

The **HEALTH OVERVIEW AND SCRUTINY COMMITTEE** met at **WARWICK** on the **28th SEPTEMBER, 2005**

Present:-

Members of the Committee:

County Councillors: Jerry Roodhouse (Chair
Anne Forwood (Vice Chair)
John Appleton
Sarah Boad
Tom Cavanagh
Marion Haywood
Bob Hicks
Helen McCarthy
Anita Macaulay
Frank McCarney
Raj Randev
John Ross

District Councillors: Bill Hancox (Nuneaton and
Bedworth Borough Council)
John Hatfield (Warwick
District Council)

Other County Councillors:

Bob Stevens (Cabinet Portfolio Holder –
Performance Management)

Officers:

Marion Davis – Director of Social Care and Health
Alwin McGibbon – Health Scrutiny Officer
Jane Pollard – Assistant County Solicitor

Also Present:-

[Roger Copping \(Warwick District Health Champion\)](#)
Ann Beaufoy (Member of the Patient and Public
Involvement Forum – North Warwickshire PCT)
Sandra Simms (Member of the Patient and Public
Involvement Forum – North Warwickshire PCT)
Joan Hughes (Chairman – League of Friends
Shipston on Stour Hospital)
Malcolm Hazell (Coventry and Warwickshire
Ambulance Trust)
Jan Fereday-Smith (South Warwickshire General
Hospitals Trust)

Jane Ives (South Warwickshire General Hospitals Trust)
Helen Walton (South Warwickshire General Hospitals Trust)

1. **General**

(1) **Apologies for absence**

Apologies for absence were received from Councillors Jane Harrison. In addition Paul Hooper (Regional Tobacco Lead, South Warwickshire PCT) had indicated that he could not attend.

(2) **Members Declarations of Personal and Prejudicial Interests**

Councillor Tom Cavanagh – member of Rugby Borough Council.
Councillor Frank McCarney – Board Chairman of George Eliot NHS Trust.

(3) **Minutes of the meetings held on 21st June 2005 and matters arising not covered elsewhere on the agenda**

(i) **Minutes**

Resolved:-

That the minutes of the Health Overview and Scrutiny Committee's 21st June 2005 meeting be approved – subject to the amendment of the final sentence of the first paragraph of Minute 11(3) to read "This was very expensive as the cost of repair would be £54 but a new pair would cost £500" – and be signed by the Chair.

(ii) **Matters arising**

There were no matters arising that were not covered elsewhere on the agenda.

(4) **Matters arising from previous meeting**

(i) **Lighthorne Heath Branch Surgery [Health O&S 27 July 2005]**

The Committee noted the letter from Peter Dodd, Stratford Locality Manager.

(ii) **Maternity Services Review [Health O&S 15 June 2005]**

The Chair suggested that the responses the PCTs and Acute Hospital Trusts should be sent to the Maternity Services Panel. Councillor Sarah Boad as Chair of that Panel welcomed that course of action.

It was then Resolved:-

- (1) That the Health Overview and Scrutiny Committee's thanks the PCTs and the Acute

Hospital Trusts for their responses to the recommendations on Access to Maternity Services; and

- (2) That a further progress report be made to the Access to Maternity Services Panel in six months.

(iii) Review into the National Ambulance Service [Health O&S 27 July 2005]

Malcolm Hazell, Chief Executive of the Coventry & Warwickshire Ambulance NHS Trust said that the proposals arising from the review was that there would be a reduction from 33 local services to 11. It was proposed that the Staffordshire, Shropshire, Hereford & Worcester, Coventry & Warwickshire and West Midlands services would combine. The new arrangements would commence from the 1st April 2006 with shadow organisations in being by the end of December. He then read out the following letter he had written to the Strategic Health Authority expressing the view of the Trust:-

“The proposal to have a single ambulance trust covering the entire region is not supported by this Trust. Whilst it is acknowledged that it is possible to retain local operations centres and thereby minimise the risk to patients, any reduction in local management capacity represents a reduction in the capacity of ambulance services to deliver effective patient care. For example, all our executive Board members who have an operational background fulfil the role of Duty Senior Officer, and as such provide support to operations officers 24 hours daily. A requirement for such support typically arises 3 or 4 times a week under normal circumstances, and can be much more demanding in situations such as the fuel crisis, or when the terrorist threat is great, or when there is strong media interest in a particular incident. Non operational Board members co-ordinate and fulfil the duty recall officer function, which is essential if the Trust is to mobilise off duty staff to meet increases in demand, particularly in the event of a major incident.

