

## Membership

### Councillors

Keith Girling (Chair)  
Richard Butler  
Dr John Doddy  
Kevin Greaves  
David Martin  
Michael Payne  
Liz Plant  
A Kevin Rostance  
Andy Sissons  
Steve Vickers  
Muriel Weisz

### Officers

David Ebbage	Nottinghamshire County Council
Martin Gately	Nottinghamshire County Council

### Also in attendance

Michelle Livingston Healthwatch Nottinghamshire

## **MINUTES**

The minutes of the last meeting held on 25 July 2017, having been circulated to all Members, were taken as read and were signed by the Chair.

## **APOLOGIES**

Apologies were received from Councillor Rostance due to medical reasons.

Councillor Sissons replaced Councillor Wright for this meeting only.

## **DECLARATIONS OF INTEREST**

Councillor Doddy declared a private interest in Item 4 – Sherwood Forest Hospitals – Winter Plan as he is a governor for the hospital.

## **SHERWOOD FOREST HOSPITALS - WINTER PLAN**

Denise Smith, Acting Chief Officer Operating Officer, gave members a brief summary of the proposed plans to manage the increase demand during the forthcoming winter period.

During her briefing, the following points were highlighted:

- In regards to bed modelling, 92% bed occupancy in Sherwood Forest with an extra 55 beds being added from November and will remain up until end of March.
- Increased opening hours with the discharge lounge extending into the weekend, opening from 10am – 4pm and an increase capacity of junior doctor support to provide timely take home medication.
- Working with colleagues in community and social care to minimise delayed transfers of care.
- Flu vaccinations for staff started two weeks earlier than scheduled and 20% of frontline staff have had the vaccination.

During discussions the following points were raised:

- The additions of extra staff can be found from part time staff working more hours or extra shifts. A lot of work has gone into increasing nurse bank instead of using agency staff.
- Discharge planning is usually completed well in advance of a patient leaving the hospital to prevent a delay for their medication to be ready. Additional support has been given to write up medication and then dispense it to prevent such problems from occurring.
- There is a low vacancy rate at Sherwood Forest with a waiting list for nurses, but an ongoing recruitment campaign is in progress, medical staff are very well served within the hospital.
- Patients are never usually discharged late in the evening unless they request it.
- Relationships in the mid notts area are very well established with the community and care providers with good governance and infrastructure to work around collaborative working is in place.

It was agreed that Sherwood Forest would return after the winter period to update the Committee on how it went.

## **NOTTINGHAM UNIVERSITY HOSPITALS – WINTER PLAN**

Caroline Shaw, Chief Operating Officer at NUH and Nikki Pownall, Programme Director, NHS Nottingham CCG attended the meeting for this item and highlighted the following points:

- 6 patients had 12 hr trolley waits in 16/17 (9 in 15/16; 0 17/18 to date)

- Strong patient experience scores (Friends & family Test scores remain among strongest in peer group) and one of the top in the country.
- Strengthened front door streaming (GP-led primary care service, 7 day service, 8am-midnight), supported Transfer of Care Team working at the front door.
- From 1 October - no patients will be assessed for their post-hospital care needs within NUH.
- Patients who are medically fit to be transferred from NUH will be treated & and assessed for continuing health and social care in either their own home or a different less acute health/ social care facility.
- Improved ambulance handover times. Turned around as quickly as possible, 65% are turned around within 15 minutes.
- The ED (Emergency Department) was designed for 350 patients daily, the department now sees 550 up to 600 patients per day. Need an ED & urgent care facilities that are the right size and design to meet demand. A series of business cases are being developed, and will prioritise the case for a new urgent and emergency care centre
- Still ongoing challenges such as system demand vs capacity, environmental constraints and delays with stepping down medically fit patients

During discussions the following points were raised:

- The number of admissions in ED has increased over the last 18 months – 2 years.
- 85 – 86% of patients are seen within 4 hours, the patients who are usually longer are major trauma related patients. Every case in which a patient is waiting up to 8 hours is reviewed
- The STP (Sustainability Transformation Partnership) is in support of the business case and is one of their top priorities. The business case will be presented to the Board in December.
- Patients and staff are involved with the business case and it will be the same people who will manage the future of the Trust.
- Due to most patients being seen within 4 hours, this could be a reason for the admissions into ED have increased, 97% of minor injuries get treated within the time period.

The Chairman thanked Caroline and Nikki for their attendance and requested to come back to the Committee after the winter period to inform us of how it went.

## **BASSETLAW HOSPITAL UPDATE**

Representatives from Bassetlaw Hospital gave an update on the latest information on the performance including paediatric admissions and recruitment.

