



Changes to stroke services

Public document

- City Hospital • Sandwell Hospital • Rowley Regis Hospital
- Midland Metropolitan University Hospital • Community services
- The Birmingham and Midland Eye Centre • Leasowes Intermediate Care Centre

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Welcome and thank you

Thank you for taking the time to read the information in this document and for completing the attached survey. It is important to us that we inform and involve our patients and the people who use our services in the design and delivery of them. We want to hear from you about our plans to improve stroke service across our Trust. This document sets out what our stroke service looks like now and how, with your help, it will look in the future.

Our aim is to continuously improve the number of patients who survive a stroke and to enable them to live with less disability.

We will also take the opportunity to tell you a little bit more about your new acute hospital, the Midland Metropolitan University Hospital, which opens in Smethwick next year.



Sir David Nicholson KCB CBE, Chairman

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Richard Beeken, Chief Executive Officer

A handwritten signature in black ink, appearing to be 'Richard Beeken'.



Midland Metropolitan University Hospital

Midland Metropolitan University Hospital, or Midland Met as it's affectionately known, is our new hospital in Smethwick. It is currently under construction and will be a significant hospital within Birmingham and the Black Country.

Midland Met will be the largest acute healthcare facility within our Trust.

Our new hospital will bring together all critical and emergency care services that currently take place at City and Sandwell Hospitals. This change means that the hospitals will combine forces to serve patients that are extremely unwell and need a hospital stay; or whose care is an emergency.

These are just some of the benefits our new hospital will bring:

The wards and rooms centre on patient wellbeing. All bedrooms have an external view onto one of the courtyards or surrounding areas of the hospital.



It will be home to 11 emergency, trauma and elective inpatient operating theatres, maternity theatres and 15 birthing rooms for maternity services.



State-of-the-art equipment, including items we have fundraised for above and beyond NHS standard, will support faster diagnosis and improve patient outcomes.



Designed in collaboration with clinicians and patients, you'll get the same level of care around the clock daily.



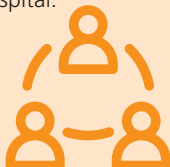
A boost to the local economy with 600 people, including local tradespeople, already working on the project.



The hospital will help to regenerate the immediate local area with our fundraising campaign supporting community gardens, outdoor spaces and an arts programme for residents.



Patients who need to stay in the hospital will move around the site via separate corridors and lifts. It means patients will have privacy while moving around the hospital.





Improving stroke services

The purpose of this document is to outline the proposed changes to the stroke service at Sandwell and West Birmingham NHS Trust as part of the opening of Midland Metropolitan University Hospital next year.

From next year, there will be three strands of stroke care:

- For those who need inpatient medical treatment, care will be delivered at Midland Metropolitan University Hospital. This will include rehabilitation where it is suitable for the person.
- When the person's medical condition is stable enough for them to leave the acute hospital, we will aim to continue their

care and rehabilitation in their own home. To do this, we have expanded our previous home-based rehabilitation team in Sandwell, which is now known as our Integrated Community Stroke Service (ICSS).

- If it is not possible to meet the person's rehabilitation needs in their own home at that time, for example, if they require specialist equipment which is not suitable for the home environment, inpatient rehabilitation will be offered. The proposal is for this to be located at our Rowley Regis Hospital site. This is the Trust's preferred option as outlined below.



It is important to note that in all three cases, care will be tailored to the individual and the setting will have no impact on the quality or frequency of the care that each person receives. In all settings care will be delivered in line with national clinical guidance.

Improving stroke services

Why are we making these changes?

Following public consultation in 2007, the conclusion was that our new hospital would provide acute and emergency care for residents in the area. This means that patients will have access to specialist teams, diagnostics, and facilities to help them be diagnosed and treated quicker and in line with the latest national guidelines.

By implementing this change, stroke services would need to operate on two separate sites by separating the acute service from the rehabilitation service.

