APPENDIX 3a – Draft Balance of Services

Potential Solution - Essential Service Change

The services that are required to be on the emergency site to ensure that services are clinically safe and resolve workforce issues

Emergency and Acute: 59 %

Both sites

Acute and Planned: 41 %

Emergency Department Critical Care Unit (HDU, ITU)

Inpatients

(427 inpatient beds)

Services listed in 'both sites' box

+

W&C

Children's ward Maternity wards

Neonates (not in IP beds)

Gynaecology

Acute Stroke Unit

Cardiology

Coronary Care Unit (CCU)

Acute Elderly Care

Urology

(Hot site provision for on-going discussion)

Urgent Care Centre

Children's Assessment Unit (CAU)

Outpatients

Diagnostics

Day Case Renal Unit

Endoscopy

Ambulatory Emergency Care (AEC)

Inpatients

Clinical Decision Unit (CDU)

Short-Stay

Endoscopy

Colorectal Surgery

Orthopaedics

General Surgery

Head & Neck

General Medicine/ Nephrology

Gastroenterology

Respiratory Medicine

Endocrinology

Oncology & Haematology

Planned Discharge

Day Case Cancer Services (to remain as current provision on each site)

(Both site provision for on-going discussion)

DTC
General Surgery
Colorectal
Upper GI
General Medicine
Oral Surgery

ENT Orthopaedics Plastic surgery

<u>Inpatients</u> (302 inpatient beds)

Services listed in 'both sites' box

Breast Service Rehabilitation

(Warm site provision for on-going discussion)

N.B % split is based on IP bed base and excludes Critical Care and Neonatology