

# SHEFFIELD CITY COUNCIL

## Commissioners Working Together Joint Health and Overview Scrutiny Committee

### Meeting held 21 November 2016

**PRESENT:** Councillors Jeff Ennis (Barnsley MBC) (Chair), Pat Midgley (Sheffield City Council), Sean Bambrick (Derbyshire County Council), Rachael Blake (Doncaster MBC) and Stuart Sansome (Rotherham MBC)

#### Also in attendance

J. Wardle, Derbyshire CC  
A. Fawley, Nottinghamshire CC  
T. Moorhead, Sheffield CCG  
W. Cleary-Gray, SYB Sustainability and Transformation Plan  
G. Venables, Clinical Adviser, Commissioners Working Together  
E. Ashman, Wakefield CCG  
A. Wood, Wakefield MDC  
J. Spurling, Rotherham MBC  
A. Nicholson, Sheffield City Council  
A. Morley, Barnsley MBC  
P. Anderton, Commissioners Working Together  
C. Edwards, Rotherham CCG  
J. Pederson, Doncaster CCG  
I. Golton, Clinical Networks and Senate  
L. Smith, Barnsley CCG  
I. Griffiths, Bassetlaw CCG  
M. Ruff, Sheffield CCG  
S. Jones, Commissioners Working Together  
Councillor Peter Short, Rotherham MBC

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#### **1. APOLOGIES FOR ABSENCE**

- 1.1 Apologies for absence were received from Councillor Colleen Harwood (Nottinghamshire County Council) and Betty Rhodes (Wakefield MBC).

#### **2. EXCLUSION OF PUBLIC AND PRESS**

- 2.1 No items were identified where resolutions may be moved to exclude the public and press.

#### **3. DECLARATIONS OF INTEREST**

- 3.1 There were no declarations of interest.

#### **4. MINUTES OF PREVIOUS MEETING**

- 4.1 The minutes of the meeting of the Committee held on 8<sup>th</sup> August, 2016 were approved as a correct record.

**5. AMBULANCE SUPPORT - REVIEW OF HYPER ACUTE STROKE SERVICES IN SOUTH YORKSHIRE, BASSETLAW AND NORTH DERBYSHIRE AND REVIEW OF CHILDREN'S SURGERY AND ANAESTHESIA SERVICES IN SOUTH AND MID YORKSHIRE, BASSETLAW AND NORTH DERBYSHIRE: FEEDBACK AND DISCUSSION**

- 5.1 The Committee received two briefing papers, which had been circulated to Members prior to the meeting, on Ambulance Support. The first of these had been provided by the Yorkshire Ambulance Service (YAS) and covered response times, staff training and stroke care in relation to Acute Stroke cases and further information in relation to Children's Surgery. The second briefing paper, from the East Midlands Ambulance Service (EMAS) outlined the way in which the service had begun to reconfigure the way in which it dealt with patients.
- 5.2 In attendance for this item were Jackie Cole and Mark Inman (YAS) and Peter Bainbridge (EMAS).
- 5.3 Members made various comments and asked a number of questions, to which responses were provided as follows:-
- Whilst statistics showed that approximately two thirds of ambulance responses in Barnsley for suspected stroke patients (category C2T) were within target time, it was not possible to say what the performance for the other one third was.
  - The YAS standard time for arrival at the hyper acute stroke centre was 60 minutes and it would not be possible to make comparisons with reported figures relating to London (30 minutes) until the final operating model had been completed.
  - Financial help was available to people who were struggling to meet the financial demands of having to travel long distances to visit friends and relatives who were in hospital.
  - The YAS did prioritise calls and always endeavoured to be with the patient as quickly as possible. Patients would be called back in the event of any delay.
  - Increases in demand and turnaround times would be addressed when the final operating model for YAS was in place.
  - The important time to consider in stroke cases was the time from symptoms to treatment and education was an important factor in reducing this.
  - The EMAS had started to reconfigure the way in which it dealt with patients in 2010, with stroke patients in the Bassetlaw area of Nottinghamshire being conveyed to Doncaster Royal Infirmary since 2011. All ambulance clinicians were trained in assessing patients to determine if they had had a stroke and all units accepted patients who were identified as FAST (face, arm, speech

test) positive and had the necessary skills to manage them during their journey to hospital. In addition, staff support measures had been introduced which included service directories on all vehicles, with telephone numbers and postcodes of the units.

- In relation to reduced mortality, evidence was anecdotal with statistics only being available from individual stroke units.
- In relation to setting the time for ambulance arrival, the YAS worked from an algorithm, which prompted questions, so that key details were obtained.
- In making comparisons with the ambulance service in London, it should be noted that London was more compact and that larger units had shown a reduction in stay. Furthermore, the larger volume of patients led to more sustainable units and improved experience.
- It was felt that the EMAS reconfiguration was resulting in patients getting the right treatment in the right place at the right time.
- In relation to heart attack patients, there were reduced mortality rates and part of the exercise was to ensure future proofing.

5.4 RESOLVED: That the Committee:-

- (a) thanks Jackie Cole, Mark Inman and Peter Bainbridge for their contribution to the meeting;
- (b) notes the contents of the circulated briefing papers and the responses to questions; and
- (c) requests that officers give consideration to the provision of appropriate publicity of any financial assistance available to people, who were having difficulty in meeting the cost of travelling long distances to visit hospital patients.

**6. COMMUNICATIONS AND ENGAGEMENT - HYPER ACUTE STROKE SERVICE PROVISION AND CHILDREN'S SURGERY AND ANAESTHESIA SERVICE PROVISION: PUBLIC CONSULTATION UPDATE**

- 6.1 Helen Stevens (Associate Director of Communications and Engagement, Commissioners Working Together Programme), gave a presentation, a copy of which was circulated at the meeting, which provided an update on the public consultations regarding proposed changes to Hyper Acute Stroke Services in South Yorkshire, Bassetlaw and North Derbyshire and to Children's Surgery and Anaesthesia Services in South and Mid-Yorkshire, Bassetlaw and North Derbyshire. The presentation covered the approach, engagement so far, with 78 responses to the Hyper Acute Stroke Services consultation and 60 responses to the children's surgery and anaesthesia services consultation, all of which had been received online. The presentation went on to provide an analysis of the

responses to each consultation exercise and set out the key themes emerging which were:-

- travel times to specialist unit
- visiting loved ones and the impact on families
- people being unconvinced that this wasn't about saving money
- challenging the numbers of children affected in Barnsley

6.2 The next steps in the process involved a mid-point gap analysis, staff sessions and an independent analysis at the end of the consultation period.

6.3 Members made various comments and asked a number of questions, to which responses were provided as follows:-

- The majority of responses were from the Barnsley area, with this being mainly due to the activities of the local Save Our NHS Campaign, which sought to oppose the proposed changes. Officers of the local CCG were engaging with the campaign.
- The challenge to the numbers in Barnsley needed to be worked through
- The next Committee meeting on 13<sup>th</sup> February, 2017 would include an analysis of the results of the consultations.
- If Members or officers had any other ideas regarding the consultations, they should let Helen Stevens know.

6.4 RESOLVED: That the Committee:-

- (a) thanks Helen Stevens for her contribution to the meeting; and
- (b) notes the contents of the presentation and responses to questions.

## **7. DATE OF NEXT MEETING**

7.1 It was noted that the next meeting of the Committee would be held on Monday, 13<sup>th</sup> February, 2017 at 2.00 p.m. at Birch and Elm, Oak House, Bramley, Rotherham S66 1YY.