

MINUTES of the meeting of Health Scrutiny Committee held at The Council Chamber, Brockington, 35 Hafod Road, Hereford on Thursday, 20th September, 2007 at 10.00 a.m.

Present: Councillor JK Swinburne (Chairman)

Councillors: WU Attfield, PJ Edwards, MJ Fishley, P Jones CBE, MD Lloyd-Hayes, G Lucas, AP Taylor and PJ Watts

In attendance: Councillors LO Barnett Cabinet Member (Social Care Adults and Health) and WLS Bowen

15. APOLOGIES FOR ABSENCE

Apologies were received from Councillors SPA Daniels and AE Gray and from Mrs A Stoakes, Vice-Chairman of the Primary Care Trust Patient and Public Involvement Forum.

16. NAMED SUBSTITUTES

Councillor PJ Edwards substituted for Councillor AE Gray and Councillor MD Lloyd-Hayes for Councillor SPA Daniels.

17. DECLARATIONS OF INTEREST

The following declarations of interest were made:

Name	Item	Interest	Reason
WU Attfield	Agenda item 10: Changes in the Management of Mental Health Services	Personal	Trustee of a mental health charity
WLS Bowen	(general)	Personal	Non-Executive Director of Hereford Hospitals NHS Trust
P Jones	Agenda Item 6: West Midlands Ambulance service NHS Trust – Proposed Reconfiguration of Emergency Operations Centres in the West Midlands	Personal	Council appointee to the Hereford and Worcester Fire and Rescue Authority, Chairman of the West Midlands Fire Control Board and Director of the Fire Company.

MD Lloyd-Hayes	Agenda item 6	Personal	Council appointee to the Hereford and Worcester Fire and Rescue Authority
PJ Watts	Agenda item 6	Personal	Council appointee to the Hereford and Worcester Fire and Rescue Authority

18. MINUTES

RESOLVED: That the Minutes of the meeting held on 14th August, 2007 be confirmed as a correct record and signed by the Chairman.

19. SUGGESTIONS FROM MEMBERS OF THE PUBLIC ON ISSUES FOR FUTURE SCRUTINY

There were no suggestions from Members of the public.

20. WEST MIDLANDS AMBULANCE SERVICE NHS TRUST - PROPOSED RECONFIGURATION OF EMERGENCY OPERATIONS CENTRES IN THE WEST MIDLANDS

The Committee considered a response to the West Midlands Ambulance Service NHS Trust's (WMAS) proposed reconfiguration of emergency operations centres (EOCs).

Copies of the WMAS consultation document had been previously circulated to Members of the Committee. Documentation supplied by the Save Your Emergency Operations Centre campaign being run by staff based at the Hereford and Worcester Emergency Operations Centre at Bransford had also been circulated

Mr M MacGregor Regional Head of Commissioning for WMAS and Mr D Laird, WMAS Locality Director for Herefordshire, Worcestershire and Shropshire attended the meeting to present the Trust's proposals and answer questions.

The presentation set out the background to the formation of the West Midlands Regional Ambulance Trust noting that it was the highest performing Regional Trust. It illustrated the current emergency operations centres (EOCs) and the lack of links between them, apart from between Shrewsbury and Brierley. It was noted that if the EOC at Bransford failed the fallback was an office at Bromsgrove Ambulance Station which could accommodate 4 seats compared with 7 at Bransford. It would take about half an hour to make this operational. During that time no ambulances could be despatched in the locality area – none of the other EOCs could help. It was added that local knowledge was not a factor taken into account when recruiting staff – no one could know every location in the locality.

The reasons for change were outlined as follows: there were five stand alone facilities; the fall back facilities were not fit for purpose; there was no ability to work together or spread calls. The arrangements did not comply with the Civil Contingencies Act and there were a multitude of different, incompatible systems. The aim of the reconfiguration was to achieve better patient care with the use of more clinicians, faster call answering to get help to patients more quickly, enhanced career progression for EOC staff, improved resilience, ability to deal with a major incident, standardised technology and the retention of local knowledge, whilst noting that technology was adept at identifying the location of a caller.

The proposal was described as involving, two large centres mirroring one another at Tollgate, Stafford and Brierley Hill, with a third Centre at Leamington Spa which was currently the third busiest Centre with more resilience than the other remaining two Centres. This would significantly increase the number of EOC seats from 62 to 110. It would pool resources, centralise functions and provide flexibility. It was stated that concerns that ambulances would be sucked into Birmingham were ill-founded and not borne out by the experience of Coventry and Warwickshire, or Shropshire and the Black Country. There was a safeguard in that the Primary Care Trusts (PCTs) would in any event demand that performance levels were maintained.

