

# Scrutiny Board Statement

## Closure of Blood Donor Centre in Seacroft, Leeds

Scrutiny Board (Adult Social Services, Public Health, NHS)

May 2017





# Introduction

1. As a Scrutiny Board we (the Scrutiny Board (Adult Social Services, Public Health, NHS) discharge Leeds City Council's health scrutiny function. In this we would specifically highlight the following functions:
  - To review and scrutinise any matter relating to the planning, provision and operation of the health service in its area and to make reports and recommendations on any such matter it has reviewed or scrutinised;
  - To comment on, make recommendations about, or report to the Secretary of State in writing about such proposals as are referred to the authority by a relevant NHS body or a relevant health service provider.
2. In December 2016, we first became aware of the proposed closure for the Blood Donor Centre in Seacroft. Press coverage reported proposals to close the blood donor centre in Seacroft on 27 January 2017.
3. At our Board meeting on 20 December 2016 we raised concerns about the apparent lack of consultation regarding the proposals and ensured further details were being sought from the provider of the service/facility, NHS Blood and Transplant (NHSBT).
4. Accordingly, a letter was sent to NHSBT by the Chair on 22 December 2016, detailing our concerns and requesting further details about the reported closure, alongside any service user/public consultation and engagement that may have taken place.
5. We received a response from NHSBT on 13 January 2017 and considered all the additional information provided at our Board meeting on 24 January 2017. At that Board meeting we:
  - Noted the intended closure of the Blood Donor Centre in Seacroft had been brought forward from the end of February 2017 to 27 January 2017- due to the centre running at a reduced capacity.
  - Noted evidence of attempts by NHS Blood and Transplant (NHSBT) to inform/engage with the local scrutiny process, however out of date contact details had been used and there were no details around how NHSBT may have tried to verify the information.
  - Highlighted our concerns around the lack of any formal public consultation regarding the proposed closure.
  - Highlighted further concerns regarding the general lack of awareness of the proposal across Leeds 'Health and Social Care economy (including service commissioners and providers alike).
  - Considered the proposed closure as a substantial variation that merited a much more robust approach to engagement and consultation.
6. Subsequently, we considered whether or not to refer the closure to the Secretary of State for Health.



# Introduction

7. After much deliberation, and taking a somewhat pragmatic approach given the timings and reported current state of the service, we agreed not to make a formal referral to the Secretary of State for Health on this occasion.
8. However, we agreed the Chair should write to NHSBT and other key stakeholders setting out our concerns and seeking assurances that lessons would be learned.
9. We also agreed to request a further report from NHSBT to consider the impact of the closure on service users and the levels of blood donation across Leeds.
10. In addition, we requested this report be provided for September 2017, which will also require appropriate NHSBT staff to attend the Scrutiny Board meeting to present the report and address any of our questions and/or concerns at that time.



# Comments and Observations

11. The following comments and observations should be considered alongside the timeline of key events and dates, attached at Appendix 1.
12. We recognise NHSBT is a Special Health Authority for England and Wales that supplies critical biological products and related clinical services to the NHS within a highly regulated environment.
13. We also recognise this is a national service and that NHSBT holds a special relationship with the Department of Health and is accountable directly to that department.
14. Nonetheless, we are disappointed by NHSBT's decision to close a Blood Donor Centre in Leeds without any involvement, engagement or consultation with the local body charged with maintaining oversight of health services across the City.
15. While we recognise that NHSBT deliver a national service, we are also concerned by NHSBT's apparent lack of awareness or disregard for its duties and responsibilities to proactively involve, engage and consult with local Health Overview and Scrutiny Committees.
16. We believe that NHSBT is "a responsible person", as defined by 'The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013', and is therefore subject to the same requirements and has the same responsibilities as any other body within that definition.
17. As such, NHSBT has responsibility to help support local authorities to discharge their health scrutiny functions. In this instance, we believe NHSBT has failed to adequately discharge this responsibility.
18. We would view the closure of the NHSBT Blood Donor Centre as a 'substantial variation' of service, as we would of any proposed closure of a local health care facility. As such, we believe the proposals should have been subject to a process of formal public consultation, alongside full engagement with the Scrutiny Board.
19. As a minimum, and in line with the 2013 regulations, we would have expected NHSBT to:
  - Formally consult with us (the Scrutiny Board);
  - Provide details of the intended date of decision;
  - Be explicit about the date when any response to the proposals should be provided;
  - Inform us of any changes to its decision-making timetable.
  - Formally publish details of this decision-making timetable.
20. Furthermore, from the ongoing exchange of correspondence, we remain unconvinced that NHSBT acknowledge its specific responsibilities around public consultation and engagement with the health scrutiny process. Rather, NHSBT appear to suggest that its relationship with the Department of Health absolves it of these fundamental duties and responsibilities.



