

Attendance

Members of the Panel

CLlr Claire Darke (chair)
CLlr Ian Claymore
CLlr Paul Singh
CLlr Susan Constable
CLlr Ian Claymore

Other Councillors

Employees

Earl Piggott-Smith	Scrutiny Officer
Viv Griffin	Assistant Director Community

Other attendees

Charlotte Hall	Deputy Chief Nursing Officer (The Royal Wolverhampton Hospital NHS Trust)
David Loughton	Chief Executive (The Royal Wolverhampton Hospital NHS Trust)
Dee Harris	Wolverhampton Clinical Commissioning Group
Mark Lane	Wolverhampton Clinical Commissioning Group
Jo Kavanagh	West Midlands Ambulance Service
Nick Henry	General Manager, West Midlands Ambulance Service
Dr Johnathan Odum	Medical Director (The Royal Wolverhampton Hospital NHS Trust)
Justine Lewis	Care Quality Commission
Jonathan Potts	Care Quality Commission
Carol Bott	Healthwatch Chief Officer, Healthwatch Wolverhampton

Apologies

Apologies were received from the following Councillors

Cllr Milkinder Jaspal
Cllr Burt Turner

Part 1 – items open to the press and public

<i>Item No.</i>	<i>Title</i>	<i>Action</i>
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2	Declarations of Interest	
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There were no declarations of interest received

3.	Minutes of the meeting 6.2.14 Resolved	
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That the minutes of the meeting held on 6 February 2014 be approved as a correct record and signed by the Chair.

	Minutes of the meeting 13.3.14 Resolved	
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That the Chair be delegated authority to approve amendments to the minutes. The following changes were approved by the Chair

Add the following to paragraph (2), page 8 “The Chief Executive is responsible to the Secretary of State and Parliament, and leads a 24 hour service governed by a local unitary board.”

Amend the wording on paragraph (3), page 8 to read “Jeremy Vanes commented on the challenges of working in a politicised environment, in a deprived catchment, with a workforce exceeding 7,000 headcount, delivering complex tertiary services.”

Amend the wording on paragraph (4), page 8 to read “Jeremy Vanes outlined the main responsibilities of the Trust Board and his appointment as Interim Chair following the departure of Richard Harris. Jeremy has been interim chair for nine of the previous 18 months, in two separate spells.”

Amend the wording on paragraph (1), page 9 to read “Jeremy Vanes stated that there had been four Chair’s appointed over an eight year period and there was no single reason linking their decisions to leave, but Richard Harris had served a short-term.”

Amend the wording on paragraph (3), page 3 to read “This included Patient Forums until 2008, after which, responsibility had passed to Local Authority’s to procure LINK and the Health watch. Jeremy Vanes explained the impact of introducing different structures for involving the public in health care provision since the abolition of Community Councils had mixed results in terms of success, but these were national changes that the Trust had always tried to make a success.”

Amend the wording on paragraph (4), page 9 to read “Jeremy Vanes commented on the potential future use of mobile phone technology to engage the public, and particularly young people - for example, the use of the phone to monitor blood pressure levels, which could easily be adapted to harvest feedback on services.”

Amend the wording on paragraph (6), page 9 to read “Jeremy Vanes commented that this situation has the potential to create tension, but considered that powerful management was needed to deal with the hospitals financial problems at the time of David Loughton’s appointment by the then Chair – Professor Mel Chevannes in 2003/04. Jeremy Vanes while accepting that the article was embarrassing disputed the accuracy of parts of the report and also stated that some of the references relate to events that happened many years ago and were unrelated to the Trust.”

Amend the wording on paragraph (7), page 9 to read “Jeremy Vanes explained the role of the Strategic Health Authority prior to 2013 in appointing Chief Executives. Currently the Governors of a Foundation Trust or the Trust Development Authority now steer these appointments.”

Amend the wording on paragraph (2), page 10 to read “Jeremy Vanes commented on the increase in annual turnover from when David Loughton was first appointed. The turnover had increased to over £400 million for 2014, and is a change from the Trust making annual losses of £6 million per annum in 2007/08 to now achieving a regular surplus above £5 million per annum since 2010.”

