

AT A MEETING of the HEALTH OVERVIEW AND SCRUTINY COMMITTEE of the COUNTY COUNCIL held at The Castle, Winchester on Tuesday, 29 March 2011.

PRESENT

Chairman:
p Councillor Pat West

Vice-Chairman:
p Councillor Liz Fairhurst

Councillors:

p Ray Bolton	p David Harrison
p Ann Buckley	p David Keast
p Rita Burgess	a Roz Muschamp
p Keith Chapman	p Pam Mutton
p Brian Collin	a Angela Roling
p Phryn Dickens	p John Wall
p Peter Edgar	

Co-opted Members:

Councillors:
a Marion Kerley
p Ray Love
p Tim Southern
p Dennis Wright

In attendance at the invitation of the Chairman: Cllrs Felicity Hindson, Executive Member for Adult Services and Brian Dash, also Frank Rust, Chairman, Hampshire LINK.

63. **DECLARATIONS OF INTEREST**

Members were mindful that, where they believed that they had a personal or personal prejudicial interest in any matter to be considered at the meeting, they should normally, at the time of the debate, declare their interest, and having regard to the circumstances described in paragraphs 9, 10, 11 and 12 of the County Council's Code of Conduct, consider whether to leave the meeting whilst the matter was discussed save for exercising any right to speak in accordance with Paragraph 12 of the Code.

The following members declared a personal interest:

Cllr Brian Collin	Wife employed by NHS
Cllr Phryn Dickens	Husband and son employed by NHS
Cllr David Harrison	Employed by NHS
Cllr Pam Mutton	Daughter employed by NHS
	Member, League of Friends, Andover WMH
Cllr Pat West	Daughter-in-law employed by NHS
Cllr Dennis Wright	Wife is a GP Practice Manager

64. **MINUTES**

The Minutes of the Meeting of the Committee held on 25 January 2011 were confirmed as a correct record, and signed by the Chairman.

65. **CHAIRMAN'S COMMUNICATION**

a. **Apologies**

Councillors Ros Muschamp and Angela Roling sent their apologies. Cllr Marion Kerley also tendered her apologies.

b. **Additional meetings**

The Chairman provided evidence to the Independent Reconfiguration Panel set up to review the decision of Portsmouth Hospitals to close Ward G5 on 8 February 2011. The final report was expected at the end of March.

The 'Healthy Accountability Forum' held in London by the Centre for Public Scrutiny in March provided a helpful update on progress with the progress of the draft Health Bill.

66. **WORK PROGRAMME**

The Chief Executive presented the Committee's Work Programme (Item 5 in the Minute Book).

RESOLVED:

That the Committee's Work Programme be approved.

Draft Report of the Review of Falls in Older People:

The Committee received and approved the draft report. Dr Ruth Milton, Director of Public Health who was present at the meeting affirmed her support for falls prevention and agreed to champion service improvement work against the recommendations in the report. It was commented by the Committee that the HOSC and NHS would need to be clear about how success could and should be measured in service development.

RESOLVED:

That the Report be approved and NHS Hampshire, working with the Director of Public Health provide a response setting out an indicative timeframe for responding to the recommendations in the report at the HOSC meeting in September.

INQUIRIES RECEIVED AND ACTION TAKEN

The Chief Executive presented a report on enquiries received, the source of each enquiry and the action taken (Item 6 in the Minute Book).
The enquiries related to:-

- **Hythe Hospital: HOSC Panel update**

Cllr Brian Dash and the Chairman of Hythe Hospital League of Friends, John Carr confirmed that they considered that the engagement process to date had been appropriate and that they would support the proposal from NHS Hampshire that work now moves forward to identify the options for providing health services from the Hythe Hospital site.

The HOSC agreed that the Panel led by Cllr Dash should continue to oversee this work on behalf of the Committee. This will enable Members to come to a view about any further formal consultation required at the September meeting, prior to the formulation of a business case in October. If the Panel is of the view that the engagement process has been thorough the HOSC will be able to exercise discretion about the extent of any formal consultation required.

Members noted that the beds provided temporarily at Forest Court were funded by Hampshire Adult Social Services and stressed the need for there to be clarity about the source of funding for services as the options are developed. The need for a greater profile and contribution from GPs and Hampshire Adult Services was also highlighted.

