

SCRUTINY BOARD (HEALTH AND WELLBEING AND ADULT SOCIAL CARE)

Health Service Developments Working Group

Notes of meeting held on 7 November 2011

Attendance:	
Members of the Scrutiny Board	
<ul style="list-style-type: none"> • Councillor Lisa Mulherin (Chair) • Councillor John Illingworth • Councillor Shirley Varley 	<ul style="list-style-type: none"> • Joy Fisher (Co-opted member) • Sally Morgan (Co-opted member) • Paul Truswell (Co-opted member)
Officers <u>NHS Leeds:</u> Nigel Gray, Deputy Director of Commissioning Matt Ward, Associate Director of Commissioning Caroline Walker, Communications Lead <u>Leeds Teaching Hospitals NHS Trust</u> Karl Milner, Director External Affairs and Communication Ross Langford, Head of Communications <u>Leeds City Council</u> Dennis Holmes, Deputy Director, Adult Social Care Steven Courtney, Scrutiny Support	
Apologies:	
<ul style="list-style-type: none"> • Councillor Judith Chapman • Councillor Rebecca Charlwood 	<ul style="list-style-type: none"> • Councillor Graham Kirkland

Items	Action
1 Attendance / Introduction	
The Chair welcomed all those present to the meeting of the Health Service Developments Working Group. Introductions were made and apologies (as detailed above) were received and noted.	
2 Horizon scanning	
<p>The horizon scanning document was presented and considered by the working group, with the main issues identified and discussed as follows:</p> <p>(a) Proposed 111 service – reported as a nationally mandated service change for urgent care, with a proposed new telephony service for non-emergency care matters. Using a national procurement model, it would be proposed to work across West Yorkshire. The outcome of the procurement would influence / impact on the review of Leeds' model for urgent care and the out of hours service.</p> <p>(b) Review of Urgent Care/ Out of Hours – closely linked with the outcome of the proposed 111 service and seen as the local perspective of proposed changes to the existing urgent care pathway. The process for developing the consultation documentation, including the use of a 'readers panel' was</p>	

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<p>outlined and discussed. A level 4 (substantial) service change was proposed, with a 14-week (rather than 12-week) public consultation period confirmed. The consultation was scheduled to take place between December 2011 and March 2012 – with the additional 2 weeks taking account of the Christmas holiday period.</p> <p>It was noted that as a proposed substantial service change, the Scrutiny Board may wish to be formally consulted on the proposals.</p> <p>The ongoing need for public education associated with any 'new model' of urgent care was discussed and noted.</p> <p>(c) Universal Services – proposed integration of health visitors and children's centre workforce. There was brief discussion around the Government's aim to increase the number of Health Visitors nationally. An outline of the engagement activity to date was provided, including engagement with the Youth Council and Parents Forums (within Children's Centres).</p> <p>It was noted that the proposed level of service change was still to be confirmed and more details were anticipated after December 2011.</p> <p>(d) Mid Yorkshire Hospital Catchment Review – it was reported that the review was likely to result in a lower impact than initially anticipated and would be considered with the Trust's overall Winter Plan.</p> <p>A brief discussion followed around the uptake of flu vaccinations and the lack of any national campaign in this regard.</p> <p>(e) Trauma Designation – highlighted that the Specialised Commission Group (SCG) was the lead organisation, with the aim of centralising Major Trauma and establishing designated Major Trauma Centres (MTC) by April 2012. It was proposed that LGI would become the MTC for West Yorkshire and this could result in triage for an additional 1500 patients per annum.</p> <p>(f) Vascular Designation – it was proposed that LTHT would become the regional centre for serious vascular cases. While the documentation outlined that LTHT was not receptive to designation at this stage, it was reported to the meeting that the proposals were likely to result in a lower impact (i.e. lower patient numbers) and discussions were ongoing.</p> <p>(g) Neurosurgery Designation – a brief outline was given around the national 'Safe and Sustainable' review of Children's Neurosurgery. It suggested that the regional health scrutiny network might usefully consider the (potential) involvement of Health Overview and Scrutiny Committees across the region and whether or not a joint scrutiny approach would be the most appropriate way forward.</p>	

