

AT A MEETING of the HEALTH OVERVIEW AND SCRUTINY COMMITTEE of the COUNTY COUNCIL held at The Castle, Winchester on Tuesday, 29 April 2014

PRESENT

Chairman:
p Councillor Pat West

Vice-Chairman:
p Councillor David Keast

Councillors:

p Ray Bolton	p Marge Harvey
p Graham Burgess	p Tony Hooke
p Rita Burgess	p Martin Lyon
p Roz Chadd	p George Ringrow
p Charles Choudhary	p Frank Rust
p Jacqui England	p Bruce Tennent
p David Harrison	p Martin Tod

Co-opted Members:

Councillors:
p Tonia Craig
a Alison Finlay
p Tim Southern
p Dennis Wright

In attendance at the invitation of the Chairman:

Councillor Jonathan Glen, Chairman of Policy and Resources Select Committee
Councillor Patricia Stallard, Chairman of Safe and Healthy People Select Committee

39. **APOLOGIES FOR ABSENCE**

Apologies were received from Councillor Alison Finlay and Councillor Liz Fairhurst, Executive Member for Adult Social Care and Public Health.

40. **DECLARATIONS OF INTEREST**

Members were mindful that where they believed they had a Disclosable Pecuniary Interest in any matter considered at the meeting they must declare that interest at the time of the relevant debate and, having regard to the circumstances described in Part 3, Paragraph 1.5 of the County Council's Members' Code of Conduct, leave the meeting while the matter was discussed, save for exercising any right to speak in accordance with Paragraph 1.6 of the Code. Furthermore Members were mindful that where they believed they had a Non-Pecuniary interest in a matter being considered at the meeting they considered whether such interest should be declared, and having regard to Part 5, Paragraph 2 of the Code, considered whether it

was appropriate to leave the meeting whilst the matter was discussed, save for exercising any right to speak in accordance with the Code.

Councillor Frank Rust declared a non-pecuniary interest in Item 6, as he is a Member of the Wessex Clinical Senate.

Councillor Tim Southern declared a non-pecuniary interest in Item 6, as his wife occasionally works as a radiographer at Andover War Memorial Hospital.

41. **MINUTES**

With the addition of Councillor Tim Southern's attendance, the Minutes of the meeting of the Health Overview and Scrutiny Committee (HOSC) held on 25 March 2014 were confirmed as a correct record, and signed by the Chairman.

There was one matter arising in relation to the minutes:

- The Chairman informed the Committee that since the last HOSC meeting, both the Isle of Wight and the Southampton health scrutiny committees had met to consider proposals for the future of vascular services in South Hampshire. As a result of these meetings, both committees agreed that the proposals do not, at this stage, constitute a substantial change in service.

42. **DEPUTATIONS**

No deputations were received.

43. **CHAIRMAN'S ANNOUNCEMENTS**

The Chairman made one announcement:

Future of the HOSC

The Chairman announced to the Committee that it was expected that this meeting of the Health Overview and Scrutiny Committee would be the last under the current constitutional arrangements. It was noted that the Better Care Fund and increased integration of health and social care had led to the recommendation to redefine the County Council's overview and scrutiny function and its Executive function in a consistent, coherent and comprehensive manner which takes account of these changes.

It was therefore agreed by Cabinet in April 2014 that the following recommendations be made to County Council at the AGM on 30 May 2014:

- That the Health (Overview and Scrutiny) and the Safe and Healthy People Select (Overview and Scrutiny) Committees are disbanded.
- That the County Council delegates the function of health scrutiny to a new Health and Adult Social Care Select (Overview and Scrutiny) Committee.

The Chairman expressed her gratitude to Members for their input to the work of the Committee over its lifespan, and to the previous Chairmen, Councillor Anna McNair Scott, and previous Councillor Dr Ray Ellis. Members from all parties also extended their gratitude to the support and guidance of the Chairman, and also to the work of the Scrutiny Officers to the Committee.

44. **PROPOSALS TO DEVELOP OR VARY SERVICES**

The Director of Policy and Governance presented a report on proposals to develop or vary health services in the area of the Committee (see Item 6 in the Minute Book). The report was presented in three parts which comprised items for action required by the Committee to respond to proposals from the NHS to substantially change or vary NHS services, items for monitoring, which allowed the Committee to monitor outcomes from substantial changes, and items for noting which alerted the Committee to forthcoming proposals from the NHS to vary or change services.

Under items for action:

The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust: inpatient oncology services - proposals

The Committee welcomed representatives from The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust (RBCH), alongside representatives from Poole Hospital NHS Foundation Trust. Members noted the report received (see appendix 1, and appendix A to Item 6 in the Minute Book), which detailed the intention of RBCH to make the temporary move of the oncology inpatient service to Poole Hospital permanent. The Trust originally presented to the Committee on their proposals to temporarily move the service in November 2012.

