Lancashire County Council

Health Scrutiny Committee - Steering Group

Minutes of the Meeting held on Monday, 13 July, 2015 at 2.00 pm in Room B18b, County Hall - County Hall, Preston

Present:

County Councillor Steven Holgate (Chair)

County Councillors

M Brindle Y Motala Mrs F Craig-Wilson

1. Apologies

None received

2. Notes of the last meeting

The minutes of the meeting held on 22 June 2015 were agreed to be an accurate record

3. Lancashire Teaching Hospitals Trust

Sarah James, Associate Director for Strategic Development and Paul Havey, Director of Finance attended the meeting to discuss:

- Your Hospital, Your Health review of the clinical service strategies and hospital estate
- Financial situation following investigation by Monitor

Margaret Pratt, a financial manager from Monitor was also in attendance

Sarah James explained that Lancashire Teaching Hospital Trust requested to attend Steering Group to instigate a dialogue with members. Sarah outlined information around clinical service reviewing which enabled the Trust to understand how care would be provided to patients going forward. The main points of the discussion were:

- It was explained that LTHT had a Preston site and a Chorley site, with Preston seeing an increase in the use of their A&E services. This, it was outlined, had caused staffing challenges and an acceptance that the Trust's service set-up was not at the required standard.
- Margaret Pratt explained that service users desired treatment from specialists rather that a doctor with a more general understanding of various fields. It was explained that safer and better outcomes could be achieved from fewer centres with more specialists.

- CC Yousuf Motala made reference to engagement with CCG's, stating that it needed to be improved in order to acquire the necessary resources.
 Sarah agreed that engagement needed to be improved from the Trust with CCG's, and across the entire health economy.
- It was explained that a review was underway of the Trust's clinical service provision, with consideration of the most effective and efficient way to provide services, value for money and the aspects of the service that best fit together.
- It was noted that public consultations may take place concerning what services were desired from the Trust. Subsequently, decisions would be made around what could be delivered, and what was best for the future of the Trust.
- CC Steven Holgate requested that the clinical strategy model for the Trust be shared with Steering Group once it had been agreed. Sarah agreed that this would be distributed once it had been finalised.
- Members enquired whether options had been looked at, such as new technologies, to correspond with and provide care to outpatients. It was explained that the Trust would explore utilising new methods of patient interaction, such as Skype and telephone outpatients, and that this would be properly consulted on before anything was implemented. It was noted that some service users may be IT illiterate, and therefore, not all solutions would be appropriate for all people.
- Officers queried what the most effective method of engagement would be with Overview and Scrutiny going forward. It was explained that Steering Group had delegated powers from the Health Scrutiny Committee and that the notes of the meetings were a standard item on the agenda pack.
- It was agreed that a progress report be submitted to the Steering Group and once this had been provided, members could decide what further actions they would take.
- It was explained that LTHT officers could 'sign-up' for email notification of when agendas and minutes were published. It was also noted that all meetings were webcasted. It was stressed that Overview and Scrutiny welcomed any feedback on past and future topics from LTHT to the HSC.
- CC Steven Holgate expressed concern around issues of capacity, and that there appeared to be an emphasis upon offering care at Preston, rather than Chorley, despite it being logical if a user resided closer to the Chorley site. It was suggested this could be an issue within the secretarial services and that this was an issue that required attention.
- CC Fabian Craig-Wilson suggested that means of access and affordability required particular focus for out-patients. This, it was highlighted, would become more of an issue as services became more specialised which may lead to more travel, and therefore, transport issues may emerge in the event that centralised specialist units were created.
- CC Steven Holgate made reference to urgent care centres, and that they
 would be highly beneficial in reducing the level of users of the stretched
 A&E services in Preston.
- CC Steven Holgate noted that the Trust's deficit had increased over the past 12-18 months and queried what measures were in place to offset this increase. It was explained that a new plan would be submitted by 24th July,

- 2015, which would outline where savings could be made, and that Margaret Pratt would be working closely alongside the Trust to oversee the delivery of the plan.
- It was explained that there was a need to deliver safe and statutory services at an affordable quality, but it was stressed that this would not involve any compromise on the safety of the treatments. It was explained that treatments/medicines that are of the highest quality may not be used, but the level below, which still had a high level of specification, could be used in a bid to save money. It was explained that some services were more expensive than the income they generated and balancing these costs would only be achieved by expenditure reductions, or if commissioners provided more money.
- CC Margaret Brindle made reference to hip replacements and how there
 are two levels of quality that can be used. Therefore, clarification was
 sought on whether this was the type of saving the Trust was looking at.
 Paul Havey explained that doctors would not compromise on quality and
 that providing care with positive outcomes at the first attempt, was better
 for patients and saved money subsequently. It was specified that savings
 would be focussed upon cutting extras that were not of paramount
 importance, rather than savings made via lowering the quality of care.
- CC Fabian Craig-Wilson questioned why there were reportedly low numbers of mid-level doctors within Lancashire, and CC Yousuf Motala added to this expressing that Lancashire's Universities were producing the graduates, but could not retain them. Paul Havey explained that the Deaneries offered the placements, and therefore this determined the numbers. It was agreed that there needed to be an increase in the number of mid-level doctors within the County. Margaret Pratt explained that it was a wider workforce strategy issue, as not everything was needed to be performed by doctors and that certain tasks could be undertaken by specialised nurses.
- Paul Havey explained that the Francis report's findings suggested that there was a direct correlation between outcomes, safety and nursing levels.
- CC Yousuf Motala explained that with the changes in migration rules, there was the potential for the loss of many nurses.
- CC Steven Holgate explained the importance of taking staff on the journey
 of the Trust's spending reductions, noting that without their engagement
 and support it would be twice the struggle. Paul Havey explained that
 there was regular engagement with staff and that the Trust's
 communications department had been disseminating information in a
 timely and simple manner in order to keep staff informed. It was explained
 that the staff fully understood the need to control expenditure.
- Margaret Pratt explained that if every member of staff saved £300 per annum, the budget issues would be eliminated. Wendy Broadley explained that LCC had a "10% Challenge", in which employees were challenged to save 10% from their service areas expenditure, which was successful. It was suggested that an initiative such as this could be utilised in order to help the Trust save on expenditure in a similar way.

- CC Yousuf Motala enquired what mechanisms were in place for whistleblowing regarding wasteful members of staff in terms of expenditure. It was explained that if a staff member felt like they needed to blow the whistle for any reason, a system was in place and that they would be supported. Also, it was stressed that all staff had the power and responsibility to challenge.
- Members enquired whether there was any flexibility within the requirements set out for savings. Margaret Pratt explained that there would be loan support available at the rate of 3% interest in the event that funds were needed. It was explained that, as all services are in a process of transition, there would be a period of sensing what was sustainable long-term.

Members thanked officers for their attendance

4. Work Plan

It was agreed that the work plan would be further updated following the next Health Scrutiny Committee

5. Date of next meeting

It was noted that the next meeting of the Steering Group would be 3rd August 2015. They would meet with officers from Ormskirk and Southport Hospital Trust to discuss their post CQC inspection action plan

I Young
Director of Governance, Finance
and Public Services

County Hall Preston