

# Future of Acute Hospital Services in Worcestershire

## Patient, Public & Stakeholder Sub Committee – Actions & Agreement Log

Wildwood, Worcester

21<sup>st</sup> November 2013, 16.30pm

### Action Notes

<p><b>1. Welcome</b></p> <p>Attendees</p> <p>The following members attended the Patient, Public &amp; Stakeholder Sub Committee:</p> <ul style="list-style-type: none"> <li>▪ Colin Beardwood OBE (CB), <i>Chair</i></li> <li>▪ Cllr Pat Witherspoon (PW), Councillor, Redditch District Council</li> <li>▪ Cllr Liz Smith (LS), Councillor / Cabinet Member, Worcester City Council</li> <li>▪ Cllr Tom Wells (TW), Councillor, Malvern Hills District Council</li> <li>▪ Fran Oborski (FO), Chair, Wyre Forest District Council</li> <li>▪ Peter Pinfield (PP), Chair, Worcestershire Health Watch</li> <li>▪ Judy Adams (JA), Lay member / Patient, Public Involvement , Redditch &amp; Bromsgrove CCG</li> <li>▪ Stella Baldwin (SBa), Lay member / Patient, Public Involvement (PPI), Wyre Forest CCG</li> <li>▪ Sarah Harvey-Speck (SH-S), Lay member / PPI, South Worcestershire CCG</li> <li>▪ Stephen Howarth (SH), Non-Executive Director, Worcestershire Acute Hospitals NHS Trust</li> <li>▪ Paul Crawford (PC), Patient Representative, Worcestershire Acute Hospitals NHS Trust</li> <li>▪ Neal Stote (NS), Chair, Save the Alex</li> <li>▪ Steve Brown (SBr), Chair, Kidderminster Hospital Alliance</li> <li>▪ Richard Quallington (RQ), Chair, Community First</li> <li>▪ Simon Angelides (SA), Programme Director, Arden CSU</li> <li>▪ Sarah Makin (SM), Communications and Engagement Lead – Projects, Arden CSU</li> <li>▪ Jennifer Sharp (JS), Programme Support, Arden CSU</li> </ul> <p>Apologies</p> <ul style="list-style-type: none"> <li>▪ Cllr Bill Hartnett (BH), Leader, Redditch District Council</li> <li>▪ Cllr Marcus Hart (MH), Chair, Health &amp; Wellbeing Board / Worcestershire County Council</li> <li>▪ Cllr Roger Hollingworth (RH), Leader, Bromsgrove District Council</li> </ul>	
<p><b>1. Introductions</b></p>	
<p><b>1.a.</b> CB welcomed the members of the Sub-Committee to the first meeting. CB briefly set out the context of the work of the Sub-Committee and stressed three points in the Terms of Reference.</p> <p><i>1: that the first duty of this Committee is to consider how the programme should involve patients &amp; public in order to develop the process;</i></p>	

<p><i>2: that all participation within the Committee should be meaningful, which is not to say that everything can or will be taken forwards but that it will be taken into consideration;</i></p> <p><i>3: that the role of this Sub Committee is to make recommendations to the Programme Board. This group is not responsible for decision-making; however, CB noted that on behalf of the Sub Committee he will take forwards any item thought to have not been taken into appropriate consideration.</i></p> <p>The Committee had a short discussion focused upon whether the Committee’s business should be undertaken in private. CB clarified that whilst the business of the Committee would be private the work needed to be communicated more widely. CB clarified that all members would have the opportunity to give opinions in order to debate and agree collective recommendations to put forwards to the Programme Board – CB also highlighted that it important at this stage for all members to be able to talk freely and make suggestions.</p> <p>PW noted support for the approach and that there would need to be trust developed between the members.</p> <p>CB commented that he felt there was a good cross section of representation across the county and interests.</p>	<p><b>1.a.1 Action – JS</b>, to ensure that name plates are available for future meetings.</p> <p><b>1.a.2 Agreement – Meetings</b> to be held in private.</p>
<p><b>2. Declaration of Interests</b></p>	
<p><b>2.a.</b> CB referred to Encl 1 noting that every member had been asked to complete a Declaration of Interests, and that one or two queries had arisen. In order to clarify, CB stated that for the purpose of this Sub Committee it was important to note any interest relating to the health service, specifically any which individuals felt would be pertinent to the decisions the Sub Committee was going to make. SA clarified that the purpose of this declaration is not to exclude individuals, rather to ensure transparency about interests / potential conflicts.</p> <p>FO asked specifically if membership of HOSC would be relevant to include. It was confirmed it should be included.</p> <p>SBr asked whether the fact he was representing a group would be important to include. It was confirmed it should be included.</p> <p>SBa raised a point around deputy attendance and their Declarations of Interest. SA confirmed it would be necessary for Deputies attending their first meeting to complete a Declaration of Interest.</p>	<p><b>2.a.1 Action – all</b>, to complete the Declaration of Interests, and hand to Programme Team at the next meeting, if not done so already.</p> <p><b>2.a.2 Action – all</b>, to share the Declaration of Interests form with any deputy due to attend in their stead and request they pass to the Programme Team at their first attended meeting</p>
<p><b>3. Timing and Location</b></p>	

