



Health Scrutiny Panel

20 November 2014

Time 2.00 pm **Public Meeting?** YES **Type of meeting** Scrutiny
Venue Committee Room 3 - Civic Centre, St Peter's Square, Wolverhampton WV1 1SH

Membership

Chair Cllr Claire Darke (Lab)
Vice-chair Cllr Zahid Shah (Con)

Labour	Conservative	Liberal Democrat
Cllr Milkinderpal Jaspal Cllr Bert Turner Cllr Greg Brackenridge Cllr Jasbir Jaspal Cllr Peter O'Neill Cllr Daniel Warren	Cllr Paul Singh	

Quorum for this meeting is two Councillors.

Information for the Public

If you have any queries about this meeting, please contact the democratic support team:

Contact Jonathan Pearce
Tel/Email Tel: 01902 550741 jonathan.pearce@wolverhampton.gov.uk
Address Democratic Support, Civic Centre, 2nd floor, St Peter's Square,
Wolverhampton WV1 1RL

Copies of other agendas and reports are available from:

Website <http://wolverhampton.moderngov.co.uk/mgListCommittees.aspx?bcr=1>
Email democratic.support@wolverhampton.gov.uk
Tel 01902 555043

Please take note of the protocol for filming and recording of, and use of social media in, meetings, copies of which are displayed in the meeting room.

Some items are discussed in private because of their confidential or commercial nature. These reports are not available to the public.

Agenda

Part 1 – items open to the press and public

<i>Item No.</i>	<i>Title</i>
7	Provision of planned care services by The Royal Wolverhampton NHS Trust at Cannock Chase Hospital - public consultation interim report (Pages 1 - 10) [To consider the report detailing the outcome of the public consultation on the provision of elective services at Cannock Chase Hospital and offer comments.]



Proposals to Deliver Planned Care at Cannock Chase Hospital

What we will cover

- The consultation process and key themes
- Equality Analysis
- Actions taken to date and future plans
- Next Steps



Update on the consultation

- Consultation ran from 18 July to 17 October
- 5000 documents were distributed across the city
- 4 public meetings were held
- Signal Radio ran a roving reporter programme
- There were a number of radio interviews/ press releases
- We attended a number of local patient and public groups
- We used social media to keep people updated

- 664 responses were received in either hard copy or on line survey (more than 3 times the responses to Urgent Care)



What people said

- There was a high level of concern about the proposals expressed by many of those who responded
- The most concern was about travel and available transport including use of bus passes across county boundaries and difficulties getting to CCH
- Positive comments about relieving the pressure on services at New Cross
- Positive comments from people who already/have used existing services at CCH
- Some concerns about whether there would be the same standards/ types of staffing at CCH



What people said

- Petition received in relation to Breast Surgery staying at New Cross
- Many people wanted to keep services as they are and did not want change
- Some people expressed concern about splitting care between 2 sites and whether their records would be available at both sites

It became clear during the consultation that there was a lot of misunderstanding about the proposals – we need to work on this in the next phase



Equality Analysis

- Separate Equality Analysis ran from 17 September – 17 October to complement the questions in the main consultation document
- Asked specific questions about experiences of planned care services for those in the 10 protected characteristic groups
- Analysis of travel times and options for people to get to CCH undertaken

Themes:

- Outpatients/day case surgery no negative impact – patient choice
- The provision of a dedicated bus will significantly mitigate concerns from those on disability allowance/with mobility issues
- Potential positive impact for a number of groups due to the smaller, calmer nature of the hospital site
- Improved patient experience as a result of certainty



Action taken/Future Plans

- The Trust has committed to providing a dedicated bus service to and from CCH. The schedule will ensure that patients can get there in time for appointments
- Meetings held/being arranged with key groups to provide further clarity on the clinical model and address misunderstandings
- Commitment given to share with patient groups the detailed plans as they progress
- Develop clear patient information on the revised pathways
- Provide regular updates to Health Scrutiny Panel/Health & Wellbeing Board/Healthwatch on progress (update meetings held during the process)
- Ensure there is robust evaluation of all changes which includes patient feedback
- Share independent assurance on quality of services at CCH as it is available – CQC/Trust Development Authority/Commissioner reviews



Proposed timescales

	2014				2015				2016				2017			
	Aug - Sep	Oct	Nov	Dec	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Consultation	█															
Re-modeling CCH			█													
RWT takes over CCH			█													
Proposed transfers																
Orthopaedics					█											
Rheumatology					█											
Dermatology					█											
Endoscopy					█											
General Surgery								█								
Urology									█							



Next steps

- Timeline for service changes to be finalised (requires confirmation of building schedule for CCH)
- Final report to be presented to RWT/WCCG Board meetings
- Service Task & Finish groups to be established to work through detailed plans including patient engagement
- Action Plan to be monitored
- Ongoing engagement – Health Scrutiny Panel, Healthwatch, Health & Wellbeing Board



Why are we doing this – A reminder

- A better experience for all patients
- Improved quality of clinical services and health outcomes
- Keeping local services safe - a clinically and operationally sustainable service model
- Treatment in an improved environment
- More effective use of public resources

Change is difficult for everybody – we need to work with our patients and their families to make these changes work for them

