



Health Scrutiny Panel

Minutes - 25 September 2014

Attendance

Members of the Health Scrutiny Panel

Cllr Paul Singh
Cllr Bert Turner
Cllr Greg Brackenridge
Cllr Jasbir Jaspal
Cllr Peter O'Neill
Cllr Daniel Warren

Employees

Viv Griffin	Assistant Director - Health, Well Being and Disability
Tessa Johnson	Graduate Management Trainee
Adam Hadley	Scrutiny and Transparency Manager
Jonathan Pearce	Graduate Management Trainee

Part 1 – items open to the press and public

Item No. *Title*

- 1 Apologies**
Apologies for absence were received from Cllr Darke, Cllr Shah and Cllr Milkinder Jaspal.
- 2 Election of new chair**
In the absence of both the Chair and Vice-chair, Cllr O'Neill was elected as Chair for the duration of the meeting.
- 3 Declarations of Interest**
There were no declarations of interest.
- 4 Minutes of previous meeting (17 July 2014)**
The minutes of the meeting on 17 July 2014 were approved as an accurate record.
- 5 Matters arising**
Cllr O'Neill informed the panel that item five in the minutes had been approved to be reported back to Children and Young People Scrutiny Panel, rather than Health Scrutiny Panel, by Scrutiny Board.

6 **The Royal Wolverhampton NHS Trust - Patient Experience Friends and Family Test , the work of The Patient Advice and Liaison Service (PALS) and Complaints**

Carol Bott introduced the report. She told the group that the process of complaints and feedback had been streamlined and that overall response rates were high. Cllr O'Neill asked for ward results to be identified more clearly in the table and added that some response rates were very low. He asked if the team was targeting certain low response areas. Carol Bott responded that the target minimum response was 74% and where the target was not met, the areas in question were targeted as a priority. She added that sometimes there were other reasons for lack of response e.g. if the ward is busy and patients do not want to wait to give their feedback. Carol reassured the group that there were a variety of ways to give feedback which were tailored to the ward. Cllr O'Neill asked what was happening to respond to negative feedback e.g. on the maternity ward with regards to being left alone. Carol responded that nurses would have a follow up appointment with patients who have raised concerns, training needs could be identified and the patient would be informed as to how the issue had been resolved. Cllr O'Neill asked what happened to the monetary donations. David Loughton responded that usually money is donated to specific ward trust funds, of which there are 173. If donations are not specified, they will go into the general fund and most donations go to cardiac or cancer wards. Cllr O'Neill asked whether Carol will be involved with consultations in her new role and Carol responded that she will be.

Cllr Warren asked about the table on page 27, with regards to the question "left alone at a time you were worried". He asked whether there were time scales on the question and whether there had been specific worrying concerns regarding long times spent alone. Carol Bott responded that her team would analyse the data and break it down comment by comment, and that this information can be reported back. David Loughton added that the hospital used a monitoring system which tracked the number of visits and how long patients were left alone and highlighted that the perception may be different to the reality. Cllr Brackenridge thanked Carol for the report but asked that going forward tables be displayed in an iPad friendly format.

Cllr O'Neill asked how data is collected if patients do not have any friends or family. Carol responded that her team try to speak to the patients themselves, but there are also volunteers and members of staff who will see individual vulnerable patients and seek feedback from them.

Cllr Singh asked what the feedback on quality walkabouts are. David responded that there was one per month with a detailed report raising any issues to management. Cllr Turner asked whether the dementia ball was held in Bilston and added that the dementia ward was doing excellent work.

7 **NHS Capital Programme Projects - GP premises in Wolverhampton**

David Johnson introduced the report and told the panel that there are monthly capital review groups with each CCG area to address concerns about premises. He added that there had been increased contact with Council employees and regular meetings had been set up to discuss development plans e.g. housing developments in

Wolverhampton. He hoped to have more meetings with council employees in other CCG areas.

