

Membership

Councillors

Kate Foale (Chairman)
Colleen Harwood (Vice-Chairman)

- A Bruce Laughton
John Ogle
Jacky Williams
John Wilmott

District Members

- | | | | |
|---|--------------|---|--------------------------------------|
| | Jim Aspinall | - | Ashfield District Council |
| A | Paul Henshaw | - | Mansfield District Council |
| | Tony Roberts | - | Newark and Sherwood District Council |
| | Griff Wynne | - | Bassetlaw District Council |

Officers

- | | | | |
|--|--------------|---|--------------------------------|
| | Paul Davies | - | Nottinghamshire County Council |
| | David Ebbage | - | Nottinghamshire County Council |

Also in attendance

- | | | | |
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| | Keith Mann | - | NHS England |
| | Phil Mettam | - | Bassetlaw CCG |
| | Dr Amanda Sullivan | - | Mansfield/Newark & Sherwood CCG |

MINUTES

The minutes of the last meeting of the Health Scrutiny Committee held on 3 June 2013 were confirmed and signed by the Chair.

APOLOGIES FOR ABSENCE

An Apology for absence was received from Councillor Bruce Laughton.

DECLARATIONS OF INTEREST

There were no declarations of interest.

BASSETLAW HEALTH SERVICES

Representatives from the Bassetlaw CCG, gave a presentation to members on the work of Bassetlaw Clinical Commissioning Group.

Their role is to commission local services and to work closely with the Primary Care Trust (PCT) setting specific targets and to make sure the quality of care to patients is improving. This is led by GPs and nurses from district hospitals. For them to be effective, working in a collaborative way is vital.

During the discussion the following points were made:-

- Bassetlaw Hospital is a small district hospital serving its population of 112,000. 172 beds are situated at the hospital.
- The Bassetlaw District has significant amount of elder people living in the area, the hospital takes up to 20 admissions a day.
- The hospital does have a midwifery situated there but women who are high risk are usually referred to Doncaster Hospital.
- Friends and Family tests and patient forums help provide feedback for the service. Governors from the Trust also take visits around the wards communicating with the patients themselves.
- The CCG recognised that the Integrated Care Board needed improvement for the Community Service and Care Homes and an Action plan is in place to help start that.
- Dementia Summit was held to give an opportunity for carers to feedback their views on caring.
- A Community Pilot Programme around Community Paramedics is helping paramedics integrate into local services. Bassetlaw are required to transport into Yorkshire as well as Nottinghamshire.
- Talks are in place to get ambulance hub stations located at Fire Stations as well as Bassetlaw Hospital.

The Chair thanked the representatives from Bassetlaw CCG for their presentation and for answering questions.

MANSFIELD/NEWARK & SHERWOOD HEALTH SERVICES

Dr Amanda Sullivan gave a brief presentation to members on the work of Mansfield/Newark & Sherwood Health Services, highlighting the following key points:-

- The organisation serves its 127,000 population which is broken down into 5 constituencies.

- The vision for the next 3 years is illustrated in the Shift Left model graph, which breaks down the cost per day for the different types of care they offer. Dr Sullivan confirmed that figures for this were accurate and Members commended this and requested a copy.
- £1.5m has been given to the community services to help improve links in Social Care and the Integrated Health Teams.
- A Flo-texting service has been running where carers can monitor patients with long term conditions.
- The Family Nurse Partnership is an important service to help to bring down the numbers in child poverty. Over 4,000 children are in poverty in the Mansfield/Newark & Sherwood area. This service helps single parents feel supported, develop parenting skills and cope with day to day life with a child.
- The Out of Hours service has an increased demand but is now operative at certain hours on weekends. The CCG recognise the need for improvement and are looking at ways to develop this service.
- Performance monitoring of the service takes place through the friends and family test. Every month a patient participation group meet and a survey is handed out around wards to help gain feedback on ways to improve also.
- There seems to be a capacity problem for ambulances within the area. Things are improving but there is a long way to go.

The Chair thanked Dr Sullivan for her attendance and for answering members questions.

MORTALITY RATES AT SHERWOOD FOREST HOSPITALS

The Chair circulated a letter to members which was sent to Sir Bruce Keogh explaining the concerns the Committee have and how Members welcomed the in depth review into Sherwood Forest Hospitals NHS Foundation Trust.

Dr Amanda Sullivan informed the Committee that the CCG are holding an independent review also.

The Committee was happy to wait for both of these reviews to be carried out and then be brought back to a future meeting in November.

KIRKBY COMMUNITY PRIMARY CARE CENTRE: PLANNED PROCUREMENT

Keith Mann from NHS England gave members a briefing on the planned tender process for a replacement contract for primary medical service at Kirkby Community Primary Care Centre and raised the following points:-

- There will be a 90 day consultation period for the public.

- 4 GPs plus practice nurses will be situated at the Centre.
- The bidding process and the timeline for a new contract to be initiated was explained. A bidders day will be held with public involvement. This day will bring in new opportunities for new buyers to come in to the process. From there the bids will be evaluated by a specialist team. At the end of that stage the outcome of the approved supplier will be announced with the service commencing in April 2014. The process cannot be conducted any quicker.
- The contract will be looked at every 5 years. Members were concerned that this was too frequent but Mr Mann explained that this was a legal requirement. This raised further concerns with members about the contract itself and the tendering process.

Members expressed concerns about the consultation and whether this could actually influence the final outcome. Serious concerns were also raised about the tendering process.

Members agreed for an update of the review to be brought back to the committee in 6 months' time.

WORK PROGRAMME

The work programme was discussed and noted.

The meeting closed at 3.05pm.

CHAIRMAN

15 July - Health Scrutiny