



CONSULTATION DOCUMENT

Improvements to vascular services in
Cheshire and Merseyside

Cheshire and Merseyside Vascular Review

Introduction

This document describes improvements that the NHS is planning to make to the way vascular services are provided in Cheshire and Merseyside, and asks you for your views on these changes. We want to make sure that all of our vascular services give patients care of the highest possible quality. Although current services are good and offer safe treatment, we believe that to sustain high quality services into the future, things will have to change, which may involve the relocation of some services. This document sets out the planned changes, why they are necessary, what benefits they will bring and how they will be delivered.

What are vascular services?

Vascular services are for people with disorders of the arteries and veins. These include narrowing or widening of arteries, blocked vessels and varicose veins, but not diseases of the heart and vessels in the chest (these are covered by cardiology).

These disorders can reduce the amount of blood reaching the limbs or brain, or cause sudden blood loss if an over-stretched artery bursts. Vascular specialists also support other medical treatments, such as kidney dialysis and chemotherapy.

All of these diseases used to be treated by surgery only. More recently, specialists have been able to treat many vascular disorders by reaching the site of the

problem via the inside of the blood vessels. This is known as interventional radiology, and is a much less invasive approach. Making these advanced techniques readily available to all patients is one of the goals of the review.

At the moment, treatment for vascular conditions takes place at most district hospitals. The district hospitals in Cheshire and Merseyside which currently provide vascular services are Aintree Hospital, Arrowe Park Hospital, Countess of Chester Hospital, Halton Hospital, Leighton Hospital Crewe, Royal Liverpool Hospital, Southport Hospital, and Warrington Hospital.

The changes proposed in this document do not relate to the majority of emergency treatment services. These will remain available from A&E departments across Merseyside and Cheshire

Who needs specialist vascular services?

People with abdominal aortic aneurysms:

This is a condition in which the main artery in the abdomen becomes stretched and prone to bursting. Timely detection and treatment of abdominal aortic aneurysms prevents later problems with rupture and bleeding, and can be life-saving. About 350 aortic aneurysm repairs are carried out annually on people from Cheshire and Merseyside.

People with strokes or transient ischaemic attacks (TIAs or mini-strokes):

Sometimes, these problems with the blood supply to the brain occur because of a narrowing in a blood vessel in the neck called the carotid artery. This can be treated with an operation to improve the flow of blood and reduce the risk of future strokes. About 300 of these procedures are carried out annually on people from Cheshire and Merseyside.

People with poor blood supply to the feet and legs:

Some people, particularly those who smoke or have diabetes, can develop narrowings in the blood supply to the legs and feet. This can cause pain on walking, ulceration and infection.

Surgical or interventional radiological treatment can improve the blood supply, make walking easier and prevent the serious complications of inadequate blood supply. About 450 of these procedures are carried out annually on people from Cheshire and Merseyside.

All these operations take place in local hospitals in Cheshire and Merseyside. However, some people live nearer to a hospital in Manchester or Staffordshire and may have their operations there instead.



Why do we need to change how we provide vascular services?

In short, because it will save lives, and improve the outcomes for many patients in our area.

To provide the best possible care for our patients.

Treating vascular disease very well is not easy. Research shows that the chances of survival and improved quality of life after treatment improve when patients are treated by

a highly trained specialist team working in a larger centre to which many patients are referred.

The more operations carried out at a particular hospital, the more likely it is that treatment will be successful. Seeing more patients allows doctors and other staff to hone their skills and maintain them at the highest level, ensuring that patients get the care they need.

This means that we need to have a small number of hospitals carrying out higher numbers of specialist operations, rather than lots of hospitals carrying out only a few complex operations each year.

To ensure specialist doctors are available at all times

In some smaller hospitals, there are not enough consultants to provide high quality twenty-four hour care for patients with vascular diseases. By concentrating specialists in fewer hospitals and

ensuring patients are taken to those hospitals promptly, we can ensure everyone gets the treatment they need, when they need it. Any potential small delay in accessing treatment will be more than outweighed by the better outcomes.

