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SOUTHEND-ON-SEA BOROUGH COUNCIL

People Scrutiny Committee

Date: Tuesday, 16th March, 2021

Time: 6.30 pm

Place: Virtual Meeting via Microsoft Teams

Contact: S. Tautz (Principal Democratic Services Officer)

Email: committeesection@southend.gov.uk

AGENDA

1 Apologies for Absence

2 Declarations of Interest

3 Questions from Members of the Public

4 Minutes of the Meeting held on 2 February 2021 (Pages 1 - 4)

**** **ITEMS CALLED IN/REFERRED DIRECT BY CABINET - 23 FEBRUARY 2021**

None

**** **ITEMS CALLED-IN FROM THE FORWARD PLAN**

None

**** **ITEMS FOR PRE-CABINET SCRUTINY**

None

**** **OTHER SCRUTINY MATTERS**

5 **COVID-19 Response - Changes to Phlebotomy Provision** (Pages 5 - 12)

Report of Mid and South Essex NHS Foundation Trust attached.

TO: The Chairman & Members of the People Scrutiny Committee:

Councillor L Salter (Chair), Councillor N Folkard (Vice-Chair)

Councillors M Borton, H Boyd, A Chalk, D Cowan, M Dent, F Evans, M Flewitt, D Garne, B Hooper, M Kelly, K Mitchell, C Nevin, I Shead, M Stafford, A Thompson

Co-opted members

Church of England Diocese

Fr Jonathan Collis (Voting on Education matters only)

Roman Catholic Diocese

VACANT (Voting on Education matters only)

Parent Governors

(i) VACANT (Voting on Education matters only)

(ii) VACANT (Voting on Education matters only)

Southend Association of Voluntary Services

K Jackson (Non-Voting)

Healthwatch Southend

O Richards (Non-Voting)

Southend Carers Forum

T Watts (Non-Voting)

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SOUTHEND-ON-SEA BOROUGH COUNCIL

Meeting of People Scrutiny Committee

Date: Tuesday, 2nd February, 2021

Place: Virtual Meeting via Microsoft Teams

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- Present: Councillor L Salter (Chair)
Councillors N Folkard (Vice-Chair), M Borton, H Boyd, A Chalk, D Cowan, M Dent, F Evans, M Flewitt, D Garne, B Hooper, M Kelly, K Mitchell, C Nevin, I Shead, M Stafford and A Thompson
- In Attendance: Councillors T Harp, A Jones, M Terry (Cabinet Members), Councillor K Evans, P Bates, J Chesterton, E Cook, T Forster, P Grout, A Keating, B Leigh, J O'Loughlin, M Marks, B Martin, S Tautz and J Williams
O Richards (Healthwatch Southend), T Watts (Southend Carers Forum) (Co-Opted Members)
M Faulkner-Hatt, N Biju (Southend Youth Council) (Observers)
- Start/End Time: 6.30 pm - 7.30 pm

768 Apologies for Absence

There were no apologies for absence from the meeting.

769 Declarations of Interest

The following councillors declared interests as indicated:

- (a) Councillors T Harp, A Jones and M Terry (Cabinet Members) - Interest in the referred item; attended pursuant to the dispensation agreed at Council on 19 July 2012, under S.33 of the Localism Act 2011.
- (b) Councillor L Salter - Minute 773 (Draft Prioritising Resources to Deliver Better Outcomes - 2021/22 to 2025/26) - Husband is a consultant surgeon at Southend Hospital; daughter is a consultant at Basildon Hospital; son-in-law is a general practitioner in the Borough - Non-pecuniary interests.
- (c) Councillor N Folkard - Minute 773 (Draft Prioritising Resources to Deliver Better Outcomes - 2021/22 to 2025/26) - Ambassador for Fund Raising Team at Southend University Hospital; member of the Readers' Panel for Southend University Hospital; relative employed at Broomfield Hospital - Non-pecuniary interests.
- (d) Councillor B Hooper - Minute 773 (Draft Prioritising Resources to Deliver Better Outcomes - 2021/22 to 2025/26) - Director of Blade Education (a not-for-profit company); parent of child attending secondary school in Borough; family member resident in supported living accommodation - Non-pecuniary interests.
- (e) Councillor H Boyd - Minute 773 (Draft Prioritising Resources to Deliver Better Outcomes - 2021/22 to 2025/26) - Family member employed in care home setting - Non-pecuniary interest.
- (f) Councillor C Nevin - Minute 773 (Draft Prioritising Resources to Deliver Better Outcomes - 2021/22 to 2025/26) - Employed at external NHS Trust; previous care home worker; family members employed at Mid and South-Essex Trust hospitals and by Public Health England - Non-pecuniary interests.

