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SOUTHEND-ON-SEA BOROUGH COUNCIL

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

Date: Wednesday, 6th June, 2018

**Place: Council Chamber - Civic Suite,
Victoria Avenue, Southend-on-Sea**

Present: Southend-on-Sea Borough Council – Councillors B Arscott, S Habermel, C Nevin and M Borton
Essex County Council – County Councillors B Egan and J Lumley
Thurrock Council – Councillors V Holloway and T Fish

In Attendance: Councillors M Terry and C Willis – Southend-on-Sea Borough Council
F Abbott, N Faint, G Hughes, T Hartley and Roger Harris

Start/End Time: 7.30 - 8.55 pm

1 Membership of Joint Scrutiny Committee

The Scrutiny Officer advised that following the recent local elections and changes to Committees, the membership for the Joint Scrutiny Committee is as follows:-

Representing Southend-on-Sea Borough Council – Councillors B Arscott, S Habermel, C Nevin and M Borton

Representing Essex County Council - County Councillors B Egan, J Lumley, Dr R Moore and S Robinson

Representing Thurrock Council – Councillors V Holloway and T Fish.

2 Apologies for absence & substitutions

Apologies for absence were received from County Councillor Dr R Moore (Essex County Council) and County Councillor S Robinson (Essex County Council).

3 Declarations of Interest

The following interests 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 area;
- (b) Councillor Habermel - non-pecuniary – brother is a paramedic with London Ambulance Service; sister is a nurse and works at Southend Hospital; nephew is a physiotherapist at Southend;
- (c) Councillor Borton - non-pecuniary – daughter is a nurse at Rochford Hospital;

- (d) County Councillor Egan - non-pecuniary – ECC nominated governor – Castle Point & Rochford CCG; cousin works at Basildon Hospital.

4 Appointment of Chairman and Vice Chairman

Resolved:-

1. That Councillor Arscott be appointed as Chairman of the Joint Scrutiny Committee.

COUNCILLOR ARSCOTT IN THE CHAIR

2. That County Councillor Egan and Councillor Holloway be appointed as the two Vice Chairmen of the Joint Scrutiny Committee.

5 Minutes of the meeting held on Tuesday, 13th March, 2018

Resolved:-

That the Minutes of the meeting held on Tuesday, 13th March 2018, be confirmed and signed as a correct record.

6 Terms of Reference of the Joint Committee

The Terms of Reference for the Joint Scrutiny Committee had been approved at the meeting held on 20th February 2018 and were presented to the meeting for information.

The purpose of the Joint Scrutiny Committee was to respond to the consultation document on acute reconfiguration in Mid and South Essex and to monitor and scrutinise the work of the STP.

Resolved:-

That the Terms of Reference of the Joint Scrutiny Committee be noted.

7 Statements from members of the public

There were no statements from members of the public.

8 Public consultation 'Your Care in the Best Place'

At the meeting on 13th March 2018, the Joint Scrutiny Committee had agreed the way forward for submitting the response to the Mid and South Essex Sustainability & Transformation Partnership (STP) public consultation 'Your Care in the Best Place'. The Joint Scrutiny Committee had submitted its formal response on 22nd March 2018 and a response from Dr Donley OBE, Independent Chair was received on 19th April 2018.

Resolved:-

That the Joint Scrutiny Committee formal response to the consultation and the response from the STP be noted.

9 Mid and South Essex STP - outcome report

The Joint Scrutiny Committee had before it the independent analysis of consultation feedback which had been published on 22nd May 2018.

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
- Claire Hankey – Director of Communications and Engagement, STP
- Tom Abell – Deputy Chief Executive of the 3 hospitals in Mid and South Essex
- Dr Ronan Fenton – STP Medical Director

The representatives gave a presentation which provided the following information:

- developments from the last meeting in March 2018
- overview of public consultation
- outline of consultation responses - the key findings were that the 5 principles consulted upon were broadly supported, however there was some local variation - less general agreement with the proposals from residents within the Southend CCG area and less agreement from Thurrock residents on proposals to close Orsett Hospital once services had been transferred to centres closer to people's homes
- a short video providing a snap shot of information from focus groups
- preparing for decision-making by CCG Joint Committee at meeting in public on 6th July
- updates on family and carer transport, East of England Clinical Senate, which will feed into decision-making business case and Partnership Board.

