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Meeting Date	26 July 2022	Agenda Item	5.2
Report Title	AMSR Business Ca	se	
Report Author	Inese Robotham, Chief Operating Officer		
Report Sponsor			
Presented by	Inese Robotham, Chief Operating Officer		
Freedom of	Open		
Information			
Purpose of the Report	The paper summarises main implications of the Acute Medical Services (AMSR) Redesign Business Case (enclosed as Appendix 1) in terms of changes in service provision and associated benefits, impact on workforce and financial resources.		
Key Issues	 and financial resources. The Acute Medical Services Redesign Programme is a key foundation of the Health Board's wider 'Changing for the Future' plans. The Programme will deliver improved management of acute medical patients and will relieve pressure on the Emergency Department. The business case was approved at an extraordinary Management Board on 23/05/2022. The main changes can be summarised as follows: Centralisation of acute medicine at Morriston hospital (including centralisation of acute medical admissions) Transfer of Stroke and Ortho-geriatrics inpatient rehabilitation services from Singleton to Neath Port Talbot Hospital Temporary (until October 2023) establishment of 90 beds at Singleton Hospital to provide capacity for clinically optimised patients whilst alternative out of hospital pathways are being worked up. It is estimated that circa 1700 staff across Singleton, Morriston and Neath Port Talbot hospitals will be affected by the new model and the Organisational Change Process (OCP) commenced on 13/06/2022. The revenue financial plan for the AMSR has been profiler over a three-year programme: Year 1 (2022/23) – in year cost of £4m of which £3m will be offset through redirected Covid monies 		nging for ent of on the inary anges ton medical batient leath Port ment of capacity rnative d up. eton, e affected e Process en profiled which

	 A further £0.363m was allocated for project support bringing the net impact in-year to £1.36m. Year 2 (2023/24) – an in year cost of £2.967m based on assumption of 90 beds at Singleton Hospital until October 2023. Year 3 (2024/25 and recurrent) – revenue savings of £0.5m will be released. 			
Specific Action	Information	Discussion	Assurance	Approval
Required	\boxtimes			
(please choose one				
only)				
Recommendations	Members are asked to:			
	 NOTE the enclosed AMSR Business Case and the associated service change, workforce, finance and governance implications. 			

AMSR BUSINESS CASE

1. INTRODUCTION

Acute Medical Services Redesign (AMSR) Business Case was approved at an extraordinary Management Board meeting on 23/05/2022. This report summarises the main components of the case. Full Business Case has been included as Appendix A.

2. BACKGROUND

AMSR programme is a key foundation of the Health Board's wider 'Changing for the Future' plans, particularly focusing on the evolution of Morriston, Singleton and Neath Port Talbot hospitals to become individual 'Centres of Excellence'. The Business Case addresses the centralisation of acute medical services on Morriston hospital site and the centralisation of rehabilitation services on Neath Port Talbot hospital site. In addition, the case includes temporary (until October 2023) establishment of 90 beds on Singleton hospital site as an additional capacity for Clinically Optimised Patients (COPs).

The main principles of the AMSR Programme are detailed on pages 5 and 6 of the enclosed business case.

Detailed demand and capacity and workforce modelling has been undertaken and is included in Section 5 (page 16) and Section 6 (page 18) of the enclosed business case.

It is estimated that circa 1700 staff across Singleton, Morriston and Neath Port Talbot hospitals will be affected by the new model at a various degree and the Organisational Change Process (OCP) commenced on 13/06/2022. It has to be noted that the Business Case details additional investment required in workforce so there is no threat of redundancies as part of the OCP.

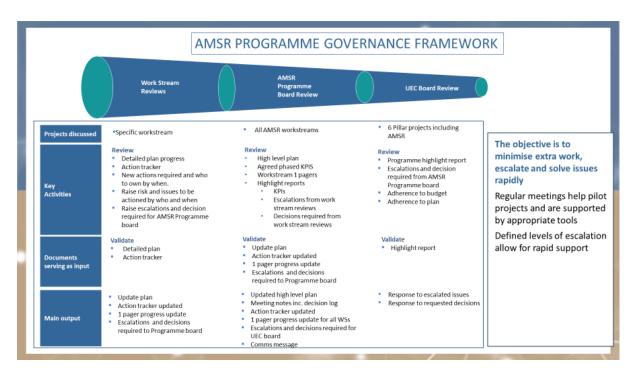
There are a number of benefits anticipated from the implementation of the AMSR programme. These are detailed in Section 8 (page 28).