- (g) Councillor F Evans - Minute 77 (Draft Prioritising Resources to Deliver Better Outcomes - 2021/22 to 2025/26) - Director of Belfairs Academy - Non-pecuniary interest.
- (h) Councillor K Mitchell - Minute 773 (Draft Prioritising Resources to Deliver Better Outcomes - 2021/22 to 2025/26) - Member of Fostering Panel; family member resident in supported living accommodation - Non-pecuniary interests.
- (i) Councillor I Shead - Minute 773 (Draft Prioritising Resources to Deliver Better Outcomes - 2021/22 to 2025/26) - Family member resident in supported living accommodation outside the Borough - Non-pecuniary interest.
- (j) Councillor T Harp - Minute 773 (Draft Prioritising Resources to Deliver Better Outcomes - 2021/22 to 2025/26) - Volunteer with Southend Association of Voluntary Services (SAVS) and the 'Turning Tides' project; wife is employed by SAVS – Non-pecuniary interests.
- (k) Councillor A Jones - Minute 773 (Draft Prioritising Resources to Deliver Better Outcomes - 2021/22 to 2025/26) - Parent of child attending secondary school in Borough - Non-pecuniary interest.

770 Questions from Members of the Public

The Cabinet Member for Children and Learning responded to questions presented by Mr D Webb.

771 Minutes of the Meeting held on 24 November 2020

Resolved:

That the minutes of the meeting of the Committee held on 24 November 2020 be confirmed as a correct record and signed.

772 Minutes of the Special Meeting held on 7 December 2020

Resolved:

That the minutes of the special meeting of the Committee held on 7 December 2020 be confirmed as a correct record and signed.

773 Draft Prioritising Resources to Deliver Better Outcomes – 2021/22 to 2025/26

The Committee considered Minute 730 of the meeting of the Cabinet held on 14 January 2021, which had been referred directly to the People Scrutiny Committee, together with a report of the Executive Director (Finance and Resources) presenting the draft General Fund Revenue and Capital Budget for 2021/22 to 2025/26.

Resolved:

That the following decisions of the Cabinet be noted:

"1. That it be noted that a Medium-Term Financial Strategy for 2021/22 – 2025/26 will be available for consideration in February 2021 and the draft Medium Term Financial Forecast and estimated Earmarked Reserves Balances up to 2025/26 (Annexes 1 and 2 to Appendix 1 to the submitted report), be endorsed.