Amend the wording on paragraph (4), page 10 to read “Cheryl Etches explained the processes and controls to assess quality impact which have been used by the Trust to deliver annual budget surpluses when funding proposals are submitted for consideration, for example Quality Impact Assessments on any changes that reduce expenditure.”

Amend the wording on paragraph (5), page 10 to read “Jeremy Vanes commented on the impact on the Trust due the issues at Mid Staffordshire Foundation Trust and the potential to deliver care as a result of using the resources at Cannock Hospital to create extra capacity at New Cross, which will reduce waiting times for elective procedures, and enable safe expansion of more emergency medical care.”

Amend the wording on paragraph (6), page 10 to read “Cheryl Etches commented that the area used previously for vascular surgery is now an acute medical ward used for winter pressures activity and it would be difficult to bring the vascular service back.”

Amend the wording on paragraph (7), page 10 to read

1. “Managing the medical research facility hub at the hospital on behalf of 14 health networks. The hospital has been given responsibility to coordinate funding of £27 million to support the research studies for five years.
1. Managing the takeover of Cannock Hospital and the development of services, which was the most suitable option to emerge from the enforced reconfiguration of the failing Mid-Staffordshire Foundation Trust.
2. Preparation for Foundation Trust application and recruiting extra nurses as part of the action plan following the Care Quality Commission Inspection in September 2013.”

Subject to the above amendments the Minutes were duly accepted as a fair and accurate record of the proceedings.

4. **Matters arising**

There were no matter arising from the minutes.

MEETING BUSINESS ITEMS

DECISION ITEMS

5. **West Midlands Ambulance Service – Quality Accounts 2013/14**
[Nick Henry, General Manager, West Midlands Ambulance Service]

Nick Henry outlined the performance of West Midlands Ambulance Service against nationally set standards in terms of response times. Nick Henry commented on the specific work being done to increase resources to improve ambulance response times for Category Red 2 (respond to 75% of calls within 8 minutes) and Green 2 (respond to 90% of calls within 30 minutes).

Nick Henry commented on the very positive working relationship with the staff in emergency department at the Trust to reduce delays in ambulance turnaround times. The working relationship was described as being the best across the West Midlands.

Nick Henry explained the criteria for Wolverhampton Clinical Commissioning Groups issuing fines for delayed patient handovers and the amount of fines issued for the period 1.4.13 – 31.1.14.

Nick Henry commented on work being done to reduce the number of high volume service users to refer people to the appropriate alternative service such as a GP to better manage their care. Nick Henry explained that extra paramedic staff being trained to respond to growing demands on the service following decision to increase funding.

Nick Henry explained that a copy of Quality Accounts was not available to be sent in advance of the meeting, but would be sent to the Panel following the meeting

Jo Kavanagh explained plans for the presentation of the Quality Accounts and that there will be an opportunity to answer any specific questions about the report.

The Panel queried the nature of the public complaints about the service and the work being done to improve the situation. Nick Henry explained that customer services training would deal with the complaint about behaviour. Nick Henry explained that the “other” category for complaints was a catch all group.

The panel queried the impact on performance following the introduction of the Make Ready scheme. Jo Kavanagh explained that the changes had allowed the service to respond more effectively and put more resources to meet peaks in demand. Jo Kavanagh explained the benefits of improved medicine

management, quicker turnaround times, and improved infection control for ambulances following the change.

Resolved:

The Panel welcomed the progress made to improve performance and agreed to receive a further update at a future meeting when the information is available.

The Panel to be sent a copy of the Quality Accounts report when received.

Earl Piggott-
Smith

6. **Care Quality Commission - Proposed changes to the inspection and regulation of care services**
[Jonathan Potts/Justine Lewis, Care Quality Commission]

Jonathan Potts gave a presentation about the role and responsibilities of the Care Quality Commission and the plans for developing new criteria for assessing the quality of care provided by health organisations. Jonathan Potts explained that the use of performance ratings will lead to improvements in quality of services.

