



Future Generations Strategy

Making our services fit for future generations of women, babies, and families







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Introduction What is Future Generations?

In late 2015, Liverpool Women's NHS Foundation Trust published its Future Generations Strategy. This clearly set out the Trusts' vision for services in the future, with the aim of improving outcomes for women and babies and ensuring clinical staff have access to the full range of clinical support services and timely access to other specialist clinical expertise.

The reason for this is whilst our current Liverpool Women's Hospital site is an amazing place, the healthcare needs of women and babies has changed over the last 25 years since it was built. We cannot provide as high a standard of care as we would like to in our current hospital site and that is why we are working on protecting our services for the long term future.

Liverpool Women's is not closing. The long term aim of the Trust and health and care partners in Liverpool is to gain approval to build a new Liverpool Women's Hospital alongside other adult hospital services in the city to protect our services for the future. This would also allow the Trust to capitalise on its already strong research capabilities by be being co-located in the centre of the city's research hub.

However, any move to a new hospital would take a number of years to achieve and is subject to approval from NHS England and the outcome of a public consultation before we can even think to make any plans. Therefore as well as focusing on our long-term future, we must also work hard and collaboratively with our local partners, and develop plans to ensure we continue to deliver high quality and safe care to women and babies in the time leading up to any potential future relocation, as well as continuing to demonstrate the clinical need for change in the longer term.

We will never be able to completely remove all of our clinical risks while we remain on our current hospital site but we are doing all we can to mitigate the risks as much as possible.

We are now experiencing the anticipated challenges in recruiting and retaining highly specialised medical staff, particularly in cancer care and anaesthetics. To deal with this, we are working creatively with other health colleagues to develop and provide attractive new roles for doctors and other staff, and we are sharing facilities such as surgical theatres and intensive care beds on other sites in Liverpool. Since 2016 we have also undertaken a significant piece of work to increase 24/7 consultant cover within the Trust, which means that the best and most experienced experts are available on-site all of the time.

Alongside recent developments such as our fabulous new neonatal unit, we are also looking at additional measures for the medium-term future on our current site to further mitigate risk, such as the possible development of a CT scanner and blood bank on-site, although these will be not without their challenges.

Any plans for our future will now also be delivered against the backdrop of Covid-19 and the likely impact that recent events will have on the healthcare sector for the foreseeable future.

We are living in uncertain times but one thing we are clear on at Liverpool Women's is that our main priorities are patient safety and quality of care, and whilst we are on our current hospital site we will continue to do all we can to offer women, babies and families the best quality of care possible but we also remain passionate about the need to maintain focus on the longer term challenges and need for change.

I hope the following pages will help to explain our Future Generations journey so far and some of our plans for the future.



Kathryn Thomson Chief Executive



A history of women's healthcare innovation in Liverpool

Liverpool has a rich history of providing care for women and babies that dates back to 1796.

There have been many women's hospitals in Liverpool over the years.

The current Liverpool Women's Hospital was built in 1995 and it is our intention that it will remain a valuable asset for the health and care sector in Liverpool for many years to come, regardless of which care provider may be located within it in the future.

We are now the only standalone specialist Trust in the country that cares for women and babies. Over the last 25 years, we have delivered approximately 200,000 babies, undertaken 225,000 gynaecological procedures, and cared for 25,000 neonatal babies.

Our research and genomic medicine activities have grown over the years and our fertility services are now delivered from two sites in Liverpool and Knutsford, helping to make the dream of a family become a reality with around 1,000 being born through fertility treatment each year.

However, despite the many achievements in our current home, healthcare does not stand still, as illustrated by our history.

Over the last few years, we as a Trust have been working extremely hard to continue the improvement and evolution of our services whilst planning for the long term future.

This resulted in our Future Generations Strategy which we began working on in 2015. The following pages explain why the strategy was needed, what our preferred plans are for the future and what needs to happen to make them a reality over the coming years.

our story so far...

We're proud of the history of women's health services Liverpool has, and part of the goal is to make sure that we continue to improve them for Future Generations.

Special Hospital for Women

The Special Hospital for Women opened in Shaw Street.

Liverpool and Samaritan Hospital for Women

The Duchess of York opened this new building on Catharine Street known as The Women's Hospital.