In redesigning these services, it is a fantastic opportunity to offer patients rehabilitation in their usual place of residence, in line with the national stroke service model.

Clinical evidence shows that patients who receive rehabilitation in their home have successful recovery outcomes. It also brings the service in line with the “home first” ethos that our Trust promotes which improves patient choice to rehabilitate at home if needs can be supported.



How will the service change?

Location of services

Current provision:

There are two wards at Sandwell General Hospital, one of which provides acute medical care (and rehabilitation if suitable), the other is our inpatient rehabilitation unit.

Acute stroke care and rehabilitation at home

Future provision:

Acute stroke care will be delivered at Midland Metropolitan University Hospital. This includes rehabilitation if suitable.

Home based rehabilitation will be arranged upon discharge.

Where home based rehabilitation is not possible, inpatient rehabilitation will be offered at Rowley Regis Hospital. Length of stay will be dependent on the individual and their goals and will focus on recovery to enable their return home, where further home based rehabilitation can be arranged.

Rehabilitation at home

Current provision:

The early supported discharge team review and treat patients within 24 hours of discharge from hospital.

They provide therapy for up to six weeks designed around the person's individual needs.

People within this service typically require one or two sessions per week and self management.

This service provides therapy services for those requiring one clinical member of staff per visit.

Integrated community stroke service

Future provision:

A new integrated community stroke service will provide home based stroke rehabilitation through a specialist multi-disciplinary team, seven days a week.

This includes our existing early supported discharge service alongside a more intensive rehabilitation and short term management of stroke complications, such as problems with positioning and spasticity.

This service is available for up to 12 weeks following discharge and may include daily visits from the team if required.

This service can deliver rehabilitation for patients who are in their place of residence and who are able to participate in rehabilitation, regardless of how much help they need to move.

How will the service change?

Medical provision

Current provision:

The same team of doctors work across two wards at Sandwell Hospital to provide medical care to inpatients on both the acute and rehabilitation wards.

Upon discharge home, care transfers to the person's GP.

A six week review will take place with the specialist hospital consultant.

Care at Midland Met and Rowley Regis Hospitals

Future provision:

A team of consultants and doctors will work at Midland Metropolitan University.

Upon discharge home, care will transfer to the person's GP.

A six week review will take place with the specialist hospital consultant.

If the person transfers to an inpatient rehabilitation ward, a seamless transfer of care to the medical team working at the inpatient stroke unit will be arranged.

At Rowley Regis Hospital, this unit is led by our team of GPs which will include a specialist consultant team to provide expert advice and support for your medical needs.

In addition, ward rounds will be completed by the Midland Metropolitan University Hospital consultant team twice per week.

The stroke specialist consultant team will provide expert advice and support for your medical needs.

TIA clinic

Current provision:

The Trust also offers services for those with suspected a transient ischaemic attack (TIA) sometimes known as a mini stroke.

Currently, our TIA clinic is held in outpatients at Sandwell General Hospital.

TIA clinic

Future provision:

This service will continue to exist as it does now. It may stay at Sandwell Treatment when the new hospital opens or move to the Birmingham Treatment Centre. This will form part of a future conversation with our patients and the people who care for them.

Stroke and TIA – The facts



What is a stroke?

A stroke occurs when the blood supply to part of the brain is cut off. This may be caused by a blood clot blocking an artery which goes to the brain. Alternatively, a blood vessel in or around the brain may burst causing bleeding or a haemorrhage.

Like all organs, the brain needs oxygen and nutrients provided by the blood to function properly. If the supply of blood is restricted or stopped, brain cells begin to die. This can lead to brain damage and possibly death.

The core damage cannot be stopped but the damage around the edge can be. That's why quick treatment is essential. The sooner a person receives treatment for a stroke, the less damage is likely to happen.

What is a TIA?

A transient ischaemic attack (TIA) is where the supply of blood to the brain is stopped for a short time, causing a mini stroke. The symptoms and signs appear the same as a stroke, but disappear within 24 hours and leave no lasting damage. However, TIAs should be treated seriously as they are often a warning sign that a stroke is coming.