Support arrangements for current EOC staff were outlined. Whilst WMAS had said there would be no redundancies it was recognised that not all current staff at Bransford would want to relocate. There were no plans to move ambulances. The vast majority of knowledge was on the ground. There would be staff at the new Centres dedicated to Hereford and Worcester calls.

The summary was that: change was needed, there would be no job losses, most people did not know where their 999 call was answered, calls would be answered more quickly and ambulances would remain locally based, ambulances would continue to be despatched by Division, local knowledge would be maintained, the proposal was not driven by cost savings but by improvement to services. Any savings would be reinvested locally.

It was noted that whilst the WMAS Board would meet on 9 October as originally planned two alternative proposals had come forward which would also be presented at that meeting together with a report by an independent expert on the consultation. It was now intended that a final decision would be made by the Board on 28th November.

In the ensuing discussion the following principal points were made:

- Further clarification was sought on the extent of the role of the Regional Centres. In reply the ability of the Regional Centre to co-ordinate in the event of a major incident was emphasised. Whilst the quality of the staff at Bransford were first class the facilities were not good enough.
- Cross-border issues were raised with particular reference to Wales. In reply it was stated that the WMAS bordered many areas. The proposal would overcome internal boundaries that currently existed within the Region.
- Further reassurance was sought that vehicles would not be directed from the rural areas to the City, noting that the rural areas might also require specialist vehicles. The Locality Director emphasised that he would have to demonstrate to the PCT as commissioners that local performance targets were being met. It was added that WMAS recognised the need for four wheel drive vehicles in rural areas. It was noted that Herefordshire PCT was looking to build on the current funding of Emergency Care Practitioners.
- The importance of local knowledge was discussed. It was reiterated that whilst this could be helpful it was not a factor in recruiting staff and could not be relied upon. There were protocols in place which stressed that staff must not rely on local knowledge but must get the caller to provide information to the operator. It was reiterated that there would be dedicated staff for Herefordshire. Members noted assurances regarding training of EOC staff but suggested there was a need for a localised training programme which also provided EOC staff with an

understanding of rural issues.

- Mrs L Kabani a representative of staff at Bransford, who was present as a Member of the Public, was invited to speak. She said that staff still thought that the proposal was detrimental to Herefordshire and South Worcestershire. She questioned why costings of the proposal were not available and, as they were not, how it could be stated that the proposal was cost neutral. She said there was no evidence that calls would be answered more quickly. She also referred to the appointment of 40 emergency care assistants to operate in the Birmingham Black Country area saying that this was to balance the loss of Hereford and Worcester resources in cross border assistance although the highest proportion of this assistance occurred in the Coventry and Warwickshire area.

In reply WMAS said that costings would be presented on 9th October. In relation to speed of call answering reference was made to the capacity under the proposal to answer more calls more quickly and so provide a better response. This was particularly the case when a major incident occurred. The role of the emergency care assistants was explained.

- It was noted that the Board of Hereford Hospitals NHS Trust had not yet agreed its response to the consultation.
- A further question was asked about the use of receipts from the disposal of Bransford. WMAS replied that the intention as to improve the service and the proposal would provide a better service for Herefordshire. It was again noted that WMAS would undoubtedly be challenged by the PCT if performance was unsatisfactory.
- On behalf of the PCT it was stated that the PCT had invested in the EOC at Bransford and had set aside investment for the next two years to meet targets. The PCT would be keeping a close eye on how any receipts from Bransford were invested.
- It was asked why there was not more investment into the Community First Responder Scheme (CFR). The Locality Manager replied that the current strategy was to support CFRs in fund raising, setting up the schemes and administrative support. There was also training and other support. He was prepared to look at funding recognising that CFRs were a very important part of the frontline service especially in a rural area such as Herefordshire.
- Asked about the future arrangements for the non-emergency services such as the patient transport service the Locality Manager said that those vehicles would be relocated locally but no site had been decided upon.
- Concern was expressed that the larger urban population might carry undue weight in the response to the consultation. In reply it was stated that there had in fact been a larger response from rural areas. It was added that performance in Herefordshire had improved since the formation of WMAS, the number of staff had reduced, mainly at management level, and there was a small surplus rather than an overspend. The service was more efficient, releasing money for investment in services.
- It was asked whether concentrating EOC resources as proposed might not increase vulnerability and whether there would accordingly be merit in maintaining the current centres. In reply it was said that under the new national digital radio system the intention was that each region would have two control

rooms. Any additional control rooms were referred to as spokes. The view was that in addition to being very expensive the more spokes there were the less resilient the system.