Liverpool Obstetrics and Gynaecology Unit

All three hospitals come under the administration of Liverpool Obstetrics and Gynaecology Unit.

Liverpool Women's Hospital

Services for women and babies came together under one roof at the Trust's new £30 million hospital on Crown Street.

Future Generations

The Trust begins to propose plans for the future of the city's health services for women and babies of future generations.

Preferred option for the future

A draft business case is published by Liverpool CCG detailing future options with a preferred option of moving to a new Women's Hospital next to the new Royal Hospital site.

1796 Ladies' Charity

The Ladies' Charity was set up to provide assistance with childbirth.

1883

1926 Liverpool Maternity

Opened on Oxford Street, this was the largest voluntary maternity hospital in Britain.

1932

1947

Restoration of Mill Road

After being bombed during the war, Mill Road Hospital was restored and upgraded as a specialist gynaecology and obstetrics hospital.

1985

1994 Liverpool Women's NHS Trust

The Liverpool Obstetrics and Gynaecology Unit became known as Liverpool Women's NHS Trust.

1995

2005

Foundation Trust

The Trust becomes the first on Merseyside to achieve Foundation Trust status.

2015

2016

Summer of Listening

The Trust and Liverpool CCG undertake a summer of listening with patients and public to gather views about the future direction of services.

2017

The future?

The Trust hopes that a public consultation will take place soon, leading to a decision on the long-term future of our services.

2020 and beyond

Why do our services need to change for the future?

There are a number of challenges we currently face when delivering services on our existing hospital site - the following two pages attempt to summarise each one.

The needs of patients have changed

Liverpool Women's Hospital opened 25 years ago. Women are now living longer, with more complex conditions and having babies later in life, while advances in medicine mean more premature and unwell babies are surviving when they wouldn't have done so in the past. This means that they need more specialist and complex care; not all of this care is, or can be, provided at Liverpool Women's.

Some women and babies have to be transferred to other local hospitals for their care

Not all of the care needed to treat women and babies is available at Liverpool Women's. Sometimes they have long waits to be transferred, often by ambulance, to receive the additional support they need; this may be for scans, surgery or intensive care. Moving a patient from one hospital to another is an unnecessary disruption to their care and is not good for a patient's experience. It can also increase the clinical risk for patients due to unnecessary delays in receiving care that would otherwise be accessible down a corridor or over an adjoined bridge like most other hospitals in the country.

Specialist doctors working in other hospitals have to support patients at Liverpool Women's

It is not possible to plan for all eventualities in healthcare. Sometimes, particularly during or after surgery, patients may need additional emergency support from services not provided on site e.g. support from bowel surgeons or cardiologists. We try to plan for this as much as possible but healthcare needs can be unpredictable and this creates additional clinical risks for patients being treated at Liverpool Women's.

Some mothers and babies are separated from each other

If a new mum needs specialist care she may be required to receive treatment at another hospital which means she will be separated from her new baby. If Liverpool Women's was co-located with an adult acute hospital this would reduce the length of time mother and baby are separated and visiting could be more easily accommodated for family members.

Other adult acute services need women's services

Other hospitals in Liverpool do not have access to on site maternity and gynaecology services, meaning women who are inpatients in acute trusts in the city can receive sub-optimal care. Examples would include pregnant women who are being treated for non-pregnancy related conditions such as a heart condition, abdominal surgery and broken bones.

We do not have the key support services on site that we need

Our current hospital does not have a CT/MRI scanner, blood bank or 24/7 critical laboratory services on site. If a woman needs blood products during an emergency these have to be transferred from another hospital. This can cause delays in diagnosis and blood transfusions in time-critical situations and create additional risks for women.

Why do our services need to change for the future?

We struggle to recruit enough doctors

Because of our isolation as a standalone hospital site, recruitment of consultant doctors to specialist trusts like Liverpool Women's can be a problem. This is because doctors want to work with a range of professionals in multi-disciplinary teams, which is not possible at Liverpool Women's. Today, this is a particular issue in gynaecology cancer care where there are up to three full time posts vacant. We predict this may become a problem in maternity care in the future.

We are unable to meet national care standards

We have not been able to meet a range of Royal College and NHS England standards for care for some years because we are not co-located with other acute services. Commissioners have also recently developed new service specifications that we cannot meet. Services may need to cease locally and be provided outside of the city if we cannot find a solution for providing them alongside other acute services. This would increase the current health inequalities for women and babies in the city even more in the future.

