

Health Overview and Scrutiny Committee Wednesday, 19 July 2017 - 10.00 am

Minutes

Present: Mr P A Tuthill (Chairman), Ms P Agar, Mr G R Brookes,

Prof J W Raine, Mr C Rogers, Mr A Stafford, Mr T Baker, Mrs A T Hingley, Cllr Mike Johnson, Mrs F S Smith and

Mrs N Wood-Ford

Also attended: Simon Trickett, NHS Redditch and Bromsgrove and Wyre

Forest Clinical Commissioning Groups Dr C Ellson, South Worcestershire Clinical

Commissioning Group

Claire Austin, Future of Acute Hospitals in Worcestershire

Programme

Vicky Morris, Worcestershire Acute Hospitals NHS Trust Sarah Smith, Worcestershire Acute Hospitals NHS Trust Graham James, Worcestershire Acute Hospitals NHS

Trust

Simon Adams, Healthwatch Worcestershire

Sheena Jones (Democratic Governance and Scrutiny Manager) and Jo Weston (Overview and Scrutiny Officer)

Available Papers

The members had before them:

- A. The Agenda papers (previously circulated);
- B. Presentation handouts for Item 6 (circulated at the Meeting)
- C. The Minutes of the Meeting held on 5 April 2017 (previously circulated).

(Copies of documents A and B will be attached to the signed Minutes).

849 Apologies and Welcome

The Chairman welcomed everyone to the Meeting, especially Councillor Summers from Herefordshire Council and Councillor Redford from Warwickshire County Council who were invited to participate in the discussions.

Apologies were received from Mr P Grove, Mrs M A Rayner, Mr R P Tomlinson and Mrs S Webb.

850 Declarations of Interest and of any Party Whip Mrs P Agar declared an interest as her husband was employed as a hospital porter.

Date of Issue: 2 August 2017

851	Public
	Participation

None.

852 Confirmation of the Minutes of the Previous Meeting

The Minutes of the Meeting held on 5 April 2017 were agreed as a correct record and signed by the Chairman.

853 Constitutional Matters

The Democratic Governance and Scrutiny Manager advised the Committee that Councillor Frances Smith had been nominated by District Council Representatives to stand as Vice Chairman. The nomination would go to the 14 September 2017 County Council for appointment.

854 Future of Acute Hospital Services in Worcestershire

Attending for this Item were:

<u>Future of Acute Hospital Services in Worcestershire</u> (FoAHSW) Programme

Simon Trickett, Interim Chief Officer of Redditch and Bromsgrove CCG and Wyre Forest CCG Dr Carl Ellson, Chief Clinical Officer, South Worcestershire CCG Claire Austin, Communications and Engagement Lead for FoAHSW

Worcestershire Acute Hospitals NHS Trust (WAHT)

Sarah Smith, Director of Strategy, Planning and Improvement
Dr Graham James, Divisional Medical Director of Surgery

The Chairman explained that the Chief Executive of Worcestershire Acute Hospitals NHS Trust was unable to attend and that arrangements were in place for Members to meet with her soon.

By way of presentation and for the benefit of new Members, the Committee was reminded that the project to review acute hospital services began in January 2012, concluding with the CCGs' decision on 12 July 2017. Over this time, the original NHS Bodies involved had ceased to exist and there had been numerous hurdles along the way. However, HOSC had been kept appraised of developments at each stage.

Recent key milestones included:

 the West Midlands Clinical Senate decision in June 2016 approving the Clinical Model, Assurance and Review by NHS England, leading to

- their decision in January 2017 to approve Public Consultation
- the extensive twelve week public consultation during the Spring of 2017
- the CCGs Committee in Common on 12 July 2017 where all three Boards unanimously agreed the proposals without amendment.

The twelve week consultation ran from 6 January 2017 and engaged with over 5,700 people, across a variety of media. 42 meetings and drop in sessions were arranged, nearly 3,000 online surveys were submitted, views on social media were considered and HOSC was able to influence further engagement, including with neighbouring Local Authorities and hard to reach local communities. In addition, it was noted that HOSC commented on the consultation documentation before publication.

Overall, it was stated that there was a good understanding of the proposals and responses showed general support of the key principles behind the plans, distinguishing between planned and emergency care. However, there were a number of common areas of concern, including:

- Loss of services from the Alexandra Hospital in Redditch
- Transport
- Capacity
- Quality of services across the Worcestershire Acute Hospitals.

Residents were already aware of the temporary emergency changes to services such as maternity provision and inpatient paediatrics at the Alexandra Hospital, but queried what impact these changes would have on a permanent basis.

Following consideration of all of the feedback, the Programme Board put forward twelve recommendations to the Governing Bodies of the three Worcestershire Clinical Commissioning Groups at their Committee in Common on 12 July 2017. The Committee unanimously approved all twelve recommendations, concluding this stage of the Programme.

The next stage would be implementation of the recommendations, which would be led by WAHT over the coming years. A decision was due shortly to establish whether a capital bid of £29.6m from NHS England had

been approved. If approved, all changes would be fully implemented by 2020.