A stroke is a serious medical condition which can have a major impact on people's lives. It starts as a medical emergency and can lead to reduced function and long term disability. Outcomes are improved by rapid treatment, early rehabilitation and proactive medical management.

Each year, 100,000 people across England have their first stroke, and 29 per cent of people go on to have further strokes within the first five years.

It is the single biggest cause of severe disability and the third most common cause of death in the UK.

Sandwell and West Birmingham NHS Trust treats approximately 800-900 stroke patients and 70-80 TIA patients every year.

Community-based services in Sandwell and West Birmingham

The specific team that delivers services in the community is dependent on both the residential address of the person and the GP service that they are registered with. Each GP service is part of a wider network, known as an Integrated Care Board, or ICB.

The table below shows which service would provide community stroke services for people living across Sandwell and West Birmingham, dependent on their residential address and GP.

Residential address	GP	Team who will deliver home-based services	Location for Inpatient Rehabilitation
Sandwell	Sandwell and West Birmingham	Integrated Community Stroke Service (ICSS) provided by Sandwell and West Birmingham Trust	Rowley Regis Hospital
West Birmingham	Sandwell and West Birmingham	Integrated Community Stroke Service (ICSS) provided by Sandwell and West Birmingham Trust	Rowley Regis Hospital
Other	Sandwell and West Birmingham	Integrated Community Stroke Service (ICSS) provided by Sandwell and West Birmingham Trust	Rowley Regis Hospital
Sandwell	Birmingham and Solihull	Provider - Birmingham Community Healthcare Foundation Trust (BCHC)	Rowley Regis Hospital
West Birmingham	Birmingham and Solihull	Provider - BCHC provided	Rowley Regis Hospital
Other	Birmingham and Solihull	Provider - BCHC provided service	Provider BCHC service – usually Moseley Hall Hospital

Where the person's community rehabilitation is provided by Birmingham Community Healthcare (BCHC), appropriate referrals will be made by the team at Midland Met or Rowley Regis Hospital and patients and their carers/relatives/friends will be kept informed throughout that process.

If a person who lives in Sandwell or West Birmingham has had their urgent stroke care at a different acute hospital, once they are stabilised, referrals will be taken to arrange transfer of their care back to Sandwell and West Birmingham services – either as an inpatient or to continue their rehabilitation at home.

Benefits of moving the stroke rehabilitation service to Rowley Regis Hospital

- The stroke rehabilitation beds will be located with our existing specialist rehabilitation beds at Rowley Regis Hospital, centralising our rehabilitation facilities and specialist staff. This means that the service is delivered by a larger team, including clinical leaders, who are onsite and can respond quickly to any difficulties that may arise.
- Our integrated community stroke services (ICSS) team are based at Rowley Regis Hospital, meaning that they are available to meet patients before they are discharged home, improving this transition for patients and their carers.
- Compared with arranging the same service at Sandwell Hospital site, the cost of delivering care at Rowley Regis Hospital will be reduced. This is because the larger workforce provides resilience to provide care in unexpected circumstances such as sickness, or unplanned leave. It also reduces travel for the workforce due to co-location. This means that there will be more clinical time available for patient care and reducing the impact on providing greener services where possible.
- Expansion of our specialist rehabilitation site is expected to improve our ability to recruit and retain staff, meaning the availability of highly skilled rehabilitation staff are available where needed.
- Releasing time for clinical care and attracting and retaining highly skilled staff will mean improved quality and safety of services and an improved patient experience.



Benefits for our patients:

Improving the quality and safety of our services through centralising our rehabilitation facilities will ensure that services have the right staff with the right skills in one area, to provide the right, specialist care for our patients.

Our integrated community stroke service (ICSS) would be on the same site as the rehabilitation facilities which means that you will get to meet the community team before you are discharged, improving the transition from hospital to home.

