

# Minutes



To: All Members of the Health Scrutiny Committee, Chief Executive, Chief Officers, All officers named for 'actions'

From: Legal, Democratic & Statutory Services  
Ask for: Michelle Diprose  
Ext: 25566

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## HEALTH SCRUTINY COMMITTEE

WEDNESDAY, 15 MAY 2019  
M I N U T E S

### ATTENDANCE

#### MEMBERS OF THE COMMITTEE (20) - QUORUM 7

##### COUNTY COUNCILLORS (10)

E H Buckmaster, M A Eames-Petersen, L J Greensmyth, F Guest, D Hart, D J Hewitt, S Quilty (*Chairman*), R G Tindall, C J White (*Vice Chairman*),

##### DISTRICT COUNCILLORS (10)

P Cousin (St Albans); S Deakin-Jones (North Herts) K Hastrick (Watford); M Mckay (Stevenage); N Symonds (East Herts)

#### OTHER MEMBERS IN ATTENDANCE:

R M Roberts, T Hutchings

Upon consideration of the agenda for the Health Scrutiny Committee meeting on 15 May 2019 as circulated, copy annexed, conclusions were reached and are recorded below.

*Note: No conflicts of interest were declared by any member of the Committee in relation to the matters on which conclusions were reached at this meeting.*

#### CHAIRMAN'S INITIALS

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## **PART 1 ('OPEN') BUSINESS**

### **1. MINUTES**

- 1.1 The minutes of the meeting of 6 and 20 March 2019 were confirmed as a correct record and signed by the Chairman.

### **PUBLIC PETITIONS**

None received.

### **3. WEST HERTS HOSPITAL TRUST (WHHT) ESTATE REDEVELOPMENT**

Officer Contact: Natalie Rotherham Head of Scrutiny (Tel: 01992 588485)

- 3.1 The Committee received a report to update them on the Strategic Outline Case (SOC) proposals of redevelopment of the WHHT estate across the Watford, St Albans and Hemel Hempstead hospital sites. The Committee heard there were four options available to the redevelopment proposal.
- 3.2 Members were given a project update and the next steps which included the following;
- Stakeholder panel meetings / Public meetings
  - Qualitative assessment work completed and quantitative nearing completion
  - Reconvened stakeholder panel meeting in May
  - Public meeting in June to discuss emerging preferred way forward
  - The Trust and Herts Valleys Clinical Commissioning Group (HVCCG) Boards will debate and confirm in meetings held in public in July the chosen option prior to the submission to the regulators in Summer 2019
- 3.3 The Committee heard in option one that most investment would be in emergency care, a new car park, a new ward block with 300 bed spaces equating to 70% bed base increase and an improvement in facilities. It was noted the budget for the loan from the Treasury would be £350m which would need to be repaid.
- 3.4 The Committee asked a number of questions around the following:
- Patient and carer experience
  - Safety and outcomes

### **CHAIRMAN'S INITIALS**

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- Workforce (satisfaction and sustainability)
- Transformation and future flexibility.

- 3.5 Members noted the following responses from the Trust and the CCG.
- 3.6 In terms of patient experience, planning was crucial as to where demolition would take place to create space and minimise disruption. It was noted in Watford that there was a large area of land available on the main site which could be isolated would minimise disruption. The Committee were reassured there was a detailed assurance and risk management project in place which related to the development of the estate.
- 3.7 It was anticipated all moves would be planned and patients and workforce would be well informed via a range of communication avenues.
- 3.8 In relation to how the elderly and frail would be managed, including those already in a hospital bed, the Committee were informed at Watford there would be a new ward block to create capacity so there would not be any patients in beds whilst work was being carried out.
- 3.9 In terms of patient safety during transition period, Members heard safety was always a top priority at hospitals and a quality impact assessment was always carried out when there were any changes made to hospital services and their delivery.
- 3.10 Members heard the vision is about getting consistent care for each patient across all specialisms at all times and development of the estate gives an opportunity to achieve this. For example members heard the ambition to have an integrated assessment unit for specialisms to ensure consistent care. It was noted the I.T. needed to be improved and the Trust and CCG's were hoping to implement an electronic health record system and work was currently being undertaken with the Royal Free Hospital to implement this.
- 3.11 Alongside digital investment there would be safety improvements: current services are safe but some areas such as the neo-natal unit was smaller than it should be and ventilation and water supply in this ward is not as good as it should be. The new neo-natal unit would have more cot space; and more plug sockets would be available in refurbishment of any existing buildings to aid equipment needed to treat patients.