To meet the standards set by our doctors

Vascular specialists in the UK have set out how they think vascular services should be organised so that they can give their patients the best possible results and we have built on that work with specialists from Cheshire and Merseyside. We are determined to improve our local NHS so that these standards are met in full. We can only achieve this by changing where some treatments are provided. There is general agreement on this – the debate is where the centres are best located.

To make sure that everyone has equal access to innovative procedures, such as keyhole techniques

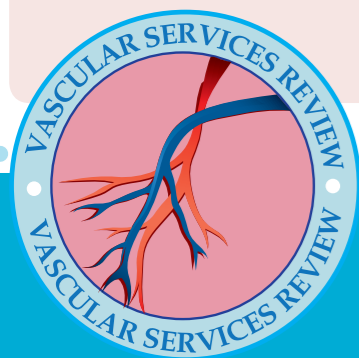
At the moment, patients in the region are not all able to access the latest treatments and techniques. We want to make sure that all patients can benefit from innovations.

Comment from LINK - Do we need to make any reference to renal patients?

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What changes are planned?

Vascular services are changing in a similar way throughout the country to secure these benefits for patients. In Cheshire and Merseyside, we are proposing that hospitals work in partnership to deliver vascular services, with complex and emergency operations carried out at a small number of specialist vascular centres and the remaining care continuing to be provided locally. The only services which will be relocated are surgery on the arteries and some more complex endovascular procedures. North of the Mersey care pathways are agreed for the South of the Mersey there will be no change in the location of outpatient clinics, initial investigations, surgery for venous disease, amputation, some angioplasties and follow-up, all of which will continue to be available at local hospitals, provided they meet quality standards. Emergency transfers will be completed quickly enough that the improved service outweighs any effect of a small delay.

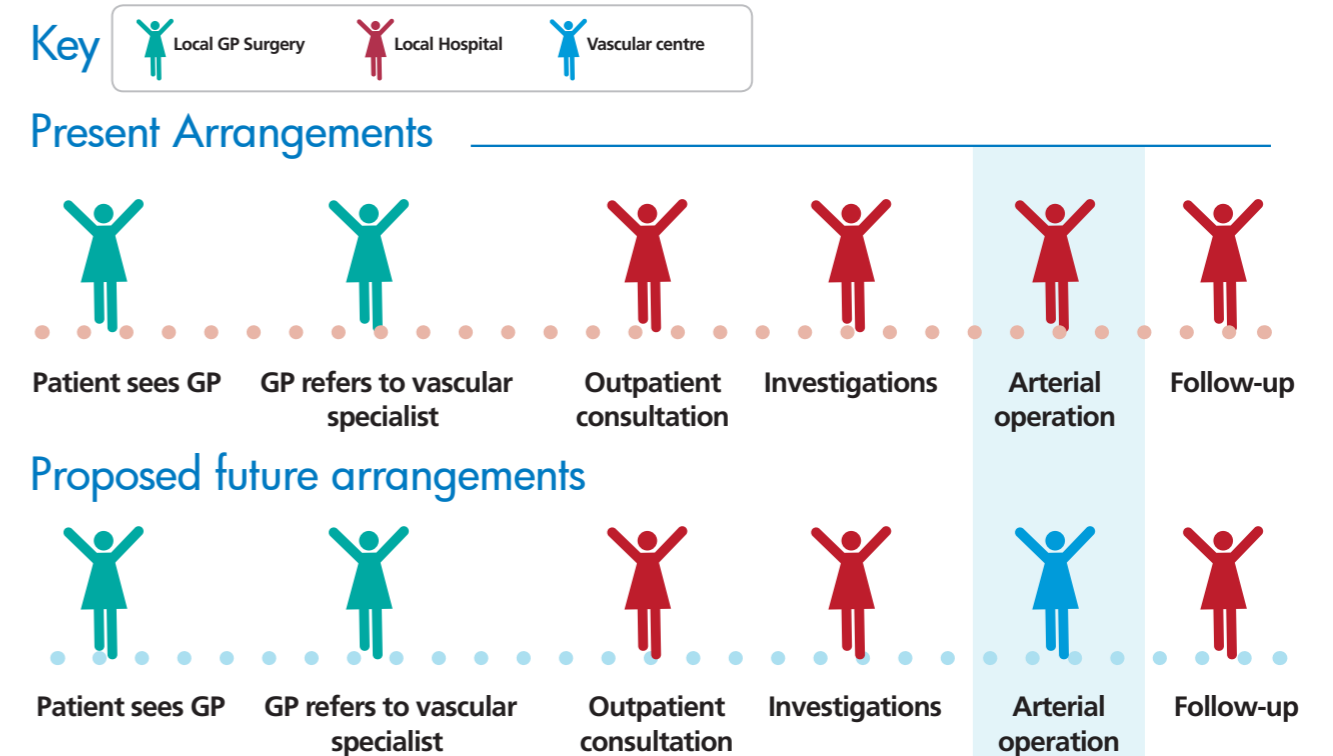
Pathways of elective care for vascular disorders

