



Telford & Wrekin
COUNCIL

<u>Committee and Date</u>
Joint Health Overview and Scrutiny Committee
11 February 2011
10am

<u>Item/Paper</u>
A

MINUTES OF THE JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE MEETING HELD ON 13 DECEMBER 2010 IN THE SHREWSBURY ROOM, SHIREHALL 10.00AM – 12:15 PM

Responsible Officer Dianne Dorrell

e-mail: Dianne.dorrell@shropshire.gov.uk

Tel: 01743 252363

Fax 01743 252713

Present

Members of the Joint Committee

Shropshire Council:

Karen Calder, Gerald Dakin (Chairman), Tracey Huffer, Rose Manger (Co-optee) and Hannah Thompson (Co-optee)

Telford and Wrekin Council:

Veronica Fletcher, Angela McClements and Jean Gulliver (Co-optee)

Also Present

Adam Cairns, Chief Executive, Shrewsbury & Telford NHS Hospital Trust

Jo Chambers, Chief Executive, Shropshire County PCT

Rev Pam Bickley, Director of Patient and Community Engagement, Telford & Wrekin PCT

Fiona Bottrill, Scrutiny Manager, Telford & Wrekin Council

Stephen Chandler, Assistant Director Adult Social Care, Shropshire Council

Dianne Dorrell, Scrutiny Officer, Shropshire Council

1. Apologies for Absence

- 1.1 Apologies for absence were received from Dag Saunders and Dilys Davis (co-opted members, Telford & Wrekin Council), Simon Jones, Portfolio Holder Adult Social Care (Shropshire Council) Jackie Seymour Portfolio Holder for Adult Social Care (Telford & Wrekin Council) and Tom Dodds, Performance Manager Community Services, (Shropshire Council).

2. Declarations of Interest

- 2.1 No declarations of interest were received.

3. Minutes

- 3.1 The minutes of the meeting held on 8 October 2010 were confirmed as a correct record.

4. Developing Health and Health Care: Consultation on Proposals aimed at keeping vital hospital services in Shropshire Safe and Sustainable

- 4.1 The Chairman welcomed Adam Cairns, Chief Executive, of Shrewsbury and Telford NHS Hospital Trust (SaTH) Jo Chambers, Chief Executive, Shropshire County Primary Care Trust and Reverend Pamela Bickley, NHS Telford and Wrekin.
- 4.2 Adam Cairns presented information on SaTH's proposals for reconfiguration, aimed at keeping hospital services in Shropshire which were affordable, sustainable and safe. A copy of the consultation document had been circulated to Members. There were, however, three dilemmas facing SaTH.
- In acute surgery, the medical training programme now required surgeons to specialise early resulting in a narrower expertise set and in some specialities smaller numbers. This could result in cases with surgeons having to perform operations in which they had no specialism. With regard to vascular surgery, aortic aneurism screening was being developed which could attract accreditation if this was performed on just one site, 24/7 thus maintaining local vascular surgery in Shropshire.
 - There were health and safety issues about the Maternity Unit at the Royal Shrewsbury Hospital (RSH) which had not been built to take the current capacity of use and was in very poor condition. Slides indicated to the Committee the lack of space for people and equipment, with particular concern about risks in carrying out caesarean operations.
 - In paediatrics, there was a need to bring the service onto one site as there were not enough doctors to look after children on each site and staffing was a weekly struggle. Merging this with obstetrics, neonatal and head and neck surgery, which mainly involved children, on one site at the Princess Royal Hospital (PRH) would ensure the services were sustainable.
- 4.3 The Committee noted that trauma service was not changing. SaTH was also aware of new risks involved with the proposed model and further work with clinicians would be undertaken. Talks were also taking place with health colleagues in Powys on travel issues and how to address potential risks with those travelling longer distance times in emergencies. A further meeting would be taking place prior to Christmas on care pathways to address concerns raised by the Assurance Panel.
- 4.4 Jo Chambers reported on the two day assurance process from which feedback from the Assurance Panel was largely supportive. However, the Panel had identified more work to be undertaken in parallel with the consultation process which would run until mid March.
- 4.5 Pam Bickley added that there was still much work to be done to resolve the issues and the process was not being presented as a fait accompli. There would be five consultation events across Shropshire, Telford & Wrekin and Powys, to be chaired by BBC Shropshire radio presenter, Eric Smith. Members of the PCT Trusts and SaTH would also visit any groups upon request. The Assurance Panel was also prepared to reconvene to give further consideration and assurance.
- 4.6 The Chairman thanked SaTH and the PCT, recognising there were still issues to resolve and further assurance would be required as the consultation went ahead. Questions were invited and the following concerns were raised:-

