## Fit for the Future

# **Planned General Surgery**

The consultation included two options for Planned Lower GI (colorectal) General Surgery, either as part of a General Surgery centre of excellence at GRH or as part of a centre of excellence for Pelvic Resection at CGH. On Thursday 4th February, the Trust Leadership Team (TLT) at Gloucestershire Hospitals NHS Foundation Trust explored in detail the configuration options against six domains: Quality of Care; Access to Care; Deliverability; Workforce; Strategic Fit and Acceptability.

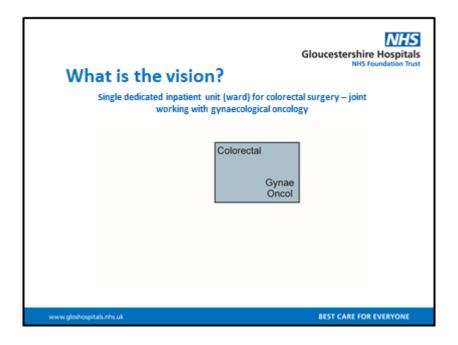
The discussion benefited from presentations followed by a question and answer session, with clinical leads from the multi-disciplinary General Surgery team. Both proposals had better outcomes for patients at their heart and many benefits. However, it was evident as a result of the debate that there was an alternative, potentially even better option, that includes the best elements from the two options presented and notably the opportunity to deliver more planned elective surgery at CGH than either of the two options consulted on. This opportunity to treat more patients in a centre of excellence for planned surgical care was also something that came through the consultation feedback (with over 40 references to increasing planned care at CGH) from both public contributors and staff.

The recommendation was that further work should begin with the General Surgery team to define this new, emerging option. The focus will be to explore the opportunity to deliver:

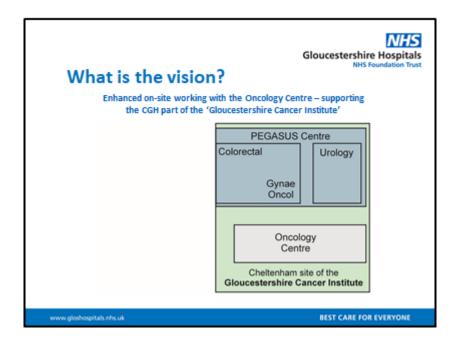
- Planned "High Risk" Upper Gastrointestinal (GI) and Lower Gastrointestinal (Colorectal) surgery at Gloucestershire Royal Hospital
- Planned complex and routine inpatient and day case surgery in both Upper and Lower GI (Colorectal) at Cheltenham General Hospital

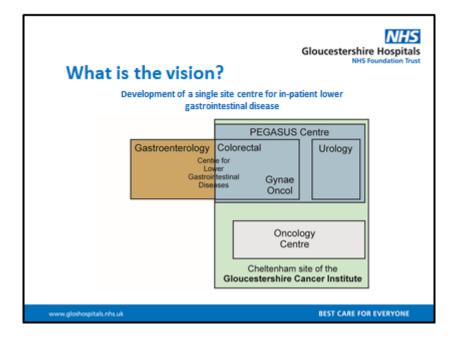
The General Surgery team will now work together to define 'high risk' and it is important to note that risk doesn't equal complexity. A complex operation on an otherwise fit and well patient could be categorised as 'low risk' where as a relatively routine operation on a patient with other underlying health conditions could be categorised as 'high risk'. Copies of the two presentations are provided overleaf.

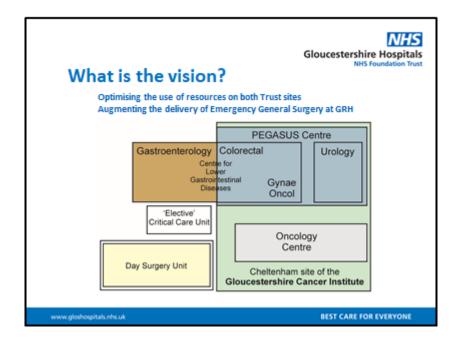




What is the vision?	Gloucestershire Hospitals NHS Foundation Trust
Development of a flagship centre of lower abdominal and pelvic surgery - 'PeGasUs Centre'	
PEGASUS Colorectal Gynae Oncol	Centre Urology
www.gloshospitals.nhs.uk	BEST CARE FOR EVERYONE



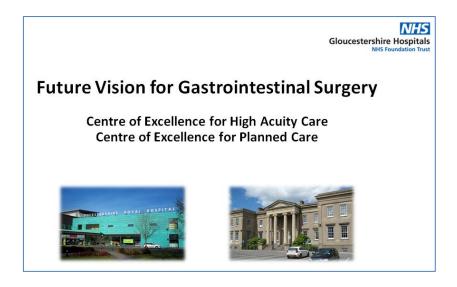




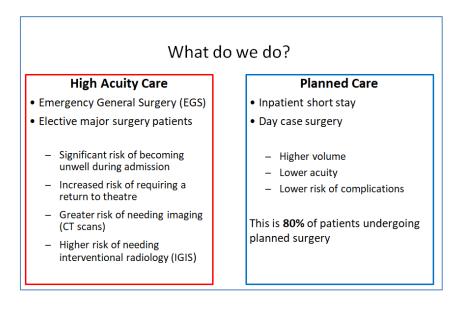














# Our Future Department of Gastrointestinal Surgery

Centre of Excellence for High Acuity Care

Elective major surgery OG cancer CR cancer IBD

> 10% return to theatre 1 every 10 or 11 days

Centre of Excellence for Planned Surgery

Inpatient short stay Weight loss surgery Rectal prolapse surgery Early rectal cancer

Day case patients Laparoscopic cholecystectomy Hernias Haemorrhoids/fistulas

Lower risk of complications

This represents **80%** of patients undergoing planned GI surgery

### Create the Environment

#### Centre of Excellence for High Acuity Care

- Dedicated SAU
- Dedicated ward for emergency admissions
- Separate dedicated elective major gastrointestinal surgery ward

#### Centre of Excellence for Planned Care

- Specialist unit with dedicated theatre for day case gastrointestinal surgery
- Dedicated ward for short stay gastrointestinal patients
- 5-day unit



## Allow our staff to flourish





 Improved well-being and resilience Redistribution of staff to improve workload Better work-life balance Not reliant on good-will

- Better supervision and training of medical staff
- Fantastic training environment Nursing, AHP, PAs



Career development and New Roles
ANPs, ERAS, nutrition team





