

APPENDIX 3a – Draft Balance of Services

Potential Solution - Essential Service Change

The services that are required to be on the emergency site to ensure that services are clinically safe and resolve workforce issues

Emergency and Acute: 59 %

Both sites

Acute and Planned: 41 %

Emergency Department
Critical Care Unit (HDU, ITU)

Inpatients
(427 inpatient beds)
Services listed in 'both sites' box
+
W&C

Children's ward
Maternity wards
Neonates (not in IP beds)
Gynaecology
Acute Stroke Unit
Cardiology
Coronary Care Unit (CCU)
Acute Elderly Care
Urology

(Hot site provision for on-going discussion)

Urgent Care Centre
Children's Assessment Unit (CAU)
Outpatients
Diagnostics
Day Case Renal Unit
Endoscopy
Ambulatory Emergency Care (AEC)
Inpatients
Clinical Decision Unit (CDU)
Short-Stay
Endoscopy
Colorectal Surgery
Orthopaedics
General Surgery
Head & Neck
General Medicine/ Nephrology
Gastroenterology
Respiratory Medicine
Endocrinology
Oncology & Haematology
Planned Discharge
Day Case Cancer Services (to remain as current provision on each site)
(Both site provision for on-going discussion)

DTC
General Surgery
Colorectal
Upper GI
General Medicine
Oral Surgery
ENT
Orthopaedics
Plastic surgery

Inpatients
(302 inpatient beds)
Services listed in 'both sites' box
+
Breast Service
Rehabilitation

(Warm site provision for on-going discussion)

N.B % split is based on IP bed base and excludes Critical Care and Neonatology