Reviews over the last three years to assess compliance against existing and emerging clinical standards has confirmed that the key drivers underpinning the long term strategy – the risks posed by providing services at an isolated site - are not only still present but have become more pressing.

Research and innovation continues to evolve and we need to be better placed to capitalise on this in the future

The immediate impact of Covid-19 has indicated that there will be an increased focus on, and investment in, research in the future. Liverpool Women's has a strong research background and we continually seek to maintain and strengthen research and innovation capabilities through partnership working with other Trusts, the academic sector, and industry.

However, being co-located with other acute services, and being centrally located within the city's research hub would allow the Trust to strengthen even more in the future and maintain its position as a world leading specialist provider for the health of women and babies.

We are the only women's hospital in the country that is not co-located with another acute provider

Although being a specialist trust on our own site may appear to be positive thing, it can actually be a major drawback for patients and staff as other support services are not readily available when they are needed. Liverpool is different from every other major city in England.

All of the these challenges mean that the women and babies of Liverpool and those people that access our care from further afield, are not getting as good a service or experience as they could be.

Our long term plan for the future will address these challenges and make sure that future generations of women and babies get the best possible quality of care available - we believe they deserve this.

Further details can be found within a range of information materials on our website at: www.liverpoolwomens.nhs.uk/ourfuture

How have our plans for the future progressed so far?

Over the last five years, our Future Generations Strategy has set a number of objectives and target outcomes to achieve. As well as making progress to move to public consultation on our future plans, this also includes short term mitigations to address the existing clinical and operational risks that we have, in the absence of currently being able to implement our long term aim for the future of co-location with another adult acute hospital.

A summary of some of some our key achievements over the last five years are as follows:

Clinical and Quality

- The Trust was awarded £15m in the form of a capital loan to address the immediate clinical risks on the neonatal unit. The redeveloped unit will provide much needed additional cots to keep the Trust's most vulnerable patients safe.
- Since 2016 we have undertaken a significant piece of work to increase 24/7 consultant cover within the Trust, which means that the best and most experienced experts are available on-site all of the time. Between 2017/18 and 2019/20 we invested £1.7m into 14 new consultant posts across four specialties (anaesthetics, gynaecology, neonatology and maternity), with further investment planned until we reach 24/7 cover which we plan to achieve by 2023.
- There is increased access to colorectal surgeons and relevant therapies for women with gynaecological cancers at Aintree and the Royal Liverpool.

Partnerships

- We continue to work closely with Liverpool
 University Hospitals NHS Foundation Trust to regular
 utilise gynaecology cancer operating sessions when
 possible at both the Aintree and Royal Liverpool
 sites to enable women to receive the complex
 support they need during and after surgery.
- We have established joint consultant posts with Liverpool University Hospitals NHS Foundation Trust to improve continuity of care and to support the recruitment and retention of staff, for example in anaesthestics and adolescent gynaecology.
- We have formally established a Neonatal Partnership with Alder Hey NHS FT so that the neonatal team now works across both sites and can provide continuity of care for babies who have additional specialist paediatric healthcare needs.
- We worked in partnership with the North West Neonatal Operational Delivery Network to deliver bespoke training to all new neonatal nurses to ensure the same level of training across the Network

Our plans for the immediate future

In early 2020, Liverpool Women's and Liverpool University Hospitals NHS Foundation Trust signed a partnership agreement and agreed to establish a Partnership Board to:

- (a) Formalise some existing joint working arrangements; and
- (b) Develop and implement further actions to compensate for the lack of co-location.

The scope of the partnership agreement includes:

- Further increasing joint appointments across nursing and medical staff groups
- Formalising existing working arrangements for transfers of patients between sites and agreeing the provision of urgent care on the Liverpool Women's, Royal and Aintree sites
- Extending access to operating theatres for Liverpool Women's gynaecology patients at the Royal Liverpool and Aintree sites
- Access to, or provision of, robotic operating theatre lists for gynaecology
- Partnership working to provide staffing for a proposed new blood bank and extended lab facilities at LWH with 24/7 delivery of urgent lab services
- Establishing formal pathways for access to imaging and diagnostics on a seven day basis
- Scoping the provision of CT scanning and extending other diagnostic services at Liverpool Women's
- Further increasing the partnership working between critical care services delivered on different site

The Trust is also applying for further investment to cover the capital costs of an onsite blood bank and CT scanner.