2. That the draft Section 151 Officer's statement on the robustness of the proposed budget, the adequacy of the Council's reserves and the Council's Reserves Strategy (Appendix 2 to the report), be noted.
3. That the appropriation of the sums to earmarked reserves totalling £3.625M (Appendix 3 to the report), be endorsed.
4. That the appropriation of the sums from earmarked reserves totalling £6.218M, which includes £2.500M to cover the remaining estimated budget gap for 2021/22. (Appendix 3 to the report), be endorsed.
5. That a General Fund Budget Requirement for 2021/22 of £133.423M and Council Tax Requirement of £87.712M (Appendix 4a) and any required commencement of consultation, statutory or otherwise, be endorsed.
6. That it be noted that the 2021/22 revenue budget has been prepared on the basis of using £1.5 million from accumulated Collection Fund surpluses for the core budget to allow for a smoothing of the budget gap across the next four financial years.
7. That a Council Tax increase of 3.99% for the Southend-on-Sea element of the Council Tax for 2021/22, being 1.99% for general use and 2.0% for Adult Social Care (Paragraph 10.16), be endorsed.
8. That it be noted that the position of the Council's preceptors is to be determined:
 - Essex Police – no indication of Council Tax position
 - Essex Fire & Rescue Services – no indication of Council Tax position
 - Leigh-on-Sea Town Council – proposed precept increase of 3.02%;
9. That no Special Expenses be charged other than the Leigh-on-Sea Town Council precept for 2021/22, be endorsed.
10. That the proposed General Fund revenue budget investment of £8.122M (Appendix 5 to the report), be endorsed.
11. That the proposed General Fund revenue budget savings and income generation initiatives for 2021/22 of £4.155M (Appendix 6 to the report), be endorsed.
12. That the proposed future outline Budget Transformation Programme 2022/23 – 2025/26 (Appendix 7 to the report), be endorsed.
13. That the proposed range of fees and charges for 2021/22 (Appendix 8 to the report), be endorsed.
14. That the Dedicated Schools Grant budget and its relevant distribution as recommended by the Education Board (Appendix 9 to the report), be endorsed.
15. That the Capital Investment Strategy for 2021/22 to 2025/26 (Appendix 10 to the report) and the Capital Investment Policy (Annex 1 to Appendix 10 to the report), be endorsed.
16. That the new schemes and additions to the Capital Investment Programme for the period 2021/22 to 2025/26 totalling £21M for the General Fund and new schemes subject to viable business cases (Appendix 11 to the report), be endorsed.
17. That the proposed changes to the current Capital Investment Programme that were considered for approval as part of the Resourcing Better Outcomes – Financial Performance Report – Period 8 (Appendix 12 to the report), be noted.

18. That the proposed Capital Investment Programme for 2021/22 to 2025/26 of £168.6M for 2021/22 to 2025/26 (Appendix 13 to the report) of which £25.6M is supported by external funding, be endorsed.

19. That the Minimum Revenue Provision (MRP) Policy for 2021/22 (Appendix 14 to the report) and the prudential indicators (Appendix 15 to the report), be endorsed.

20. That the operational boundary and authorised limits for borrowing for 2021/22 are set at £375M and £385M respectively (Appendix 15 to the report), be endorsed”.

Note: This is an Executive Function, save that approval of the final budget following Cabinet on 16 February 2021 is a Council function.

Cabinet Member: Councillor I Gilbert

Chair: _____

16/03/2021		
People Scrutiny Committee		5
COVID-19 response changes to Phlebotomy provision – Moving services into the community		
Wards and communities affected: All	Key Decision: To gain support for the relocation of Phlebotomy Service currently based at Basildon, Southend and Broomfield Hospitals to local town centre settings.	
Report of: Sharon Salthouse, Group Director for Pathology, Mid and South Essex NHS Foundation Trust		
Accountable Head of Service: Michelle Stapleton, Director of Operations, Care Group 4		
Accountable Director: Tom Abell, Deputy CEO		
This report is This report is public		

Executive Summary

This paper is to brief members of the Committee on proposed changes to the phlebotomy services previously provided from Southend, Basildon and Broomfield Hospitals and offer rationale for change. The intention is to share information and outline the options of three locations that have been identified as new locations for phlebotomy services. This has been done in consultation with local authorities.

NHS Improvement created guidelines following the Carter Report that stated, “Effective phlebotomy services are the first step to providing quality pathology tests. Wherever they are provided it is essential that patients’ needs are considered to ensure samples are taken as local to the patient as possible, with ease of access, in a manner that allowed early decision-making regarding patient diagnosis, treatment and monitoring”.