# Comments and Observations

21. Although we recognise there is some evidence of NHSBT attempting to engage with the local scrutiny process, it has ultimately been proven ineffective for the following reasons:
- The use of out of date contact details with no details of how NHSBT may have tried to verify the information. Councillor Coupar ceased to be the Chair of the Scrutiny Board in May 2015.
  - The use of a residential address for correspondence rather than the formal business address for Leeds City Council.
  - Failure to provide the authority with the proposed date by which NHSBT intended to make a decision as to whether to proceed with the proposal; and the date by which NHSBT required the authority to provide any comments.
  - Failure to inform the authority of any change to the dates provided; and,
  - Failure to publish those dates, including any change in those dates.
22. From our perspective, we believe NHSBT has failed to comply with the regulations associated with service reconfiguration.
23. We understand that the regulations should also be considered alongside the 'four tests of service change' which the government mandate requires NHS England to test proposed service changes against.
24. We have discussed NHSBT's role as a Special Health Authorities with the Independent Reconfiguration Panel (IRP). The IRP has made clear that NHSBT should be required to consider its proposed service changes against the following 'four tests':
- 1) Strong public and patient engagement
  - 2) Clear, clinical evidence base
  - 3) Support for proposals from commissioners
  - 4) Consistency with current and prospective need for patient choice
25. As we have not been proactively notified and/or engaged in the development of NHSBT's plans, it is difficult to fully assess the extent to which NHSBT has taken into account all the key considerations.
26. Nonetheless, based on the information which has been provided to us, our assessment against each of the four tests is set out below.
- Strong public and patient engagement**
27. By its own admission, NHSBT failed to undertake any formal public consultation regarding the proposed closure of the Blood Donor Centre in Seacroft.
28. While existing and known service users may have been informed of the closure this should not be mistaken for formal consultation.



# Comments and Observations

29. The approach did not seek the views of service users on the 'proposals': Rather it provided information on the consequences of a decision already taken to close the centre.

30. This failed to provide the opportunity for existing service users to adequately input into the decision-making process.

31. It also failed to provide the opportunity for prospective or future service users to have a voice in the decision-making process and future design of the service..

32. Furthermore, there was also a complete lack of awareness of NHSBT's proposals across the local health and social care economy. This failed to provide any opportunity for other matters or prospective changes across the local landscape to be adequately identified and/or considered as part of the decision-making process.

33. We can perhaps conclude that NHSBT failed to meet the government's first test or standard for service reconfiguration.

## Clear, clinical evidence base

34. Despite NHSBT providing some clinical evidence base and information in support of the decision to close the site in Seacroft, in our view, NHSBT has not provided sufficient information in relation to the following:

- Evidence of support for the service model from senior clinicians whose services will be affected by the reconfiguration.

- Evidence of engagement with clinical commissioners on the outcome of internal and independent external reviews of the clinical evidence base.
- Evidence of plans for the future.

35. Therefore we believe NHSBT has failed to deliver a clear, clinical evidence base for its proposed reconfiguration.

## Support for proposals from commissioners

36. As mentioned elsewhere, we have not been provided with any evidence to suggest NHSBT has worked collaboratively to inform its decision-making process. Our enquiries suggest there was a lack of awareness across the various statutory bodies that make up Leeds local health and social care economy.

37. As a result, we believe NHSBT failed to provide any real opportunity for other matters or prospective changes across the local health and social care economy to be adequately identified and/or considered as part of the decision-making process.

## Consistency with current and prospective need for patient choice

38. We have already established that NHSBT did not carry out any public/service user consultation regarding the proposed closure of the donor centre. However, we are aware that affected donors were informed of the proposal to close the centre with invitations to attend alternative sessions in the area.



