

SOUTHEND-ON-SEA BOROUGH COUNCIL

Meeting of Joint Health Overview and Scrutiny Committee - Mid and South Essex Sustainability and Transformation Partnership

Date: Tuesday, 13th March, 2018

Place: Committee Room 1, Essex County Council, County Hall, Chelmsford

Present: Southend-on-Sea Borough Council - Councillors B Arscott (Chairman), S Habermel, A Jones and C Nevin
Essex County Council – County Councillors J Beavis (Vice Chair), Dr R Moore and D Harris* (substitute)
Thurrock Council – Councillor G Snell (Vice Chair)

In Attendance: F Abbott, G Hughes J Boaler and Roger Harris

Start/End Time: 7.30 - 9.10 pm

1 Apologies for absence & substitutions

Apologies for absence were received from Councillor Collins (Thurrock Council), Councillor Holloway (Thurrock Council), Councillor Fish (Thurrock Council), County Councillor Egan (Essex County Council – substitute: County Cllr D Harris)) and County Councillor Robinson (Essex County Council).

2 Declarations of Interest

The following declarations of interest were made:-

- (a) Councillor Nevin - non-pecuniary - 2 children work at MEHT; step sister works at Basildon Hospital; previous association at Southend and MEHT Hospitals; NHS employee in Trust outside STP area;
- (b) Councillor Habermel - non-pecuniary - brother is a paramedic; sister is a nurse & works at Southend Hospital; nephew is physiotherapist at Southend;
- (c) County Cllr Beavis – non-pecuniary - ECC nominated governor – Mid Essex CCG.

3 Minutes of the Meeting held on Tuesday, 20th February, 2018

Resolved:-

That the Minutes of the meeting held on Tuesday, 20th February, 2018, be confirmed and signed as a correct record.

4 Statements from members of the public

There were no statements from members of the public.

5 Mid and South Essex Sustainability and Transformation Partnership (STP)

On behalf of the Committee, the Chairman welcomed the following representatives from the Mid and South Essex Sustainability and Transformation Partnership (STP) to the meeting:-

- Jo Cripps – Programme Director, STP
- Dr Celia Skinner – Medical Director, STP
- Caroline Russell – Senior Responsible Officer, STP
- Claire Hankey – Director of Communications and Engagement, STP
- Tom Abell – Deputy Chief Executive of the 3 hospitals in Mid and South Essex
- Dr Joanne Howard – Consultant Southend Associate Medical Director and Haematology lead at Broomfield

The Committee considered an update paper from the Mid and South Essex Sustainability and Transformation Partnership (STP) Programme Director. This provided further information on a number of questions and key lines of enquiry regarding the consultation process explored by the Joint Scrutiny Committee at the meeting on 20th February 2018 and at the informal meeting held on 8th March 2018.

It was noted that the closing date for the consultation has been extended to 23rd March 2018.

The representatives also gave a presentation which provided the following information:

- an overview of the consultation process to date
- information on the independent analysis of the consultation feedback
- a short video providing a snap shot of information from focus groups
- outline of the next steps
- Information on the agreed timeline.

Resolved:-

To note the update report.

6 Questions from the Joint Committee on the STP Report & responses by the STP

The Committee asked the representatives of the STP a number of questions arising from the presentation and covering the following issues, as follows and which were responded to by the STP:-

Communications and engagement

Information was cascaded by the 5 CCG's and also made use of patient participation groups. The increasing use of social media as a core component of the engagement has been well received.

With regard to the consultation re Orsett, 6,000 documents were produced specifically explaining those proposals, with 'Orsett specific' questions in them. These were distributed via GP hubs, focussed events, the college, library and pharmacists with help from Healthwatch Thurrock to further disseminate through other community organisations and settings, which had been invaluable. Members specifically recommended that the STP continues to utilise Healthwatch's expertise going forward whilst ensuring that their independence is also maintained.

The telephone survey commissioned by the STP had reached the target set of speaking to 750 people. There had been 779 on-line responses so far.

The STP provided a broad overview of responses to the consultation by each CCG area. At the time of the meeting the split of responses received from each CCG area had been: Mid Essex 38%, Southend 30%, Thurrock 13%, Castle Point and Rochford 11%, Basildon and Brentwood 8%. It was acknowledged that, until the report of the independent review of the consultation process had been completed, it would be difficult to be clear where the consultation may have worked well and where not so well.

The Joint Scrutiny Committee had been provided with a paper outlining the questions from the Southend public discussion event and asked that a similar report be provided from other events.

There was a general acceptance that there could have been some duplication of attendees at the consultation events.

All districts and parishes had been specifically invited to respond to the consultation.

Primary Care Strategy

Noted the position re the development of the plan for Primary Care. Members of the Joint Scrutiny Cttee intend to attend the forthcoming meeting of the CCG Joint Cttee on 6th April when this will be discussed.

The Joint Scrutiny Cttee also had questions on Community health care, including the consultation on the closure of Orsett Hospital and workforce plans and impact.

Patient transport and workforce transport

The Joint Scrutiny Cttee had been provided with a discussion paper providing more information on the considerations and options for a proposed patient transport service between the three hospitals. Whilst clinicians were clear on the clinical pathway models (i.e. who were the patients who would need it if the current clinical proposals were implemented) the transport model could not be completed until it was clear which service reconfiguration proposals would actually be pursued. **Action:** the Committee requested more information on the future transport model once the final proposals are known.

The Joint Scrutiny Cttee said that documentation did not include information on the volume of patients who already move between sites. Members also highlighted the importance of building some flexibility into such a transport

service so as to be able to handle the unexpected such as alerts, closures and declaring critical incidents.

Finance

The Joint Scrutiny Cttee still had concerns about the financial position and the need for investment in localities. In particular, the impact on day to day revenue spend from finding better ways of delivering services was still unclear at present. The STP representatives stressed the opportunities arising from the various proposals. Clinicians from different hospitals now were increasingly working together (rather than competing against each other). STP representatives also suggested that the establishment of larger combined clinical teams across the three acute sites would drive quality improvement and efficiencies.

In addition, whilst the STP had been provisionally awarded some transformation monies for capital investment, it was unclear how this final funding award would be impacted if not all the current proposals for service reconfiguration were implemented.

As a result of the above, the Joint Committee confirmed to STP representatives that it expected to continue reviewing the financial sustainability of the STP proposals and financial targets beyond the formal consultation period.

Stroke services

The Joint Scrutiny Cttee received some further clarity around the proposals for stroke services however still thinks there is a lack of detail and an understanding of how it will work.

The Chairman advised that the above issues and concerns will be included in the detailed response to the consultation, which will be submitted by the deadline.

Next steps

The STP intends to publish the independent analysis of the consultation feedback on 8th May and the Joint Scrutiny Committee will meet in the first week June, in mid June and the first week July. The CCG Joint Committee meeting to reach final decisions will be on 6th July. There will then be post decision scrutiny by the Joint Scrutiny Committee and further consideration of issues arising.

Resolved:-

1. That the Joint Committee reserved the right to continue scrutiny of some issues on which they still required further information – namely primary care strategy, finance, transport, workforce, and the hospital merger.
2. That the Joint Committee would be preparing a formal response back to the STP on their current proposals.
3. That all Members of the Joint Scrutiny Committee be given the opportunity to comment on the proposed response to the consultation.
4. To delegate approval to the Chairman and two Vice Chairmen to approve the finalised response to the current consultation.

Chairman: _____