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:-

Consultation - disappointed about the response rate from the consultation / survey and queried the weighting being given to responses. The STP confirmed that all evidence and respondents were given equal weighting. Some Members suggested that particular account should be taken from evidence submitted by certain respondents such as local authorities and patient groups.

The number of health staff responses was low but was thought partly attributable to be because most staff were not being directly impacted by the changes and so did not feel they needed to respond. The STP stressed that there had been formal staff side meetings and promotional material widely available.

The STP representatives stressed that the impact of proposals on inequalities and specifically health inequalities would be a key consideration.

Acute reconfiguration – the Clinical Senate had visited the Basildon site recently with their report expected later in June. The Senate have requested more detail on emergency surgical processes (especially those at Basildon) and encouraged even greater separation of elective and non-emergency processes.

Primary care strategy – there were significant work force challenges which would need to be addressed in the development of a Primary Care Strategy. The Joint Scrutiny Committee looks forward to discussing the STP wide strategy as this will be key. The individual HOSCs will consider the local implementation plans at their meeting in July and September.

The STP indicated that they were not anticipating fundamental change to local primary services but rather to further develop existing local services.

Prevention – some Members queried that, despite greater emphasis on preventative care, they doubted that members of the public knew enough about this or had access to the necessary information to effectively practice it. It was highlighted that this was a key part of community and primary care and the JHOSC had not really been able to engage in comprehensive discussions with the STP on plans for those sectors yet. Some members questioned whether many decisions could be made without a primary care strategy in place.

Transport and accessibility of services – the STP had committed during the public consultation to commission some external travel planning work and engagement events with interested partners. The work was commissioned based on four key considerations:

- improved accessibility between sites and for those in urban areas
- Improved access for those in smaller areas through a volunteer driver scheme and working with community transport providers
- improving use of public transport through providing better and more accessible information
- developing a common approach to staff transport across the three hospitals.

The STP were continually monitoring and ‘sense-checking’ the likely numbers needing clinical transfers and still thought it would be around 15 a day. The STP had checked with and sought advice in setting up clinical transfers from other areas operating clinical transfer models (e.g. Cumbria).

Members sought further clarification on possible core shuttle bus routes, frequency, connecting with other services and working with existing public transport providers.

The STP had engaged with community transport providers in small focus groups but acknowledged that it had yet to arrange a larger forum with them all present.

The detailed proposals for non-emergency transport solution (for patients, families and carers) and clinical transfers will be part of decision-making business case. A full travel plan analysis would be published alongside the

Business Case. The Joint Scrutiny Committee asked to see detail of the developing plans.

Shortages in workforce to deliver a sustainable service – there are key workforce gaps across the 3 acute hospitals and the STP representatives outlined the work being undertaken. Challenge is provided through the Clinical Senate process. Some Members sought further clarification on how future staff rotas and e-rostering could be integrated into the broader plans.

Mental health – Members highlighted that mental health patient transfers had not been included in the review. The STP confirmed that they were working with mental health providers to improve response times for those presenting at A&E with mental health issues.

Financial constraints – the STP said that successful delivery of the proposals contained within the consultation would secure a more financially sustainable NHS and also that the STP has been successful in being earmarked to receive £118m of capital funding to support improvements to hospital premises and equipment.

Resolved:-

That the STP be thanked for the presentation and update on the consultation and next steps.

10 Next steps and future meeting dates

Resolved:-

That the next formal meeting of the Joint Scrutiny Committee be held at Thurrock Council offices, Grays and will take place after the CCG Joint Committee meeting, which is scheduled to take place on Friday 6th July 2018.

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