust has had some considerable success in growing certain sections of its workforce. We would recommend that this be actively built upon across the whole workforce. The development of an 'academy' to upskill professionals of all types might be a useful avenue to explore.

6. Leadership and Standards

Attention to the Trust's leadership structure should help to strengthen the 'one Trust, two hospitals' approach to care. Governance, operating procedures and teaching should be unified (or at least dovetail) across the two sites.