**CHAIRMAN'S  
INITIALS**

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- 3.12 In relation to how the vacated space would be used it was noted the Trust would need to look at how buildings could be used in the future although some land could be sold.
- 3.13 In terms of peaks in demand on the health service it was noted the Trust and the CCG worked closely together and systems were in place and they meet regularly to discuss surges and transformation. The impact of demand was a complex piece of work and is constantly updated to build in flexibility for future changes.
- 3.14 The boards agreed communication with staff was important and staff were keen to see improvements on the estate. Surveys were regularly carried out with staff to seek their views on the developments of the estate. Members heard that vacancy rates were low, staff were very loyal and had worked at WHHT hospitals for a long period of time. Recruitment to consultant posts was very good mainly because people wanted to live and work in Hertfordshire. It was noted it was more difficult to recruit nurses due to cost of living and the trust tended to recruit nurses from overseas. The Committee were informed that when the site was redeveloped the Trust would need to seek affordable housing for staff as their biggest priority was retaining the workforce.
- 3.15 In response to a Member query it was noted there would be changes in location for a small proportion of staff, however it was noted there was a standard procedure in place for staff to apply for relocation cost. It was also noted the trust liaised with trade unions regularly to protect staff rights.
- 3.16 In relation to the electronic I.T. system being in place before 2020, Members were informed the trust had procured an alternative outsourced I.T. data company to improve basic systems and was hoped it would be in place within eighteen months. The Committee were informed funding still needed to be secured for the electronic medical records system and therefore going paperless would take longer.
- 3.17 The trust described “barn” theatres which are primarily used for orthopaedic surgery. Here the main surgical area is open-plan, with each patient being treated in a dedicated space alongside the next, with an ultra-clean air canopy over each station to prevent the spread of infection. Individuals would have a patient assessment to ensure there would be no cross contamination. The trust worked with commissioners to redesign care and involve the right staff at the right time for procedures.

**CHAIRMAN'S  
INITIALS**

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- 3.18 In response to a member question on how the high technology would work in the current Grade II listed building it was noted this building would not be used as a health care provision or offices. The trust is seeking a buyer for the building.
- 3.19 In response to expectations by some St Albans residents wanting a new hospital the Committee were informed that this not a realistic option. The trust spent time in responding to issued by new hospital campaigns and met regularly with local MP's. Members heard the boards were trying to cost as accurately as possible in order to put a scheme forward that delivered the services needed.
- 3.20 The Committee were informed communication was consistent and there would be a large communications exercise to ensure residents of Hertfordshire know about any changes to future health provision. There were patient groups in each locality and the boards engaged with people at every level. It was noted that option one which was available to the Trust would not require full consultation, options two, three and four would require a formal consultation process.
- 3.21 In summary the Committee agreed there were great assurances from the Trust and CCG which gave them confidence that health services would not diminish. The Committee accepted comprehensive planning would become more detailed and would include a risk and impact assessment. The Committee welcomed the communication plans.

### **Conclusions**

- 3.22 The Committee noted the update, attached as Appendix A to the report.