Benefits for our staff:

Expanding our specialist rehabilitation facilities may improve our ability to recruit and retain staff who are highly skilled in delivering rehabilitation. This will improve patient experience and quality and safety of the care we provide.

Benefits for our resources:

Delivering care at Rowley Regis Hospital, compared to Sandwell General Hospital, will reduce the cost required to deliver the service. This is due to being able to reduce travel costs and the need for additional staff as a result of the extra travel and a separate unit. This means that there will more clinical time available for clinical care.



How can I have my say?



By filling in the survey at this end of this document and returning it **FREEPOST to RRYC-KKSR-HHYA, Sandwell General Hospital, Communications Department, Trinity House, Lydon, West Bromwich, B71 4HJ.**



By completing the survey online at **www.swbh.nhs.uk**



By calling the team on **0121 507 2671.**



To request the information in alternative formats please contact us on 0121 507 2671.

We want to hear from as many local people as possible. If you are a member of a local group, organisation or a specific community and would like us to come along and talk to you, please email **swbh.engagement@nhs.net** or call us on 0121 507 2671.

The survey closes on Friday 12 January 2024.

Thank you for taking the time to read and respond to our proposed changes to stroke services.

Glossary of Terms

We understand that some of the language we use is very NHS focused. Below is a list of terms that we have used and what they mean.

Acute Hospital	A hospital that assesses an unwell patient and treats the initial problem. In stroke services this can be anything from 3 -14 days.
Diagnostics	Any investigations that require tests, for example brain scanning or blood tests.
Discharge	The point at which a person is medically well enough to no longer need treatment/care in a hospital setting and as such can return to their usual place of residence or an alternative pre-agreed residence.
Early Supported Discharge	This is a service that involves the transfer of a person to their usual place of residence to carry on their therapy in their own home as soon as they are medically well enough.
Multi-Disciplinary Team	This is a multi-professional team that cares for you whilst under NHS care and includes doctors, therapists and nurses as well as other professionals that you may need as part of your care.
Integrated Care Board	An integrated care board is a statutory NHS organisation which is responsible for developing a plan for meeting the health needs of the population, managing the NHS budget and arranging for the provision of health services in a geographical area.
Spasticity	This is a a tightness or stiffness with muscles following a stroke that prevents or reduces smooth, co-ordinated movement.
Transient Ischaemic Attack	A transient episode of neurologic dysfunction due to a clot which has the same symptoms as a stroke but lasts for a short period of time (maximum of 24 hours).
Rehabilitation	To optimise physical and cognitive function to improve independence in daily activities following a stroke or other illness.

Feedback Form – Tell us your views (please tick where appropriate)

1. Please tell us about you: (please tick where applicable)

- a. ☐ I am a patient / local resident
b. ☐ I am a carer or relative to someone who has used/using these services
c. ☐ I have an interest in the service
d. ☐ I work for/support a local voluntary and community sector organisation/group
e. ☐ I work for the Trust
f. ☐ Other, please say

2. How aware of the new hospital are you? (Please rank 1 to 5, where 1 is no awareness and 5 is fully aware)

1 - No awareness ☐ 2 ☐ 3 ☐ 4 ☐ 5 - Fully aware ☐

3. Do you understand why we want to make the changes?

Yes ☐ No ☐

If no, please tell us why and what we might do to assist you?

4. To what extent do you agree with the proposal to relocate stroke rehabilitation to Rowley Regis Hospital?

1 - Don't Agree ☐ 2 ☐ 3 ☐ 4 ☐ 5 - Fully agree ☐

5. If you have suffered a stroke in the past 18 months where did/do you currently go for your stroke rehabilitation?

6. When improving stroke services what matters to you?

7. If you would like to be kept informed and involved in how we develop stroke services, please let us know the best way to keep in touch with you. (Please select as many options as you wish).

