

HEALTH OVERVIEW AND SCRUTINY COMMITTEE

MINUTES of a meeting of the Health Overview and Scrutiny Committee (HOSC)
held at County Hall, Lewes on 28 July 2014

PRESENT:

East Sussex County Council Members

Councillors Michael Ensor (Chair), Frank Carstairs, Kim Forward, Ruth O'Keeffe (Vice-Chair), Peter Pragnell, Alan Shuttleworth, and Bob Standley

District and Borough Council Members

Councillors John Ungar (Eastbourne Borough Council), Sue Beaney (Hastings Borough Council), Jackie Harrison-Hicks (Lewes District Council), Angharad Davies (Rother District Council), and Mrs Diane Phillips (Wealden District Council)

Voluntary Sector Representatives

Jennifer Twist (SpeakUp)

ALSO PRESENT:

High Weald Lewes Havens CCG

Wendy Carberry, Chief Officer
Dr David Roche, Area Chair

Eastbourne, Hailsham and Seaford CCG / Hastings and Rother CCG

Jessica Britton, Associate Director of Strategy and Governance
Amanda Philpott, Chief Officer
Dr Martin Writer, Chair Eastbourne, Hailsham and Seaford CCG

East Sussex Healthcare NHS Trust

Darren Grayson, Chief Executive
Dr Amanda Harrison, Director of Strategic Commissioning and Assurance
Nicole Roberts, Consultant Obstetrics and Gynaecology
Lindsey Stevens, Assistant Director of Nursing Midwifery, Women and Children's Health and Community Practitioners
Stuart Welling, Chairman

SCRUTINY OFFICER:

Paul Dean, Member Services Manager

8. MINUTES

8.1. The minutes of the meeting held on 19 June 2014 were agreed as a correct record.

9. APOLOGIES

9.1. Apologies for absence were received from Julie Eason (SpeakUp).

10. DISCLOSURE OF INTERESTS

10.1. There were none.

11. REPORTS

11.1. Copies of the reports dealt with in the minutes below are included in the minute book.

12. BETTER BEGINNINGS

12.1. The Committee considered a report of the Assistant Chief Executive which set out the decisions made by the three clinical commissioning groups (CCGs) regarding the reconfiguration of maternity services, inpatient paediatric and emergency gynaecology services.

12.2. The CCGs thanked HOSC for the independent scrutiny that the Committee brought to the Better Beginnings review process.

12.3. The CCGs and East Sussex Healthcare NHS Trust (ESHT) made the following points:

CCGs

- The Better Beginnings pre-consultation business case demonstrated that each of the six options was deliverable and that money was not a material consideration in the case for change. The key driver for change was safety and sustainability.
- The Better Beginnings review has been comprehensive. It has been informed by widespread public, patient and clinical engagement prior to consultation. It has been clinically led and validated by independent clinicians.
- The CCGs accept all of the HOSC recommendations.
- The evidence base has been made widely available and had been openly discussed. Evidence regarding safety and quality was overwhelming and was the driving force behind the unanimous decision of all three CCGs at the joint meeting of their governing bodies on 25 June 2014 that single siting consultant-led obstetric services, and co-locating in-patient paediatrics and emergency gynaecology, is the best and safest option.
- The selection of Option 6 (single siting these services at Conquest Hospital in Hastings and ensuring two stand-alone midwifery units, one at Eastbourne and one at Crowborough) was based on evidence detailed in the pre-consultation business case and continued monitoring of quality and safety indicators from the temporary service configuration. Key considerations included:
 - Geographical spread of services (including consideration of how these services network with services outside of East Sussex)

- The predicted decline in birth rate in Eastbourne compared to a predicted stable birth rate in Hastings.
- Several Hastings wards have the highest rates in East Sussex of domestic violence, substance misuse, smoking during pregnancy and teenage pregnancy: all of which affect health outcomes of patients and unborn babies. Urgent attendances for paediatrics was also a factor.
- Hastings has a lower rate of car ownership, which reduces the ability of patients and visitors to access services that are not nearby.
- Distance from units within East Sussex to those outside of East Sussex.
- The CCGs stressed the importance of implementing the decisions swiftly. Any ongoing delay would continue, for example, to make it difficult to attract the high quality medical, midwifery and nursing staff needed to develop and deliver the best quality sustainable services.

ESHT

- Without exception, every midwife says that the service is now safer and they feel much more supported by the consultants and the junior medical staff.
- In the experience of consultants working at the Conquest Hospital, the vast majority of women are happy to travel to Hastings if they know they are going to get the enhanced level of care that can be provided at the obstetrics unit.
- Consultant cover on a single site has increased substantially and supervision of junior medical staff has improved, resulting in fewer serious incidents and improved safety.
- Almost 90% of women see a clinician within the first 12 weeks of pregnancy, which gives sufficient time for them and their families to plan the birthing arrangements. Access issues for partners of pregnant women have been improved recently as they are now able to stay overnight at the Conquest Hospital.