Although the proposals for high quality bed based nursing care were welcome, Members did note that the original grounds for closing the beds were temporary urgent action. This point should not be lost as the options are developed and members would expect that, in the event that it was not possible to identify suitable high quality nursing home provision in the Hythe area, the options developed would include the scope for the 6 reablement beds to be provided at Hythe Hospital. This provision would be in addition to any other proposals for the use of the Hospital site.

Additional information requested by members included:

- How the market testing of nursing home provision in the Hythe area would be taken forward and the mechanisms used to assess if these services were of suitable quality
- Confirmation of the resources it is anticipated will be available to support the provision of health services in the Hythe area, including the anticipated costs of the 6 reablement beds.

RESOLVED:

That Members be updated on progress with identifying options for the future of Hythe Hospital and that they are provided with greater clarity on the above points.

- **Odiham Cottage Hospital: Notice from NHS Hampshire to withdraw inpatient beds**

Strong differences of opinion appeared to exist between people representing the Odiham area and NHS Hampshire about the engagement process associated with the notice given by HCHC in relation to inpatient nursing services at Odiham Cottage Hospital. Cllr Southern expressed his reservations about the process of engagement so far, but it was also noted that there had been a considerable amount of correspondence exchanged in relation to this matter.

When the Committee was briefed about these activities last January it appeared that progress was being made. Rather than maintaining this momentum Members were concerned that the engagement process was beginning to stall. Bearing in mind the positive progress that had been made in Hythe and Oak Park the Committee remained firmly of the view that the solution to this situation rested with the local community, commissioners and providers of services. All contributors had a contribution to make to planning these services for the future.

Dr. Hugh Freeman, lead GP for the Calleva pathfinder GP Commissioning Consortium confirmed the consortium's interest and engagement with NHS service provision in the Odiham area. NHS Hampshire affirmed their engagement with the shadow consortium which will have responsibility for commissioning services in future years.

The update provided by NHS Hampshire was clear that the point had not yet been reached when a view from the Committee would be sought about proposals to change services. The options should be identified prior to the next HOSC on the 24 May 2011. At this juncture Members would need to be clear about the extent of local support for the options presented as this would enable the HOSC to come to a view about the need for formal consultation and any further work required. Particular emphasis would be given to the 4 'tests' identified by the NHS Chief Executive last summer: GP support, strong local engagement, evidence base and choice.

The HOSC Chairman stated that she thought that given the extent and rate of change within the NHS it would be helpful for the GP Consortium to take the lead, not least to help steer a safe, appropriate and transparent path through a situation that the public must find quite confusing.

Given the conflicting views that were emerging about some key issues the Committee asked that NHS Hampshire considers the following actions:

- The delegation of maximum authority to the shadow GP consortium 'Calleva' to determine the right configuration of care to be provided at the Odiham Cottage Hospital in the future, working with the local community. If there is agreement about a range of options then this

would seem to be the most effective way to build support for the way forward, particularly as it will ultimately be the GP Consortium that would be responsible for funding these services.

- That the uncertainty about the resources available to support services is addressed. The briefing from NHS Hampshire in November was clear on this point but there seemed to be a real lack of clarity about this across stakeholders about how this resource is assessed. Members have previously made the point about the need for clear and consistent messages in this respect.
- Should the engagement and consultation process extend beyond 31 July 2011 arrangements are made with HCHC for a further extension of the contract to provide inpatient nursing care at Odiham Cottage Hospital. This request takes account of the report to the meeting that the staffing pressures had eased and, as NHS Hampshire clearly stated in its briefing note to the HOSC in November, the issue is not about resources. This was not suggested as a long term solution but a means of providing continuity in this community until there is clarity about the way forward.

RESOLVED:

That HOSC request NHS Hampshire to:

- Delegate authority to the shadow Calleva GP Commissioning Consortium to take the lead in establishing the best configuration of care to be provided at the Odiham Cottage Hospital and for the surrounding area.
 - To provide clear and transparent information about the resources available to provide care and support services
 - To confirm it is prepared to ensure a further extension of inpatient nursing services with HCHC should the engagement and consultation period extend beyond 31 July 2011.
 - To update the HOSC on progress at its meeting in May 2011.
- **East Hampshire Community Hospital Services - update**

The Committee agreed to give way to national guidance in relation to 'purdah' and to defer this item until next meeting

RESOLVED:

That the Committee receive an update on progress at the 24 May 2011 meeting

- **Andover Birth Centre update in the context of North and Mid Hampshire Maternity Services:**

The Director of Public Health, Dr Ruth Milton, gave a presentation on sustainable maternity services in North and Mid Hampshire. She stated that there were clear national standards and that maternity services across Hampshire should be delivering care against those standards. Services would need to be provided that both met national standards and were delivered within affordable limits. The Director of Public Health and the Head of Midwifery at Winchester had both concluded that in the Mid Hampshire area an important step forward would be to explore a more flexible and resilient service model for maternity services.

