

Written Ministerial Statement

The content of this ministerial statement is as received at the time from the Minister. It has not been subject to the official reporting (Hansard) process.

Health, Social Services and Public Safety

Emergency Department Services in Belfast

*Published at 10.30 am on
Tuesday 5 February 2013*

Mr Poots (The Minister of Health, Social Services and Public Safety): I wish to make a statement to the Assembly regarding the proposals for the future configuration of Emergency Department (ED) Services in Belfast. These proposals will be published today by the Health and Social Care Board (HSCB) for a 13 weeks period of public consultation.

In my statement to the Assembly on 13 September 2011, regarding the temporary changes to Accident and Emergency Service Configuration at the Belfast City Hospital, I was clear that in the longer term, a strategic decision will need to be taken on the provision of ED services in Belfast. I also said that this would be a decision for me as Minister to take and it is a decision I will take only after a full and open process of consultation and engagement. Today marks the start of that process of engagement and consultation on proposals for the future delivery of this service. At the outset of this consultation it is worth noting that the drivers for change, which resulted in the temporary changes at the Belfast City Hospital, are the same drivers which are compelling us to plan ahead now for the future ED services in Belfast. Those drivers of change relate to the safety and quality of care; they are not about efficiencies or cuts. The main reasons for the temporary changes included:

- a shortfall in recruitment of suitably qualified medical staff, particularly middle grade doctors;

- the need for adequate training and supervision arrangements for junior medical staff, especially at night time;
- concern expressed by the Northern Ireland Medical and Dental Training Agency and by the General Medical Council (in August 2011) regarding the current level of supervision of doctors, especially on the Royal and Belfast City hospital sites, thus requiring the immediate action taken at that time;
- a general shortfall in medical trainees in emergency medicine not just in Northern Ireland but in other parts of the UK;
- changes in the Home Office immigration rules which makes it more difficult to recruit doctors from overseas – including locums and middle grade doctors; and,
- changes in the working practices of staff and the need to promote compliance with the European Working Time Directive, which was designed to promote safer patient care and enhance the well being of doctors who had previously worked very long hours.

The proposals in the consultation document have been developed by the HSCB working with the Belfast Health and Social Care Trust. The document reviews action already taken to secure ED services across Greater Belfast and sets out a range of options on the way forward. In formulating these options the HSCB has fully considered the regional implications of the proposals, particularly in relation to the South Eastern, Northern and Ambulance Service Trusts.

The preferred option in the document is that there should be two Emergency Departments in Belfast, one in the Royal Victoria Hospital and one in the Mater Infirmorum Hospital, supported by direct access, via GPs, to a range of specialist services at Belfast City Hospital. This

preferred option has been identified following detailed consideration of the relevant issues addressed in the document. Following public consultation, if I decide to adopt the preferred option, this change will result in the permanent closure of the Emergency Department in Belfast City Hospital.

My Department has obtained assurances from both the Trust, and the HSC Board, as the commissioner of these services, that the preferred option will provide an ED service in Belfast that is safe and sustainable and that it will deliver high quality care. As I have previously stated my first concern is the safety of patient care and that will always remain as my priority.

As indicated in the consultation document there are three key policy considerations for making changes in the way Emergency Department services are delivered across Belfast.

Firstly, and most importantly, the need to deliver a safe and sustainable service into the future, where highly-skilled clinical teams, supported by an effective physical infrastructure and environment, can provide a high quality service for patients.

Secondly, the future direction for health and social care services, as outlined in 'Transforming Your Care'¹ (TYC), is for urgent care services to be provided as close to people's homes as possible, provided by an integrated team from primary, community and hospital services with an emergency service configuration that is sustainable and resilient in clinical terms. The TYC report envisaged all hospitals in Belfast Trust as part of a single network of major acute services.

Thirdly, the strategic direction for acute hospitals and service delivery in Belfast, as outlined in 'New Directions'², focuses on both the development of patient pathways which enable people to access services quickly, without having to attend the Emergency Department, and the development of service profiles for the hospitals in the Belfast Acute Network (Belfast City Hospital, Mater Infirmorum Hospital and the Royal Victoria Hospital).

1 Transforming Your Care, A Review of Health and Social Care in Northern Ireland, HSCB, December 2011

2 New Directions – a conversation on the future delivery of health and social care services in Belfast – Belfast Health and Social Care Trust, 2008.

The proposals in the consultation document aim to move forward the implementation of the above policies, ensuring that patients in Belfast will continue to have access in the future to high quality services and care when they need urgent or emergency treatment. I wish to emphasise that these proposals relate to securing the safety and quality of care; they are not about efficiencies or cuts because the key issue here is the need to ensure that there is an emergency service for Belfast and the nearby areas that works and meets the needs of the population.

The managers and clinicians in Belfast Trust and all the other affected organisations have worked to make the temporary change, introduced in November 2011, effective. From the evidence of how the temporary change has been delivered by the Trust over the past 15 months I believe looking forward that we can have confidence that the model of care proposed in the preferred option is both safe and sustainable. However, I recognise that there may be different views and I therefore want to hear the views of key stakeholders, in particular the public and their representatives, on these important proposals before I make my final decision on the future configuration of the ED service in Belfast. I have therefore asked the HSCB to carry out this public consultation on my behalf starting today and concluding on 10 May 2013.

As well as setting out proposals for the future delivery of ED services in Belfast I look to the HSCB and Health and Social Care Trusts across Northern Ireland to also ensure that the improvements in ED waiting times and patient care, secured through their work with the Improvement Action Group, are embedded. While I recognise that this work will take time to bring to full fruition, progress has been made in securing the high standards of care that I expect to be delivered.

Finally, I would like to extend my gratitude to Emergency Department staff for the dedicated service that they provide to people across Northern Ireland. I am committed to continuing to secure improvements in ED services to ensure all of the population of Northern Ireland has appropriate access to high quality, safe and sustainable urgent and emergency care.