With specific reference to maternity services, it was planned to deliver ante and post natal care locally, ideally through primary care. An earlier suggestion to provide a midwife led unit in the north of the County had been ruled out prior to consultation as it was not considered to be sustainable. However, this proposal would be reviewed in the light of predicted population growth.

The Clinical Commissioning Groups Governing Bodies would monitor the impact and progress against specific recommendations. It was announced that from 1 August 2017, the three CCGs would have one Accountable Officer across all of the organisations, with Simon Trickett taking that role.

In the ensuing discussion, the following key points were made:

- Members were concerned about the lack of stable leadership in WAHT. However, it was encouraging to learn that after two years of interim appointments, the Board and Executive team was now substantive and was moving forward in a much stronger position following the appointment of the Chairman and Chief Executive
- A culture change was required to promote positive behaviours across all levels of the organisation and steps had been taken to promote this now
- When asked what the alternative was if the £29.6m capital funding bid was not successful, it was clarified that to implement the changes properly, it would have to be approved
- Questions were raised about the lack of physical space and it was acknowledged that this was a constraint. However, better use of existing space was possible, including plans for a link bridge to join existing buildings to increase capacity at the Worcestershire Royal Hospital site. The Committee sought assurance that the proposals for this would be publicised and explained at the appropriate stage
- Whilst discussing transport and the results from the trial Hospital Hoppa bus, it was noted that a Department of Transport bid had been submitted to establish a community transport option, which would be based on Home to Hospital and possibly become more integrated to include other appointments. This was due to start in Worcester and Redditch, then in Wyre Forest, with potential

- to expand into other areas. However, it was stated that no provision could be run free of charge due to regulations governing transportation
- Some Members required reassurance that appropriate plans were being put in place to futureproof hospital services, including appropriate funding, in the knowledge of committed housing and business developments. It was asked whether the current position was as a result of lack of understanding at the time
- NHS Representatives suggested that Worcestershire's position was not unique and sustaining a clinical workforce was a challenge for many NHS Trusts nationally
- It was reported that there was good monitoring of commissioned services and the CCGs would continue to work with partners across the health economy to ensure a collaborative health system
- Members felt it was unfortunate that the County media sometimes misreported news items, especially given the valuable role they had in informing the public of changes
- Members were interested in the implementation of the recommendations and to see what impact there was, especially in relation to waiting times and use of trolleys.

The Chairman thanked those present for a useful discussion and confirmed that the HOSC noted the CCGs decision. In addition, the Committee was supportive of the decision and looked forward to updates during the implementation stage of the Programme.

855 Quality of Acute
Hospital
Services Update

Attending from Worcestershire Acute Hospitals NHS Trust (WAHT) were:

Vicky Morris, Chief Nursing Officer
Sarah Smith, Director of Strategy, Planning and
Improvement

Dr Graham James, Divisional Medical Director of Surgery

The Chief Nursing Officer talked through the actions she had taken since her appointment to the Trust Board four months previously and referred to the Quality Improvement Plan (QIP), attached to the Agenda, which had been approved by the Trust Board following the Care Quality Commission (CQC) published reports.

It was noted that the QIP was a working document and a product of a number of different reports to ensure a consistent and clear approach for all stakeholders. It

would be updated monthly and reported to each Trust Board whilst WAHT was in special measures.

There were six themes within the Plan, with the common goal of continuous improvement:

- Deteriorating Patient
- Operational Improvement
- Governance
- Patient Experience and Engagement
- Safe Care
- Culture and Workforce.

In the discussion that followed, key points included:

- Members were interested to know how complaints were handled and were informed that the current response time was very poor and unacceptable. Further information was requested
- Staff training was vital and was increasingly available online, resulting in a positive outcome as it could be completed to suit the individual working pattern
- When asked about the level of staff morale, the Chief Nursing Officer stated that it was poor on her arrival, however, she had made great efforts to be more visible and visit departments, also resulting in positive promotion and value at Board level. In addition, it was important to celebrate success, which had been introduced
- Uncertainty over the FoAHSW programme had not helped with staff morale, therefore, improvements should now be seen more quickly
- When asked what help was available to staff to ensure their own health and wellbeing, it was noted that staff had access to liaison services
- Improving quality was key and ensuring that there continued to be a consistent approach across all disciplines was a challenge. However, compliance was achievable in time and a robust system of monitoring had been introduced
- Concerns were raised about capacity, especially as the full hospital protocol had been implemented on three occasions recently.
- Members were reassured to hear about the plans already in place and the monitoring arrangements which the Trust Board had approved. The Committee also acknowledged that the CQC had no concerns about the care of patients.

Simon Adams, the Chief Operating Officer of Healthwatch Worcestershire was invited to comment and

reported that following the CCGs decision, improvement should now be immediate. He referred to the improvement in dealing with fractured neck of femur as an indication where performance had improved from one of the worst to one of the best performing Trusts. He also reminded members about the Healthwatch report 'Care in the Corridor' which made 38 recommendations to the Trust.

The Chairman thanked everyone for a useful discussion and looked forward to quality updates at regular intervals. The reputation of the Trust was crucial to the reputation of the County.

The HOSC Chairman concluded the meeting by suggesting that the Committee should have a number of key objectives and advised he would share these for discussion outside of the meeting.

The meeting ended at 11.45 am	
Chairman	