

**MINUTES of the meeting of Health Scrutiny Committee held at The Council Chamber, Brockington, 35 Hafod Road, Hereford on Wednesday, 23rd June, 2004 at 2.00 p.m.**

**Present:** Councillor W.J.S. Thomas (Chairman)  
Councillor T.M. James (Vice Chairman)

**Councillors:** Mrs. W.U. Attfield, G.W. Davis, Mrs. J.A. Hyde,  
Brig. P. Jones CBE, G. Lucas, R. Mills and Ms. G.A. Powell

**In attendance:** Councillors W.L.S. Bowen and P.E. Harling.

**1. CHAIRMAN AND VICE-CHAIRMAN**

It was noted that Councillor W.J.S. Thomas had been appointed Chairman of the Committee and Councillor T.M. James appointed Vice-Chairman of the Committee at the Annual Meeting of Council on 21st May, 2004.

**2. APOLOGIES FOR ABSENCE**

Apologies were received from Councillor J.B. Williams.

**3. NAMED SUBSTITUTES**

There were no named substitutes.

**4. DECLARATIONS OF INTEREST**

There were no declarations of interest.

**5. MINUTES**

**RESOLVED:** That the Minutes of the meeting held on 29th April, 2004 be confirmed as a correct record and signed by the Chairman.

**6. ACCESS AND WAITING**

The Committee received a presentation from Mrs S. Beamish, Director of Operations, and Hereford Hospitals NHS Trust, assisted by Mrs L. Kedward, Project Director Emergency Care Services, on the national initiative aimed at reducing waiting times.

Mrs Beamish explained how the position had improved since 2001, the targets which it was planned to achieve by March, 2005 and the pattern of improvement which showed a significant reduction in waiting times across the board for inpatients, outpatients and the accident and emergency department, with further improvement envisaged. She outlined the key principles which had underpinned this improvement.

She drew attention to a 16% rise in admissions to the accident and emergency unit between September and October 2004 which had had a severe impact on performance. She explained how the rise had mirrored the reduction in the numbers of those attending minor injury units and how this was attributable to the change in the arrangements for the provision of out of hours services. This had illustrated the

importance of accurate communication on first contact with the patient to ensure that the matter was dealt with locally where possible. She reported that the aim was to have one local call centre so when calls came in the correct advice could be given with the benefit of local knowledge. The intention would be that calls to NHS Direct would be routed to that centre. The sudden rise in accident and emergency admissions had also highlighted the need for caution in making assumptions about the pattern of public behaviour and how quickly attitudes could change, with significant implications for service provision.

She noted that 10% of patients accounted for 50% of overall inpatient days and outlined key pieces of work which were underway to improve capacity: a review of the way in which the space available in the hospital was utilised; the way in which chronic disease cases were managed and the scope for providing care outside the hospital environment; and the redesign of emergency services focusing on the provision of services in the right place, at the right time, with the right skills available.

In response to questions Mrs Beamish expressed the view that there was the potential by changing practices to improve the availability of beds and that there was the capacity to cope with the demands the hospital could expect to face. She confirmed that a process for ongoing review of the use made of the hospital was in place. She added that the role of community hospitals would be considered as part of the project work underway.

The Committee agreed that it would be helpful to receive a further report on the situation after March 2005 to assess the progress that had been made.

**RESOLVED: That the presentation be noted and a progress report requested after March 2005.**

## 7. **CANCER SERVICES**

The Committee was informed of issues regarding the provision of cancer services.

The Cheltenham and Tewkesbury NHS Primary Care Trust had advised the Council that the Cancer Network Board responsible for overseeing the provision of cancer services across Gloucestershire, Herefordshire and South Worcestershire was, carrying out work which was likely to identify the need for continued development and change in services.

A meeting had been arranged to discuss any cross-boundary issues. It was thought possible that a formal Joint Committee might need to be established with the Scrutiny Committees of the other two local authorities affected to consider any proposed changes to services. Authority was sought to make any necessary arrangements if there was not a convenient scheduled meeting to which to report.

In response to a question it was agreed to provide clarification on the scope for patients to access cancer services from other sources, for example Shrewsbury which was more convenient for residents of North Herefordshire.

**RESOLVED: That the Director of Social Care and Strategic Housing be authorised to take any necessary action to facilitate the establishment of a Joint Committee after consultation with the Chairman of the Committee and the County Secretary and Solicitor.**

**8. COMMUNICATION AND MORALE**

The Committee considered the work of a Sub-Group to investigate communication and morale issues within the local Health Service.

The Committee had established a Sub-Group in October 2003 but without a specific remit at that stage. It was proposed that a work programme for the sub-Group should now be formulated and that the Group's membership should be increased.

**RESOLVED:**

**THAT (a) the Director of Social Care and Strategic Housing following consultation with the Chairman and Members of the Communication and Morale Sub-Group be authorised to formulate a work programme for the Sub-Group;**

**and**

**(b) Councillor Mrs W.U. Attfield be appointed a Member of the Sub-Group and Mr C.G. Grover be co-opted onto the Group.**

The meeting ended at 3.05 p.m.

**CHAIRMAN**