The Chairman asked Members if they had any questions relating to the proposals and the following points were raised:

- That West Hampshire Clinical Commissioning Group, as the main commissioners of oncology services for Hampshire patients, supported the proposals.
- That historically, the retention period for clinical staff in the oncology department at RBCH has been short, but proposals for consolidating the oncology inpatient service and an improved training programme for clinicians should encourage staff to remain in post longer, and make these positions more attractive to recruit to.
- That proposals to permanently consolidate the service are driven by the need for quality and safe care for patients, rather than cost saving.
- That length of stay for inpatients has reduced since the service was temporarily relocated to Poole Hospital. It was felt by staff that patients were offered a higher-quality service at Poole.
- That most patients needing to access the inpatient oncology unit at Poole Hospital will do so by ambulance.
- That RBCH have discussed with the local authority possibilities for improved bus links between the hospital sites, and improving accessibility of parking across the shared estate service. Members raised with Trust colleagues the ongoing Hampshire County Council

public consultation on subsidised transport, which includes bus routes from the New Forest to Bournemouth. The Trust agreed to explore responding to this in order to inform the Council of the impact should any change to this route be proposed.

- That difficulties surrounding ease of parking at the Poole hospital site have been identified and the Trusts are currently looking at different options to allow for easy access and availability.

The Committee were asked to determine whether the proposals detailed in the report constituted a substantial change. When taken to a vote, the following recommendations were agreed (13 for, three against, three abstained):

RESOLVED

That:

1. The proposals do not constitute a substantial change in service for the population of Hampshire.
2. The Committee is notified once the proposals have been permanently implemented.
3. The Committee receive detail of travel plans for families and carers visiting patients at the inpatient oncology unit at Poole Hospital.

Under items for monitoring:

Hampshire Hospitals NHS Foundation Trust, NHS England (Wessex), NHS North Hampshire Clinical Commissioning Group, NHS West Hampshire Clinical Commissioning Group: maintaining high quality hospital services for the people of North and Mid Hampshire - update

The Committee welcomed the Chief Executive from Hampshire Hospitals NHS Foundation Trust, and the Chief Officer from West Hampshire Clinical Commissioning Group (CCG). Members noted the update paper (see Appendix 2 to Item 6 in the Minute Book).

The Committee last received an update on the plans to ensure high quality hospital services for the people of North and Mid Hampshire at its meeting on the 28 January 2014. Members noted that since this time, the CCG had worked with the Trust to ensure issues raised by the HOSC in January had been addressed and incorporated into the public consultation process. After discussions with the Wessex Area Team of NHS England, the CCG and the Trust had invited an independent Department of Health "Gateway" Body to advise on areas of work that warranted further development before the public consultation took place. It was anticipated that the public consultation would resultantly now commence at the end of May 2014 for a period of twelve weeks, and would consult on the two options of either centralising critical care services at Basingstoke and North Hampshire Hospital, or building a new 300 bed critical treatment hospital between Basingstoke and Winchester.

In response to Member questions, the following points were raised:

- That as a result of the Gateway process, recommendations were made to the Trust and commissioners. Themes included the need to undertake further financial analysis, add detail to the wider impact assessment and a reconstitution of the joint programme board.
- That there was a risk that neither of the two options becomes reality. In this scenario, the Trust and its commissioners would need to agree a contingency model where 24/7 consultant cover could be achieved across the Hospitals.
- That the CCGs (with support from NHS England), as the major commissioners of care from the Trust, will be making the final decision regarding which model of care will be best for the community it serves. The Trust will be taking the final decision on the right model of finance.
- That the level of investment required would depend on which of the two options is chosen for development, but rough figures were circa £20m for redeveloping the Basingstoke site, and £120m for developing a new critical care hospital.
- That the possibility of extending the consultation period to finish in September to allow for the holiday period would be considered. The timescales for consultation were flexible in this respect, but it was hoped that analysis and the selection of a preferred option for decision would be completed by the end of September.
- That Steve Brine, the local MP for Winchester, had held a public meeting on 27 March which included an item on the Hampshire Hospitals proposals.
- That following a Member query, it was noted that services in Andover have been developing well to include areas such as endoscopy, minor injury clinic and the birthing centre.

RECOMMENDED

That it be recommended to the Health and Adult Social Care Select (Overview and Scrutiny) Committee that it receives a report on the outcomes of the consultation once this process has concluded.

Southern Health NHS Foundation Trust: adult mental health – update on progress with model of care

The Committee welcomed the Clinical Director of Mental Health from Southern Health NHS Foundation Trust alongside the Director of Commissioning - Long Term Conditions and Community from West Hampshire Clinical Commissioning Group (CCG). Members were updated on bed occupancy since the Committee last considered this item in January 2014, and were updated on the implementation of the new adult mental health service model of care. Members noted the progress report from Southern Health (see Appendix 3 to Item 6 in the Minute Book).