“The proposed reduction from four trusts to one would create an organisation responsible for two million patient journeys. The largest ambulance service in the world is presently London, and it undertook 1,155,000 patient journeys in 2004/5 (Source: NHS Health & Social Care Information Centre National Statistics). Thus the proposal is planning to create an organisation with nearly twice the activity of London Ambulance Service. There is no evidence to suggest that such a huge new trust will be efficient, economic or effective. Indeed, the three county East Anglian Ambulance Trust merger resulted in a national inquiry which cautioned about its size and structure, and the East Midlands Ambulance Trust has similarly never delivered on the expected efficiencies, economies or effectiveness.

“London Ambulance Service has an income nearly 10 times greater than Coventry and Warwickshire, but the latter conveys 44% of the volume of patients compared to London. Within a budget of £27m the Coventry & Warwickshire Ambulance Trust will convey about 520,000 emergency and routine patients in 2005/6. In terms of patients conveyed it is the seventh largest non metropolitan ambulance trust in England, and including the metropolitan services it is the 13th largest in England. It also has a considerable portfolio of GP answering and visiting services, receiving between 15,000 and 20,000 calls each month, and provides a significant logistic medical service, all within its £27m budget.

“This Trust has a high proportion of Emergency Care Practitioners – over a quarter of the entire emergency service – and it is more integrated into its health community than any other ambulance trust. All ECPs rotate with acute or primary care as well as deploying in the ambulance role. The conveyance of patients by ECPs is now as low as 50% in the emergency ambulance role.

“This Trust has been at the forefront of paramedic and emergency care practitioner development, and in conjunction with Warwick and Coventry Universities has designed and implemented a number of courses to ensure pre-hospital clinical education is fit for purpose. This investment in education and training, combined with effective local management, has already generated significant savings for the wider health community. For example, the deployment of ECPs has substantially reduced inappropriate patient conveyance and provided the most economic, efficient, and effective service for unscheduled primary care services. Such savings will continue to increase given the opportunity to do so, and overshadow any potential management savings that might ensue from merger, but clearly has failed to do so in any ambulance trust mergers thus far.

“If ambulance trusts are to continue to take on wider roles, as Coventry & Warwickshire has already done, this requires strong local focus and liaison with a local health community, including Social Services, Acute Trusts, and the Primary Care Trust. The proposal to reduce the number of ambulance trusts from four to one will detract from this process, not contribute to it.

“Moreover, given the huge geographical spread that such a proposed trust would cover, the excessive recruitment process runs the serious risk of losing the best candidates by selecting an unsuitable headquarters site, such as Dudley or Birmingham City Centre. In such circumstances the prospect of an entire three star management team being made redundant appears distinctly likely, with those who have achieved the least progress towards the aspirations espoused in the Bradley Report being rewarded with greater responsibility, salary and such like, by virtue of their place of residence and their willingness to acquiesce to a decision that is not grounded in any recognisable management decision process, such as option appraisal, risk assessment, or cost benefit analysis.

This management team will of course do its very best to ensure that, whatever final structure is decided upon, it will work with total commitment to optimise this, but we feel this should not extend to supporting proposals at the consultation phase, which are flawed.”

Members made the following points:-

- The 1st April 2006 deadline was too short to enable proper consultation to take place.
- The merger could place the provision of the local air ambulance service at risk.
- There was a significant difference in the type of ambulance services needed in a large conurbation and a very rural area and there was a worry that rural areas would lose out.
- The information provided by Malcolm Hazell should be circulated to all County Councillors, District Council colleagues, Chief Executives of District Councils and MPs in Coventry and Warwickshire.

(iv) Air Quality & Health – Implementation of recommendations
[Health O&S 12 January 2005]

The Committee received the responses from the PCTs and the Director of Planning, Transport and Economic Strategy.

