

HAMPSHIRE COUNTY COUNCIL

Report

Committee:	Health and Adult Social Care Select Committee
Date of Meeting:	10 July 2018
Report Title:	Proposals to Develop or Vary Services
Report From:	Director of Transformation & Governance

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1. Summary and Purpose

- 1.1. The purpose of this report is to alert Members to proposals from the NHS or providers of health services to vary or develop health services provided to people living in the area of the Committee.
- 1.2. Proposals that are considered to be substantial in nature will be subject to formal public consultation. The nature and scope of this consultation should be discussed with the Committee at the earliest opportunity.
- 1.3. The response of the Committee will take account of the Framework for Assessing Substantial Change and Variation in Health Services (version agreed at January 2018 meeting). This places particular emphasis on the duties imposed on the NHS by Sections 242 and 244 of the Health and Social Care Act 2006, includes new responsibilities set out under the Health and Social Care Act 2012, and takes account of key criteria for service reconfiguration identified by the Department of Health.
- 1.4. This Report is presented to the Committee in three parts:
 - a. *Items for action:* these set out the actions required by the Committee to respond to proposals from the NHS or providers of health services to substantially change or vary health services.
 - b. *Items for monitoring:* these allow for the monitoring of outcomes from substantial changes proposed to the local health service agreed by the Committee.
 - c. *Items for information:* these alert the Committee to forthcoming proposals from the NHS to vary or change services. This provides the Committee with an

opportunity to determine if the proposal would be considered substantial and assess the need to establish formal joint arrangements

- 1.5. This report and recommendations provide members with an opportunity to influence and improve the delivery of health services in Hampshire, and to support health and social care integration, and therefore assist in the delivery of the Joint Health and Wellbeing Strategy and Corporate Strategy aim that people in Hampshire live safe, healthy and independent lives.

2. **Items for Action**

- 2.1 None at this meeting.

3. **Items for Monitoring**

3.1 **Hampshire Hospitals NHS Foundation Trust: Andover Hospital Minor Injuries Unit**

Context

- 3.2 Hampshire Hospitals NHS Foundation Trust provide a Minor Injuries Unit (MIU) at the Andover War Memorial Hospital. In recent years the Trust has implemented a temporary variation to the commissioned opening hours, due to staff absence and vacancies meaning the Unit could not be safely staffed to cover the required hours.
- 3.3 The HASC last received an update on the situation in November 2017. At that time the Trust was operating the MIU 7 days a week between 8am and 8pm (compared to commissioned hours until 10pm). However recruitment of Emergency Nurse Practitioners (ENPs) continued to be difficult against a national shortage.

Update

- 3.4 A briefing (see Appendix) has been received from the Hospital Trust providing an update. This indicates that, with the agreement of West Hampshire Clinical Commissioning Group, the opening hours of the MIU have been reduced to 0830Hrs -1800Hrs for a period of 6 months from 4 June 2018. This is due to the MIU having 5 ENP vacancies.
- 3.5 The Trust are keen to continue to develop the services provided in Andover War Memorial Hospital and are actively working with partners and commissioners on the development of an Urgent Treatment Centre that will include and expand on the service currently commissioned. The new service is currently at invitation to tender stage and the commissioning plan is for a new service to be in place in July 2019.

Recommendations

3.6 That the Committee:

- a. Note the progress on managing the opening hours of the MIU at Andover War Memorial Hospital.
- b. Request a further update in six months time.

4. **Items for Information**

4.1 **South Eastern Hampshire CCG and Portsmouth Hospitals NHS Trust: Spinal Surgery Service**

Context

- 4.2 Elective spinal surgical services are currently provided at both Queen Alexandra Hospital in Portsmouth and Southampton General Hospital. It is proposed that the elective spinal surgical service at Portsmouth Hospitals NHS Trust (PHT) is moved to the Wessex Regional Spinal Unit at University Hospital Southampton NHS Foundation Trust (UHSFT). The proposal includes outpatient and inpatient work. Complex spinal surgical work is already undertaken at UHSFT, as is paediatric and trauma surgery for spinal conditions.
- 4.3 The number of potentially affected patients is 204 from across the catchment area for the Trust. Of this number of patients approximately 176 are from Portsmouth, Fareham and Gosport and South Eastern Hampshire CCG areas. The Portsmouth HOSP are scrutinising the impact for patients in the Portsmouth CCG area.
- 4.4 PHT currently has an unsustainable spinal surgical service with only one substantive consultant now delivering the service. In 2010 the Spinal Taskforce produced a paper entitled, 'Organising Quality and Effective Spinal Services for Patients. A report for local health communities'. This stated "Single-handed spinal surgeons should not be working in isolation. Wherever possible, spinal surgeons should work in teams within organisations, ideally with more than one surgeon in each site."
- 4.5 Over the past three years the Trust has tried to recruit to the service unsuccessfully. By only having one consultant available there is no consistency of medical cover available and the potential risks to quality and safety of care are higher with a service operated by a single clinician. Over the past two years the Trust has been working with Portsmouth, Fareham & Gosport and South Eastern Hampshire Clinical Care Commissioning Groups (PSEH), NHSE

Specialised Services Wessex and University Hospital Southampton NHS Foundation Trust to seek a sustainable solution for the local population.

4.6 It is proposed that following engagement, if approved by the relevant bodies, the change would take effect from October 2018. Centralising services in this way is the national direction of travel for specialist services and has been proven to improve clinical outcomes. The proposal has the support of the orthopaedic clinicians involved and commissioners. There will be an increase in travel time for some patients, however previous engagement indicates people are prepared to travel if it means they are going to receive the best clinical outcome.

4.7 A paper about the change has been provided by PHT, appended to this report.

Recommendations

4.8 HASC to agree:

- Whether the proposed change constitutes a substantial change
- Whether the proposed change is in the interest of the service users affected in the Hampshire area
- To agree any recommendations to the NHS bodies concerned regarding how to take their proposals forward, and to agree whether/when to request a further update.

CORPORATE OR LEGAL INFORMATION:**Links to the Strategic Plan**

Hampshire maintains strong and sustainable economic growth and prosperity:	No
People in Hampshire live safe, healthy and independent lives:	Yes
People in Hampshire enjoy a rich and diverse environment:	No
People in Hampshire enjoy being part of strong, inclusive communities:	Yes

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

DocumentLocation

None

IMPACT ASSESSMENTS:

1. Equalities Impact Assessment:

- 1.1 This is a covering report which appends reports under consideration by the Committee, therefore this section is not applicable to this covering report. The Committee will request appropriate impact assessments to be undertaken should this be relevant for any topic that the Committee is reviewing.

2. Impact on Crime and Disorder:

- 2.1 This is a covering report which appends reports under consideration by the Committee, therefore this section is not applicable to this covering report. The Committee will request appropriate impact assessments to be undertaken should this be relevant for any topic that the Committee is reviewing.

3. Climate Change:

- 3.1 How does what is being proposed impact on our carbon footprint / energy consumption?

This is a covering report which appends reports under consideration by the Committee; therefore this section is not applicable to this work report. The Committee will consider climate change when approaching topics that impact upon our carbon footprint / energy consumption.

- 3.2 How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?

This is a covering report which appends reports under consideration by the Committee, therefore this section is not applicable to this work report. The Committee will consider climate change when approaching topics that impact upon our carbon footprint / energy consumption.