Jonathan Potts explained that a series of 'listening events' are planned to get the views of the public about the new proposed assessment criteria.

Jonathan Potts explained that the new assessment criteria will apply to all services and the focus of the CQC is to 'shine a light' that supports improvements in the quality of care provided.

Jonathan Potts explained the consultation of the new assessment criteria will be completed in October 2014 and the aim is to have a robust system to check compliance against the care standards.

Resolved:

The Panel was supportive of the new proposed assessment criteria to inspect and regulate care services.

7. **Royal Wolverhampton Hospital NHS Trust - Care Quality Commission Chief Inspector of Hospitals inspection – outcome and action plan** [Charlotte Hall/David Loughton, The Royal Wolverhampton NHS Trust]

David Loughton introduced the report and commented that there were no surprises for the hospital following the inspection.

David Loughton commented on the findings of the inspection report which highlighted concerns about staffing levels.

David Loughton explained that the issue of staffing is common of hospitals nationally and there estimated shortfall of 230,000 in nursing staff.

David Loughton commented that it will take 18 months to 2 years to train a nurse and it is difficult to introduce a large number of staff to a unit at the same time – new staff do need to be introduced slowly in order to maintain patient care standards. David Loughton commented that there are 170 vacancies at the hospital which they are working hard to fill.

David Loughton was supportive of the new hospital inspection arrangements but had concerns about whether the teams will have all the necessary skills as there is shortage of the necessary expertise nationally.

Jonathan Potts commented on the similar challenge facing providers of adult care establishments who are also finding it difficult to recruit staff with the necessary skills and experience.

Resolved:

The Panel welcomed the progress made to implement the action plan approved by RWT Trust Board at the meeting on 27 January 2014.

8. **Provision of Urgent and Emergency Care for Patients using Services in Wolverhampton to 2016/17 – Progress Report [Dr Jonathan Odum, Medical Director, The Royal Wolverhampton NHS Trust]**

Dr Jonathan Odum commented on different methods used to consult with the public about the proposed service changes.

Dr Jonathan Odum briefed the Panel on the main message from the public consultation on future for Urgent and Emergency Care Service in Wolverhampton. Dr Jonathan Odum explained that the report has not yet been finalised and the comments from the public were still being assessed.

Dr Jonathan Odum commented that 90 per cent of responses agreed with the proposals. Dr Jonathan Odum explained that there was specific feedback from the public about wanting to have more access to their GPs when they have an urgent problem.

The Panel commented on the commented on the consultation timetable. Charlotte Hall commented that there was support from staff about the planned changes.

David Loughton commented on public complaints about parking problems and concerns about the impact of more people being seen at the hospital when the Urgent Care Centre opens. David Loughton explained that hospital has good bus service, but the public are not willing to use it as an alternative to the care. David Loughton commented that the new car parking facility cost £5 million to build. The car park provides 550 extra hospital car parking spaces – the money spent on the car park could have been used to fund the cost of recruiting 166 extra nurses.

Resolved:

The Panel accepted the following recommendations:

- to approve the methodology used to undertake the consultation about plans for the new Urgent and Emergency Care Centre.
- to support the proposed strategy for Urgent and Emergency Care Centre.

9. **Health Scrutiny Panel Draft Work Programme 2014/15**
[Earl Piggott-Smith]

Earl Piggott-Smith briefed the Panel on a list of possible topics for inclusion in 2014/15 work programme.

Earl Piggott-Smith explained plans for annual health scrutiny event to inform the panel work programme. The event will involve representatives of all key organisations contributing to the discussion. Earl Piggott-Smith explained that details about the event will be sent to the Panel after discussions with Chair and Vice Chair.

Resolved:

The Panel accepted the recommendation to have annual health scrutiny planning event to consider topics for the 2014/15 panel work programme.

Earl Piggott-
Smith

The meeting ended at 15:08