The chart below shows the pathway of care of patients who consult their GPs with vascular problems. It shows that only one of the six key steps in the pathway of care will change as a result of the proposed improvements to vascular services.

How many patients will be affected?

Our estimate is that about 550 patients a year will be affected in this way, possibly travelling a little further, but with better results following treatment

Patients pathway of care



What has happened so far?

We have carried out a thorough process to determine the best solution for Cheshire and Merseyside (please see the flowchart opposite).

We set up a Project Board to oversee this whole process, which included surgeons, radiologists, GPs and other clinicians, as well as senior NHS managers and independent experts.

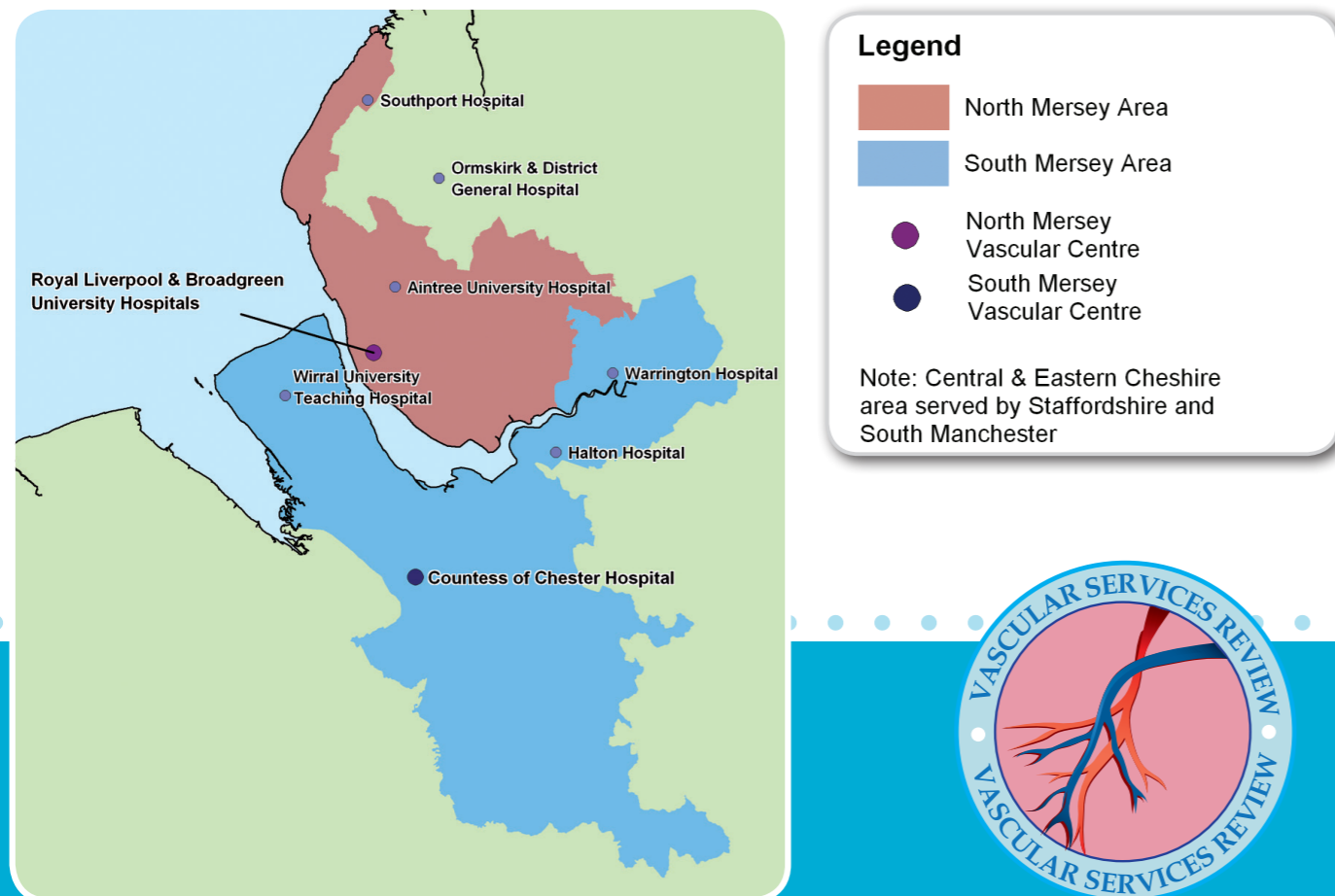
We have already engaged extensively with the public, staff, the clinical community and local politicians and all of the local council Overview and Scrutiny Committees.