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<p>(h) Children's Cardiac Designation – a brief update was provided. It was noted that the Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber) had submitted a report on the proposals and consultation options. It as also reported that a formal referral to the Secretary of State (for Heath) had been made. The outcome of the referral was expected sometime in 2012.</p> <p>It was also reported that outcome of the judicial review brought by the Royal Brompton and Harefield NHS Trust was just emerging and it seemed that the consultation process had judged to be fundamentally flawed, with the judge ruling the consultation was 'unlawful and must be quashed'. The full implications of the ruling were not yet known, however members would be updated once the position became clearer.</p> <p><i>(NB Toward the end of the meeting it was reported that the Joint Committee of Primary Care Trusts (JCPCT) had made public its intention to appeal the findings/ ruling of the judicial review).</i></p>	
<p>AGREED</p> <p>(a) That the horizon scanning details be noted and that further updates be provided in due course.</p>	NHS Leeds
<p>3 Service Change Tracker (Live proposals)</p>	
<p>The updated service change tracker (i.e. live proposals) document was presented and considered by the working group. The main issues identified and discussed were as follows:</p> <p>(a) Clinical value in elective care – an internal improvement programme building on current ways of working and national guidance. Work was continuing and likely to be picked up as part of the Scrutiny Board's consideration of work around the '<i>Leeds Transforming Health and Social Care</i>' programme.</p> <p>(b) Ophthalmology (Community Model) – move of activity for long term eye follow up from hospital to community model. Consultation was fully complete and had identified a potential gap in provision in East Leeds. Consideration was being given to how this could be addressed.</p> <p>(c) ENT Community Model – the service model was not yet completed.</p> <p>(d) Integrated Health and Social Care Teams – the proposal was bringing together a range of services into integrated health and social care teams on a geographical basis, located around existing GP practices. The aim being to provide more unified care by delivering community health and social care services for older people and people with long term conditions through fully integrated services. The intention was to have integrated teams working across the city within 18-24 months, starting with three demonstrator sites across the City.</p>	

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<p>It was identified that the proposals were likely to identify some implications around the Council's statutory duties/ responsibilities and associated governance issues, which may warrant more detailed consideration by the Scrutiny Board in the future.</p> <p>(e) Community Intermediate Care (CIC) beds – it was reported that the CIC bed site for South Leeds had been identified / agreed as Harry Booth House.. Discussions around the location of provision for North West and East Leeds were ongoing. Discussions with appropriate Area Committees was planned.</p> <p>(f) NHS Leeds Estates – aimed at improving the use of buildings so that their function and design meets the needs of patients and service providers, this workstream specifically related to existing clinics at Garforth, Otley and Leafield. It was reported that while potential alternative locations had been identified for services currently delivered at Otley and Leafield, further options needed to be developed for Garforth. It was reported that a 12-week consultation process around the proposals for Leafield and Otley would commence in January 2012.</p> <p>A number of other Level 2 service changes (that formed part of LTHT's Managing for Success (MfS) programme) were reported as being complete and recommended to be removed from future reports. These were as follows:</p> <ul style="list-style-type: none"> • Stroke Services – centralisation of stroke services at LGI close to vascular surgery. • GI surgery and gastroenterology – centralisation of upper and lower gastrointestinal surgery and gastroenterology at SJUH in Lincoln and Bexley Wings. • Children's inpatient services – further consolidation of children's inpatient services into Clarendon Wing on the LGI site. • Critical care – centralising adult critical care facilities in Jubilee Wing on the LGI site. • Trauma – centralised orthopaedic trauma service on the LGI site. • Surgery – bringing together specialised surgical services in Jubilee Wing on the LGI site. 							
<p>AGREED</p> <p>(a) That the updates provided be noted and that progress be monitored at future meetings.</p> <p>(b) That completion of the following service changes be noted and the details removed from future schedules:</p> <table border="0" data-bbox="331 1892 1252 2011"> <tr> <td>• Stroke Services</td> <td>• Critical care</td> </tr> <tr> <td>• GI surgery and gastroenterology</td> <td>• Trauma</td> </tr> <tr> <td>• Children's inpatient services</td> <td>• Surgery</td> </tr> </table>	• Stroke Services	• Critical care	• GI surgery and gastroenterology	• Trauma	• Children's inpatient services	• Surgery	<p>NHS Leeds</p>
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4	Leeds City Council – Forward Plan of Key Decisions (1 October 2011 – 31 January 2012)
	The Forward Plan of Key Decisions as it related to the Health and Wellbeing and Adult Social Care Scrutiny Board, for the period 1 October 2011 – 31 January 2012, was presented and considered.
	AGREED (a) That the information presented be noted.
5	Any other business
	<ul style="list-style-type: none"> • Breast surgery – it was reported that an integrated site at Chancellors Wing (on the SJUH site) had been identified to relocate the service. It was reported that the site was acceptable to the clinical team and addressed recent concerns raised by patient representatives, around retaining a dedicated unit/ ward. • Neonatal / maternity services – it was highlighted that a review of provision across the City was likely to take place in the near future. It was likely that such a review would consider the sustainability of maintaining neonatal and maternity services across the two main hospital sites in the City (i.e. LGI and SJUH).
	AGREED (a) That the information be noted. (b) That Neonatal / maternity services be included on the formal documentation and further updates be provided at future meetings.
	NHS Leeds/ LTHT
6	Date and time of next meeting
	It was noted that the next working group meeting would be held on <u>Monday, 9 January 2012 commencing at 10:00am</u>
	The Chair thanked all those in attendance and closed the meeting.
	ALL