Members heard that although the new model of care had been successful in treating on average 40 service users in the community who may previously have gone into inpatient care, there was still an increased pressure on adult mental health beds, and this pressure had continued to remain high, with an average of 10 inpatient beds over capacity used per month. The Trust had

also experienced challenges recruiting to vacant staff posts, and were looking with partners at possible changes to housing rehabilitation pathways and step down care to ease the delayed discharge issue.

The commissioner present informed the Committee that the Trust were provided with a fixed-sum annually for mental health services, and within this were incentives to innovate within the service to reduce out-of-County bed use. Members were informed that West Hampshire CCG, as the lead for commissioning mental health services, had taken seriously the issues within the Trust's mental health directorate and were working closely with them to ensure quality and low-impact on service users.

In response to questions from Members, the following points were raised:

- That approximately 5-10% of adults suffering from mental health disorders are admitted to an inpatient unit. It is important to ensure that their needs are able to be met in a community environment once they are medically fit to be discharged.
- That the Trust were working locally with housing departments to ensure that individuals discharged from mental health units without a permanent home residence are helped to find appropriate living accommodation, therefore easing delayed discharge.
- That the adult mental health service, as an acute service, is set on a national tariff, with more funding provided if patient numbers are higher. This tariff had been subject to 4% cost improvement plans, but it was expected that quality of services should remain the same. This was a tough ask of services, but the Trust agreed that more could be done to improve the efficiency of the service.
- That changes to the way that beds are commissioned has meant that Woodhaven has so far been unable to be used to provide acute low secure services as previously proposed to the HOSC in January. It was noted that Woodhaven remained in use providing services to patients with learning disabilities but was not delivering the service appropriate to the facilities. Members agreed to follow this up with the commissioners of this service, NHS England (Wessex).
- That steady improvement has been made to ensure that all adult mental health inpatient beds are fully compliant with all Care Quality Commission standards (CQC), and issues surrounding care planning at Antelope House have been improved to ensure that they are fully compliant with the next CQC inspection.
- That agency/bank staff are only employed to fill vacancies to ensure that the level of service delivered is safe.

RECOMMENDED

That:

1. This topic is forwarded to the Health and Adult Social Care Select (Overview and Scrutiny) Committee for further monitoring.
2. That a meeting takes place between representatives of Hampshire County Council, Commissioners and Southern Health NHS Foundation Trust to discuss next steps for the monitoring of this topic, to be ratified

at the first Health and Adult Social Care Select (Overview and Scrutiny) Committee meeting.

3. The Chairman writes to NHS England (Wessex) regarding the Committee's disappointment that funding has not yet been organised for the low-secure female unit at Woodhaven.
4. The topic of housing and step-down care is recommended to be considered by the Health and Wellbeing Board as part of their seminar on mental health provision.

Under items for information:

South Eastern Hampshire Clinical Commissioning Group: Chase Community Hospital – update on progress with model of care

The update provided in the report (Appendix 4 to Item 6 in the Minute Book) was noted by Members. Members also noted the views of the local Member for Bordon, Whitehill and Lindford, Cllr Adam Carew, who was largely supportive of the progress so far and reported that the steering group is working well and that the temporary nursing home at Liss is working but is far from ideal.

RESOLVED

That the Committee are satisfied with the actions of South Eastern Hampshire Clinical Commissioning Group in implementing the proposals to date, although noted their disappointment that the project would be delayed due to new NHS England processes.

45. **INQUIRIES RECEIVED AND ACTION TAKEN**

The Director of Policy and Governance presented a report on enquiries received, the source of each enquiry and the action taken (see Item 7 in the Minute Book). The enquiries related to:-

Surrey and Borders NHS Foundation Trust: adult mental health outpatient services – update on progress of service relocation

The update provided in the report (see Item 7 and Appendix 1 to Item 7 in the Minute Book) was noted.

RESOLVED

That:

1. Members are satisfied with the actions of Surrey and Borders Partnership NHS Foundation Trust in implementing the adult mental health outpatient service relocation.
2. The Committee is notified once Community Mental Health Recovery Services have been permanently relocated.

Frimley Park Hospitals NHS Foundation Trust and Heatherwood and Wexham Park Hospitals NHS Foundation Trust: proposed merger – submission to the Competition and Markets Authority

Members noted the invitation from the Competitions and Markets Authority to submit evidence on the proposed merger, and the subsequent letter of response from the HOSC (see Appendices 2 and 3 to Item 7 in the Minute Book).

RESOLVED

That:

1. The Committee's submission to the Competition and Markets Authority is noted.
2. This topic is recommended to the Health and Adult Social Care Select (Overview and Scrutiny) Committee for further consideration, owing to the potential for substantial service change should the merger be authorised to go ahead.

Chairman,