3. GOVERNANCE AND RISK ISSUES

There are a number of risks identified associated with the programme which have been escalated through the programme's governance structure for active management and further mitigation. These are detailed in Section 9 (page 29).

The implementation of the programme will be managed via AMSR Programme Board with seven specific work streams reporting into the Programme Board which then in turn reports into Urgent and Emergency Care Board chaired by the COO. The Governance Framework is pictorially illustrated on the next page.

Given the complex nature of the AMSR programme and the risks highlighted, the programme will be kept under constant review as a standing item on the Management Board agenda going forward. In addition, there will be formal 'go/no go' decisions made through gateway reviews at defined intervals. Central to the 'go/no go' decisions will be length of stay performance and sufficient workforce resource to deliver the new service models.



4. FINANCIAL IMPLICATIONS

The revenue financial plan for the AMSR has been profiled over three years:

- Year 1 (2022/23) in year cost of £4m of which £3mwill be offset through redirected covid monies. A further £0.363m was allocated for project support bringing the net impact in-year to £1.36m.
- Year 2 (2023/24) an in year cost of £2.967m based on assumption of 90 beds at Singleton Hospital until October 2023.
- Year 3 (2024/25 and recurrent) revenue savings of £0.5m will be released.

Full financial implications are outlined in Section 7 (page 25) of the enclosed Business Case.

5. RECOMMENDATION

The Committee is asked to NOTE the enclosed AMSR Business Case and the associated service change, workforce, finance and governance implications.

Governance and Assurance					
Link to	Supporting better health and wellbeing by actively	promoting and			
Enabling Objectives (please choose)	empowering people to live well in resilient communities				
	Partnerships for Improving Health and Wellbeing				
	Co-Production and Health Literacy				
	Digitally Enabled Health and Wellbeing Deliver better care through excellent health and care services achieving the				
	outcomes that matter most to people				
	Best Value Outcomes and High Quality Care	\boxtimes			
	Partnerships for Care	\square			
	Excellent Staff	\square			
	Digitally Enabled Care				
	Outstanding Research, Innovation, Education and Learning				
Health and Ca					
(please choose)	Staying Healthy	\square			
	Safe Care	\boxtimes			
	Effective Care	\boxtimes			
	Dignified Care	\square			
	Timely Care	\boxtimes			
	Individual Care	\boxtimes			
	Staff and Resources	\boxtimes			
Quality, Safety	y and Patient Experience				
AMSR programme is a key foundation of the Health Board's wider 'Changing for the					
Future' plans. ' issues:	Changing for the Future' seeks to address several long	standing			
Significant local health inequalities					
 Numerically larger and ageing population with consequential impacts on 					
health and social care resources					
 Health problems arising from poor lifestyle choices 					
 Prevalence of long term illness 					
	MSR is focused on admission avoidance, extending serv	vice provision			
	reduce variability and timely discharges to most approp				
	e episode has been concluded. This will improve patien				
	es and care safety.	n oxpononoo,			
Financial Imp	lications				
	nancial plan for the AMSR has been profiled over three	vears:			
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 Year 1 (2022/23) – in year cost of £4m of which £3mwill be offset through redirected covid monies. A further £0.363m was allocated for project support 					
	the net impact in-year to £1.36m.				
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	2023/24) – an in year cost of £2.967m based on assum Singleton Hospital until October 2023.				
	Singleton Hospital until October 2023.	h a nala a a al			

• Year 3 (2024/25 and recurrent) - revenue savings of £0.5m will be released.

Legal Implications (including equality and diversity assessment) This is a CHC approved service change Staffing Implications

It is estimated that circa 1700 staff across Singleton, Morriston and Neath Port Talbot hospitals will be affected by the new model at a various degree and the Organisational Change Process (OCP) commenced on 13/06/2022.

It has to be noted that the Business Case details additional investment required in workforce so there is no threat of redundancies as part of the OCP.

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)

- **Long Term** AMSR is part of the Health Board's longer term strategy and development of designated centres of excellence on hospital sites.
- Prevention Focus on admission avoidance and timely discharges will avoid patients decompensating due to unnecessarily prolonged hospital stays. This is particularly pertinent to older and frail patient cohort.
- Integration the new models of care will require multidisciplinary input from health and social care
- **Collaboration –** The project mandates close collaboration with our WAST and Local Authority colleagues.
- **Involvement** The 'Changing for the Future' strategy has been through extensive public engagement process and is a CHC approved service change.

Report History	AMSR is a key part of the wider 'Changing for the Future' plans and is a CHC approved service change.
Appendices	Appendix 1 – Full AMSR Business Case