

# Briefing

Update on

**Emergency General Surgery Services**

**at South West Acute Hospital**



## What is General Surgery?

- **General Surgery** is a wide-ranging surgical specialty that focuses on diseases of the alimentary (digestive) tract. Over the years more sub-specialism has developed across general surgery for example: colorectal surgery, upper and lower gastrointestinal surgery.
- **Emergency general surgery** relates to the treatment of patients presenting with acute abdominal pain, infections, bleeding, trauma. In children, the most frequently performed emergency surgeries are appendicectomy, testicular conditions.
- **Elective general surgery** means surgery that is planned in advance, as opposed to emergency or unplanned treatment.



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# General Surgery Services SWAH

- **Context**

- Funded 6.5 Consultants
- Funded 8 Middle Grades
- FY1/ FY2 / ST Doctors

**21<sup>st</sup> June 2018 – CE / Director meeting requested by Clinical Lead SWAH GS**

- Outlined issues regarding provision of a compliant rota
- Issues with retaining locum staff with appropriate skills / competence to provide a safe service
- Recruitment June 18 yielded no surgical applicant with endoscopy skills

**12<sup>th</sup> August 2020 – escalation to DOH – rota unsafe and not sustainable**

- Early Alert submitted by Dr Kilgallen to HSCB / DOH – 28<sup>th</sup> August 2020
- Regional summit 29<sup>th</sup> September 2020 for Regional solution to support SWAH emergency GS rota
- Current consultant rota covered until 18<sup>th</sup> December 2022



# Recruitment

- 6 rounds of recruitment – 2014-2021                      5 Consultant appointments
- February 2019 to date –                                      6 Consultants left (3 retired, 3 resigned)
- July 2021 round delayed due to RCS approval issues
- Completed January 2022 –                                  no appointments
- Current recruitment: Generic Western Trust JD –    closing date 18<sup>th</sup> November 2022



## Non elective General Surgery Admissions

**Ave GS  
admissions  
(2017/18 –  
June 22)**

Non elective patients	16 Years & Above	Under 16 Years	Total
Annual average 17/18- june 2022	1573	178	1752
Per Day	4.3	0.5	4.8

**Ave GS  
admissions  
(2019/20 –  
pre-pandemic  
baseline year)**

Non elective patients	16 Years & Above	Under 16 Years	Total
19/20			
Per Day	4.9	0.5	5.4



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## Current position

- The current position is that out of the 6.5 permanent consultant General Surgeon posts required to deliver the general surgery service in SWAH, there are 3 substantive consultants currently in post. The latest position for those 3 post holders is set out below:
  - A resignation received on Monday 3 October 2022 from one substantive consultant who will leave the Trust on 18<sup>th</sup> December 2022
  - Notice of a period of absence from another substantive consultant who, following a risk assessment, can work only on a green pathway from 21<sup>st</sup> November 2022
  - A resignation received on 8<sup>th</sup> November 2022 from a further substantive consultant who will leave the Trust on 3<sup>rd</sup> February 2023. This was notified to Department of Health via an update to the early alert (EA 22-21) 11<sup>th</sup> November 2022
  - A **temporary emergency change** is required as emergency general surgery admissions to SWAH will need to temporarily cease from 4<sup>th</sup> December 2022.



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## Patient pathways and Bypass Protocols

- **Trauma patients:** A patient pathway is agreed which will see some trauma patients being managed in SWAH. Specific criteria have been agreed with the regional trauma network, NIAS and SWAH Emergency Dept. colleagues and will continue to be reassessed on a weekly basis with NIAS.
- Travel times to Sligo University Hospital can be less, depending on where a trauma call originates for NIAS. Initial discussions have taken place and final arrangements can now be progressed given that SWAH criteria have now been agreed for management of trauma patients.
- SWAH Emergency Department Doctors will have the option to refer to a Middle Grade Surgical Doctor on site between the hours of 09:00- 17:00, Monday- Friday. The Trust will continue to develop ambulatory surgical services alongside its contingency arrangements.
- **Abdominal Pain:** This pathway will ensure that patients who self-present to the ED department will continue to be assessed and managed with inter-hospital transfer as required. Some patients who present to NIAS with abdominal pain will be bypassed to Altnagelvin or Craigavon Hospital based on agreed criteria.
- **Upper GI Bleeding:** Patients with active upper GI bleeding will be bypassed to Altnagelvin Hospital or to Craigavon Hospital.



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## Patient Pathways and Bypass Protocols

- **Children with a head injury:** These patients will be admitted to SWAH and managed on an inpatient basis by the Paediatric team at SWAH.
- **Acute scrotal or hernia pain** – Patients with acute scrotal or hernia pain should bypass SWAH with the exception of those aged 5 and under who should transfer to Sick Children’s at Royal Victoria Hospital, Belfast.
- **Colorectal surgery:** All patients requiring colorectal surgery during the period of the temporary change to services will have their surgery on the Altnagelvin site.
- **GP Referrals:** Patients who have been assessed by a GP and would normally have been referred to a general surgical team at SWAH should refer to one of the ambulatory services. Presentations include appendicitis, cholecystitis and abdominal pain with vomiting and abdominal distension who are not critically unwell





## Services NOT affected

- SWAH status as an Acute Hospital WILL NOT change
- Obstetric and gynaecology service are not affected
- Acute Medical / Care of Elderly specialties / services are not affected
- Out patient services including general surgery OP are not affected
- Elective surgery is not affected
- Critical Care / ICU are not affected
- Emergency Department will continue to receive and treat more than 90% of current attendances
- Paediatrics and Cardiology services will continue



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## Approval and Consultation

- DoH Circular “Change or Withdrawal of Services” is engaged
- For proposals which are major and/or controversial, Departmental support should be sought through SPPG/PHA
- Provides for situations when temporary changes are necessary “to protect public health and/or safety”
- Foresees situations when consultation will take place following an event of a temporary change
- Consultation document and proposed consultation approach in preparation

## Trust Mitigating Actions

- **Engagement with Royal College Obstetricians and Gynaecologists (RCOG)**
  - Advice taken from RCOG local representative on contingency mitigation options.
- **Engagement with Emergency and Medical Clinicians on site re support required**
  - Progression and development of SWAH as an Elective Overnight Stay Centre
- Trust has received a letter of Policy intent (DoH 15<sup>th</sup> November 2022) that SWAH will be an Elective Overnight Stay Centre.
  
- **Ambulatory Surgical Assessment (SAA)**
  - **Altnagelvin commenced on Monday 21 November 2022.** This will offer direct access to a senior doctor/ Consultant initially by phone for advice, same day or booked assessment (Monday to Friday 9am -5pm).
  - **SWAH will commence on Monday 12 December 2022.** This will offer direct access to a Middle Grade Doctor initially via switchboard at SWAH for advice, same day or booked assessment (Monday to Friday 9am-5pm).
- This will be available to GP's and ED Consultants across the Trust.
  
- **Discharge Area** - from 14 December there will be a discharge lounge to support early discharge and facilitate earlier access to an inpatient bed.
- There will be 'ring fenced' beds in Ward 31 to facilitate inter-hospital transfer.



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## Next Steps

- Robust Communication Plan to:
  - Staff
  - Public Representatives
  - Media
  - population of Fermanagh and West Tyrone
- Progress plans for public consultation
- Immediate preparation to progress DoH policy intent that SWAH will be a Regional Elective Overnight Stay Centre (DoH Letter 15<sup>th</sup> Nov 2022)