He told the panel that Bradley had a couple of facilities in poor conditions, including a school which had been converted into a surgery. He told the panel that there was ongoing work to identify whether a new single surgery or renovation of the existing sites would be more beneficial and added that a plan should be in place by the end of the year. David told the panel that Bilston was one of the biggest developments, with a planned new build surgery to replace the surgery currently housed in portakabins. The large amounts of new houses planned meant that a large surgery is needed. He reported that there are plans to develop a health centre in Bilston Urban village, with construction intending to begin in April 2015 with a build time of ten to eleven months. In the Scotlands, two practices have merged together and now operate in one premises, which is crowded and in need of an extension. David added that there had been feedback that car parking is also limited and the Council is exploring whether current car parks can be expanded. Heath Town's major development means that the GP needs an improved facility in the centre and there is ongoing work to establish where a suitable location would be, particularly as the surgery would benefit from expanding. David told the panel that Showell Park walk in centre is being reviewed.

Cllr Warren welcomed the regeneration in parts of the city. He asked why there were no plans for redevelopment of brown field sites in Scotlands and raised concerns that elderly people from the estates would have to walk further to go to the surgery. He suggested that the Long Hill property be re-assessed as the potential location for a surgery, which was originally intended when the previous tenants left. Cllr Turner said he felt reassured by the confirmation of the surgery being built on Bilston village. He raised concerns regarding the Bradeley Lane surgeries and said that there had been issues finding a suitable location for them for many years. Cllr Jasbir Jaspal welcomed the report and voiced her approval of the proposals. Noreen Dowd added that the walk in centre at Showell Park would be moved.

8 **Provision of planned care services by The Royal Wolverhampton NHS Trust at Cannock Chase Hospital - public consultation interim report**

Maxine Epsley introduced the report. She told the panel that the final results of the consultation would be reported to the November meeting, as well as a full equalities impact assessment and action plan, and that this was an interim report. She outlined the activities which had been carried out to ensure that the public really understood what the proposals were, particularly where some services will be dual located. She told the panel that in October when the consultation closes, the information will be analysed and shared. There will be a pre-meeting with Healthwatch to ensure they can comment on it during the scrutiny meeting. Maxine added that the level of feedback and attendance numbers at meetings had been higher than in recent consultations and that such feedback had produced balanced views.

Cllr O'Neill asked how many people had attended the roundtable events. Maxine responded that approximately 130 people over three events, with an additional 50 booked for the Molineaux event and 30 others were seen at the Mander centre. Cllr O'Neill asked when the radio station engagement at the markets would happen and Maxine told the panel that it would be over the next two weeks, with a roving reporter moving across the areas every day. She added that areas had been targeted where

there had been less response to consultation. Cllr O'Neill asked how hard to reach groups were targeted. Maxine responded that the initial equality impact identified ten groups that were particularly vulnerable. In the communication plan, stakeholders e.g. voluntary groups who interact with those people have been encouraged to engage with the vulnerable groups. Cllr O'Neill asked whether the supplementary paper attached was the one which had been agreed at the meeting on 8 August. Maxine responded it was, and that Healthwatch had been briefed on Monday and that the paper it was to be published on the website. Cllr O'Neill asked whether breast screening would remain at New Cross hospital, rather than at Cannock. Maxine responded that screening, outpatient and day surgery would happen at both sites, and the only exclusively Cannock service would be certain complex patients in day surgery. She emphasised that not all breast surgery would be moving from New Cross and Cllr O'Neill suggested that there was a press release made to that effect. Cllr Singh asked how they had engaged with elderly patients in his ward who were concerned about travelling and asked for the date that consultation would be conducted in the Penn ward. Maxine agreed to email the date to Cllr Singh, and provide him with more details with regards to engagement with the elderly population.

Cllr Warren thanked Maxine for the report. He raised concerns that there was a lot of misinformation circulated by the press and word of mouth. He asked whether there had been engagement with tenants and residents groups. Maxine responded that they had had some direct contact with tenants group seeking information, much of which was seeking reassurance, and two tenants groups are having officers from the Trust attend their meetings. She welcomed other groups to be engaged. She emphasised that this was an 18 month process, as many services would not be moving for a number of months, so there would be engagement over a long period of time. David Loughton told the panel that there will be a non-stop bus service from the bus station to New Cross hospital and from New Cross hospital to Cannock on an hourly basis. Cllr Warren responded that he thought the bus service would be well used and asked if there was sufficient demand for a half hourly service, whether it would be provided. David responded that this could be possible.

The meeting was closed.