The COVID-19 pandemic has brought into sharp focus the need to review the way our diagnostic services are delivered in light of supporting social distancing and the need to reduce the spread of COVID-19. The pandemic is acting as a catalyst for transformation in healthcare which has resulted in new approaches to our care setting. Therefore this paper outlines the changes proposed to the phlebotomy services previously based at each of the hospitals. The intention is to relocate this service to settings based in local town centres within large well-attended shopping areas in Southend, Basildon and Chelmsford.

The pandemic has already accelerated many beneficial changes in relation to diagnostic pathways, such as increased use of virtual consultations and more care in the community. It is right that these positive changes are embedded and establish new pathways to diagnosis, so that both patients and healthcare professionals can ensure that investigations are done safely. This is why new care models, integrated care in the community and making patient appointments more accessible are central to these plans.

Not only will these changes make services more accessible and convenient for patients, but they also help bring footfall back into local shops and eateries that will benefit the local economy while continuing to safeguard patients' health and wellbeing.

The units will have a safe and COVID-compliant layout, with full integration of technology to allow quick and secure transfer of patient data. There will be one-way routing, minimised seating and clear signage and floor grids to minimise risk further.

1.0 Introduction and Background

Prior to COVID-19 pandemic phlebotomy services were located in the main hospital sites, offering both walk-in services and booked appointments. The phlebotomy services in each of the hospitals were based in and around the main outpatients services, or co-located close to them. The environment was often crowded and at times patients were required to stand due to this crowding.

Following the outbreak of COVID-19 there was a proactive intention to reduce footfall in the main hospitals sites by approximately 80% of all non-acute activity. Therefore the phlebotomy services at Southend and Chelmsford were relocated to temporary locations, immediately safeguarding patients, while Basildon services were unable to establish a safe temporary location so interim measures were taken to minimise risk of COVID-19 transfer. Activity was reduced to manage crowding and additional staffing was required to support flow, causing increased cost and reduced capacity.

2.0 Proposed change to service model

The Trust and its Pathology partners (Pathology First) have a strategic ambition to provide stable and accessible care in the community that is closer to home and more convenient for patients in a location built for the long term.

The end result will be improved, high-quality services across mid and south Essex. The move will reduce footfall in the hospitals, free up space to keep our patients and staff safe and give the Trust flexibility if responding to upsurges of infection within hospital settings.

Limited phlebotomy services will remain in each of the hospitals for urgent same-day bleeds to support clinical consultations and some specialist blood tests which are time- or light-sensitive. All other referrals will be subject to this proposed change.

3.0 Recommendations

3.1 Support the movement of phlebotomy services from Southend Hospital to Victoria Plaza based in Southend town centre providing urgent, routine adult bleeds and dedicated separated paediatric service offering routine and urgent blood tests. This move is planned for mid-April 2021 and will be located on the ground floor of the Victoria Plaza shopping centre.

The new phlebotomy service will be available over an increased number of days (7) and longer opening hours thus improving access to appointment and reducing waiting times. Booking will be made via an on-line booking system, while paperless appointments will be piloted to test the reliability of this method.

The centre will have four phlebotomy chairs with the ability to increase by two if demand dictates or delays accrue. A further two phlebotomy chairs are available if the service sees an increased demand if there is a change in public choice of venues. The unit will support dignity of care for bariatric patients by offering appropriate cubical with a specialties bariatric chair.

There will be an appointment-only paediatric service with a separate waiting area.

The service will be heavily supported by feedback champions and paper or online feedback surveys in the first six weeks to allow for future planning, readjustment and reflective learning. This will be shared with the Health and Care Partnership and support future modelling.

3.2 Support the movement of the phlebotomy service from Broomfield Hospital to Fairfield Centre based in the bus terminal complex in Chelmsford town centre. This move is planned from April 2021 to improve access and increase capacity.

Broomfield hospital operated a walk-in service prior to the COVID-19 pandemic, which often resulted in overcrowding in the waiting areas and long waits. Post-COVID, this method of appointments management could not support a COVID-secure environment.

The implementation of Swiftqueue on-line booking appointment system has helped to streamline the booking process and reduce waiting times, but does not fully resolve the loss of capacity which needs addressing.