We asked the public and stakeholders for your views. Despite the specialised nature of Vascular treatments, over 2000 people took part in the first phase of engagement, and overwhelmingly told us that **Patient Safety** was the number 1 priority – **more important than Local Access to treatments**. We have listened carefully to those views and they were an important part of the considerations. **This has led to firm proposals for no more than two arterial centres in the area.**

A lot of the debate about this issue centres around the technicalities of vascular surgery and other medical

issues. So we set up a Clinical Advisory Group, which had representatives from your local trusts to agree the medical details of how the decision should be made. Without specifying which locations, there was a strong consensus that concentrating this specialist surgery into fewer centres was the right thing to do. The Clinical Advisory Group drew up a comprehensive list of quality standards that would need to be met for a specialist arterial centre working in a network with local hospitals.

The Project Board also considered the four main issues raised by patients, the public and staff in discussions to 'test' the proposals: patient safety, expertise of staff, access to services and positive outcomes for patients. The next stage was to determine the best sites. The Project Board recommended two networks for Cheshire and Merseyside based on the best outcomes for patients, one to serve the North, and one to serve the South.



Map contains Ordnance Survey data © Crown copyright and database right 2011. Licence No 100050534.

For the North, the hospital trusts agreed that this would be best placed centred on the **Royal Liverpool Hospital**, and for the South there were two bids:

- **one from Warrington and Whiston, centred at Warrington Hospital**
- **one from the Countess of Chester and Wirral University Teaching Hospitals, centred on the Countess of Chester.**

These were the only bids formally received from Trusts and therefore the only ones that were considered.

The Commissioners of these services, the Clinical Commissioning Groups that are served by these hospitals, unanimously recommended the **Countess of Chester** as the preferred centre, which would work collaboratively with the vascular surgeons from each of the trusts in Wirral and Warrington.