## **4. NHS QUALITY RECOMMENDATIONS**

Officer Contact: Natalie Rotherham Head of Scrutiny (Tel: 01992 588485)

- 4.1 The Committee received a report providing them with the responses to the recommendations made at the Committee's NHS Quality Scrutiny held in March 2019.
- 4.2 Members noted that the recommendations from the following key providers had been received:

**CHAIRMAN'S  
INITIALS**

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- West Hertfordshire Hospital NHS Trust (WHHT)
- East of England Ambulance NHS Trust (EEAST)
- Princess Alexandra Hospital NHS Trust (PAH)
- East & North Hertfordshire Hospital NHS Trust (ENHT)
- Hertfordshire Community NHS Trust (HCT)

Note there were no recommendations for the Herts Partnership University NHS Trust.

### Conclusion

- 4.3
- i. That the Committee noted the recommendation reports attached as Appendix 1(a), 1(b), 1(c), 1(d) and 1(e) to this report.
  - ii. That HSC passes the monitoring of the recommendations to the Implementation of Recommendations Advisory Committee (ISAC)

*Natalie  
Rotherham /  
Charles  
Lambert to  
action*

## 5. SCRUTINY WORK PROGRAMME

Officer Contact: Natalie Rotherham Head of Scrutiny (Tel: 01992 588485)

- 5.1 The Committee considered its work programme 2018 – 2019, attached as Appendix 1(a), 1(b) and 1(c) to the report, and those scrutinies scheduled for the forthcoming period
- 5.2 The Committee noted that four scrutiny requests had been received from the Integrated Plan Scrutiny 2018/19 – 2022/23 as follows:
- i. Impact on the County Council of proposed creation of one management team across the three clinical commissioning groups (CCGs) in the Strategic Transformation Partnership (STP) area.
  - ii. Scrutiny of the re-structuring of the health outcomes of Drugs and Alcohol services (Public Health)
  - iii. Scrutiny of the Suicide Prevention Strategy (Public Health)
  - iv. Health and Wellbeing Board: Emotional health & wellbeing of children (Children, Young People & Families)

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INITIALS**

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5.3 The Committee agreed the scrutiny requests detailed in 5.2 above be added to the work programme.

5.4 The Committee noted the following scrutiny requests have been added to the OSC work programme from the Integrated Plan Scrutiny 2018/19-2022/23 and these were passed to the Health Scrutiny Committee to note.

1. *The Public Health outcomes and performance to be examined. This will include working across the County Council's departments and the outcomes of public health funded work in districts and boroughs. (Public Health)*
2. *Scrutiny to explore how services will be funded, safeguarded and maintained after the ring fence is removed from the Public Health budget. (Public Health)*

5.5 Members noted that the Impact of Scrutiny Advisory Committee (ISAC) had met on 13 March 2019 and noted the minutes and tracker attached to the report.

### **Conclusion**

- 5.6
1. The work programme considered at this meeting reflected the decisions made by the Committee at its last meeting.
  2. The Committee agreed its work programme, amended as follows:-

#### *Scrutinies to be added to the work programme*

- i. Impact on the County Council of proposed creation of one management team across the three clinical commissioning groups (CCGs) in the Strategic Transformation Partnership (STP) area.
  - ii Scrutiny of the re-structuring of the health outcomes of Drugs and Alcohol services (Public Health)
  - iii. Scrutiny of the Suicide Prevention Strategy (Public Health)
  - iv Health and Wellbeing Board: Emotional health & wellbeing of children (Children, Young People & Families)
3. The Committee noted the scrutiny requests received from

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INITIALS**

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OSC as a result of the Integrated Plan Scrutiny 2018/19 – 2022/23

- 4. The Committee noted the minutes of the meetings of the ISAC meeting held on 13 March 2019 and the recommendations tracker attached as Appendix 3(a) and 3(b) to the report

**6. ITEMS FOR REPORT TO THE COUNTY COUNCIL (STANDING ORDER SC. 7(2))**

- 6.1 To agree items for inclusion in the Committee’s report to County Council. In the absence of a decision, a summary of all items will be reported to the County Council at its meeting on 16 July 2019.

**KATHRYN PETTITT  
CHIEF LEGAL OFFICER**

**CHAIRMAN.....**

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