Some additional capacity was re-established by increasing phlebotomy chairs in a temporary location in a church hall (Christchurch). However, in the long term this is not sustainable and gives no flexibility to improve and grow capacity as this facility is a community hall and will reintroduce community clubs and social events as COVID-19 restrictions are eased.

Therefore, there is a requirement to establish a fixed phlebotomy service in a dedicated centre which enables improved access to diagnostic testing, closer to home. Again, adjustments will offer single patient flow, socially distanced waiting areas, and individual blood rooms. This cannot be fully achieved in the current service location or the previous hospital location.

The phlebotomy service will run Monday to Friday, with appointments offered from 7.30am to 5.30pm in the first instance matching current service provision but will grow as demand increases to six days with extended hours.

The hospital will continue to offer same-day urgent blood tests which support outpatient consultations and specialist tests which are time- and light-sensitive.

3.3 Support the transfer of hospital phlebotomy services from Basildon to the Eastgate Shopping Centre in Basildon town centre. This development is still in the design stage and is planned for late May 2021.

The centre will support adult urgent, routine appointments and routine paediatric bleeds, increasing capacity and enabling improved waiting times.

Capital funding to support this scheme has been approved and ratified by the Trust's MSE Investment Group. Funding will be released from the financial year beginning April 2021.

Overview of changes and timeline:

Current	Planned change	Timeline
Broomfield Mid Essex Hospital	Fairfield Road, Chelmsford	March 2021
Southend Havens Hospice	Victoria Shopping Centre, Southend	April 2021
Basildon & Thurrock Basildon Hospital	Eastgate Shopping Centre, Basildon	May 2021

4. Reasons for Recommendation

4.1 To gain support for the relocation of phlebotomy services currently based at Basildon, Southend and Broomfield Hospitals to local town centre settings.

5. Consultation

5.1 Due to the nature of our COVID-19 response and having to expedite changes at pace to keep patients and staff safe we have not been able to consult fully with our local communities on these service changes. The changes take into account the wider strategy as outlined in the NHS Long Term Plan, published in 2019, that 'community phlebotomy services should be improved, so that all

patients can have blood samples taken close to their homes, at least six days a week, without needing to come to acute hospitals.'

Consultation has taken place with Health and Care partners, and Pathology First. Phlebotomy staff have reviewed and assessed the most effective way to provide an excellent service to our patients while taking into consideration the strict infection prevention control measures that have to be adhered to as we continue to respond to the COVID-19 pandemic

Patient engagement workshops are planned to take place in March and April and a patient experience survey is going out to a cohort of patients who have used the phlebotomy service. Feedback from these workshops and surveys will help us to shape the new service as it gets up and running.

6. Impact on corporate policies, priorities, performance and community impact

- 6.1 The new phlebotomy services will be in the heart of local communities providing easy access for patients. There will no longer be a need for our local populations to go into hospital to provide a blood sample.

Supporting our local areas: The blood testing units will bring additional footfall to the main shopping centres in Basildon and Southend, and the high street in Chelmsford.

A report commissioned by NHS England and NHS Improvement to review diagnostic services as part of the NHS Long Term Plan outlined key actions required as part of the COVID-19 recovery and renewal of these services.

Once clear recommendation was that community diagnostic hubs (CDHs) should be established away from acute hospital sites to keep them 'as clear of COVID-19 as possible.'

This will also help to reduce the variation in services that currently exists across the patch.

7. Background papers used in preparing the report:

The NHS Long Term Plan: <https://www.longtermplan.nhs.uk/wp-content/uploads/2019/08/nhs-long-term-plan-version-1.2.pdf>

Science in healthcare: delivering the NHS Long Term Plan: <https://www.england.nhs.uk/wp-content/uploads/2020/03/science-in-healthcare-delivering-the-nhs-long-term-plan.pdf>

The guidance paper on diagnostics published on 26 June 2018 was used in the development of this brief - "First steps in improving phlebotomy: The

challenge to improve quality, productivity and patient experience”
<https://www.england.nhs.uk/improvement-hub/wp-content/uploads/sites/44/2018/06/First-Steps-In-Improving-Phlebotomy.pdf>

The Trust has robust governance arrangements in place to ensure projects approved through to implementation add value to the efforts of the organisation and contribute towards improving outcomes in patients. An Equality Quality and Impact Assessment has been undertaken for all three retail units.

