

**Report of Head of Scrutiny and Member Development**

**Report to Scrutiny Board (Health and Well-Being and Adult Social Care)**

**Date: 25 January 2012**

**Subject: Major Trauma in Yorkshire and the Humber – local implications**

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

**Summary of main issues**

1. The purpose of the report is to present an outline of the proposed changes to the patient pathways for Major Trauma across Yorkshire and the Humber.
2. In Autumn 2012, proposals to change existing local patient pathways for accessing Major Trauma services across Yorkshire and the Humber first emerged. This included establishing designated Major Trauma Centres (MTC) across the region. It is proposed that Leeds Teaching Hospitals NHS Trust (LTHT) will become a designated MTC from April 2012.

**Health Service Developments Working Group**

3. At the meeting in November 2011, the Health Service Developments Working Group (HSDWG) was first made aware of the proposed service changes around Major Trauma. However, detailed information (including specific local implications) have not been presented to date and the level of significance attached to the proposals appear to have been open to interpretation – initially presented as Level 4 (major/ substantial) service changes in November, and more recently presented as a Level 3 (significant) change. The rationale for this change in assessment has not been made clear and could not be explained.
4. Furthermore, to date information around the local implications has been limited, particularly in the following:
  - Proposed networks / patient flows - including projected patient numbers;

- Implications / benefits for local patients;
  - Potential impact on other LTHT hospital based services;
  - Impact on other related services and/or organisations, such as Yorkshire Ambulance Service and Embrace.
5. An indication of the above information is necessary to help the working group, through discussion with NHS organisations, agree the appropriate level of service change – and therefore the appropriate level of public engagement and involvement necessary. To help the Scrutiny Board consider this aspect in more detail, the terms of reference for the Health Service Developments Working Group is attached at Appendix 1.

### **Regional Health Scrutiny Member Network**

6. At a regional Health Scrutiny Member Network meeting (which involves the Chairs of each of the 15 local authority Health Overview and Scrutiny Committees), representatives from the Yorkshire and Humber Specialised Commissioning Group attended to provide a briefing on the rationale behind the proposed changes, including the potential benefits to patients and the proposed sub-regional networks. The briefing note provided to that meeting is attached at Appendix 2.
7. Given the regional nature and potential implications of the proposals, consideration was given to proposing a joint regional health scrutiny committee to formally consider the proposals. However, there was limited support for this approach, with a general consensus that individual local authority health overview and scrutiny committees would be better placed to consider the proposals and likely local implications.
8. Appropriate NHS representatives, from a service commissioning, service provider and emergency transport perspective, have been invited to attend the meeting. This will help to provide the Scrutiny Board with the opportunity to explore any identified issues in more detail.

### **Yorkshire and the Humber Specialised Commissioning Group**

9. It should be noted that a further meeting of the Specialised Commissioning Group is scheduled for 27 January 2012 (i.e. after the Scrutiny Board meeting). It is likely that further significant issues around phasing implementation and rehabilitation will be considered at that meeting, with associated decisions arising. As such, it may be necessary for the Scrutiny Board to give further consideration to the proposals and local implications.

### **Recommendations**

10. To consider the information presented and seek to determine the appropriate level of service change.
11. To identify any additional information that may be required and determine any further scrutiny activity that may be required.

### **Background documents**

- Health Service Developments Working Group – horizon scanning November 2011 and January 2012