# Comments and Observations

39. We acknowledge there is another donor centre located in the city centre of Leeds and that NHSBT run mobile sessions in community venues across the Leeds area; therefore donors still have the opportunity to donate locally.
40. However, we believe the failure to properly engage and consult on the proposed closure has resulted in there being a lack of any local intelligence regarding future demand and patient choice or preferences.
41. In addition, we are equally concerned that the Department of Health Triennial Review of NHS Blood and Transplant did little to enhance or reinforce NHSBT's duties and responsibilities in relation to service reconfiguration when recommending that, '*...NHSBT's blood collection modernisation strategy be accelerated, but monitored through a phased plan, with key decision points reflecting analysis of the impact on donor behaviours*'
42. While recognising the need to consider donor behaviour, in our view, there was a missed opportunity to reinforce NHSBT's responsibilities to engage with local health overview and scrutiny committees, other local health and social care bodies and local service users, when considering specific actions and any proposed changes to the local service offer.





# Summary and Conclusions

43. Following local media coverage of the proposed closure for the Blood Donor Centre in Seacroft; we first raised concerns about the lack of NHSBT's engagement and consultation at our Board meeting on 20 December 2016.
44. We invited NHSBT to attend a meeting with us to discuss the proposals and we also asked NHSBT to delay the proposed closure to allow more time to consider and review the proposals.
45. NHSBT did not attend a meeting with us and advised the proposed closure would occur earlier than originally planned due to prevailing circumstances – particularly in terms of staffing.
46. Nonetheless, we believe NHSBT has:
- Failed to comply with the letter and the spirit of current legislation and regulations governing service reconfiguration within the NHS; and,
  - Failed to adequately address the majority (if not all) of the government's tests for service reconfiguration.
47. The interests of patients, service users and the general public are paramount. As such, we are most concerned by the lack of any formal public engagement or consultation regarding the proposed closure of the Blood Donor Centre in Seacroft.
48. Failure to observe statutory duties regarding service reconfiguration permits us to refer the closure decision to the Secretary of State for Health. Our original decision was not to take this formal course of action, but to stress the importance for NHSBT to consider its actions and provide assurances that lessons have been learned for future reference.
49. We also agreed to request a further report from NHSBT by September 2017, to consider the impact of the closure on service users and levels of blood donation across Leeds.
50. However, given the latest response from NHSBT (Mike Stredder, Director of Blood Donation) on 10 March 2017, we have significant concerns regarding NHSBT's understanding of its duties and responsibilities and how regulations and guidance apply to it as a Special Health Authority.
51. As such, we will formally submit this statement and seek responses to its findings from:
- NHS Blood and Transplant
  - The Department of Health
  - The independent Reconfiguration Panel.
52. We trust this statement and the views expressed will serve to enhance future decision-making processes, and we would like to thank all those that have contributed to the production of this statement.

**Cllr Peter Gruen, Chair  
Scrutiny Board (Adult Social  
Services, Public Health, NHS)**

**May 2017**





# Appendix 1: Timeline

Date	Summary of event
<b>DECEMBER 2016</b>	
20 December	<p><b>Scrutiny Board (Adult Social Services, Public Health, NHS) first became aware of the proposed closure for the Blood Donor Centre in Seacroft.</b></p> <ul style="list-style-type: none"> <li>○ <b>Scrutiny Board Meeting</b> - Concerns were raised about the apparent lack of consultation regarding the proposals and ensured further details were being sought from the provider of the service/facility, NHS Blood and Transplant (NHSBT).</li> </ul>
22 December	<p><b>Letter to NHSBT</b> – detailing the concerns and requests for further details of NHSBT’s decision and any service user/public consultation and engagement that informed the decision.</p>
<b>JANUARY 2017</b>	
13 January	<ul style="list-style-type: none"> <li>○ <b>NHSBT response</b> – letter highlights details of the decision &amp; engagement/consultations:             <ul style="list-style-type: none"> <li>- Due to two blood donor centres in Leeds that collect both platelets and whole blood (NHSBT centre at Bridle Path and City Centre of Leeds) in close proximity led to reviewing donor centre provision.</li> <li>- Decision by Department of Health Advisory Committee on the Safety of Blood Tissues and Organs (SaBTO) to collect fewer platelets by apheresis procedure and ongoing decline in hospital demand for blood.</li> <li>- Leeds Headrow site best placed to serve Leeds (bigger blood donor base, higher footfall, better placed to attract BME donors).</li> <li>- Closure of Leeds Bridle Path Donor Centre will not affect NHSBT’s ability to collect and supply blood/blood products to meet demand of hospitals</li> <li>- NHSBT wrote to Cllr Coupar (May 2016) regarding long term options of centres in Leeds and Sheffield. Further letter (September 2016) informing the decision to close the Leeds Bridle Path Blood Donor Centre.</li> <li>- Collective consultation with staff side representatives for those impacted by the proposed change</li> <li>- Decision to go ahead with closure of the Bridle Path Donor Centre taken on 4 November 2016.</li> <li>- Individual consultation with affected staff.</li> </ul> </li> </ul>



