

Adult Social Care and Health Overview & Scrutiny Committee

15 February 2012

Paediatric and Maternity Services at George Eliot Hospital, Nuneaton Interim report of the Task & Finish Group

Recommendations:

- (1) To endorse the progress of the Task & Finish Group
- (2) To endorse the proposed next steps

1.0 Introduction

- 1.1 In 2011, the Arden Cluster (the merger of NHS Coventry PCT and NHS Warwickshire PCT) gave notice of its intention to consult on changes to the provision of paediatric and maternity services in North Warwickshire. Specifically, this was in relation to the continued provision of services at the George Eliot Hospital (GEH), Nuneaton.
- 1.2 There has been professional consensus that the current in-patient paediatric service at GEH is unsustainable, and should be relocated to University Hospital Coventry and Warwickshire (UHCW). This is due to a low volume and variety of cases at GEH, which prevents doctors from gaining the experience they need to develop and progress, which in turn has had a negative impact on staff retention and morale. The low case load and diversity has also restricted the training that the hospital can provide to junior doctors. As a result, the West Midlands Deanery concluded that it could no longer support medical paediatric training at the site, and withdrew training from September 2011.
- 1.3 The transfer of in-patient paediatrics away from GEH would have consequences for other GEH services. Without consultant paediatricians on-site 24x7, GEH would not have the expertise to address problem births at the maternity unit. The Arden Cluster has therefore commissioned a wider review of paediatric and maternity services for North Warwickshire to ensure that services for women and children are safe and sustainable.
- 1.4 As part of this review, the Arden Cluster is obliged to consult the Adult Social Care and Health Overview & Scrutiny Committee as it involves a "potential substantial change or variation in the provision of health services".

- 1.5 A Task & Finish Group was established to scrutinise the review, with a remit to consider:
- The consultation process undertaken by the Arden Cluster, including pre-consultation engagement, development of the options, awareness of local needs and potential impacts
 - The effectiveness of the consultation process, including whether it is reaching the right people in the right areas and the ease with which people can submit their views
 - A formal response to the consultation on behalf of the Adult Social Care and Health Overview & Scrutiny Committee
- 1.6 The current membership of the Task & Finish Group is as follows:
- Cllr Martyn Ashford
 - Cllr Peter Balaam (Chair)
 - Cllr Jim Foster
 - Lesley Hill (LINK representative)
 - Cllr Barry Longden
 - Cllr Carolyn Robbins
 - Cllr Sonja Wilson
- 1.7 Due to a number of changes and delays in the proposed consultation process (summarised in the table below), the Task & Finish Group agreed that this interim report should be brought to the Committee now to provide an update on progress to date and to seek endorsement on the proposed next steps.

2.0 Progress to date

- 2.1 Regular meetings have been held to receive information and hold discussions with representatives of the Arden Cluster. Some members have also participated in stakeholder events.
- 2.2 Many issues have been considered so far – including clinical robustness, operational viability, physical access to facilities (transport etc), continuity of care for users and the views of hard-to-reach groups.
- 2.3 Alongside the work of the Task & Finish Group, the consultation process is being reviewed by the National Clinical Advisory Team (NCAT) and the Department of Health “Gateway Review” process. The NCAT review focuses on issues of clinical robustness, while the Gateway Review focuses on governance of the service redesign process.
- 2.4 In order to avoid duplication with these reviews, the Task & Finish Group has agreed to narrow its focus. Members are focusing their scrutiny on the potential impact on users of the options (such as accessibility of services and the practicalities of transport) and the reach of the consultation (to ensure hard-to-reach groups are included and a variety of opinions are submitted). Members will defer opinion on clinical and governance matters to the NCAT and Gateway reviews, and consider any issues within those reports as they arise.

2.5 The following table provides a timeline of the Task & Finish Group's activity to date.

Date	Arden Cluster update / member activity	Outcome
26 July 2011	Members were Informed that alternative service models are being explored, and the public consultation is to begin in October 2011.	Members to await details of proposals
3 Oct 2011	Members were informed of delays to the previous timescales, and the revised next steps: - "Options appraisal" workshop scheduled to analyse 6 service options against standard criteria - "Business Case" to be developed, to validate the financial, clinical and operational sustainability of the options - Gateway Review scheduled for November, to ensure robustness of consultation planning and governance - Public consultation to begin 5 Dec 2011	Cllr Longden and Lesley Hill to participate Cllr Longden to participate
2 Nov 2011	Members were given timelines for reviewing the Business Case and draft Consultation document, and asked to respond within 5 working days.	Meeting scheduled for 17 Nov 2011
17 Nov 2011	Meeting postponed due to further delays	
18 Nov 2011	Delayed receipt of Business Case and draft Consultation (in which the 6 original options had been reduced to 3 options). Members were required to respond within 2 working days.	Emergency meeting scheduled for 21 Nov 2011
21 Nov 2011	Members met to review the above documents and discuss concerns.	Formal response letter drafted overnight
22 Nov 2011	Formal response letter of the T&F Group submitted, signed by Cllr Balaam and Cllr Caborn	
24 Nov 2011	Press release issued by Arden Cluster stating that public consultation is delayed until new year to allow further work on Business Case.	Members to await details of proposals
11 Jan 2012	Members were informed of the latest status, explained below (2.6 and 2.7).	Members to await details of next steps Members are still awaiting a written reply to the 22 Nov letter

2.6 The main reason for the delay in consultation centred on Option C of the shortlisted options, which proposes that all services remain at GEH apart from in-patient paediatrics.

2.7 Although Option C ranked first in the non-financial options appraisal and is the preferred option for GEH, the Arden Cluster is seeking assurances over the sustainability of the workforce plan, based on the following concerns:

- The paediatric case mix at GEH will remain low, making it difficult to recruit and retain doctors

- The option is not supported or deemed safe by current paediatricians and neonatologists because GEH has so far been unable to find a viable model that ensures the long-term retention of suitably qualified doctors

2.8 On 23rd January 2012, a press release was issued stating that GEH is proposing a partnership with South Warwickshire NHS Foundation Trust in order to support Option C. This would provide a resident rota of consultant paediatricians working on the GEH site, employed by South Warwickshire NHS Foundation Trust. It is intended by GEH that this new partnership will provide a viable model and therefore meet professional concerns about Option C.

2.9 This proposal will be independently reviewed by a consultant from the Royal College of Paediatricians and by NCAT. The outcome of these reviews will inform the Arden Cluster's judgement of whether Option C is sustainable over the long term and can therefore be included as an option for public consultation.

3.0 Proposed next steps

- 3.1 The Task & Finish Group seeks endorsement from the Committee to:
- Continue in its current form, with its main focus of scrutiny being the potential impact on users and the reach of the consultation (deferring clinical and governance issues to the NCAT and Gateway Review teams)
 - Continue to scrutinise and provide its views to the Arden Cluster during the pre-consultation phase – i.e., the development and finalisation of the Business Case and Consultation document
 - Instruct the Arden Cluster that it requires at least 5 working days to consider and respond to these documents, preventing a repeat of the scenario that occurred on 21 November
 - Scrutinise the consultation response rate at 30 days and 60 days from the date of commencement, with a view to making recommendations that improve participation (if necessary)
 - Bring a draft formal consultation response to the Committee for approval when appropriate*

*As the consultation dates have not yet been announced, it is not known if this response can be brought to a scheduled Committee meeting date. Therefore, members may wish to consider if a special meeting would need to be convened or if approval of the response could be sought outside the formal Committee setting (i.e., via email).

Position	Name	Contact Information
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