The Chairman summed up the key points and the Committee agreed that they should form the basis of the Committee's response.

RESOLVED: That the Committee's response to the West Midlands Ambulance Service NHS Trust's consultation on the reconfiguration of emergency operations Centres should be based on the following points:

- **support in principle for the reconfiguration of Emergency Operations Centres as proposed by the Trust, encouraged by the investment in compatible IT systems across the proposed 3 Centres.**
- **recognition of the strategic rationale for the proposal, however, in order to fully support the changes proposed the Committee would require assurance:**
 - **that the service on the ground in Herefordshire would not be adversely affected and that data for the County will be collated separately and monitored;**
 - **that there would be no urban drift of services and that this is monitored and evidenced by firm data; and**
 - **that in order to ensure that residents of Herefordshire continued to receive a high calibre service suitable training is provided to control room staff so that they had a good knowledge of the localities they served, including for example an understanding of the issues facing a rural area such as Herefordshire.**
- **increased cross-border communication with neighbouring ambulance services to further improve effective service delivery.**
- **reinvestment into the County of any resources realised through reorganisation. Providing direct funding for equipment for Community First Responders would be a good place to start to seek to improve the provision of service to rural areas.**

21. REVIEW OF "ELDERLY FALLS"

The Committee considered a scoping statement for a review of "elderly falls" and the process for the review.

RESOLVED: That the scoping statement for the review of "Elderly Falls" as appended to the report, be approved, subject to simplification of some of the terminology.

22. HEREFORD HOSPITALS NHS TRUST - FOUNDATION TRUST STATUS

The Committee received an update on Hereford Hospitals NHS Trust's progress towards achieving Foundation Trust status.

It was noted that the Trust Board continued to believe that Foundation Trust Status was the best vehicle for maintaining and improving the quality of and access to secondary healthcare services for the people of Herefordshire. The timescale for consideration of the Trust's current application was subject to change because of the number of applications under consideration by the Department of Health.

In response to questions about the prospects for this second application it was stated that the Trust's financial position was stronger than when the first application had been made.

RESOLVED: That the position be noted and further updates provided.

23. RECONFIGURATION OF MENTAL HEALTH SERVICES

The Committee was informed of plans to change two aspects of mental health services provided by the PCT.

The first proposal related to "The Shires", where the PCT was proposing to tender for a new provider of the service, which provided long term accommodation for younger people with enduring mental health issues. The second related to a review of the mental health rehabilitation service.

RESOLVED: That the proposals be noted and the Primary Care Trust asked to provide further reports when the proposals were far enough advanced for the Committee to comment on them.

24. CHANGES IN THE MANAGEMENT OF MENTAL HEALTH SERVICES

The Committee considered plans to change the management of mental health services and the way in which community mental health teams worked.

Mr Paul Ryan, Head of Commissioning at the Primary Care Trust presented the report. He explained that while the changes were in some respects relatively minor they were significant for service users. It was noted that a consultation exercise had been undertaken and it was proposed to report on the outcome to the Committee's next meeting.

RESOLVED: That the proposal be noted and Herefordshire Mental Health Services be asked to present the results of the consultation for discussion by the Committee at its next meeting.

25. DEVELOPMENT OF LOCAL INVOLVEMENT NETWORK

The Committee received a progress report on the development of a Local Involvement Network (LiNK).

The Procurement Officer presented the report. It was noted that the amount of money to be allocated by the Government to run the LiNKs had not yet been announced which meant that tenders could not be invited from potential hosts for the LiNK. There was also a general lack of clarity about the operation of the LiNKs.

It was proposed that the Minister should be informed of the Committee's concerns and clarification sought.

The Chairman of the Primary Care Trust Patient and Public Involvement Forum criticised the Council's approach to the development of the LiNK. He said that the

PPIF had not been involved and consulted on its development despite its offer to assist in the process.

In reply the Chairman expressed regret at the PPIF's concern and said that it had always been intended that once the detail was known the Council would discuss the development with the PPIF. The Director of Adult and Community Services added that officers would be happy to meet to discuss the PPIF's concerns and draw on its assistance but had to be careful also to maintain the independence of the procurement process.

RESOLVED: That clarification be sought from the Minister on the plans for the development of the Local Involvement Networks.

26. WORK PROGRAMME

The Committee considered its work programme.

RESOLVED: That the work programme as appended to the report be approved and reported to the Strategic Monitoring Committee.

The meeting ended at 12.30 p.m.

CHAIRMAN