Motions

Motion 1

12.4. The following motion moved by Councillor Shuttleworth and seconded by Councillor Ungar was LOST:

HOSC determines that the decision of the Clinical Commissioning Groups which proposes the removal of the consultant-led maternity service and in-patient paediatric service from Eastbourne District General hospital on a permanent basis is not in the best interests of a large sector of East Sussex residents. Further, that HOSC believes that the consultation process was flawed by the omission of a choice to retain these services in Eastbourne as well as in Hastings.

HOSC determines that these matters be referred to the Secretary of State for Health for consideration by an Independent body.

The main grounds for referral are the significant loss in health services for the residents who live in the extensive area served by Eastbourne District Hospital including:-

- *The impact on patient safety*
- *The impact for the safety of women in labour*
- *The poor transport infrastructure between Eastbourne and Hastings*
- *The unreliability of serious incident projection data*
- *The unreliability of birth projection data*
- *The shortfalls in the consultation process*

12.5. A recorded vote of Councillor Shuttleworth's motion was requested and taken. The motion was LOST, the votes being cast as follows:

FOR THE MOTION (4)

Councillors Carstairs, O'Keeffe, Shuttleworth and Ungar.

AGAINST THE MOTION (8)

Councillors Beaney, Davies, Ensor, Forward, Harrison-Hicks, Phillips, Pragnell and Standley.

Motion 2

12.6. The following motion moved by Councillor O'Keeffe and seconded by Councillor Carstairs was LOST:

This Committee has sufficient concern in the light of recent information showing the strong possibility of evidence being incomplete or selectively presented that it wishes to consider referral of the decision concerning maternity and paediatrics to the Secretary of State and to collect evidence towards that end prior to the September meeting of Sussex.

12.7. A recorded vote of Councillor O'Keeffe's motion was requested and taken. The motion was LOST, the votes being cast as follows:

FOR THE MOTION (6)

Councillors Carstairs, Forward, Harrison-Hicks, O'Keeffe, Shuttleworth and Ungar

AGAINST THE MOTION (6)

Councillors Beaney, Davies, Ensor, Phillips, Pragnell and Standley.

The Chair confirmed, through the use of his casting vote, that the motion was LOST.

Motion 3

12.8. The following motion moved by Councillor Standley and seconded by Councillor Pragnell was CARRIED:

Sussex has considered the decisions of the CCGs and agree that they are in the best interests of health service for residents in East Sussex.

12.9. A recorded vote of Councillor Standley's motion was requested and taken. The motion was CARRIED, the votes being cast as follows:

FOR THE MOTION (7)

Councillors Beaney, Davies, Ensor, Harrison-Hicks, Phillips, Pragnell and Standley

AGAINST THE MOTION (5)

Councillors Carstairs, Forward, O'Keeffe, Shuttleworth and Ungar.

12.10. RESOLVED that the decisions of the Clinical Commissioning Groups are in the best interests of the health service for East Sussex.

12.11. The Chair acknowledged that this decision was one of the most difficult that HOSC had ever been called upon to take; the process had brought out intense emotions and passions. He thanked everybody involved in the process.

12.12. HOSC's future involvement in overseeing the successful implementation of the CCGs' decisions on maternity and paediatric is paramount and would be robust. This would involve:

- Nominating a HOSC representative to the CCGs' implementation board.
- The CCGs and ESHT giving evidence at future HOSC meetings that:
 - Demonstrates tangible improvements in maternity and paediatric services
 - Provides ongoing assurance that the CCGs are robustly monitoring ESHT's delivery of the changes.
 - Ensures effective ongoing use of feedback from staff and the public.
 - Provides evidence that HOSC's recommendations are being implemented - in particular, that an effective and innovative communications strategy is in place in advance of full implementation.

13. HOSC WORK PROGRAMME

13.1. It was agreed that the following items should be added to the **18 September 2014** HOSC meeting:

- An update on the implementation of the 'Shaping our Future' clinical strategy, including the full business case and a possible visit to the stroke unit at Eastbourne District General Hospital.
- 'Challenged Health Economy': to include an update on the review by PWC of ESHT's situation.
- The Dignity in Care report to include an overview of the link with staffing levels.
- A brief update on the progress of the implementation of the changes to maternity and paediatric services.

13.2. It was agreed that the Dementia Strategy, Dementia Service Redesign, and the Joint Scrutiny update on Sussex Partnership Foundation Trust items should be deferred to the **27 November 2014** HOSC meeting.

13.3. It was agreed that the following reports and briefings should be circulated via email to HOSC Members as soon as practicable and any of the items put on a future HOSC agenda if required:

- A report providing more details of the notice served by the CCGs to ESHT on the Trust's provision of community services.
- A report on the commercial procurement of Musculoskeletal (MSK) services to indicate whether it could constitute a 'substantial variation' to services.
- A report addressing concerns around the accessibility of the 'Patient First' GP appointment system.

13.4. Members of the Committee were asked to consider whether they wished to represent HOSC on the Better Beginnings implementation board (see paragraph 12.12). A representative will be agreed at the next committee meeting.

13.5. RESOLVED to note and update the Work Programme.

The Chair declared the meeting closed at 4.15pm.