

Report to: **East Sussex Health Overview and Scrutiny Committee (HOSC)**

Date: **16th September 2008**

By: **Director of Law and Personnel**

Title of report: **Fit for the Future – progress update**

Purpose of report: **To summarise developments in relation to the Fit for the Future process in East Sussex following HOSC's decision to refer the Primary Care Trusts' proposals to the Secretary of State for Health.**

RECOMMENDATIONS

HOSC is recommended to:

- 1. Note the response to HOSC's referral to the Secretary of State for Health.**
 - 2. Consider and comment on developments in maternity services outlined in appendices 3 and 4 in the light of the Secretary of State's response.**
 - 3. Consider how the Committee wishes to use the indicators outlined in appendix 3 and the monitoring template at appendix 4 in its ongoing monitoring of maternity strategy.**
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1. Background

1.1 On 20th December 2007 a joint committee of the two East Sussex Primary Care Trust (PCT) Boards took a decision to centralise consultant-led maternity, special baby care and inpatient gynaecology services at the Conquest Hospital, Hastings with a midwifery-led maternity unit at the Eastbourne District General Hospital, and enhanced ante and post-natal care in the community.

1.2 On 31st March 2008 HOSC wrote to the Secretary of State for Health to refer the PCTs' plans (with the exception of the enhanced ante and post natal care) for independent review, on the basis that the PCTs' decision was not in the best interests of health services for East Sussex residents.

1.3 The Secretary of State passed HOSC's referral to the Independent Reconfiguration Panel (IRP) for advice. The IRP is a national panel comprising clinical representatives, NHS management representatives and lay representatives. During May and June 2008 a sub-group of the IRP visited East Sussex to interview a wide range of stakeholders including HOSC members, NHS clinical and managerial staff, campaign groups, representatives of local people and proposers of alternative options. They also visited the Conquest and Eastbourne Hospitals.

1.4 At the HOSC meeting on 16th June 2008, the Committee considered progress on aspects of maternity strategy which had not been subject to the referral, and arrangements to maintain safe services at the two main hospital sites pending the Secretary of State's decision. HOSC also requested further details of the quality indicators being developed in order to monitor the standard of care being provided currently and after any future change to maternity services.

2. Outcome of HOSC's referral

2.1 On 4th September 2008 the Secretary of State announced that he had accepted the recommendation of the IRP to reject the PCTs' proposals to reconfigure maternity and related services as they would reduce accessibility and choice for the people of East Sussex. This decision was taken on the basis of the report compiled by the IRP and submitted to the Secretary of State on 4th August 2008. Attached as appendix 1 is the letter from the Secretary of State to HOSC concerning his decision. Attached as appendix 2 is the press release from the IRP on its

report. The full IRP report has previously been circulated to HOSC members and is available from the IRP website www.irpanel.org.uk.

2.3 It is understood that the Judicial Review of the PCTs' decision, led by local campaign groups, has been put on hold in the light of the Secretary of State's decision and is likely to be withdrawn.

3. Monitoring developments in maternity and related services

3.1 The Secretary of State has called upon the PCTs to continue to work with stakeholders to develop a local model offering choice to service users, which will improve and ensure the safety, sustainability and quality of services. This must include the provision of consultant-led maternity, special baby care and inpatient gynaecology on both main hospital sites, but is likely to involve some changes to the way the services operate, e.g. staffing structure. Thus, as one of the key stakeholders, there are a number of areas where HOSC is likely to be involved as the PCTs develop this strategy.

3.2 Firstly, HOSC will wish to continue to monitor the provision of consultant-led maternity services at both the Eastbourne and Hastings hospitals as the future strategy is developed and established, to ensure services remain safe and effective. As mentioned above, HOSC requested more detailed information about the development of quality indicators in relation to maternity services. The PCTs have supplied an update on this work - attached at appendix 3. HOSC is requested to consider how to make use of these indicators in the Committee's ongoing monitoring of the quality of maternity services.

3.3 Secondly, HOSC will want to comment on the effectiveness of communication and engagement with the people of East Sussex in taking forward the IRP's recommendations.

3.4 Thirdly, HOSC will wish to monitor progress with the implementation of the recommendations made by both the IRP in its report to the Secretary of State and by the Committee in its report of October 2008 on the Fit for the Future proposals. Many of HOSC's recommendations would have applied only if the decision to move services to a single site had been approved. However, there are some recommendations which apply regardless of the configuration of services and progress against these can be monitored. The PCTs updated HOSC's monitoring template prior to the announcement of the Secretary of State's decision and this is attached at appendix 4. The template can be amended in future to remove the HOSC recommendations which are now irrelevant, and to incorporate the IRP recommendations if HOSC believes this to be helpful in monitoring progress.

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