

2015 Updated FAQs

1. Why do things need to change?

There are many reasons why some of the hospital services available in Worcestershire at the moment need to change. One of the reasons is that there is national evidence saying that certain services can be provided to a higher standard and more safely if they are in one location. There's also a lack of doctors specialising in certain services which means that it's difficult to provide a high quality service in different locations 24 hours a day and seven days a week. We also need to ensure that we can provide the best possible outcomes for all of our patients into the future, which is becoming increasingly challenging as people are living longer and are experiencing more long-term conditions.

2. Is the Alexandra Hospital in Redditch going to close?

No. The proposals affect only a small number of services and a small number of patients. The majority of services currently available at the Alexandra Hospital would not be changed.

3. Is the Alexandra A&E going to close

No. Under our proposals it would stay open and 93% of the people who currently use it will still be able to use the A&E but it will become an adult-only emergency department. Children would still be seen in the minor injuries and urgent care part of A&E

4. Which services would be affected by the proposals?

The main services affected would be:

- Maternity
- Paediatrics or children's services
- Accident and Emergency

Most other services would continue to be available as they are now. There would be no change to any outpatient or diagnostic service.

5. How would the proposals affect maternity services?

The independent panel of expert clinicians recommended that:

A centre of excellence is established for consultant-led maternity services at Worcestershire Royal Hospital (WRH) – this means that women with higher-risk pregnancies who live in Redditch and surrounding areas would no longer be able to have their baby at the Alexandra Hospital. They would be able to choose to give birth at any hospital with a consultant-led maternity unit

A stand alone midwifery-led unit in the north of the county should be considered as a way of providing maternity care closer to home for women with low-risk pregnancies.

If the proposals are agreed, significant work then needs to be done to ensure that any service changes do not compromise quality or patient safety. In the case of maternity services, this would include ensuring that there is enough room at Worcestershire Royal Hospital, and other surrounding hospitals, to cater for the number of women from Redditch and surrounding areas giving birth.

Women would only have to go to the Worcestershire Royal, or another hospital with a consultant-led birth unit, for the actual delivery of their baby. All ante and post natal care will continue at the Alex as now and it is proposed that the hospital should have a seven-day assessment and daycase unit for pregnant women.

6. How would the proposals affect children's services?

The majority of children would still be treated by doctors in a paediatric assessment unit at the Alexandra Hospital, as they are now, during the day. The only change would be for the small number of children needing to stay in hospital overnight who would be transferred to the Worcestershire Royal Hospital. Very specialist treatment for children would still be delivered in specialist children's hospitals outside the county as it is now.

7. How would the proposals affect accident and emergency services?

93% of the people who currently use the A&E at the Alex would continue to do so under our proposals. There would still be accident and emergency units at both the Alexandra and Worcestershire Royal hospitals. A 24/7 emergency centre for adults, a 24/7 GP-led urgent care centre and a nurse-led minor injuries unit at the Alexandra Hospital would deal with 93% of cases that the unit deals with now, including broken limbs, falls etc. A small number of patients suffering from a major emergency, like a road traffic accident, would be transferred to a trauma unit at the Worcestershire Royal. The most complex emergency cases, where patients have multiple injuries, would be transferred to specialist trauma units outside the county as they are now.

8. How would the proposals affect planned surgery?

Different types of planned surgery would be delivered at different hospitals and centres of excellence would be developed at both the Alexandra and Worcestershire Royal hospital sites. Planned surgery for orthopaedics, urology (including urological cancer) and benign laparoscopic Upper GI surgery would be delivered in Redditch and colorectal surgery, reconstructive breast surgery, vascular surgery and head and neck cancer surgery would be delivered in Worcester.

9. How would the proposals affect orthopaedic services?

The proposal is for the Alexandra Hospital to become a centre of excellence for orthopaedics for the whole county. Outpatient orthopaedic services would still be available in all of the same locations as currently. The number and range of daycase or short-stay orthopaedic operations at Kidderminster would also increase.

10. How would the proposals affect urology services?

Specialist urology services for patients who need to stay in hospital would be provided at the Alexandra Hospital as they are now. Outpatient services would be provided in the same local hospitals as they are now

11. Why has the process taken so long?

It is important that we find the best solution for all patients in Worcestershire. All options needed to be evaluated in detail and this has taken some time. National medical guidance and the needs of patients are also constantly changing and we have needed to review and update our proposals to take this into account. We don't want to rush to find a solution for the sake of doing things quickly which will not meet the needs of our patients or provide the best quality service in the long term. We also have to follow the process which is set out by NHS England.

12. Will the public have a chance to be involved in the process?

Yes, once the options have been developed in detail, these will be put forward to the public and patients as part of a public consultation process. We do not have a date for this yet, but when it is confirmed, it will be advertised in the media and on this website. No decisions will be made without this public involvement.

13. How can I find out more about the proposals and the public consultation?

You will be able to find out the most up-to-date information on this website. The dates of any events we are running as part of the public consultation will be advertised here. We will also promote these events and let you know how you can give us your views in the local media and through voluntary sector groups and other organisations.

14. How would the proposals affect head and neck cancer services?

The head and neck cancer service would continue to operate as it does currently. Our proposals help protect the future for head and neck cancer services in the county.

15. How would the proposals affect vascular and interventional radiography services?

The vascular and interventional radiology service would continue to operate as it does currently. Our proposals help protect the future for vascular and interventional radiology services in the county.

16. Would the proposed changes affect services at Kidderminster Hospital?

The proposed changes would strengthen Kidderminster Hospital's future. They would develop the number of planned operations the hospital can deliver.

17. What's being done to improve public transport between hospital sites?

The three CCGs are committed to working with Worcestershire County Council on public transport as we realise how important it is for staff, patients and visitors to be able to travel to

each hospital site. We have set up a transport group to look at options for improving travel between the three hospital sites.

18. What services would stay the same?

The vast majority of services would stay the same. There would be some changes to maternity services, children's services and A&E. There would also be some changes to other services – for instance, orthopaedics, which would largely be delivered at the Alexandra Hospital.

19. How would the Worcestershire Royal Hospital cope with more patients?

No services would move until we were sure that the Worcestershire Royal Hospital would be able to cope with an increase in patients in certain services. In order to create capacity for services which would be moving to Worcester, some services which are currently being provided at the Worcestershire Royal would move to Kidderminster or Redditch.

20. Will something be done about the parking at Worcestershire Royal?

Yes. Worcestershire Acute Hospitals NHS Trust is aware it needs to improve its car parking and has already submitted plans for additional spaces.

21. Are you moving paediatrics from the Alex?

No. The majority of services for children will remain at the Alex. Only children who need to stay in hospital overnight will have to be treated at the Worcestershire Royal Hospital.

22. Are you moving maternity services from the Alex?

No. The majority of care for mums-to-be would remain at the Alex. The only change would be for the actual birth itself. Women who want or need a consultant-led birth would have to deliver their babies at the Worcestershire Royal or another hospital which provided consultant-led births. We will be consulting on whether there should be a midwife-led birth centre in the north of the county and women can also choose to give birth at home.

23. What services remain at the Alex?

Almost everything, except services for children who need to stay overnight in hospital and the delivery of babies overseen by a consultant