The following points were made:-

- The South Warwickshire PCT was to be commended for identifying and promoting the importance of smoke free households in protecting the health of families and children.
- The review had exposed Borough/District Council Environmental Health Officers to Health Service professionals.

It was then Resolved:-

- (1) That the Health Overview and Scrutiny Committee welcomes the positive responses from PCTs and the Director of Planning Transport and Economic Strategy on the steps taken towards implementation of the recommendations on Air Quality and Health; and
- (2) That the responses be forwarded to the relevant Cabinet portfolio to inform future working on these issues.

(v) Assessing NHS Core Standards for 7 Trusts [Health O&S 15
June 2005]

The Committee noted that they would need to comment on the declarations of the various trusts by the end of October.

Alwin McGibbon said that Rugby PCT had written to say that it was confident that it would be submitting a declaration that stated that it was fully compliant with standards. The PCT asked for any comments from the Committee. However the PCT was unable to produce a hard copy of its submission and the electronic version was protected by a password.

The Committee recognised that the timescale was unrealistic.

It was then Resolved:-

- (1) That the Healthcare Commission be advised that the Health Overview & Scrutiny Committee considers that the process followed to date had not engaged the Committee in any meaningful way; and
- (2) That the Health Overview & Scrutiny Committee was unable to comment on the compliance at this stage of the NHS Trusts with the Core Standards as it has received insufficient information to enable it to do so from the Rugby PCT and the information was awaited from the other trusts.

2. Public Question Time (Standing Order 34)

Joan Hughes, Chairman – League of Friends Shipston on Stour Hospital, made the following statement:-

“I currently work at the Shipston on Stour Hospital as a volunteer and often see examples of patients receiving attention from the staff.

“The importance of this service is that it is available 24 hours a day, 7 days a week and is run by a sister who has other responsibilities and is always available.

“Over the years I’ve been impressed with the Minor Injuries Unit (Stratford Hospital) and long experience has shown me how valuable it has been to the community. Also it is particularly important facility in Stratford on Avon especially with its role as a tourist town in the region.

“Could the Health O&S Committee please note my comments as evidence of the usefulness of this service?”

The Chair said that this would be passed on to the South Warwickshire General Hospitals NHS Trust, representatives of which were present, and the South Warwickshire PCT.

3. South Warwickshire General Hospitals NHS Trust – Changes to Services

A letter from Mrs Janet Monkman, Chief Executive of the South Warwickshire General Hospitals NHS Trust, in response to a draft letter from the Committee to the Secretary State making representations about the Trust's proposals for the provision of the physiotherapy service in Leamington Spa was circulated.

The representatives from the Trust were grateful for the opportunity to respond to the draft letter. The Trust had attempted to answer a range of concerns as set out in Mrs. Monkman's letter and the representatives requested that the Committee should reconsider its stance.

The following points were raised during the discussion:-

- If there were a demand for more appointments in Leamington Spa, the Trust would consider providing more.
- The central booking system would enable patients to choose between an evening appointment in Warwick and a daytime appointment in Leamington Spa.
- It was recognised that the bus service was patchy with some parts of Leamington area being poorly served by buses to Warwick Hospital.
- Car parking at the Hospital was tight; also people were liable to park in the streets outside the Hospital to avoid paying the car parking charges, thereby causing problems for local residents.
- The portakabin had never been intended to be a permanent solution to the provision of a physiotherapy service in Leamington Spa.
- In view of the willingness of the Trust to increase the number of appointments in Leamington Spa, if required, it was considered that the letter should not be sent to the Secretary of State and the matter be reviewed in six months.

It was then Resolved:-

- (1) That the Health Overview and Scrutiny Committee note the letter from the Chief Executive of the South Warwickshire General Hospitals NHS Trust and express concern at the loss of physiotherapy appointments in Leamington Spa and that the Committee ask the Trust to monitor the pattern of physiotherapy appointments between Leamington Spa and Warwick and inform those patients on benefits that they can claim a refund on travel expenses and that the fact that there was free parking at Warwick Hospital for blue badge holders be highlighted; and

- (2) That the South Warwickshire General Hospitals NHS Trust report back to the Warwickshire Health Overview and Scrutiny Committee in six months on the pattern of bookings for physiotherapy appointments and in the meantime the proposed letter making representations to the Secretary of State against the changes to the physiotherapy service in Leamington Spa be not sent.