A number of these proposals had previously been discounted during the commissioner led appraisal process in 2016, on the grounds of both feasibility - as we may not be able to staff them - and value for money.

The likely impact of Covid-19 is also likely to add a layer of complexity to any of these plans. However, these services are vital for a small number of seriously ill women and this will not change.

Therefore in the absence of funding to deliver the preferred option, the Trust is pursuing these additional actions in order to improve quality and safety in the medium term; it is not yet clear if it will be possible to deliver all of these actions.

Our key messages for patients, visitors and the public

We are aware that whilst we have been busy continuing to deliver operational services, taking our plans through NHS processes and trying to acquire funding for a new hospital, some of our patients, visitors, and public may think our plans have stopped or changed.

We want to be very clear that:

- The women and babies of Liverpool and beyond deserve the best quality care available this is why we are so passionate about the need for change.
- Our current services at Liverpool Women's Hospital are safe and we continue to provide the best possible care to patients. We want to maintain this quality of care to keep the future generations of babies, mothers and women of Liverpool safe and to improve their experience of our services.
- Our preferred option for the future is the same as it was five years ago - to build a new Liverpool Women's Hospital which will be physically linked to the new Royal Liverpool Hospital. This would give our services greater access to other specialist services that we simply cannot and will never be able to deliver at our current hospital site.

- Liverpool Women's is not going to close; we want to make our services for women and babies in Liverpool even better for the future by moving to a new hospital. If we did move from our current home it is our preference and belief that the current hospital site would be used for health and care purposes in the future there are many health and care providers who could make valuable use of the site for the benefit of the Liverpool population.
- Before we can go any further with our preferred plans for the future, we need approval from NHS England to undertake a public consultation about our proposals. We don't know when this will take place but we hope it can happen soon. Even if our proposals are supported, a new hospital would take a number of years to build.
- In any event, we will be staying at our current Liverpool Women's Hospital site for a number of years and we will continue to keep our patients safe by investing in services at our current hospital site.



What happens next?

We have been on our Future Generations journey since 2014-15. Since then there has been the development and independent scrutiny of the case for change and Future Generations Strategy. Despite a further commissioner led options appraisal process, independent clinical support for the plan, and applications for NHS capital, the Trust has been unable to secure the funding for the new hospital so far.

In the meantime, quality and standards have been kept under regular review and operational planning has continued to ensure quality and safety is maintained. In addition, Liverpool City partners have publicly supported and endorsed our plans for colocation in the One Liverpool Plan.

Our current Future Generations Strategy runs to the end of 2020. Whilst we have delivered many positive changes since 2015, and we continue to pursue further changes that can improve the current position, we have been unable to deliver our major ambition for co-location.

There have also been a number of changes external to the organisation over the last five years that will have an impact on our long term plans going forward. These include;

- The establishment of the Cheshire and Merseyside Health and Care Partnership
- Plans for the merger of the North Mersey Clinical Commissioning Groups (CCGs)
- The publication of the NHS Long Term Plan
- New specialised commissioning intentions
- Publication of the One Liverpool Plan
- Coronavirus (Covid-19) global pandemic and likely impact on the future of the healthcare sector

It is therefore timely for us to begin to review and refresh our strategy in line with current landscape.

We remain convinced that co-location with acute adult services is the single largest improvement we can make for all our service users, but while this is not possible, at least for the next few years, it is imperative that we update our strategy for today's environment and look for other ways to improve quality, safety and experience for our patients and families in the interim. We will therefore be commencing a strategic review during 2020-21.

How we will keep the public engaged and informed in this process

Our preference is always to actively engage our patients and families, past and present, in the development of our plans and we intend to continue to do this going forward. However, these are unusual times, and because of the Covid-19 global pandemic, the way we develop the next stage of our plans will need to be different than before, and much more reliant on digital or remote engagement.

When we are in a position to do so, and following our strategic review later this year, we will publish a schedule of public events and activities as well as other methods of engagement so that people can decide how they want to contribute to discussions.







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