HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE ROTHBURY HOSPITAL REFERRAL REVIEW GROUP

Notes of the Health and Wellbeing OSC (Rothbury Hospital Referral) Review Group meeting held in the Committee Room 1, County Hall, Morpeth at 1.00 p.m. on Wednesday, 16 January 2019

PRESENT

Councillor J Watson (Chair, in the Chair)

COUNCILLOR

Dungworth, S Moore, R. Rickerby, L

OTHER GROUP MEMBER

Nugent, D (Healthwatch Northumberland)

OFFICERS

Bennett, Mrs L.M. - Senior Democratic Services Officer Bradley, N - Service Director: Strategic Commissioning and Finance Henry, L - Legal Services Manager Lally, D - Chief Executive Roll, J - Democratic Services Manager

Brown, S. - Northumberland Clinical Commissioning Group Bainbridge, V - Northumberland Clinical Commissioning Group Mitcheson, R - Northumberland Clinical Commissioning Group Riley, C - Northumbria Healthcare NHS Foundation Trust Taylor, M. - Northumbria Healthcare NHS Foundation Trust

1. Apologies for Absence

Apologies for absence were received from Councillor T. Cessord and H. Ray (Northumbria Healthcare NHS Foundation Trust.).

2. Declarations of Interest

There were no declarations of interest.

3. Notes of Previous Meetings

The notes of the previous meetings held on 4 and 10 December 2018 were received.

4. Update on Questions to the Northumberland Clinical Commissioning Group and Northumbria NHS Foundation Trust

The Chief Executive stated that correspondence had been received criticising the decision to hold the meeting in private. She explained that the decision was two fold: to provide an environment which would allow members of the group to have a focused discussion and the opportunity to freely ask questions and express their opinion; and also to ensure that members of staff were treated reasonably following an incident which occurred after the last meeting. She added that this Group was not a formal Council Committee or Sub-Committee but that the notes of this meeting along with the Clinical Commissioning Group's (CCG) responses to the questions raised would be made publicly available prior to the Scrutiny meeting on 23 January. Healthwatch stated they had also received correspondence querying the privacy of the meeting and the need to improve relationships between parties and was pleased to receive an explanation.

Members received a presentation from the CCG outlining its responses to the list of questions regarding the areas raised by the Secretary of State. The presentation dealt with each of the questions raised in turn.

Members were informed that the CCG had held a helpful meeting with representatives of the Campaign Group on Friday, 11 January 2019 and agreement had been reached for a further meeting with the group and Healthwatch to look at the data set that the CCG would be using. It was hoped that this further meeting would take place before 23 January 2019. A visit would also be arranged with representatives of the Campaign Group to Bell View at Belford, which was a resource centre offering day care and support.

During the discussions a number of issues were raised:-

- The comment in the Rothbury Travel Impact Analysis regarding the travelling distance between Shilbottle and Alnwick should be reviewed.
- No complaints about care or clinical incidents had been logged since the hospital beds were temporarily closed. However, complaints had been received about the closure of the beds from the Campaign Group.
- It was acknowledged that the 5th test had only been introduced after the consultation had taken place, however, it was included within the decision making report in September 2017. The CCG would raise this issue at its forthcoming meeting with NHS England and would seek its views.
- The CCG had responded to the Secretary of State's letter in respect of the Equality Impact Assessment and timeline.

- There had been no formal requirement for the CCG to inform the Health & Wellbeing Scrutiny Committee of the temporary decision to suspend the patient beds as it was an operational decision, however, informal discussions had taken place. It was hoped that communication between the CCG, the Trust and the Scrutiny Committee would be improved in future similar situations.
- The Whalton Unit at Morpeth was currently temporarily closed with patients being referred to Wansbeck Hospital which was approximately five miles away. It was a more difficult journey from Rothbury to the Wansbeck Hospital by bus, however, 85% of patients had a car and it was an extra eight minutes drive. This temporary closure would still cause problems for the remaining 15% of patients. The Trust had secured funding for transport to Wansbeck.
- In response to a question from the Chair, the CCG was unable to put forward solid proposals for services within the new health centre but had put forward an improved community offer which included more integrated community services and the introduction of other clinics to Rothbury. The hospital was more vibrant now since a GP practice had moved in. It was not possible to move forward with plans and use the first floor of the hospital until the issue regarding the beds was resolved but it was intended to build on what was available and ensure a facility which would serve many not the few. However, expectations had to be managed.
- It was suggested that it may be helpful if there was a clear indication of what improvements had already been made and to obtain the views of patients who had benefited.
- Interest had been received from a dental practice regarding use of the Rothbury hospital building and this would be welcomed. However, no progress could be made on this until the issue of the hospital beds was resolved.
- The Campaign Group had asked to be the main stakeholder but had been informed that although it was an important stakeholder, there were other stakeholders too. The CCG had followed due process but still needed to work with the community, the Campaign Group, local member, Healthwatch and other groups going forward. It was open about the process and happy to engage. Focussed discussions regarding design could then follow with smaller groups.
- The Healthwatch representative welcomed the wider engagement by the CCG and news that the Campaign Group had agreed to a meeting and to the visit to Bell View. It was important that more people were involved in looking at options and help prevent further delays in finding a resolution.
- The Healthwatch representative commented that a number of assumptions had been made in the presentation arising from the Quality Impact Assessment which was dated 2016/17. It could not be assumed that all of the comments made were still reliable today. As regards bus travel, it was not as secure as it once was with many services being withdrawn. The Get About Scheme contract was due to expire on 31 March 2019. Some older patients who were currently happy to drive

would eventually decide to stop due to their age. The data would be updated.

- As regards palliative care, a MacMillan nurse had been appointed and there was a good palliative care offer. Patients were being supported in their own home where possible and others were being cared for at Alnwick Infirmary, Wansbeck Hospital or in Care Homes. No clinical complaints had been received and the Palliative Care services was regarded as an excellent service.
- A member commented that community needs were very different today and the national policy was to move more services from hospitals to home, and focus more on prevention and wider health and wellbeing. This demanded a mindset change. The Healthwatch representative referred to the difficulties Home Care services were experiencing in Northumberland.
- With regard to the change in provider of homecare, members were advised that a tendering process was being carried out to provide home care across Northumberland .
- A query as to whether patients were being referred to the RAF facility would be checked.
- A comment was made that the Secretary of State's letter could be interpreted in different ways and did contain contradictions such as not specifying what were the flaws in the consultation process and stating that the process did not need to be reopened.

The Chief Executive stated that the meeting and the responses by the CCG to the Review Group's questions had been very helpful and would be reported to the scrutiny committee meeting on 23 January at which more questions may be raised. She acknowledged the stalemate position of focussing solely on the issue of reopening the beds and suggested that the CCG and the Trust needed to sit down with the interested parties from Rothbury and Healthwatch to see past this and agree a way forward which would provide a community offer which would benefit the wider community.

An updated position statement would be provided to the Secretary of State by the end of January and then the involvement of Review Group could end. Northumberland County Council would be monitoring progress through the normal Overview and Scrutiny Committee process.

The CCG reported that it hoped to resolve this issue by April 2019. There was a meeting of its Governing Body on 23 January 2019.

It was confirmed that the responses to the questions presented to the Review Group could be made publicly available.

RESOLVED that the notes of this meeting and the papers distributed to the Review Group be made publicly available.