<p><b>3.a.</b> SA noted that for the first meeting the time &amp; location had been suggested, but that going forwards Sub Committee perspective on convenient timings was requested.</p> <p>The Sub Committee discussed the timing and location of the meeting.</p> <p>CB confirmed he is as anxious as other members to get the dates established as a rolling programme.</p> <p>The Sub Committee discussed the need for deputies. A specific issue was highlighted of multiple deputies providing support to the Sub Committee.</p> <p>The consensus of the Sub Committee was to move the meetings around the county. SA suggested alternating three locations: Worcester, Kidderminster, Redditch/Bromsgrove.</p> <p>SA noted that the next meeting scheduled on the 9<sup>th</sup> December was again at Wildwood, and confirmed that members were happy for that to remain, with assurance that from January the location would be rotated.</p> <p>Consensus around meeting day was that Mondays would be preferred however there was a request for meetings to not be the first Monday of the month due to a conflict.</p> <p>The Sub Committee discussed the potential end point of the programme. CB confirmed that it was impossible to give any indication as to when the programme will end.</p> <p>SA provided some context to the programme and the difficulties with the new landscape especially as the legal framework was still under discussion. SA suggested tabling a schedule for the next 6 months, to be reviewed in May.</p>	<p><b>3.a.1 Agreement</b> – the Sub Committee confirmed that they were happy with alternating the location to include three locations.</p> <p><b>3.a.2 Agreement</b> – the Sub Committee confirmed that they were happy with Monday meetings, after 4pm, from January, to avoid the first Monday of the month where possible.</p>
<p><b>4. Review of Proposed Sub Committee Membership</b></p>	
<p><b>4.a.</b> CB asked the group if they felt any organisation / group was missing from the membership, which people felt could contribute to the development of the Sub Committee.</p> <p>NS stated that the villages of Studley, Bidford, and Henley will be affected and need to be consulted. PW confirmed this was similarly true on the south side of the county. NS confirmed that it would be useful to invite Hazel Wright to advise on consultation with these areas of Warwickshire.</p> <p>SH noted that the role of this Sub Committee is to make recommendations not to conduct the consultation. He agreed that</p>	

NS and PW raise a valid point that the Sub Committee should recommend that the Programme Board may wish to consult these groups. JA agreed that the mandate does not cover these areas at present and noted this would include South Warwickshire Patient Public Involvement representative also. TW noted this would also include Gloucestershire / Herefordshire for same reason, stating they are not necessarily on board, but need to be considered.

SBr questioned how the Sub Committee could determine who the right people are to engage with within the community?

FO stated she was conscious that young people need to be involved and consulted. FO reminded the Sub Committee the timings of school / college and therefore the difficulties of attending a meeting at 4pm. FO suggested that it would be more appropriate for representative from the programme to go to the Youth Cabinet meetings and share information and feedback comments as a starting point.

The Sub Committee discussed the differing needs of membership vs engagement. CB noted that colleagues had highlighted the need to talk to young people in future, and reflected to the Sub Committee that there were not significant gaps in membership of the Sub Committee at this time, noting it would always be possible to invite others in future if this changed.

SA noted that as part of an Economic Impact Assessment the services affected across the 3 sites would be considered. The work would create a series of 'heat maps' that would describe the economic impact of the three sites and thereby guide issues such as membership and consultation approach.

SA confirmed that the purpose of this group was to advise how to ensure that consultation is effective. SA noted this would be primarily in Worcestershire but that the heat map will likely include other areas.

The Sub Committee discussed the potential implications of the 'heat maps'.

FO noted there was a large migrant community which would need to be considered as part of the planning and engagement. CB reiterated that there was a need to ensure that all minority groups (e.g. nurseries / elderly) had a voice within the engagement activities.

The Sub Committee discussed the lack of public transport representation. CB confirmed that the Operations and Delivery Sub-