Email ☐ In person ☐ Telephone ☐ Social media e.g. website, X, Instagram, TikTok ☐

Letter ☐ Local Newspaper ☐

Other (please specify)

I give my consent to receive information from the Trust ●

I do not give consent to receive information from the Trust. ●

The following questions will help us to understand more about who has responded to our survey. This information will help to ensure that we are reaching out and into our different communities and listening to everyone's views.

Please tell us your address

What is your ethnic background?

- ☐ White – British
☐ White – any other white background
☐ White – Irish
☐ Mixed – White/Black African
☐ Mixed – White/Black Caribbean
☐ Mixed – White/Asian
☐ Any other mixed background
☐ Black or Black British - Caribbean
☐ Black or Black British – African
☐ Any other Asian background
☐ Any other Black background
☐ Asian or Asian British - Indian
☐ Asian or Asian British – Bangladeshi
☐ Asian or British – Pakistani

Are you...

- ☐ Female
☐ Male
☐ Transgender
☐ Prefer not to say

Other (please specify)

Do you have a disability?

- ☐ Yes
☐ No
☐ Prefer not to say

About you

Email address

Contact Number

**Thank you for taking the time to complete our survey.
Your views matter to us.**

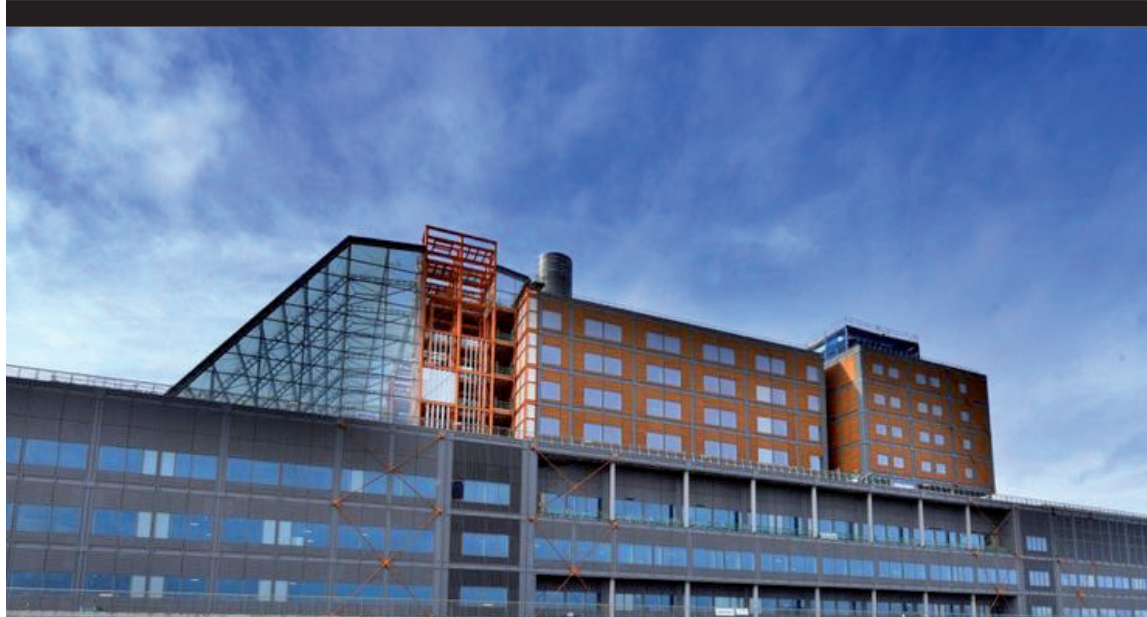
What is your religion/faith?

- ☐ Christianity
☐ Islam
☐ Buddhism
☐ Hinduism
☐ Judaism
☐ No religion
☐ Prefer not to say

Other (please specify)

Which of the following age categories do you fit into?

- ☐ 17 and under
☐ 18 -24
☐ 25 – 34
☐ 35 – 44
☐ 45 – 54
☐ 55 – 64
☐ 65 – 74
☐ 75 – 84
☐ 85 and over



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