Members raised a number of questions. In relation to the robustness of Hampshire evidence provided in the report by the Director of Public Health, concern was expressed that it appeared as if planning information had been ignored since predictions of potential births in Andover seemed low in view of plans for dwellings for several thousand people in that area. Whilst accepting that planning information should always be sought, even with a few thousand prospective new people moving to the area, The Director of Public Health pointed out that only a small proportion would be potential mothers.

The Committee was concerned that it was not clear how women in the Basingstoke and North Hampshire area had been engaged and how the forthcoming merger would affect the options available to them. Also of concern to the Committee was how the views of Maternity Services Liaison Committees, the Hampshire LINK and GPs feed into the work.

Members commented that amongst possible different midwifery models, the 'domino' approach had been discussed and dismissed due to previous unsuccessful trial of a similar approach in Andover. It was not clear why it failed in Andover whilst it appeared to have been used safely and successfully elsewhere in Hampshire.

Members noted that recent experience in the South and East of Hampshire had been very positive with mothers choosing and being encouraged to use the Grange and Blake Birth Centres and this seemed to contrast with the experience of mothers in Andover and with what Members were being told at this meeting.

Members reported feedback from mothers in the Andover area which indicated that they had not been offered any birth centre as a choice, whilst the presentation showed Ashurst was available to mothers in the south of the area. This was despite an assertion that engagement with mothers in Andover indicated distance was not the most important factor, making Ashurst presumably a potential option for mothers from all parts of the mid Hampshire area. Members were therefore concerned about the advice mothers were being given by GPs and midwives about their birth options.

The Committee responded to the inference that small numbers of births at the Andover Birth Centre (ABC) indicated a preference by mothers

for having their babies in Winchester by noting that the confidence by mothers in the ABC had been seriously weakened by the history of repeated closures at short notice and indefinite length such as the one it was currently experiencing.

The Head of Midwifery in answer to questions about the continuing staffing problems said that new midwives were now working in the service, but still 10% were off due to substantial medical grounds and not due to stress of work which had been suggested. The Chairman noted that the HOSC wanted to be assured that the Andover Birth Centre would continue to be well used and that prospective mothers needed to be made very clear about their options for a birthplace of their choice, whether at home, in a midwife-led birth centre or a main unit. The Chairman also wanted to be assured that local GPs were being effectively engaged about the options available.

Members were very concerned that the grounds for temporary urgent closure of the ABC had now moved to continued closure subject to the outcome of consultation of the models of care and the wider engagement exercise being taken forward by the Director of Public Health. The Chairman confirmed that the option existed for the matter to be referred to the Secretary of State but it was agreed that this course of action should not be pursued as it removed decision making from local people and could reflect negatively on the forthcoming merger with North Hampshire Hospitals. Members stressed that the terms 'safe and sustainable' should not be interpreted to mean financial cuts.

The presentation given can be found at:

http://www3.hants.gov.uk/councilmeetings/advsearchmeetings/meeting_sitemdocuments.htm?sta=&pref=Y&item_ID=2814&tab=2

RESOLVED:

That the HOSC formally records its deep concern that the ABC would not reopen as intended at the beginning of April, despite assurances from WEHT to the Committee last November. Additional information to be provided as a result of the presentation to the HOSC related to:

- the extent to which the Ashurst Birth Centre is offered as a choice to women from the catchment area for WEHT:
- Why there hadn't been greater involvement with Basingstoke and North Hampshire Hospital and the women of that area about the plans for maternity services given the forthcoming merger. How would this be addressed?
- How the assumptions about population growth would be adjusted given the plans for significant new housing development over the next 5 years
- The 'domino' birthing model appeared to have been dismissed as not being safe or sustainable although it has apparently been used successfully elsewhere in the county. The HOSC would like to be clear why the domino birthing option had been discounted for the Andover area and what approaches are under consideration.
- The extent of GP support for the proposal.

- **GP branch surgery, Whiteley: Proposed closure of branch surgery**

Members welcomed the update from NHS Hampshire and supported the suggestion of the Chairman that the local member oversees the next steps on behalf of the HOSC.

