

Solihull Health Overview and Scrutiny Committee 09 November 2022

Update on the reprovision of a Minor Injuries Unit (MIU) at Solihull Hospital

Introduction

The purpose of this briefing is to provide high-level information to support the ongoing discussion around the current situation facing University Hospitals Birmingham NHS Foundation Trust (UHB) and NHS Birmingham and Solihull (ICB), with regards to the measures that are proposed to support the recovery of hospital services across Birmingham and Solihull. Specifically, this briefing pertains to the reprovision of a Minor Injuries Unit at Solihull Hospital.

Background context

The Minor Injuries Unit (MIU) at Solihull Hospital was temporarily closed in May 2020, to initially offset the impact of the pandemic and then to facilitate the creation of a 'green' elective site, in line with emergent national policy. This has enabled UHB to be able to offer patients their elective surgical procedures, as well as outpatients and diagnostic services throughout the course of the pandemic and the associated spikes in emergency hospital admissions.

Furthermore, and as reported to last month's (October) Joint Health Overview and Scrutiny Committee (JHOSC), UHB has received conditional approval from the Department of Health and Social Care (DHSC) and NHS England for £43m of capital investment to build six new theatres and associated services at Solihull Hospital in 2023. This is a key development, not just for the hospital, but also for the wider Birmingham and Solihull system in its efforts to deliver accelerated, sustainable recovery of services to patients.

University Hospitals Birmingham NHS Foundation Trust (UHB)

UHB is one of the largest NHS trusts in the UK, serving a regional, national, and international population. With multiple sites including Birmingham Chest Clinic, Heartlands Hospital, Good Hope Hospital, Queen Elizabeth Hospital Birmingham, and Solihull Hospital, as well as community and primary care services, more than 2.2 million patients are seen and treated at UHB every year.

The infographic below gives an overview of the scale of the Trust:



Reprovision of a Minor Injuries Unit (MIU) at Solihull Hospital

The strength of feeling in Solihull, regarding the urgent care services that are currently available to its residents, is fully recognised; there is a commitment to providing a service that better meets local people's needs.

As referenced above and as discussed at last month's JHOSC, Solihull Hospital continues to play a crucial role in being able to offer patients their elective surgical procedures, as well as outpatients and diagnostic services. There is a considerable waiting list for some surgical procedures and appointments, due to the unprecedented impact of COVID-19, so the capacity that Solihull Hospital provides is essential to help us treat as many patients from across our local health economy as possible, in a timely way.

UHB and the ICB have worked through four potential options for an MIU service, as part of a thorough options appraisal, which has now been considered through UHB's internal processes. The preferred option, of UHB and the ICB, is to re-provide an MIU on the Solihull Hospital site, in line with the national service specification. It is proposed that the reprovided MIU will be situated where the current pre-operative assessment area is.

Other options that were considered and discounted include: the reinstatement of the MIU in its previous location on the hospital site; building a new facility on the hospital site; and creating a brand new facility off-site. All options were assessed against the following factors and weighted (in order): time required to reprovide the MIU service; disruption to other clinical services on the site; clinical adjacencies; value for money; and alignment with local and national strategy. A strengths, weaknesses, opportunities and threats (SWOT) analysis was also carried out.

Prior to the temporary closure of the MIU, an average of 3,500 patients attended per month. Following the closure of the Solihull MIU, the majority of this activity (approximately 80%), was transferred to Heartlands Hospital's Emergency Department. People presented at the MIU with a 50/50 split of minor illnesses and minor injuries. Historically, Solihull MIU performed well in terms of waiting times and patient satisfaction. It is anticipated that the proposed reintroduction of the MIU would support with reducing attendances at other UHB, and neighbouring areas, emergency departments with minor illnesses and injuries.

Activity modelling has been undertaken to predict demand throughout the duration of the day for the MIU at Solihull. Based on this data, it is proposed that the MIU would operate between 08:00 and 22:00 hours, seven days per week. MIU patients would be able to walk in, without an appointment. The MIU would see and treat adults and children.

Examples of conditions treated at a MIU

MIUs are nationally classified as type three departments and treat injuries that are not critical or life-threatening, such as:

- Cuts and wounds
- Sprains and strains
- Broken bones
- Wound infections
- Minor burns and scalds
- Minor head injuries
- Insect and animal bites
- Minor eye injuries
- Injuries to the back, shoulder and chest
- Removal of foreign bodies from eyes, nose or ears

As with other 'type three' MIUs, patients with more serious conditions would need to be seen and treated at a nearby 'type one' emergency department (e.g. Heartlands, Queen Elizabeth, Warwick, Good Hope hospitals).

Point of care blood testing and plain film x-ray would be available, in line with the national service specification for MIUs. The proposed location for the MIU is adjacent to the imaging department. It is anticipated, subject to approval, that the MIU could be operational within six months. This includes estates work and recruitment.

The MIU would be led by emergency nurse practitioners, supported by other clinical and non-clinical support staff. Subject to approval of this proposal, a recruitment campaign will be undertaken to recruit additional emergency nurse practitioners, radiographers and other staff.

UHB is collaborating with the ICB regarding the reinstatement of an urgent treatment centre (UTC), which would be led by GPs, for patients with urgent primary care concerns. This would be potentially co-located in the MIU on the Solihull Hospital site.

Communications and engagement

Communicating and engaging with local people and stakeholders is important for us and is a real opportunity for us to understand the thoughts and experiences of the people that we provide services for, understand and help improve the issues and health inequalities that exist in our respective areas, as well as raising awareness of important issues.

We are proposing a pragmatic approach to communicating our plans; balancing meaningful communication with identified and prioritised audiences and our desire to bring positive change for our patients and citizens, as quickly and as safely as we can.

This approach was proposed and approved at the JHOSC in October and the communications and engagement plan has since been shared with the committee, and is also attached as an appendix to this report.

Engagement with the West Midlands Clinical Senate and NHS England's regional office has already started and will progress in line with the development of the above proposal.

Conclusion

Over the last two years UHB and BSOL ICS, with support from local elected members and other key stakeholders, have had to make a series of difficult, short-medium term decisions. These were made in order to manage the impact of the global pandemic, recover our services by prioritising those in most clinical need, as well managing the 'front doors' and protecting as many planned procedures as we could.

We now have an opportunity, with your support, to reinstate a MIU on the Solihull Hospital site to reprovide a quality service for the people of Solihull and the surrounding area.