4. Mental Health Provision

(1) Terms of Reference for Mental Health Panel (2nd Phase)

The Report of the County Solicitor and Assistant Chief Executive was considered.

It was then Resolved:-

That the Health Overview and Scrutiny Committee agree the terms of reference for the scrutiny of mental health with specific reference to:-

- Panel Members
- Scope
- Methodology
- And Resources

It was agreed that the Panel should comprise the Chair, two Conservative Group Members (Councillors Helen McCarthy and Anita Macaulay), two Labour Group Members, and two Borough/District Members of the Committee (Councillors Jane Harrison and Richard Meredith).

(2) Mental Health Trusts – Proposals for change in Coventry and Warwickshire

Marion Davis informed the Committee of an important change in the provider service for mental health provision in Coventry and Warwickshire. The Strategic Health Authority was setting up a Trust to deal with mental health and learning disability provision across Coventry and Warwickshire. Both she and her counterpart in Coventry were involved in the arrangements.

5. Provision of NHS Dentistry in Leamington Spa

The Committee received details of the action proposed by the South Warwickshire PCT to provide NHS dentistry in Leamington Spa following the decision by the practice at 13 Euston Place to leave the NHS.

The following comments arose during the discussion:-

- Members were pleased that action was being taken and it was noted that use was being made of international recruitment.
- The insistence that practices should be wholly private or wholly NHS was a retrograde step as private practices currently provided NHS treatment for children.
- It was noted that the Euston Place practice had been offered a 20.4% increase this year.

It was then Resolved:-

- (1) That the Health Overview and Scrutiny Committee notes the closure of the dentistry practice at 13 Euston Place, Leamington Spa, to NHS patients;
- (2) That the Health Overview and Scrutiny Committee welcomes the steps being taken by South Warwickshire PCT to ensure that patients affected continue to have access to NHS dentistry services; and
- (3) That the information be forwarded to the Chairs of the Warwick Area Committee and relevant PPI Forums.

6. South Warwickshire PCT – Changes to Services

The Committee received the document headed “Balancing Demand with Resources”.

The Chair said that he and Councillors Ann Forwood and Anita Macaulay had met representatives from the South Warwickshire PCT about measures that the PCT were seeking to put in place to meet certain challenges for the Health economy locally. A meeting had also been arranged for the 3rd October 2005 with the acute sector.

7. Community Hospital Beds Pilot for South Warwickshire

The Committee were disappointed that there were no representatives present from the South Warwickshire PCT and it was agreed that a letter should be sent to the PCT expressing that disappointment and emphasising the importance of ensuring an appropriate level of consultation with the Patient and Public Involvement Forum.

8. National Health Service – proposed changes

The Committee noted that this had been debated at the County Council meeting on the 20th September, 2005.

9. **Correspondence**
“Creating a World Class Coventry and Warwickshire Health Economy”

The Committee received details of a review of acute hospital services across Coventry and Warwickshire and received a briefing from the meeting of the Acute Services Review Board on the 20th September 2005 where options were being considered on the role of the Acute Trusts in Coventry and Warwickshire. It was noted that there was a likelihood of changes to ensure the stability of the health economy.

The Chair said that he had tried to get wider representation from the Committee on the Project Board but this had been restricted to the Chairs of Health O&S Committees. However, he had made it clear that his presence on the Project Board would not be taken as support of any proposals arising from discussion at the meetings and that he would reserve the right to scrutinise any such decisions. He would ensure that spokespersons were kept informed of any background information and that there would be a full presentation to the Committee in December.

10. **Future meetings and work programme to date**

The Chair reminded members about the health event scheduled at Manor Hall, Leamington Spa, on Wednesday the 26th October 2005 from 3 p.m. to 9 p.m.

He also reminded them of the need for a meeting during the third week of October in connection with the draft declarations from the seven health trusts on core standards. *[County Solicitor’s note: It was subsequently decided that this issue could be dealt with by way of a virtual meeting.]*

11. **Any other Items**

None.

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Chair

The Committee rose at 12.40 p.m.