During the update, the following points were highlighted:

- Following the closure of the beds the staffing levels allowed for the provision of a Children's Assessment Unit, open to 8am to 10pm seven days a week, and the provision of additional nursing support to the Emergency Department available 24/7.
- As part of the changes we enhanced our day services and a paediatric consultant is on site until 6pm, and junior paediatric medical staff are on site 24 hours per day to support the Emergency Department and the Maternity Service.
- Historical data from the Ward A3 indicated that a small number of children would require transfer to Doncaster Royal Infirmary however, this has been higher than expected with an average of 13 children per week transferred in the first three months, reducing to eight per week in more recent months
- It is not clinically safe to re-open the Children's Ward at night without the necessary qualified paediatric staff, and following recruitment drives the position is unimproved.
- A review of paediatric services across South Yorkshire and Bassetlaw is needed to ensure the best response possible to the widespread staffing shortages.

During discussions the following points were raised:

- A number of positions were offered to applicants and ended up not being taken, the reason for this is that students put multiple applications in and secure more than one post so they take their first preference post.
- There is no change in the paediatric cover, can reach residents up to 6pm then on call takes over.
- Overseas recruitment to the Philippines gave opportunity to 67 posts but with visa restrictions and other issues, only 7 applicants gained jobs.
- The review had already commenced at local level, report due to be published at the end of March.
- That Michelle Livingston from Healthwatch is due to be co-opted onto the ACP Group.

The Chair thanked the representatives from Bassetlaw and requested for them to come back to the May meeting.

## **CHATSWORTH WARD NEURO-REHABILITATION (MANSFIELD COMMUNITY HOSPITAL)**

Representatives from Mansfield Community Hospital briefed Members on changes to the delivery of services at the Chatsworth Ward at Mansfield Community Hospital

During their briefing, the following points were raised:

- It is a 16 bedded unit that cares for patients with neuro rehabilitation needs.
- Sherwood Forest Hospitals NHS Foundation Trust confirmed an intention to withdraw from providing the current neuro-rehabilitation services at Chatsworth Ward at the end of July with a date of November originally to cease service provision.
- Decision based on number of factors including ability to recruit specialist staff.
- Both the Trust and the CCG are committed to making sure there is a continuity of service, so no changes will take place until these conversations are completed and new services are put in place.
- There has been patient engagement including a listening event held in August approx. 40 in attendance including patients, families and staff and a further public event was held on 4<sup>th</sup> October with 55 in attendance
- Neuro rehabilitation commissioning lead has met with key stakeholders to gather thoughts and information

During discussions the following points were raised:

- The CCGs will continue to update the HSC on the matters arising from Sherwood Forest Hospitals NHS FT decision to withdraw from providing the services, and also its future plans for commissioning specialised neuro-rehabilitation services for its citizens.
- That a Co-design Event with all relevant stakeholders will be held in November 2017 and then see what the next steps forward from there will be.
- The Committee agree for the item to be brought back to the next Committee meeting to update us further on this matter.

The Chair thanks representatives for their attendance and asked for them to come back to the November meeting.

## **EAST MIDLANDS AMBULANCE SERVICE – PERFORMANCE INFORMATION**

Wendy Hazard and Keith Underwood, both Ambulance Operations Managers attended the meeting up update Members on the latest performance information from the East Midlands Ambulance Service (EMAS), including new performance requirements, with an additional focus on the difficulties the Trust faces when handing over patients at Emergency Departments

During their update, the following points were raised:

- We progressed our Quality Improvement Plan, and the CQC came back to EMAS February 2017. In March the CQC published its follow-up report: Overall CQC rating 'requires improvement, Safe: improved from 'inadequate' to 'requires improvement. Effective: remained 'requires improvement'. Well-led: remained 'requires improvement'. Caring and Responsive: remained 'good'.
- 57 new DCA's (Doubled Crew Ambulances) delivered in 2016/17 (20 in Nottinghamshire)
- The demands on the service is putting extra pressure on resources and staff. The new ARP (Ambulance Response Programme) will hopefully help the situation prioritising the sickest patients to ensure they receive the fastest response. This was introduced in July 2017.
- Work is being done with NUH, SFHT and BDGH to improve handovers in times of pressure.

The Chair thanked them both for their attendance and the Committee considered the information which was provided to them.

### **NOTTINGHAM TREATMENT CENTRE PROCUREMENT**

Maxine Bunn, Director of contracting and Chief Officer NHS Nottingham West, introduced a briefing to Members on the procurement of the Nottingham Treatment Centre.

During the briefing, the following points were raised:-

- The current contract was awarded to Circle following a competitive procurement. It is currently within the last year, of its 5 year contract, and expires 27th July 2018. With the contract expiring there is a legal requirement of CCGs to procure services which meets the required laws, guidance and standards.
- The procurement approach has been chosen for commissioning the service across the 4 CCGs. CCGs will ensure that the relevant gateways are signed off in line with the agreed governance process.
- The Equality and Quality Impact Assessment will be regularly updated and reviewed. It is felt that the re-procurement will have minimal impact to patients in terms of access to the different specialities, and location of services within Greater Nottinghamshire.
- Patients will still have the same access to the same services which will still be located within the same building. Potentially, some services will be provided by a different provider but the quality of care will still remain as high.

## **WORK PROGRAMME**

The work programme was noted

The meeting closed at 2.05pm

**CHAIRMAN**