# Appendix 1: Timeline

Date	Summary of event
17 January	<ul style="list-style-type: none"><li>○ <b>Email from Principal Scrutiny Adviser on behalf of the Chair</b> – requesting a range of information:<ul style="list-style-type: none"><li>- Electronic copies of letters sent to Cllr Coupar, confirmation of capacity in which Cllr Coupar was contacted, information used to confirm Cllr Coupar as the appropriate contact, confirmation on how the letters were originally sent and attempts made to confirm receipt.</li><li>- Details of any local stakeholders involved in discussions around the proposed closure and/or those informed once a closure decision had been made.</li><li>- Details of any local ward councillors involved in discussion about the proposed closure (including any feedback received).</li><li>- Details of any public/service user engagement and involvement, including feedback. (To share any communications/engagement plan developed as part of the process around the proposed closure).</li><li>- Date on which the decision to close the blood donor centre was agreed and to confirm the decision-making body, details of any minutes and paperwork from the meeting.</li><li>- Confirmation on who owns the blood donor centre in Seacroft and any future plans for the facility</li><li>- Details to confirm current arrangements for blood donations across Leeds (times and locations), and the changes once the proposed closure is implemented (how are blood donors and wider public being informed of these).</li></ul></li></ul>
20 January	<ul style="list-style-type: none"><li>○ <b>Letter to NHSBT</b>, requesting for the proposed closure of the Leeds Bridle Pathway Donor Centre (scheduled 27 January 2017) to be deferred for the foreseeable future, in order to allow sufficient time for the Scrutiny Board to fully consider all the available information.</li></ul>



# Appendix 1: Timeline

Date	Summary of event
23 January	<ul style="list-style-type: none"> <li>○ <b>NHSBT response</b> - Following the queries raised via email on 17 January 2017 the following further information was provided:               <ul style="list-style-type: none"> <li>- Electronic copies of the two letters sent to Cllr Coupar in May 2017 and September 2016 were included.</li> <li>- Information regarding the process for contacting Cllr Coupar was limited due to the member of staff who contacted Cllr Coupar being on maternity leave. The standard procedure for NHSBT is to check the council website for details of relevant committee members to contact.</li> <li>- In terms of discussions with other local stakeholders around the proposed closure, NHSBT wrote to the following MPs: Rachel Reeves MP, Fabian Hamilton MP, Greg Mulholland MP, Hilary Benn MP and Richard Burgon MP. The letters provided the same information that was included in the letters to Cllr Coupar.</li> <li>- NHSBT did not contact any ward Councillors in relation to the proposed closure.</li> <li>- NHSBT did not carry out any public/service user engagement consultations about the proposed closure. NHSBT wrote to affected donors in September 2016 to inform them they were considering a proposal to close the donor centre and wrote to them again in December 2016 to confirm this closure, inviting them to alternative sessions in the area.</li> <li>- The decision to close the blood donor centre was formally communicated to staff on 4 November 2016 after the collective staff consultations came to an end on 28 October 2016. Documents of the minutes for consultation meetings and the final decision were also provided.</li> <li>- Confirmation that the NHSBT Leeds Bridle Path site, which included the donor centre, is owned by NHSBT.</li> <li>- There are currently two blood donor centres in Leeds that collect platelets and whole blood. One is located at the NHSBT centre at Bridle Path, while the other donor centre is located in the city centre of Leeds at a leased property.</li> <li>- NHSBT currently runs 488 mobile sessions per year in community venues across the Leeds area, of these around 50 sessions are within 6 miles of the current Bridle Path site. Following the closure of the donor centre at Bridle Path, all donors wishing to donate locally will still have the opportunity to do so.</li> </ul> </li> </ul>