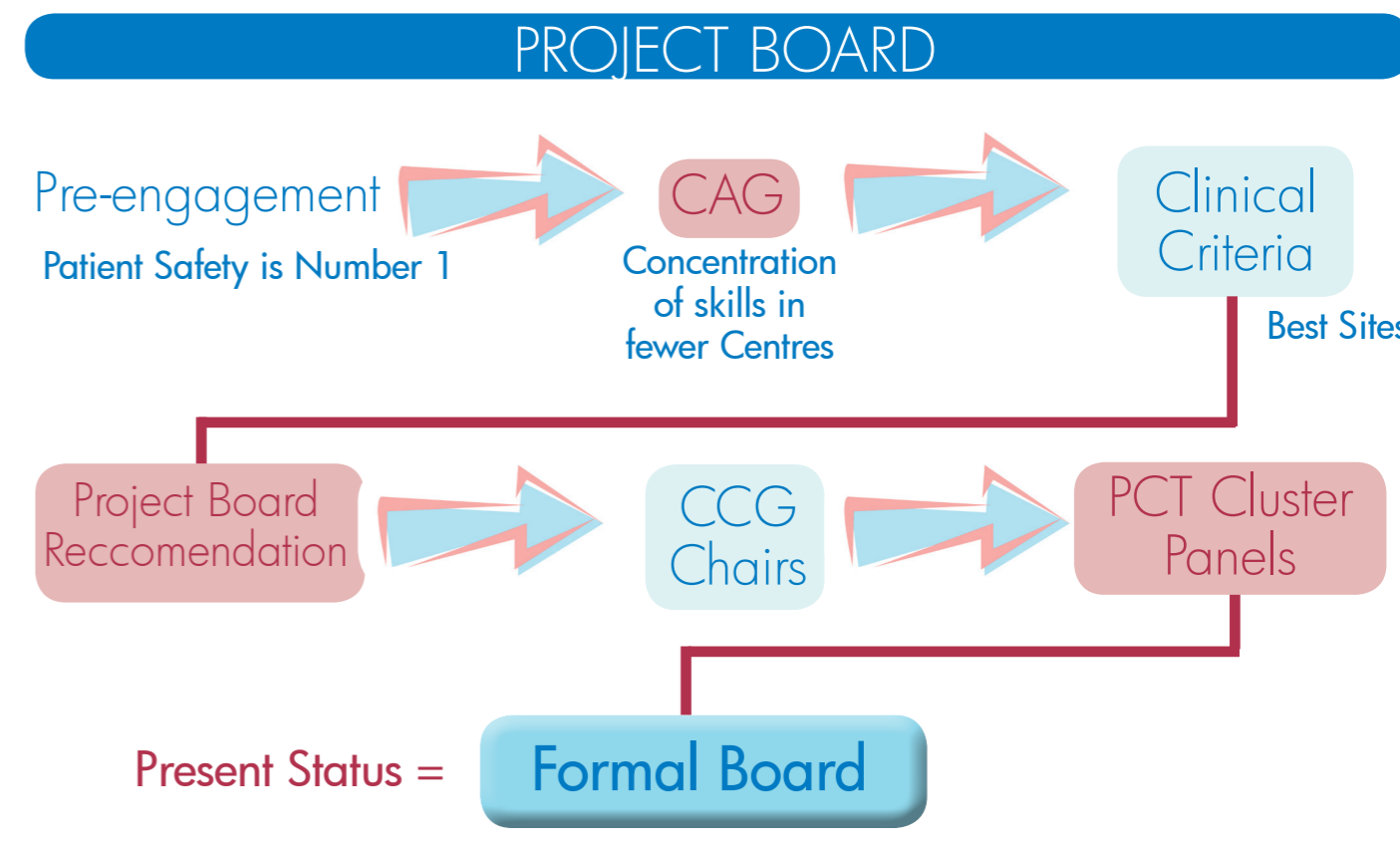
So the recommendation is that there are two networks, with the specialist centres being at the Royal Liverpool Hospital for the north, and the Countess of Chester Hospital for the south. See Map below.

It is very important to understand that only the most complex procedures will take place in the specialist centres, and that the vascular surgeons will still operate in each of the local trusts. These surgeons would remain part of the specialist clinical network for vascular surgery.

A thorough impact assessment, as well as independent clinical advice from vascular experts, determined that it is **not the case** that other local services would be harmed by these changes, provided there is proper planning and co-operation between the Trusts and the clinical staff. It also determined that the additional travelling time to get to a specialist centre for some patients was worthwhile in the improved results from the concentration of specialists.

These recommendations have been approved by the Boards of NHS Cheshire Warrington and Wirral, and NHS Merseyside, to go forward to formal consultation – which is the phase we are now in.

So, would like your views on these proposals, which are designed to save lives and improve patient outcomes in every part of Cheshire and Merseyside.



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How many vascular centres will there be?

We believe two vascular centres would be optimal. This will ensure that all patients are treated at hospitals that comfortably meet the minimum number of operations per year specified by local clinicians (Appendix 1) and where specialist surgeons and interventional radiologists are available all the time.

