

Future of Acute Hospital Services in Worcestershire

Patient, Public & Stakeholder Advisory Group– Actions & Agreement Log

Wyre Forest District Council

12th January 2015, 4pm

Action Notes

1. Attendees

The following members attended the Patient, Public & Stakeholder Advisory Group:

- Colin Beardwood OBE (CB), *Chair*
- Margaret Jackson (MJ), *Vice-chair*
- Judy Adams (JdA), Lay member patient and public involvement, Redditch & Bromsgrove CCG
- Peter Pinfield (PP), Chair, Worcestershire Health Watch
- Richard Quallington (RQ), Chief Executive, Community First
- Cllr Fran Oborski (FO), Councillor, Wyre Forest District Council
- Phil Street (PS), Manager, Worcestershire Council for Voluntary Youth Services
- Jan Adams (JA), Board lead for PPI, Wyre Forest CCG
- Stephen Howarth (SH), Non-Executive Director, Worcestershire Acute Hospitals NHS Trust
- Paul Crawford (PC), Patient Representative, Worcestershire Acute Hospitals NHS Trust
- Claire Austin (CA), Communications and Engagement Director
- Sarah Makin (SM), Communications and Engagement Lead – Projects, Arden CSU

Apologies:

- Lucy Noon (LN), Director of Corporate and Organisational Development, South Worcestershire CCG
- Cllr Hazel Wright (HW), Councillor, Stratford-on-Avon District Council
- Cllr Pat Witherspoon (PW), Councillor, Redditch Borough Council
- Sarah Harvey-Speck (SH-S), Lay member patient and public involvement, South Worcestershire CCG
- Neal Stote (NS), Chair, Save the Alex
- Stephen Brown (SBr), Chair, Kidderminster Hospital Alliance
- Diane Jones MBE (DJ), Lay member patient and public involvement, Herefordshire CCG
- Cllr Margaret Sherrey (MS), Leader, Bromsgrove District Council
- Cllr Marcus Hart (MH), Chair, Health & Wellbeing Board / Worcestershire County Council
- Cllr Bill Hartnett (BH), Leader, Redditch Borough Council
- Cllr Tom Wells (TW), Councillor, Malvern Hills District Council

1. Introductions – new members and declaration of interests

1.a. CB confirmed there were no new members to the group. He announced that Charles Goodey would be standing down as the lay member on South Warwickshire CCG and the new lay member would be

CA to invite new lay member for South Warwickshire to

invited to join the PPSAG in due course.	join the PPSAG
2. Apologies – CB confirmed apologies received as in section 1 above.	
3. Minutes from last meeting	
3.a. All actions were confirmed as completed. The minutes from the last meeting were approved.	
4. Programme Update including Clinical Senate Review	
4.a. CA gave an update on the current status of the Programme. The proposed clinical model was still being reviewed by the West Midlands Clinical Senate and their review would be published later this year. The WMCS will need to produce a report once they have finished their information gathering phase. It will have to be sent to the ICRP for checking and then it needs to go back to the Clinical Senate for a final report to be produced in February It was now certain that the public consultation would not start before General Election on May 7 th and is unlikely to start before the late summer. The safety of clinical services is being closely monitored by the Quality and Sustainability Sub Committee of the Programme Board which is chaired by Mr Mark Wake, medical director of the Acute Trust.	
5. Update on Pre-consultation engagement	
5.a. CA presented the Pre-consultation engagement report which covered the period from September to December 2014. She explained we have been focusing on engaging groups that are most affected by the proposed changes and those whose voices are seldom heard across the whole of the county, for example: young mums, people with learning disabilities, the homeless and older people. We are going to them as opposed to inviting them to come to us and the notes taken during the meetings will be fed back into the process. The main topic arising from these meetings so far is about transport . The meetings are scheduled to continue until the end of March and the beginning of the pre-General Election purdah period. CB and MJ both said they had attended some of the pre-consultation engagement meetings and had welcomed the opportunity to explain the proposed clinical model to local community groups.	
6. Update from transport group	
6a MJ presented the update from the Transport Group. Two meetings have taken place so far. At both meetings there was good representation from the CCGs, County Council Transport Teams, the Acute Trust, and voluntary sector along with representatives from the Patient, Public and Stakeholder Group. At the first meeting, the group received an informal presentation on the findings and recommendations in the Mott MacDonald IIA and followed	

<p>this with a discussion of the transport issues in Worcestershire and possible solutions.</p> <p>It agreed that the group should address four main issues:</p> <ul style="list-style-type: none"> Parking and movement around the Worcestershire Royal site Public and community transport Communication and Information Other arrangements such as timing of appointments – which could potentially reduce pressure on transport. <p>At the second meeting, the group received feedback relating to travel and transport from the pre-consultation engagement meetings as well as presentations on public and community transport and an update from the Acute Trust on its future travel and transport plans, particularly in relation to car parking.</p> <p>Members of the group were asked to consider the costs of improving the travel and transport services they currently offer to mitigate the impacts of the proposed changes.</p> <p>The group is due to conclude its proposals by the beginning of February 2015.</p>	
<p>6. AOB</p>	
<p>There were no items of any other business</p>	