

Joint Lancashire Health Scrutiny Committee

Meeting to be held on 22 January 2013

Electoral Division affected: All

Vascular Services Review

(Appendices A, B and C refer)

Contact for further information:

Wendy Broadley, 07825 584684, Office of the Chief Executive,

wendy.broadley@lancashire.gov.uk

Executive Summary

At the Joint Health Scrutiny Committee on 24 July 2012 members were presented with a report outlining proposals for the reconfiguration of vascular services across Lancashire and Cumbria.

The recommendation of the Vascular Clinical Advisory Group of the Lancashire and Cumbria Cardiac and Stroke Network was that one site should be in the north of the region due to geography and travelling distances. It was felt two sites were needed in the south of the network as the population coverage would be just over 2 million. All hospitals within the region were asked to submit bids should they wish to be nominated as a specialist vascular intervention unit working within the proposed vascular network.

Following a procurement process it was recommended that the specialist intervention centres should be located at Carlisle, Blackburn and Preston. These centres would undertake all major inpatient vascular work. Day case work and outpatients would continue in all local hospitals within the region.

Following a discussion members concluded that further information should be requested and a letter was sent to Dr Jim Gardner, Medical Director NHS Lancashire setting out the information the Committee required for the next meeting. Attached at Appendix A is the response from NHS Lancashire to this request.

Since the meeting on 24 July University Hospitals Morecambe Bay Trust (UHMBT), who were unsuccessful in their tender submission, wrote to NHS Lancashire expressing their intention to challenge the recommendation of the Vascular Clinical Advisory Group. A copy of their letter is attached at Appendix B.

A meeting had been planned for 25 September but was postponed to allow the appeal process undertaken by UHMBT to take place. Attached at Appendix C are details of the outcome of the appeal and further updates since the Committee met in July last year.

Recommendation

The Joint Health Scrutiny committee is asked to:

- i. Determine whether the proposals are considered to be a 'substantial variation';
- ii. Consider whether the level of engagement has been adequate; and
- iii. Provide NHS Lancashire with their views and comments on the proposals and if appropriate recommend a course of action.

Background and Advice

At the Joint Health Committee on 24 July 2012 officers from NHS Lancashire presented a report which explained that the aim of the service review was to reconfigure vascular services and secure improved outcomes for patients across Lancashire and Cumbria. The Vascular Service Review formed part of the wider review being undertaken simultaneously across England.

It was proposed to provide specialist intervention services for Lancashire and Cumbria from three centres with 24 hour, 7 days a week (24/7) facilities. Bolton, Wigan and Dumfries & Galloway were also included within the review area.

It was explained that bids from five hospitals had been carefully considered and three sites had been recommended. The recommendations of the procurement team had been made in line with recommendations from the Vascular Clinical Advisory Group, following short-listing, interviews and scoring, which included assessment of risks. The approach taken was also supported by the All Parliamentary Select Committee for Vascular Surgery. The three proposed specialist intervention centres were located at Carlisle, Preston and Blackburn.

The Committee received a presentation on the current status of the review which included:

- A summary of the reasons why the review was being undertaken
- The rationale for three specialist centres
- Details of communication and engagement
- The results of a patient and public survey

Following a discussion members felt unable to support the proposal for the 3 vascular intervention centres (Carlisle, Preston and Blackburn) as there were still many unanswered questions. It was agreed to hold another meeting of the Joint Health Scrutiny Committee to provide officers with a further opportunity to explain the background to the proposals in greater detail and demonstrate evidence of engagement and support from other stakeholders.

A summary of the main points and actions required by the Committee were detailed in a letter dated 27 July to Dr Jim Gardner, Medical Director NHS Lancashire which included:

- Evidence of engagement and support of the Lancashire and Cumbria Clinical Commissioning Groups (CCGs)
- A copy of the 'Patient and Public Survey' data and an engagement action plan.
- Further information on the estimated numbers of the population of South Cumbria (160,000) expected to travel to Preston instead of Lancaster.
- Evidence that transport issues (both public and private) have been considered when looking at site selection.
- Further detailed evidence of the background to the proposals, including information on the existing services that will remain in the current locations and within local communities and supporting criteria for the selection of the 3 locations.
- Ambulance target data.
- It was stressed in the presentations that Royal Lancaster Infirmary came fourth out of the four sites under consideration following a risk assessment. Therefore an explanation was required as to why it was marked down as members feel it was important to understand in what areas it was perceived as weak.

The response to this request is attached as Appendix A. In Section 9 of the document there is a comprehensive list of supplementary information in the form of web links. These web links are intended to demonstrate evidential support of the statements made in the preceding sections. Due to the volume of this supporting information it has not been included within the main body of the report however a hard copy can be made available upon request.

As members are aware, University Hospitals Morecambe Bay Trust (UHMBT) were unsuccessful in their submission to host a specialist intervention centre at Royal Lancaster Infirmary (RLI); an issue which raised concerns relating to the access of services for patients living in South Cumbria. The Trust subsequently announced its intention to appeal against the recommendation of the Vascular Clinical Advisory Group and undertook this through the NHS Blackpool Dispute Resolution Process.

This action was separate to, and independent of the considerations of this Committee.

However as the concerns of the Committee at its meeting on 24 July included those relating to the location of a specialist intervention centre at RLI it was agreed that the Committee should be made aware of the specific grounds for the appeal by UHMBT. A copy of UHMBT's letter to NHS Lancashire dated 6 September setting out their intentions is attached as Appendix B.

The outcome of the appeal by UHMBT and an update on previous information presented is attached as Appendix C.

Once the Committee has been presented with the information provided by NHS Lancashire and UHMBT, members will need to determine a number of factors:

- a) Is the proposal to move from the present configuration of services in Cumbria and Lancashire on five sites to a vascular network with specialist inpatient

operations being delivered on three hospital sites considered to be a '*substantial variation*'?

- b) Has the engagement and communication of the review and subsequent development of the proposals been robust and inclusive?

Following the agreement of these factors the Committee is then asked to provide NHS Lancashire with its comments on the proposals and whether it will recommend any further course of action prior to a final decision being taken by the Board of NHS Lancashire.

Consultations

N/A

Implications:

This item has the following implications, as indicated:

Risk management

There are no risk management implications arising from this report.

Local Government (Access to Information) Act 1985

List of Background Papers

Paper	Date	Contact/Directorate/Tel
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Reason for inclusion in Part II, if appropriate