

## Hyper acute and acute stroke services in Somerset preferred option FAQs

At the NHS Somerset Board meeting on 30 November 2023, the Board accepted a recommendation to take forward one preferred option for stroke services in Somerset for more detailed analysis.

Following further evaluation, a final recommendation whether to proceed with this option will be made to the Board in a decision-making business case.

The preferred option for the future proposes a hyper acute stroke unit at Musgrove Park Hospital, Taunton and acute stroke units at both Yeovil District Hospital and Musgrove Park Hospital.

You can find the full list of FAQs on our website - Stroke consultation FAQs - Our Somerset.

#### Now that one preferred option has been selected, what happens next?

Further modelling of the preferred options needs to be completed. This includes further analysis including financial, geographical, logistic and operational considerations, and public feedback.

The final decision-making business case will be considered by the NHS Somerset Board early next year.

This review focuses on creating safe and sustainable stroke services in Somerset, and is not about saving money. All the evidence gathered will enable the Board to make an informed decision on the best way forward.

The final decision-making meeting will be held in public to allow those interested to hear the discussion and how the final decision is made.

# Have you already made a decision already about the future of the hyper acute and acute stroke services?

No, no final decision has been made. Based on the modelling and work we have done so far, we think that the only deliverable option for the future of the hyper acute and acute stroke services is for there to be one hyper acute stroke unit at Musgrove Park Hospital in Taunton and an acute stroke unit at both Yeovil District Hospital and Musgrove Park Hospital.

Following analysis of the public feedback, detailed modelling, and an options appraisal of the two options taken to public consultation the decision has now been made to discount option B, which proposed creating one hyper acute stroke unit and one acute stroke unit at Musgrove Park Hospital.

Before a final decision on the future of stroke services can be made, further modelling of the preferred option needs to be completed. This includes further analysis of the financial, geographical, and operational impact, and public feedback.





Only once this work has been completed, a recommendation for the future of hyper acute and acute stroke services in Somerset will be made to the NHS Somerset Board to enable them to make a final decision on the future of stroke services.

The final decision-making business case is expected to be considered by the NHS Somerset Board in January. This review focuses on creating safe and sustainable stroke services in Somerset, and is not about saving money. All the evidence gathered will enable the Board to make an informed decision on the best way forward.

### How did you arrive at one preferred option?

In developing the proposed options, a series of workshops were held with people working in stroke services, key stakeholders including the Stroke Association, and people with lived experience of a stroke. Together they looked at how local stroke services could be improved. These sessions were used to develop a long list, then a short list, of potential solutions for the future.

The four solutions shortlisted were examined further and following insights from the public and patient group, were refined and reduced to two potential options.

These two potential solutions were then taken out to public consultation. This was to gather further insights from local people about the proposed changes.

The public consultation is one part of a bigger piece of ongoing work that considers all aspects of the proposed changes to stroke services including financial, geographical, logistic and operational considerations.

Analysis of the public feedback, further detailed modelling of financial and operational considerations was undertaken. An options appraisal of the two options taken to public consultation was conducted.

The options appraisal showed that option B was no longer a deliverable option – option B proposed creating one hyper acute stroke unit and one acute stroke unit at Musgrove Park Hospital.

The further modelling has shown that it would not be feasible to provide the significant investment required to deliver this model of care. The extra resources required at both Musgrove Park Hospital and Dorset County Hospital would not be sustainable.

The further modelling has shown it is not possible to deliver the entirety of Option B at the Dorchester County Hospital site and even a partly implemented solution would require significant capital investment which would have to be diverted from other planned improvements in Somerset, to support both Dorchester County Hospital and Musgrove Park Hospital to provide stroke services and could not be implemented within the two year timetable set.

The consultation feedback also highlighted the important role family and loved ones play in the recovery and wellbeing of stroke patients. An acute stroke unit at Yeovil District Hospital would enable patients to return to Yeovil, if that was closer to their home.

The recommendation to discount option B by the Stroke Project Board was accepted by the NHS Somerset Board on 30 November 2023.

You can read the full paper outlining the options appraisal on our website.

### Why did you discount option B?

The further modelling has shown it is not possible to deliver the entirety of Option B at the Dorchester County Hospital site and even a partly implemented solution would require significant capital investment which would have to be diverted from other planned improvements in Somerset, to support both Dorchester County Hospital and Musgrove Park Hospital to provide stroke services and could not be implemented within the two year timetable set.

The consultation feedback also highlighted the important role family and loved ones play in the recovery and wellbeing of stroke patients. An acute stroke unit at Yeovil District Hospital would enable patients to return to Yeovil, if that was closer to their home.

You can read the full <u>options appraisal paper</u> which went to the NHS Somerset Board detailing why the recommendation was made can be found on our website.

# If you now know that option B is not a deliverable option, how do you know that option A will be deliverable?

Now that one preferred option has been selected further modelling will be completed. The final recommendations will be further developed by senior clinicians, health and care staff and people with lived experience of stroke.

This more detailed modelling will examine in detail the financial, operational and logistical considerations of the preferred option. This includes working with NHS Dorset to consider implications for Dorset County Hospital.

Only when this work has been completed will we know whether option A is a deliverable option for the future of hyper acute and acute stroke services.

The final decision-making business case is expected to be ready early next year so will be considered by the NHS Somerset Board in January.

This review focuses on creating safe and sustainable stroke services in Somerset, and is not about saving money. All the evidence gathered will enable the Board to make an informed decision on the best way forward.