Below is the summary of the assessments:

Phlebotomy Unit – Eastgate Shopping Centre and Victoria Plaza Southend

Equality and Diversity: There are no implications for groups with protected characteristics.

Duty of Quality: Increase in capacity enabling reduction in patient waiting times.

Patient Experience: The new facility will offer an improved service to patients increasing patient satisfaction. Surveys will be completed by patients at the end of their visit to enable continuous improvement to the service.

Having phlebotomy services in the shopping centre with adequate parking spaces that are cheaper than the hospital allows patients to park easily and do their shopping on a single visit thereby reducing complaints and improving their experience.

Carers Experience: With planned operation for the patient maintained by the service with access to other services within the shopping centre will also improve carers’ experience.

Patient Safety: The centre is being designed in compliance with infection and COVID-19 safety measures. The centre will be augmented with safety features to protect patients.

Clinical Effectiveness: Having adequate bleeding capacity promotes timely availability of test results to support evidence-based clinical intervention. The opening of the centre is being implemented through engagement with staff, patients and Commissioners. Feedback received is being used to shape strategy and future plans. This will improve the standards of service delivered to patients.

Productivity and Innovation: Moving the phlebotomy service to the Eastgate Shopping Centre follows the Carter Report recommendations to move

services close to patients. It will result in an enhanced service delivery closer to patients.

Staff Satisfaction: Some of the staff members may not be keen on moving to the new site but the majority will find it positive due to ease access to parking and shopping whilst at work.

Phlebotomy Unit – Fairfield Centre – Chelmsford

Equality and Diversity: Appointments will be offered in the same manner as current. The clinic is well served by public transport and town-centre car parks. Patients with a blue badge are able to park on yellow lines outside the clinic. Change of location is the only new aspect to the service.

Patient Experience: The change of location will be more convenient for some and less for others, but a reduction in footfall at the acute site is a consequence of providing a COVID-secure service. Additionally, GP surgeries are no longer able to accommodate maternity and phlebotomy services due to social distancing and COVID-compliance issues with their buildings. The new clinic is a pleasant environment with good transport links.

Patient Safety: Community maternity services have been severely impacted by the closure of their services within GP surgeries which affects patient safety. This clinic will enable timely appointments to be resumed thus improving patient safety. The current alternative for phlebotomy is at the acute site or a local church hall. Avoiding visiting the acute site is an improvement in patient safety from a COVID-secure perspective, and the church hall is not designed for clinical use. The new clinic has more suitable flooring, lighting, benching, and layout.

Clinical Effectiveness: Community midwives will be working in exactly the same manner as previously, but in a different location. For phlebotomy, there will always be a supervisor or manager on site to ensure high standards. No change to evidence-based practice or engagement.

Productivity and Innovation: This setting is an improvement upon attending the acute hospital site or a church hall in terms of infection prevention. The opening hours of the clinic are within our own gift which enables the services to be responsive to changes in demand and therefore improved use of resources. There is a financial cost to the clinic setup which has been approved by the MSE Investment Group.

Staff Satisfaction: The clinic is a pleasant setting and provides a staff rest room, kitchen, lockers and changing facilities. Whilst some staff may have preferred their current location due to proximity to their homes, for others this location will be preferable. The phlebotomy staff will have the benefit of a supervisor or manager on site. Community midwives are currently under

enormous strain as they have no fixed location from which to offer community services, so this clinic should improve morale for maternity.

Report Author:

Sharon Salthouse – Group Director of Pathology, Mid and South Essex NHS Foundation Trust.