RESOLVED:

That Cllr Keith Evans acts as the local Member lead in relation to this issue and the Committee be provided with an update in May.

- **Access to NHS Dentistry**

NHS Hampshire provided a concise and informative presentation to the Committee. Members were pleased to note that considerable progress appeared to have been made over the last few years. The Committee was told that 16 new dental practices had opened across the county. Services had been expanded in 14 locations. Four new practices were due to open and currently there were sixty-seven practices accepting all patient groups for NHS treatment.

Members commended NHS Hampshire on the clear improvements achieved in widening access to dentistry across Hampshire. The presentation provided can be found at:

http://www3.hants.gov.uk/councilmeetings/advsearchmeetings/meeting_sitemdocuments.htm?sta=&pref=Y&item_ID=2814&tab=2

RESOLVED:

That Members welcomed the reported achievements in substantially improving access to NHS dental care.

- **NHS Equality Delivery System**

Members noted the information provided about the NHS initiative to achieve greater consistency and sharing of good practice for all groups of people regardless of background characteristics or life choices.

RESOLVED:

That the NHS Equality Delivery System (EDS) be noted

68. **PROPOSALS TO DEVELOP OR VARY NHS SERVICES**

The Chief Executive presented a report on proposals to develop or vary health services in the area of the Committee (Item 6 in the Minute Book). He presented the report in two parts which comprised items for information which alerted the Committee to forthcoming proposals from the NHS to vary or change services, and items for action required by the Committee to

respond to proposals from the NHS to substantially change or vary NHS services.

Under Items for action he gave details on:

- **Hampshire Partnership NHS FT: consultation on older people's mental health services**

The Clinical Director for Older People's Mental Health Services for Hampshire Partnership NHS FT gave a presentation that included additional information and clarity about the Trust's intention to consult on older people's mental health services. The information provided enabled Members to understand that the proposed model of care which included close working with partners should enable overlap of provision to be minimised and enable any gaps identified to be filled. It was also clear that the evolving model was based on extending successful delivery of care in Hampshire.

RESOLVED:

The HOSC supported Hampshire Partnership Trust in its intention to consult on older people's mental health services in South Hampshire and Southampton subject to the necessary revisions to the consultation document and that asked that regular updates on progress would be provided to the HOSC

Under items for information he gave details on:

- **Joint Scrutiny of Therapy Provision for Children with Special Educational Needs**

The Director of Public Health who currently has the responsibility for commissioning children's health services, told the Committee that the Hampshire Joint Child Health Commissioning Board had taken ownership of, and was committed to, taking forward the recommendations in the report of the Joint Review. She emphasised that more and more joint working between the NHS and Children's Services was being undertaken on a daily basis, and that this provided a very positive context in which progress could be made. She noted that the new SEN Green Paper now provided a new dimension and that progressing the report's recommendation would need to take the new ideas into account. The Director of Public Health also stated it would be important to integrate the principles of Quality, Integration, Productivity and Performance (QIPP) which are considered key to achieving value for money as well as maximum benefit and quality of care to patients. The presentation about the SEN green paper can be found at:

http://www3.hants.gov.uk/councilmeetings/advsearchmeetings/meeting_sitemdocuments.htm?sta=&pref=Y&item_ID=2813&tab=2

RESOLVED:

That the Committee would be updated on further progress and developments at its September meeting.

- **Children's Cardiac Surgery: consultation and scrutiny issues**

The Chairman reported that this issue was considered to be a substantial change in service provision by HOSCs in the SHIP area and in Oxfordshire. In view of the common concern over the options presented in the consultation documents the Chairman proposed that a Joint Scrutiny Panel be setup to review this issue in depth. Members agreed to the proposal

RESOLVED:

That the Hampshire HOSC with HOSCs in the SHIP area and Oxfordshire jointly setup a Scrutiny Panel to review the NHS proposals for Children's Cardiac Surgery.

- **South Central Strategic Health Authority: Consultation on Proposals to Fluoridate Drinking Water in Southampton and Southwest Hampshire**

Following the findings of the legislative decision in favour of the Strategic Health Authority (SHA), the Committee remained concerned about whether the measure would be cost effective and whether it would be technically feasible

RESOLVED:

That the HOSC would write to the SHA to indicate its continuing reservations about the authority's intention to add fluoride to the water supply and would request a response to the issues raised in relation to technical feasibility of the schemes and the cost effectiveness of the proposal as set out in the original report from Hampshire County Council.

Chairman, 24 May 2011