# Appendix 1: Timeline

Date	Summary of event
	<p>Also, following the request the defer the closure of the donor centre as set out in the letter sent by the Chair on 20 January 2017:</p> <p>NHSBT stated they are unable to do so due to already running the centre at reduced capacity (3 rather than 6 donation beds) and reduced opening hours due to some staff leaving early ahead of the closure, going on sick leave, agreeing with mutual consent to terminate employment early. As a result the closure was brought forward from the end of February to 27 January, donors informed of the closure date and staff redeployment/redundancy dates have been agreed. Therefore it would not be operationally viable to continue opening the centre beyond this point.</p>
24 January	<ul style="list-style-type: none"> <li>○ <b>Scrutiny Board Meeting</b> - Details of the exchange in correspondence between the Chair of the Scrutiny Board and NHSBT were shared with the Board. The Scrutiny Board considered the additional information and:           <ul style="list-style-type: none"> <li>- Noted the intended closure in Seacroft being brought forward from the end of February 2017 to 27 January 2017- due to the centre running at reduced capacity.</li> <li>- Noted Evidence of attempts by NHSBT to inform/engage with the local scrutiny process, however out of date contact details had been used and there were no details around how NHSBT may have tried to verify the information.</li> <li>- Raised concerns around lack of any formal public consultation regarding the proposed closure.</li> <li>- Raised further concerns regarding the general lack of awareness of the proposals across Leeds' Health and Social Care economy (including both service commissioners and providers).</li> <li>- Considered whether or not to register the closure to the Secretary of State for Health.</li> </ul> </li> </ul> <p>After some deliberation, the Scrutiny Board agreed not to make a formal referral to the Secretary of State for Health but agreed that the Chair should write to NHSBT and other key stakeholders setting out the concerns of the Scrutiny Board regarding the process followed by NHSBT and seeking assurances that lessons would be learned.</p> <p>The Scrutiny Board agreed to request a further report from NHSBT to consider the impact of the closure on service users and the levels of blood donation across Leeds.</p>



# Appendix 1: Timeline

Date	Summary of event
<b>FEBRUARY 2017</b>	
<b>17 February</b>	<ul style="list-style-type: none"> <li>○ <b>Letter to NHSBT</b> following the Scrutiny Board meeting held on Tuesday 24 January 2017, in which the proposed closure of the Leeds Bridle Path Donor Centre was considered. An extract of the draft minutes were enclosed to summarise the discussion and outcome. The letter highlighted the main issues considered by the Scrutiny Board which centred on the lack of any:               <ul style="list-style-type: none"> <li>- Formal public consultation regarding the proposed closure; and,</li> <li>- Effective engagement with the Scrutiny Board.</li> </ul> </li> </ul> <p>The letter includes the Boards intention to contact NHSBT again with fuller details of the Scrutiny Boards concerns and observations. Also included is the final resolution of the Scrutiny Board; that in September 2017, NHSBT provide a further report on the impact of the closure.</p>
<b>22 February</b>	<ul style="list-style-type: none"> <li>○ <b>Letter sent to Mr Mike Stredder</b> (Director of Blood Donation, NHSBT), following the comments attributed to him in the Yorkshire Evening Post (17 Feb 2017). The letter requests Mr Stredder to explain his views regarding NHSBT not having any obligation to consult with the public on the proposal to close the Leeds Bridle Path Donor Centre. The Scrutiny Boards views on the matter are made clear as well as the intention to contact NHSBT again with fuller details of the Boards concerns and observations.</li> </ul>
<b>MARCH 2017</b>	
<b>10 March</b>	<ul style="list-style-type: none"> <li>○ <b>Response from Mike Stredder received</b> - highlighting the following in regards to public consultation:               <ul style="list-style-type: none"> <li>- NHSBT did not carry out any public consultation but donors were informed of the proposal and decision to close.</li> <li>- Unlike other local health service providers, NHSBT does not have a mandatory requirement to provide a specific number of donation sessions in a given area and responsibility is to collect enough blood to meet hospital demand.</li> <li>- The closure of the site does not prevent donors from donating in the Leeds area.</li> </ul> </li> </ul> <p>As an Arm's Length Body (ALB), NHSBT is accountable directly to the Department of Health and ensures both DH Sponsors and the Secretary of State for Health is kept updated on planned changes.</p>







**Scrutiny Board (Adult Social Services, Public Health, NHS)**

**Closure of the Blood Donor Centre in Seacroft**

**May 2017**

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