

# Neighbouring health systems

## Dorset<sup>1</sup>

Services offered	Number of beds	Location	Number of Somerset patients per year
HASU	8	Royal Bournemouth Hospital	0
	5	Dorset County Hospital (DCH)	
ASU	28	Royal Bournemouth Hospital	0
	?	Poole Hospital	
	19 (inc neuro <sup>2</sup> )	Dorset County Hospital	
Thrombectomy		Southampton	
TIA	TIA Clinics	Mon – Fri: DCH, Poole and Salisbury W/Ends & BHs: Bournemouth, Poole or Salisbury	

Dorset County Hospital has a 24 bedded stroke ward, with beds that are used for HASU, ASU, neurology and medical outliers. A business case has been submitted to change 5 of the beds to an official nationally recognised HASU. There are no plans to combine the HASU beds at DCH and Royal Bournemouth Hospital onto a single site.

Dorset County Hospital currently receives no Somerset resident patients for acute stroke care. In 2021/22 they had 537 strokes admitted, which falls below the national target of 600 for a HASU.

<sup>1</sup> [Future of our stroke services in Dorset - YouTube](#)

<sup>2</sup> Information from Dorset County Hospital

### Bristol, North Somerset and South Gloucester (BNSSG)<sup>3</sup>

Services offered	Number of beds	Location	Number of Somerset patients per year
HASU	20 (proposed)	Southmead (proposed single HASU) Bristol Royal Infirmary Weston Hospital	198
ASU	22 (proposed)	Southmead (proposed ASU) Bristol Royal Infirmary Weston Hospital	
Thrombectomy		Southmead	
TIA		Southmead Bristol Royal Infirmary Weston Hospital	

BNSSG has been undergoing a stroke reconfiguration programme as part of the Healthier Together programme. The following plans have been approved in February 2022 and will be implemented by the end of the year.

The development of a single HASU at Southmead Hospital, providing 24/7 emergency treatment, with the development of an ASU located next to the HASU. This will significantly reduce transfers, enable people to be treated by a specialist team and improve patient experience.

A specialist stroke workforce will be retained at the Bristol Royal Infirmary to support people with specialist needs who cannot be transferred to the Southmead Hospital units.

This change will have an impact on the number of hyperacute strokes from the Sedgemoor area of Somerset, who would previously have been taken to Weston General Hospital for their care. These people will now be closer to Musgrove Park Hospital in Taunton, so ambulances would take them there.

The table below shows the predicted impact of this change on Somerset – with comparison between the modelling undertaken for the PCBC and the DMBC, as the figures are significantly different:

	PCBC 20/21 per week	DMBC 21/22 per week
<b>Diverts to Musgrove Park (strokes and mimics)</b>	0.6	3.8
<b>Somerset Thrombectomy transfers</b>	-0.5	-0.7
<b>Total impact of diverts and transfers on Musgrove Park</b>	+0.1	+3.1

<sup>3</sup> [Stroke services consultation - Healthier Together \(bnssghealthiertogether.org.uk\)](https://www.bnssghealthiertogether.org.uk)

Of which mimics:	40%	66%
Of which strokes:	60%	34%
<b>Revised position: Musgrove Park</b>		
Strokes		1.0
Mimics		2.0

Source: ORH ([Operational Research in Health](#))

Note that stroke diverts data relates to patients who have already been assessed at the scene. ORH have calculated thrombectomy transfers from modelling data.

The table above shows how the PCBC anticipated a minimal overall impact on Somerset from the proposed changes in BNSSG (change on +0.6 patients per week). The updated modelling used in the DMBC shows:

- The net number of patients that is expected to divert to Musgrove Park is expected to increase from 0.6 per week to 3.1 per week (of which 1.0 are strokes).
- Thrombectomy patients transferring from Somerset to Southmead is expected to rise to 0.7 patients per week which is included in the above.
- Of these, 2 patients per week will be stroke mimics
- 1 additional stroke patient will be diverted to Musgrove Park per week

The activity modelling within the DMBC is considered to be an upper estimate of activity as no allowance has been made for factors such as clinical decision-making by onsite responders.

Based on the revised figures arising from the BNSSG DMBC, there is an additional impact on Somerset of approximately 4 patients per week on average who will be conveyed to SFT and require specialist assessment, diagnostic and treatment interventions. Stroke mimic patients who require hospital admission will require additional non-stroke resource unless timely repatriation is in place.

#### BaNES, Swindon and Wiltshire (BSW) <sup>4</sup>

Services offered	Number of beds	Location	Number of Somerset patients per year
HASU	4	Royal United Hospitals Bath	
	4	Salisbury District Hospital	
ASU	26	Royal United Hospitals Bath	
	26 (ASU and rehab)	Salisbury District Hospital	
Thrombectomy		Southmead Southampton	
TIA		Royal United Hospitals Bath Mon – Fri: Salisbury W/Ends & BHs: Bournemouth, Poole or Salisbury	

BaNES, Swindon and Wiltshire (BSW) will become an integrated care system in 2022<sup>5</sup>. In early 2020 BSW Partnership published its health and care model and priorities for the delivery of health and care services across the region, these were revised in October 2021 in the light of learnings from the pandemic<sup>6</sup>.

Whilst there has been the development of an Acute Hospitals Alliance - which brings together the Royal United Hospitals Bath (RUH) NHS Foundation Trust, Great Western Hospitals (GWH) NHS Foundation Trust in Swindon, and Salisbury NHS Foundation Trust to work together to manage acute care - there are no identified plans to undertake a review of acute stroke services.

<sup>4</sup> [Acute Stroke Unit | Royal United Hospitals Bath \(ruh.nhs.uk\)](https://www.ruh.nhs.uk/acute-stroke-unit)

<sup>5</sup> [PowerPoint Presentation \(ruh.nhs.uk\)](https://www.ruh.nhs.uk/presentation)

<sup>6</sup> [About our health and care model - BSW Partnership](https://www.bsw-partnership.org/about-our-health-and-care-model)

## North Devon<sup>7</sup>

Services offered	Number of beds	Location	Number of Somerset patients per year
HASU		Royal Devon and Exeter	
ASU	24 (including rehab beds)	North Devon District Hospital	
Thrombectomy		Derriford Hospital Plymouth	
TIA		North Devon District Hospital	

Devon ICS undertook an acute services review in 2017<sup>8</sup>. The outcome of this was to continue to provide first-line emergency response for people experiencing symptoms of a stroke at all four Devon acute hospitals with an emergency department (North Devon District Hospital in Barnstaple, Royal Devon and Exeter Hospital in Exeter, Torbay Hospital in Torquay, and Derriford Hospital in Plymouth). This would include rapid stroke assessment, diagnostics and thrombolysis. HASU care will be provided in Exeter and Plymouth, with ASU care available at all four hospital sites. No further stroke service reviews plans are in place.

<sup>7</sup> [Stroke Services - Northern Devon Healthcare NHS Trust \(northdevonhealth.nhs.uk\)](http://northdevonhealth.nhs.uk)

<sup>8</sup> [What we will do - Integrated Care System for Devon \(icsdevon.co.uk\)](http://icsdevon.co.uk)