# Wiltshire Health Overview & Scrutiny Committee



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MINUTES of a MEETING held at WILTSHIRE COUNTY COUNCIL 14 SEPTEMBER 2005

<u>PRESENT:</u> County Councillors: Mr R While (Chairman), Dr J English (Vice Chairman), Mrs S Doubell, Mrs M White, Mrs J Rooke, Mr J Noeken, Mrs P Rugg, Mrs B Wayman. District Councillors: Mrs P Winchcombe, Kennet District Council; Mr P Paisey, Salisbury District Council; Mrs J Wood, North Wiltshire District Council; Mr G Cox, West Wiltshire District Council.

<u>STAKEHOLDERS:</u> Mr T White (Chairman of South Wilts PCT Patient Forum), Dr P Biggs (Chairman of West Wilts PCT Patients Forum) Mrs J Cole (User & Carers' Network).

OTHERS: Frank Harsent, Chief Executive, Salisbury Healthcare NHS Trust; Carol Clarke, Chief Executive, Nicholas Gillard, Director of Planning & Partnerships, Jenny Barker, Director of Operations, Nicola Dunn, Director of Finance all Kennet, North and West Wilts Primary Care Trusts; Shiena Bowen, Chair, West Wiltshire Primary Care Trust; Harry Hayer, Avon, Gloucestershire & Wiltshire Strategic Health Authority; Malcolm Sinclair, Avon & Wiltshire Mental Health Partnership Trust; Dr Ray Jones, Director of Adult and Community Services; Jeanette Longhurst, Assistant Director, Adult & Community Services, Ian Gibbons, Paul Kelly, Joanna Howes, all Wiltshire County Council; Mandy Bradley & Brad Fleet, Kennet District Council; Miranda Gilmour, North Wiltshire District Council; June Sadd, Wiltshire & Swindon Users Network

Members of the public present: 70	

# 38. Apologies

Apologies were sent by Mollie Groom

### 39. Chairman's Announcements & Public Participation

The Chairman announced that, as a significant number of members of the public had come to hear the discussion regarding the closure of the community hospitals at Bradford on Avon and Westbury, he would be taking that item first. The Chairman explained that he would like to hear first from West Wiltshire Primary Care Trust, then from members of the public and finally would open the debate up to members of the Committee. This would allow members of the Committee to hear from all sides before agreeing a resolution.

# 40. Item 8 – Closure of Bradford on Avon Hospital and part of Westbury Hospital by West Wiltshire Primary Care Trust

The Committee heard from Carol Clarke (CC), Chief Executive of West Wiltshire and Kennet & North Wiltshire Primary Care Trust (PCT) who explained why the PCT Board had taken the decision to close the two hospitals. CC accepted that the decision was bound to be unpopular within those two communities, but stated that the PCT's finances were such that a significant amount of savings had to be made in order to achieve a statutory position of financial balance. CC regretted that the previous executive team did not take action sooner, but because they hadn't the PCT now found itself in a very serious position because it has consistently spent more per year than it receives.

CC gave assurance that the decision would not affect services, because the PCT had undertaken to move all the services delivered at the two hospitals to the three remaining hospitals in West Wiltshire.

CC said the PCT needed to be brave in order to provide a stable platform for the future so that the cycle of debt did not continue in a downward spiral and services would continue to be provided in the future.

The PCT has allowed time for all stakeholders to be consulted prior to implementation of the decision.

Nicola Dunn (ND), Director of Finance, then gave a summary of the financial position of the PCT, which illustrated the way the financial position of the PCT has declined since its inception in 2001. The 2004/05 statutory accounts prompted the Audit Commission to act and to make it clear that the way the PCT does business has to change.

In order to address this, the PCT has had to put together a robust financial plan for 2005/06. The Trust aims to continue to commit to fast access to secondary care for patients who need to receive high level treatment, but it has had to seek look for ways to address the recurring overspend.

Jenny Barker (JB), Director of Operations, then talked about the need to ensure improved efficiency and clinical management, and identified Pathways for Change as a means for suggesting new models of care.

JB explained that the PCT had looked at various options for saving the money required to achieve financial balance, but that this would have brought about cuts in services, rather than changes in location, and that the PCT felt this would have a greater detrimental effect on patients. She accepted that the option of closures in Bradford on Avon and Westbury would have an impact on some people in terms of distance travelled and travelling times.

JB also expressed the view that most of the community hospital buildings are now unfit for purpose, having been mainly built in the Victorian era. She also gave assurance that the PCT would retain Trowbridge, Melksham and Warminster hospitals, pending the outcome of Pathways for Change. JB stated that it is the view of the PCT that substantial numbers of people would be able to manage in their own homes with intermediate care support.

