

## **MINUTES**

**JOINT HEALTH SCRUTINY COMMITTEE**  
**11 September at 10.15am**

### **Nottinghamshire County Councillors**

Councillor M Shepherd (Chair)  
Councillor G Clarke  
Councillor V Dobson  
Councillor Rev T Irvine  
Councillor E Kerry  
A Councillor P Tsimbirdis  
A Councillor C Winterton  
Councillor B Wombwell

### **Nottingham City Councillors**

Councillor G Klein (Vice- Chair)  
Councillor M Aslam  
A Councillor E Campbell  
A Councillor A Choudhry  
A Councillor E Dewinton  
Councillor C Jones  
Councillor T Molife  
A Councillor T Spencer

### **Also In Attendance**

Simon P Smith ) Executive Director for Local Services, Nottinghamshire Healthcare Trust  
Dr P Homa ) Chief Executive of NUH Trust

Mrs R Rimmington ) Nottinghamshire County Council

Mr N McMenamin ) Nottingham City Council

Mrs B Venes - Nottingham City LINKs

Laura Skaife ) Associate Director of Communication

## **MINUTES**

The minutes of the meeting held on 10 July 2012 were confirmed and signed by the Chair.

## **APOLOGIES FOR ABSENCE**

An apology for absence was received from:-

Councillor Eunice Campbell (Other Council Business)  
Councillor Emma Dewinton (Other Council Business)  
Councillor Parry Tsimbiridis (other)  
Councillor C Winterton (other)  
Councillor A Choudhry

## **DECLARATIONS OF INTERESTS**

None.

## **PSYCHOLOGICAL THERAPIES UPDATE**

Following a report to the Joint Committee in March this year a number of issues were raised by members that had resulted in further information being sought about Psychological Therapies provided by the Trust and about the transitional arrangements from Child and Adolescent Mental Health Service to Adult Mental Health Services. Councillor G Klein (Chair of the Joint Committee at that time) received a letter from Professor Mike Cooke MBE Chief Executive that provided a response to those issues raised; attached at appendix A to the report. Mr Smith, Executive Director of Local Services had been invited to answer questions in response to this letter. A copy of the briefing to the Committee was attached at appendix B to the report.

Following discussion the following additional information was provided in response to questions:-

- The Trust was committed to service user involvement in all its services regarding its current care and treatment. Whilst it acknowledged that consultation had not happened on this occasion, it would ensure that any further changes would see effective involvement take place.
- A Patients' access to therapy would begin with a general discussion with a Therapist to gather information about the reasons for their GP referral and to explain what therapy would entail in order to determine the most appropriate intervention. It was important to keep opportunities open for the patient.
- Therapists had been asked to review patients at 15 and 20 sessions to be used in their treatment pathway. The majority of intervention was limited to 30 sessions but could be extended if it were felt necessary as part of a patients treatment pathway. No incidents of this had been reported as yet. Ultimately, there would be a review after each session with a request to the Primary Care Trust before the 30<sup>th</sup> session in order not to break intervention.

The Committee requested a presentation in the future, on the Step 4 Service that provided specialist treatment for service users using Adult Mental Health Services across Nottinghamshire. In particular, on how the service worked together with all appropriate agencies involved in addressing psychological needs, including evidence-based therapeutic models.

The Chair commented that he was happy with the response in that no concerns had been raised by GPs and that the Trust had not received any complaints from service users.

**It was agreed to receive a presentation to a future meeting of the Committee on the performance and progress of the Psychological Therapies Services, including their links with other therapeutic services.**

## **NOTTINGHAM UNIVERSITY HOSPITAL TRUSTS – CANCELLATION OF NON-URGENT ELECTIVE OPERATIONS – PROGRESS REPORT**

This was the first of three quarterly progress reports requested by the Committee following its meeting in May this year, when a report was received on the cancellation of non-urgent elective operations. The report had related to media coverage at that time and concerns raised about the number of non-urgent elective operations which had been cancelled by the Trust.

Mr Homa Chief Executive of Nottingham University Hospitals gave a presentation to the Committee, which summarised information set out in the letter to Councillor Klein attached as an appendix to the report, dated 30 August 2012.

Following his presentation the following additional information was provided in response to questions:-

- The number of errors listed as a reason for cancelled operations included those patients who requested a more convenient appointment.
- The increase in reasons seen in June and July this year to do with equipment was due to a national shortage of treatment for bladder cancer and the operations therefore not taking place.
- Where staffing had been given as a reason, this had been due to an increase in the demand for emergency cases.
- Planned operations were not overbooked to take account of any that might drop out.
- The Trust continued to prioritise patients who had operations cancelled when booking operations, to ensure they had them as soon as possible. Only in extreme cases would a patients operation be cancelled twice.

- Although the position of Nottingham University Hospitals had improved it still did not perform as well as most similar sized peer organisations. Figures on operations cancelled earlier than 'on the day' were not routinely collected or made available by hospitals, although they gave a much fuller account of cancelled operations. The Trust was the first of its kind to adopt this approach and publish its results.
- The Board was adamant to improve further on its number of cancelled operations. Whilst it acknowledged there would always be an irreducible number, it hoped to achieve no more than 3% in terms of all cancellations.
- It intended to continue to provide and publish information on its cancellations and put them open to examination in order to become one of the best.

The final report on the external review of emergency and elective pathways and the Nottingham University Hospitals action plan was being published at its September Board meeting, which would be shared with the Committee once finalised.

The Chair thanked Mr Homa for his presentation and update.

**The Committee agreed to note the update and progress made by the Nottingham University Hospitals Trust and looked forward to receiving its next report in December, including the final report on its external review.**

## **WORK PROGRAMME**

The committee would receive reports at its meeting on 9 October 2012 on the Quality Care Commission and Contraceptive and Sexual Health Services.

It was reported that Members had agreed following the Alcohol briefing it would not be necessary for this study group to enter a phase of evidence gathering. A list of possible areas for development had been drawn up and would be shared with the Health and Wellbeing Boards for the City and County as possible areas for development in relation to alcohol services.

**The report and oral update was noted.**

The meeting closed at 12:30pm.

Chair