Care will still continue if one hospital becomes temporarily unavailable, for example because of a fire or an outbreak of infection. However, the purpose of the consultation is to check that this is supported, so the final outcome depends on what the consultation shows.

Are there any risks from the change?

The transition period will need careful management to ensure services continue to be delivered successfully, and that relationships are correctly set up between the specialist arterial centres and other parts of the NHS. Other essential staff, such as nurses and technicians, play a vital role in vascular services. We will need to ensure that we can organise all of the staff to ensure all the necessary skills are available to support the vascular services.

What are the benefits of the changes?

The changes will mean that

- Patients have better outcomes from vascular procedures. They will be more likely to survive aortic aneurysm surgery and less likely to have a stroke after treatment of a narrowing in the carotid artery. **We estimate that three to five lives a year could be saved if surgery was concentrated in fewer centres.** In addition, fewer patients are expected to suffer avoidable complications of surgery, such as renal failure, stroke and damage to the blood supply to the spinal cord and legs.
- The new clinical standards will ensure that designated vascular centres and other hospitals offer prompt access to high quality services, and will be monitored against those standards to make sure they continue to provide a consistently high service.
- Patients can have a wider range of treatments, because of the twenty-four hour availability of consultant interventional radiologists.
- Screening for abdominal aortic aneurysms can be successfully introduced. This will save about 150 lives per year in Cheshire and Merseyside, because people with a problem will be detected early and treated before there is a risk of life-threatening bleeding.

Clinical clarification needed

Full Flush Image



Feedback Form

WILL BE SEEKING ADVISE FROM PRINTER TO SEE THE BEST WAY TO DESIGN THIS I.E GUMMED EDGES AROUND PAGES TO BE ABLE TO SEND BACK IN POST

How to take part in this consultation:

It is very important we continue to obtain as much feedback as possible on the proposal in this consultation document in order to ensure it is supported by the majority of patients and the public. This feedback can be provided in a number of ways:

- Patients and the public will be encouraged to feedback on-line using a dedicated website.
<https://www.surveymonkey.com/s/J62W8Y8>
- Patients and the public unable to access/use an online facility can either register their views over the telephone by dialing 0800 085 1547 or return a hard copy of the feedback form (to be made available as a stand alone document, see draft under separate cover).
- There will be a number of consultation events across Merseyside and Cheshire where patients and the public will be able to attend to register their views. There will be at least two in each area (North or South Mersey) see below:

Liverpool based Public Event:	Venue:	Aintree Race Course
	Dates:	TBC
	Time:	Venue provisionally booked 8 – 5pm, for a 10-2pm event
Warrington Public and Stakeholder Event:	Venue:	Halliwel Jones Stadium Platinum Room & NSW lounge for lunch (at public event).
	Dates:	TBC
	Time:	Venue provisionally booked 8 – 5pm
Wirral	Venue:	Hulme Hall Port Sunlight
	Dates:	Tuesday 24th January
	Time:	15.00 to 18.00
Western Cheshire	Venue:	Northwich Memorial Hall
	Date:	Tuesday 31st January
	Time:	18.00 to 21.00

- There will be a travelling exhibition which will be located in high footfall areas across Cheshire and Merseyside and hospitals involved in the proposals.

If you would like a copy in another format, such as Braille, large print, easy read, audio cassette or CD, or in another language, please telephone us on: **0800 085 1547** or email: **haveyoursay@wirral.nhs.uk**