The Chairman then allowed a prolonged period of public participation, acknowledging the number of people who had come along to speak at this item. A number of questions were directed at the representatives of the PCT, who endeavoured to answer as many as possible.

A number of members of the public made statements directed at the Committee, the content of which included pleas for full public consultation on the closures, and for patients and the public to be fully involved in all decisions. Several GPs working in Bradford and Westbury expressed dismay that, after years of trying to work closely with the PCT, the hospitals should be closed at this point in the Pathways for Change process which was seeking to provide better services for all. There was concern that these closures would put pressure on existing services and would increase emergency admissions to the Royal United Hospital, Bath. The Committee heard from a number of members of staff and from the unions, who were concerned that not enough had been done to inform staff, that the PCT had not been open about its intentions and that high quality staff would be lost through redundancy or job insecurity.

The Committee also heard from a number of town and district councillors who expressed their disappointment, on behalf of their communities, that the hospitals would be closed. Several people also expressed their concern that the level of projected savings from the closures was not clearly established. There was concern about the future of the stroke unit at Westbury and of children's services in the town in general. It emerged that GPs in Trowbridge had been in discussions with the PCT about developing a primary care facility in the town, and CC confirmed that those GPs had come forward and asked for discussions with the PCT, and that the PCT would be willing to talk to GPs from any of the other towns about similar projects.

There were a number of emotional outbursts from members of the public and personal attacks were made against the Chief Executive of West Wiltshire Primary Care Trust.

The Chairman then closed the public participation part of the meeting and invited the members of the Committee to ask their own questions and engage in debate.

Members of the Committee put a number of questions to the PCT, including questions about the numbers of staff affected, the future of the buildings at Bradford on Avon and Westbury and the capacity to deliver the services in alternative settings. The Committee was also greatly concerned that these closures appeared to run counter to Pathways for Change. Members expressed concern about the financial information and sought clarity on a number of issues, and about the quality of communication with staff. The Chairman agreed to carry out further analysis of the financial situation, and to work with the financial director of the PCT and the Strategic Health Authority, in order to satisfy himself, on behalf of the Committee, that the picture presented was clear and accurate. Other concerns expressed included the impact of these closures on social care services provided by the county council and by the voluntary sector and the cost of making staff redundant against the level of savings the PCT expected to be able to make.

The stakeholders also took the opportunity to question the PCT and asked whether it was felt that the Department of Health would intervene to secure financial balance if the Trust failed to achieve it and CC agreed that the Department would intervene if necessary.

Dr Ray Jones spoke to give a view of the situation from the perspective of a social services provider. Dr Jones put the issue into context by saying that similar things are happening across the country and with ever increasing urgency as the NHS prepares for a major reconfiguration. He expressed a hope that, should the Committee opt to form a Task Group to look at the impact of the closures more closely, it would give consideration to ensuring that people who need to receive services do not fall through the net, and to look into how organisations working together can best achieve modernisation of services.

Members debated the issue of how to balance the need for some form of consultation against the PCTs need to save money that would contribute to its recurrent deficit. Members felt that, although it was not in their gift to force the PCT to carry out full public consultation, they were able to undertake a level of consultation in order to satisfy themselves on a number of issues and to enable them to hear more fully the concerns raised by staff, the public and other representative stakeholder groups. Members understood the implications of pressing for full public consultation lasting twelve weeks, in that it may jeopardise the PCT's ability to afford to deliver the outcomes of Pathways for Change, a process that stakeholders had all signed up to.

Mr Noeken moved a motion to allow the PCT to make the closures at this time, with the proviso that the Committee would carry out its own consultation via a specially formed Task Group, and that the full powers of the Overview & Scrutiny function would be brought into play at the conclusion of Pathways for Change if the Committee was unhappy

This motion was seconded by Mrs Rugg and was carried.

# Resolved

- (1) To thank the members of the public for making representations to the Committee.
- (2) To recognise the financial requirements placed on the PCTs and the need for action, and therefore on the balance of the difficulties presented, not to formally object to these closures at this time.
- (3) To continue our support for the delivery of modernised local health services through the Pathways for Change initiative, but to review the transition and development of these services by establishing a member task group in conjunction with the Patients Forums for Kennet, North and West Wiltshire, and in particular to focus initially on redistribution of current services and public information.
- (4) To appoint the following people to serve on the Task Group

Peter Biggs – West Wiltshire PPIF Cllr Gordon Cox – West Wiltshire District Council Cllr John English – Wiltshire County Council Mike Griffiths – Kennet & North Wilts PPIF Cllr Mollie Groom – Wiltshire County Council Cllr Pat Rugg – Wiltshire County Council Cllr Roy While – Wiltshire County Council