- Additional travel time for women in labour and paediatrics
 - Ambulance response times which were already an area of concern in Shropshire
 - Use of an obstetric flying squad which would be an issue at night
 - Provision for family visiting arrangements and travel issues
- 4.7 In response, Adam Cairns stated that constructive talks were ongoing with Powys GPs and the Institute of Rural Health in North Wales and he believed the issues could be worked through and managed and advice would be sought from those who had tackled similar problems elsewhere in the country. He was keen to hear the views of communities most affected and to find new ways of delivering a service to prevent unnecessary travel for older people. He wanted to hold onto the midwife lead services and there was a need to work through the risks with midwives and examine a series of clinical matters that could be undertaken in advance. The views from all midwives were invited, and talks were underway with local health boards regarding a strategy for patients in Wales.
- 4.8 The Trust was working towards a situation where there would be less disruption in managing patient stay when sites become full due to unpredictable admission rates if acute services were on one site with planned activity on the other.
- 4.9 The PRH site offered more flexibility for bringing maternity and children's services onto one site and a greater opportunity to resolve the issue of space and quality standards that currently existed at the RSH. It was not certain yet whether the Early Presentation Assessment Unit would stay at the RSH site.
- 4.10 Discussion was taking place with local transport providers on the idea of a shuttle bus services for both patients and staff travelling from the south of the county and there was time to reach a solution on this prior to implementation of the changes.
- 4.11 Consideration was being given to some urgent changes in acute surgery for safety reasons as outlined in the consultation document. It was not yet known if the changes would take place before the end of the consultation. However, the Joint Committee would be notified once it was known when the proposed changes would take place.
- 4.12 A&E would be sustained on both sites but with changes in the nature of the two departments and how they operate.
- 4.13 The Committee requested the following with regard to the consultation:
- The need to emphasize that midwifery was not moving from the RSH
 - Information be provided for GP surgeries and midwifery sites
 - Website links be made where possible to publicise
 - A copy of the consultation document be provided for all Members of both Councils so that they could publicise via Local Joint Committees and Town and Parish Councils
 - Information be publicised by Shropshire Association of Local Councils.

- 4.14 During a final discussion on funding, the Joint Committee that the Trust Board believed the proposals were achievable. The £20m loan from the Strategic Health Authority would be used to repair the Trusts balance sheet over the next 18 months which had been in deficit for a number of years and would be paid back over 25 years. Also, there was no longer a need to pursue a short term loan of around £28m for further capital requirements. The Trust had identified an area of land which it could sell and a variety of other measures to raise this amount.
- 4.15 The Chairman thanked Adam Cairns, Jo Chambers and Pamela Bickley for attending and answering questions, welcoming the proposals to secure hospital services in Shropshire, Telford and Wrekin. The Joint Committee would provide an interim response and would be meeting again towards the end of the consultation period to seek further reassurance on issues raised and to provide a final response to the consultation.

RESOLVED:

- a) **That proposals to secure hospital services in Shropshire, Telford and Wrekin be broadly welcomed, subject to issues raised, and consultation on the proposed changes be supported, subject to comments above.**
- b) **That the committee meet again to consider its final response, subject to further assurances on issues raised.**

5. Proposals for a new NHS Trust to provide Community Health Services for Shropshire, Telford & Wrekin

- 6.1 The Chairman invited Jo Chambers, Chief Executive of Shropshire County PCT, to introduce the proposals contained within the consultation document circulated with the agenda, marked 5. Detail around the proposals had been provided at the previous joint meeting and Jo Chambers answered a number of questions raised by the committee:

- Maternity services at the Robert Jones & Agnes Hunt Hospital were run by SaTH and proposals for the new NHS Trust would not affect SaTH's ability to provide maternity services there.
- It was not anticipated the new Trust would be in direct competition with the West Midlands Ambulance Service (WMAS), this was a matter for WMAS
- Community Hospitals would be used for preventative A&E care and MIU's may also be used, dependent upon certain criteria, and if more convenient to operate from a particular area
- Shropdoc service would not be affected as it was an independent organisation and was expected to continue to co-operate with the new trust
- Feedback to date had been in the main overwhelmingly supportive of running community services in the heart of communities
- It was anticipated that the new single Trust would be set up in shadow form with a new board by April 2011 leading to its legal establishment in July 2011. The new Trust could then begin work on applying for 'Foundation' status.
- Appointment of the Chair of the Shadow Board and non-executive directors would be made early in 2011
- A 5 year financial plan was in the process of being put together to demonstrate financial viability to the Department of Health but there was still work to be done, dependent upon a range of issues such the requirement to make year on year 4% efficiency savings

- Indications were that GP consortia would want a network of community health services closely around GP practices and community hospitals and so this work would continue which was a good basis for the new Trust to work upon
- The model of commissioning community beds in Shrewsbury and Telford away from acute hospitals to the private sector was expected to continue with the new Trust working with GP Consortia who would determine responsibility in this area

RESOLVED: That proposals contained within the consultation document be supported, and that officers, in consultation with the Joint Chairmen, prepare a response, taking into account views and comments expressed at the meeting.

6. Terms of Reference

- 6.1 The Scrutiny Manager, Telford and Wrekin Council, presented her report attached to the agenda marked 6 recommending updated terms of reference for the Joint Committee, attached at Appendix 1. A typographical amendment was noted under the heading Membership of the Joint Health Overview and Scrutiny Committee, whereby the first sentence be amended to note there will be three elected members from each authority and not six as stated.

RESOLVED: That updated terms of reference be approved, subject to the above amendment.

7. NHS Consultation Framework

- 7.1 The Scrutiny Manager, Telford and Wrekin Council, presented her report attached to the agenda marked 7 recommending a consultation framework for the Joint Committee as set out at section 5.2 of the report.

RESOLVED: That the consultation framework outlined in Section 5.2 of the report be adopted.

8. Joint HOSC Work Programme

- 8.1 The Scrutiny Manager, Telford and Wrekin Council, presented her report attached to the agenda marked 8 on a programme of work for 2010/11.
- 8.2 The next meeting of the Joint Committee would include Developing Health and Health Care to look at further evidence regarding care pathways in liaison with the West Midlands Ambulance Service and to formulate a Joint response.
- 8.3 Also a written update had been requested from the Cancer Forum and the Cancer Network on the engagement with patients in developing patient pathways for gynaecological cancer services that will take place from April 2011, which might result in a report to a future meeting.

The meeting closed at 12:25 pm

Chairman: _____

Date: _____