

Medical Team

Your DBTH newsletter

Organisational update



Happy New Year and welcome to the first edition of the Medical Team newsletter.

Having met with a number of you over the last few months I'm keen to start the New Year with some newly established methods of engagement and communications to ensure that the Executive Team and I are able to listen and respond to your ideas, suggestions, challenges and concerns, and also share with you plans and updates from the Trust and the Accountable Care System (ACS), which is now moving at pace.

As an important group of staff, who are integral to the success of the Trust and will be integral in the success of the ACS, this bulletin will serve as a regular Trust update, delivered to you by the Executive Team. I will also take the opportunity to inform you of any key Trust developments.

I know you are all very busy and so not to unnecessarily add to your emails I anticipate the bulletins will be shared no more than monthly (we will also include them on our website [here](#)).

In addition to the new bulletin I will be setting up lunchtime consultant meetings. These will be small meetings (of no more than six of us at one time) to provide the opportunity for you to raise suggestions, challenges and concerns with me in the presence of just a few of your colleagues.

These meetings have been specifically scheduled over lunchtime, to accommodate for busy schedules. Simple refreshments (a drink and a sandwich) will be provided. Below is a list of dates and times across Doncaster and Bassetlaw. Please can you confirm your attendance at your meeting of choice with Angela O'Mara by calling 644153 or emailing a.o'mara@nhs.net

If there is high demand I will endeavour to set up more at convenient times.

Lunchtime meetings

- **24 January**, DRI, 12.30 to 2pm
- **8 February**, BH, 1.30 to 3pm
- **23 February**, DRI, 12 to 1.30pm
- **8 March**, DH, 12 to 1.30pm
- **28 March**, DRI, 12.30 to 2pm
- **12 April**, BH, 1 to 2.30pm
- **24 April**, DRI, 12 to 1.30pm
- **9 May**, BH, 1 to 2.30pm
- **25 May**, DRI, 12 to 1.30pm
- **11 June**, BH, 11.30 to 1pm
- **18 June**, DRI, 12.30 to 2pm

Thank you

I'd like to thank you all for your hard work over Christmas and New Year and for your continued dedication to providing care for our patients through this busy period we have been/ are currently experiencing.

Although the immediate pressures are felt in our Emergency Departments, we know that as patients move through our wards and departments, every area will come under pressure.

We will continue with reduced elective throughout this week and review on a week by week basis to try and manage the pressure on our services.

ACS update

Decision made on the future of hyper acute stroke services

The joint committee of clinical commissioning groups met in November 2017 and made the unanimous decision to change the way we provide hyper acute stroke services across the region. The decision comes after almost three years of detailed work, developing proposals, a 16 week public consultation and analysis of various performance and financial data available.

Dr Peter Anderton, stroke consultant and clinical lead for hyper acute stroke services, led the presentation to the committee supported by transformation programme lead Marianna Hargreaves and associate communications director Helen Stevens.

Hyper acute stroke care will, in the future, no longer be provided in Barnsley or Rotherham Hospitals with patients from the region being taken for their initial assessments and treatments in Doncaster and Sheffield- or Pinderfields Hospital for some Barnsley patients. No changes were made to the hyper acute stroke service in Chesterfield. The meeting was live-streamed and is available to view on the [ACS website](#).

Update on the review of hospital services

An event for the public was held in December to discuss the latest developments of the hospital services review. Around 70 people attended, including foundation trust governors, patient group representatives and members of the public. Presentations were given and conversations had around each of the five services being reviewed as well as an overview of the ACS and updates on the work of primary care and mental health.

Now that all the clinical working groups have taken place for each service, it was possible to share the latest conversations and a number of potential solutions and ways forward were discussed with those who attended.

Feedback so far has been very positive with audience members saying they valued being able to share their views and ask questions of the clinical leads, many of whom were representatives from DBTH.

The ACS continues to ask for staff and public input via the survey which can be found [here](#) and they will be holding information events within the Trust. When a date is confirmed we will share that with you.

The review team are now in the process of analysing all information from the clinical working groups before the groups will meet for a fourth time in the new year to develop their thoughts on how we can work differently to improve services.

An update from the Cancer Alliance

In October NHS England's National Cancer Programme released their [Progress Report \(2016-17\)](#). The report highlighted how Cancer Alliances are improving regional coordination of care; as well as pointing to the importance of the [Recovery Package](#) for people living with and beyond cancer.

The National Cancer Programme goes beyond measuring how long people live after cancer, towards how well people live after cancer. They will look at the long term impact on people's finances, ability to maintain social networks and their psychological well-being.

This reflects an encouraging national commitment to the Recovery Package.

In our own region, we continue to work towards a 2020 deadline to ensure everyone diagnosed with breast, bowel or prostate cancer regionally can access this level of support.

Organisational structure