- (5) To ask the task group to report back in the first instance within 6 weeks on the implementation of the current proposals and then as a secondary activity to review the details of the Pathways for Change initiative to ensure this is in the best interests of the health community of Wiltshire.
- (6) To ask the Task Group to include, within its investigation, an assessment of any impact from these closures on the services provided through social care and the voluntary sector.
- (7) To ask the Chairman to write to the Audit Commission, the Strategic Health Authority, the Secretary of State for Health and the Independent Reconfiguration Panel, to formally express the view of the Committee regarding the need for the PCT to make cuts in services before the end of its Pathways for Change engagement process.

Following this item the Chairman announced that the Committee would take a short break to allow members of the public to depart if they wished.

# 41. Salisbury Healthcare NHS Trust – Foundation Bid Status

The Chairman agreed to take this item next as Mr Harsent had another commitment after the meeting.

The Committee received a presentation from Frank Harsent, Chief Executive of the Trust, about the bid for foundation status for Salisbury District Hospital and the consultation period, which is now well underway. Members have received copies of the consultation document previously.

Members were positive and enthusiastic about the bid and congratulated Mr Harsent on the success of the hospital and the quality of the services offered to patients who are drawn from an increasingly wide geographical area.

There followed a general discussion with input from Mr Harsent took in the effect of the reconfiguration of PCTs and the implication for community services in South Wiltshire, the predicted financial position of the Trust at the end of this financial year.

June Sadd, of Wiltshire & Swindon User's Network (WiSUN), invited Mr Harsent to speak to come and speak to WiSUN members and Mr Harsent agreed.

Mr Paisey confirmed that Salisbury District Council strongly supports the Trust in this bid.

#### Resolved:

Following guidance offered by the Centre for Public Scrutiny, the Committee resolved that the Chairman would write to South Wilts PCT, South Wilts Patient & Public Involvement Forum (PPIF) and Salisbury Healthcare PPIF, to seek their views on any possible implications for commissioning patterns.

# 42. Minutes of Previous Meeting

#### Resolved:

To confirm and sign the minutes of the meeting held on 29 June 2005 as a true record.

#### 43. Member's Interests

No interests were declared.

# 44. Strategic Health Authority and Primary Care Trust Reconfiguration

The Committee received a presentation from Harry Hayer of Avon, Gloucestershire & Wiltshire Strategic Health Authority (AGW SHA), regarding the national reconfiguration of SHAs and PCTs.

A general discussion was held, which highlighted a number of issues including the timing of this reconfiguration in light of the imminent White Paper on healthcare and the crucial role of GPs in commissioning services for the future.

### Resolved

The Chairman will write to AGW SHA to give the Committee's view about the reconfiguration, including those given by Salisbury District Council and forwarded to the Committee.

# 45. Avon & Wiltshire Mental Health Partnership Trust – Mainstreaming Mental Health

Due to the fact that the meeting had overrun at this stage, it was agreed that the Committee would set aside some time at an informal briefing session to hear the presentation in full. Members felt that the issue was of great importance and that they need to give it the attention it deserves.

# Resolved:

To ask the health scrutiny officer to liase with Malcolm Sinclair to set a date for the briefing meeting.

### 46. Healthcare Commission - Self Assessments for Trust

Members had received requests for comments from the three PCTs in Wiltshire, the RUH, Salisbury Healthcare NHS Trust and AWP Mental Health Trust.

#### Resolved:

To form a one off informal Task Group, consisting of Mrs White, Mrs Winchcombe and Mr Noeken, to provide comments for each of the Trusts who have made a request.

The Task Group is due to meet on 19 September.

# 47. Sodexho Scrutiny Task Group

The Committee received the interim report from the Sodexho Task Group and noted the recommendations.

Dr English was nominated as the Health Overview & Scrutiny representative on the reformed Sodexho Scrutiny Task Group.

# 48. Health Scrutiny Development Day

It was agreed that the development day would be held on the morning of 22 November at a venue to be agreed.

### 50. Date of Next Meeting

The next meeting will be held on 9 November 2005. It will be a single item agenda to receive the interim report from the Pathways for Change Scrutiny Task Group.

The next scheduled meeting of the Committee is on 14 December 2005 at 14:30.

# 51. Urgent Items

None

(Duration of the meeting: 14:30 - 18:45)

The officer who has produced these notes is Jo Howes, Health Scrutiny Officer within Democratic and Members' Services, direct line (01225) 713004; Email johowes@wiltshire.gov.uk