**4.a.1 Agreement** – the Sub Committee confirmed that they were happy with membership at present.

<p>Committee would be leading on this part of the programme. CB confirmed that the Programme was currently procuring an Integrated Impact Assessment which would be undertaking an initial consideration of transport issues between the different Trust sites. CB confirmed that transport is a very important issue and this would be brought back to the Sub Committee to consider and comment on.</p> <p>The Sub Committee discussed that the Sub Committee membership has a responsibility to have appropriate discussions within their wider network to facilitate as a wide a range of views as possible and bring relevant comment / views / information back to the Sub Committee.</p> <p>SA noted that once the ‘heat maps’ are completed they will be brought back to the Sub Committee and make any recommendations as to who else may need to invite as a result of the information. SA also noted the ‘heat maps’ will go to the Programme Board to consider whether the appropriate CCGs are engaged within the decision making structures. SA set out the actions take to date with the surrounding CCGs.</p> <p>SBa noted that the three Worcestershire CCGs have now produced prospectuses outlining their commissioning intentions. The public had been asked to comment on these documents. SA set out the context in which the prospectuses had been developed and the formal steps required of the programme.</p> <p>RQ noted that within the JSR there were tensions between roles in providing assurance and also taking on consultation. The Sub Committee discussed the lessons that had been learnt from the JSR and how they might be applied to the Programme.</p> <p>The Sub Committee discussed the concern that there was not a sufficient demographic range represented on the Sub Committee and potential approaches to addressing the concern.</p> <p>RQ noted that a range of older stakeholder views should be considered. PW confirmed that she sits on Older People’s Consultative Group and would be happy to liaise on behalf of the Sub Committee. The Sub Committee agreed with RQ that the only gap in Sub Committee membership was around young people.</p>	<p><b>4.a.2 Action – all</b>, to hold appropriate discussions with their networks organisations / individuals who have interest</p> <p><b>4.a.3 Action – SA</b>, to bring heat maps to the Sub Committee once EIA complete and recommend any appropriate changes to membership as a result of findings</p> <p><b>4.a.4 Action – CB, SA</b>, to consider representation around young people on the Sub Committee</p>
<p><b>5. Programme Update</b></p>	
<p><b>5.a.</b> SA noted that the design of the Programme had, at its centre, a focus upon transparency. Four Sub Committees had been established: Clinical, Finance, Patient, Public &amp; Stakeholder, and Operations &amp; Delivery (this Sub Committee had responsibility for Transport). SA confirmed that it was the intention of the Programme to place the</p>	

work of the programme on a public facing website – however there were some operational and logistic challenges with making this happen – but this was a focus of the Programme.

The Sub Committee discussed the level of interest in the JSR website and Facebook page.

SA set out the Gateway approach to developing the programme and the roll of the Independent Clinical Review Panel. SA reiterated that it is important to arrive at the correct decision.

FO raised the issue of the Trust commissioned work from the Royal Colleges on Emergency Services & Paediatrics and questioned the implications of these findings on the Programme.

SA set out that there was a clear brief in terms of the reconfiguration of services to meet demands of the future. SA confirmed that the issue of safety of services is matter for the Trust, CCGs and NHS England to decide upon based on findings and outside the scope of the Programme.

NS stated that he was invited to meet with the Trust and Royal College and raised a concern as a representative of Save the Alex – they were being asked to critique Option 1 and Option 2. NS stated that he did not feel it was appropriate for him to address questions of clinical safety.

CB noted that things will not stand still whilst awaiting the outcome from Independent Clinical Review Panel and that safety was a primary consideration of the Trust. CB/SA noted the concern raised by NS.

The Sub Committee discussed the future scenarios for the next Gateway for the Programme and where further information would be made available to the public. It also discussed the timescales in terms of the report from the Clinical Review Panel.

SBr expressed concern that the output of the Clinical Review Panel could be polarising in terms of the public debate and that the decision itself was predetermined. CB/SA noted this concern.

CB reiterated that it was not the role of this Sub Committee to make the decision, nor to justify it rather the sub committee's role is to ensure the widest possible engagement with the public.

PP clarified that the role of the Sub Committee is to ensure *how* to get to a decision and not to make decisions and that this is right and proper for the Sub-Committee. TW reiterated this, stating that this group is not creating a list of options, rather is here to ensure a

<p>transparent, full and meaningful consultation takes place.</p> <p>TW noted that engagement will clearly be significant in areas where there will be a reduction in acute services and there was a need to ensure balanced dialogue with groups who were not as fully engaged.</p> <p>The Sub Committee discussed the need to use plain English in terms of the communication with the public. Members of the Sub Committee offered support to the Programme in fulfilling this commitment.</p> <p>The Sub Committee commented that there were lessons to be learnt from some of the publication materials developed during the JSR.</p> <p>SA set out some of the assurance activities that need to be undertaken as part of the overall governance of the Programme.</p>	
<p><b>6. Stakeholder Mapping Exercise</b></p>	
<p><b>6.a.</b> The Sub Committee undertook a stakeholder mapping exercise.</p> <p>Within this discussion the Sub Committee requested a short summary of the key points to be circulated prior to the next round of meeting papers.</p>	<p><b>6.a.1 Action – SA,</b> to provide a summary of each meeting</p>
<p><b>7. AOB</b></p>	
<p><b>7.a.</b> No AOB raised.</p>	
<p>Next meeting:  <b>Monday 9<sup>th</sup> December, 16:00-18:00, Meeting Room, Wildwood</b></p>	

End