<p>إذا لديك الرغبة في الحصول على نسخة بشكل آخر، مثل بريل، كتابة كبيرة، مسجلة على شريط كاسيت أو قرص سي دي أو بلغة أخرى، أرجو الإتصال بنا على الرقم: 0800 085 1547 أو البريد الإلكتروني: haveyoursay@wirral.nhs.uk</p>
<p>(Arabic)</p>
<p>আপনি যদি অন্য আকারে একটি কপি পেতে চান, যেমন ব্রেইলি, বড় হরফে, অডিও ক্যাসেটে বা সিডি, বা অন্য ভাষায়, তাহলে অনুগ্রহ করে টেলিফোন করুন: 0800 085 1547 বা ইমেল করুন: haveyoursay@wirral.nhs.uk</p>
<p>(Bengali)</p>
<p>如果您想索取這份文件的其他語文譯本或以其他形式編制的版本（如凸字、大字體、錄音帶或光碟），請致電 0800 085 1547 或寄電郵到 haveyoursay@wirral.nhs.uk 來聯絡我們。</p>
<p>(Chinese)</p>
<p>यदि आप अन्य प्रारूप में एक कॉपी चाहते हैं, जैसे ब्रेल, बड़ा प्रिंट, ऑडियो कैसेट या सीडी, या किसी अन्य भाषा में, कृपया हमें 0800 085 1547 पर टेलीफोन करें या haveyoursay@wirral.nhs.uk पर ईमेल भेजें।</p>
<p>(Hindi)</p>
<p>Jei norite gauti kopiją kitu formatu, pvz., Brailio raštu, dideliu šriftu, kita kalba arba įrašytą garso juostoje ar kompaktiniame diske, prašau susisiekti su mumis telefonu 0800 085 1547 arba el. paštu haveyoursay@wirral.nhs.uk</p>
<p>(Lithuanian)</p>
<p>Jeżeli chcesz otrzymać kopię w innym formacie np. zapisaną w języku Braille'a, dużą czcionkę, audio, CD lub w innym języku, proszę zadzwoń: 0800 085 1547 lub napisz haveyoursay@wirral.nhs.uk</p>
<p>(Polish)</p>
<p>ਜੇ ਤੁਸੀਂ ਹੋਰ ਫਾਰਮੈਟ ਵਿਚ ਇਕ ਨਕਲ ਚਾਹੁੰਦੇ ਹੋ, ਜਿਵੇਂ ਕਿ ਬਰੇਲ, ਵੱਡੀ ਛਪਾਈ, ਆਡੀਓ ਟੇਪ ਜਾਂ ਸੀਡੀ ਜਾਂ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ, ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ 0800 085 1547 ਤੇ ਸੰਪਰਕ ਕਰੋ ਜਾਂ haveyoursay@wirral.nhs.uk ਤੇ ਈਮੇਲ ਕਰੋ।</p>
<p>(Punjabi)</p>
<p>În cazul în care doriți un exemplar într-un alt format, cum ar fi Braille, cu caractere mari, o casetă audio sau CD sau într-o altă limbă, vă rugăm să ne contactați la numărul de telefon: 0800 085 1547 sau prin e-mail la: haveyoursay@wirral.nhs.uk</p>
<p>(Romanian)</p>
<p>Haddii aad jeclaan laheyd koobi ama nuqul qaab kale ah, sida farta Braille, far waaweyn, cajalad maqal ama Siidii (CD) ah, ama luqad kaleba, fadlan naga soo wac teleefoonka ah: 0800 085 1547 ama email noogu spoo dir: haveyoursay@wirral.nhs.uk</p>
<p>(Somali)</p>
<p>หากคุณต้องการรับสำเนาในรูปแบบอื่น เช่น อักษรเบรลล์ ตัวหนังสือขนาดใหญ่ สื่อบันทึกเสียง หรือ ซีดี หรือในภาษาอื่น โปรดโทร: 0800 085 1547 หรือ อีเมล: haveyoursay@wirral.nhs.uk</p>
<p>(Thai)</p>
<p>اگر آپ کسی دوسرے فارمیٹ میں نقل چاہتے ہوں جیسا کہ بریل، بڑا پرنٹ، آڈیو کیسٹ یا سی ڈی، یا کسی دوسری زبان میں تو براہ مہربانی ہمیں فون کریں: 0800 085 1547 یا ای میل کریں: haveyoursay@wirral.nhs.uk</p>
<p>(Urdu)</p>
<p>Nếu bạn muốn nhận một bản sao theo định dạng khác, như là chữ nổi Braille, cỡ in lớn, băng cát xét âm thanh hoặc đĩa CD, hoặc theo một ngôn ngữ khác, vui lòng điện thoại cho chúng tôi theo số : 0800 085 1547 hoặc gửi thư điện tử đến: haveyoursay@wirral.nhs.uk</p>
<p>(Vietnamese)</p>

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