

Public Document Pack



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Tuesday 1 March 2016

Notice of Meeting

Dear Member

Calderdale and Kirklees Joint Health Scrutiny Committee

The **Calderdale and Kirklees Joint Health Scrutiny Committee** will meet in the **Council Chamber - Town Hall, Huddersfield** at **3.30 pm** on **Wednesday 9 March 2016**.

This meeting will be webcast live.

The items which will be discussed are described in the agenda and there are reports attached which give more details.

A handwritten signature in black ink, appearing to read 'Julie Muscroft', on a light-colored background.

Julie Muscroft

Assistant Director of Legal, Governance and Monitoring

Kirklees Council advocates openness and transparency as part of its democratic processes. Anyone wishing to record (film or audio) the public parts of the meeting should inform the Chair/Clerk of their intentions prior to the meeting.

**The Calderdale and Kirklees Joint Health Scrutiny Committee members
are:-**

Member

Councillor Robert Barraclough

Councillor Andrew Marchington

Councillor Elizabeth Smaje

Councillor Molly Walton

Councillor Howard Blagbrough - Calderdale Council

Councillor Malcolm James - Calderdale Council

Councillor Martin Burton - Calderdale Council

Councillor Adam Wilkinson - Calderdale Council

Agenda

Reports or Explanatory Notes Attached

Pages

1: Minutes of Previous Meeting

1 - 6

To approve the Minutes of the meeting of the Committee held on 29 January 2016.

2: Interests

7 - 8

The Councillors will be asked to say if there are any items on the Agenda in which they have disclosable pecuniary interests, which would prevent them from participating in any discussion of the items or participating in any vote upon the items, or any other interests.

3: Admission of the Public

Most debates take place in public. This only changes when there is a need to consider certain issues, for instance, commercially sensitive information or details concerning an individual. You will be told at this point whether there are any items on the Agenda which are to be discussed in private.

4: Deputations/Petitions

The Committee will receive any petitions and hear any deputations from members of the public. A deputation is where up to five people can attend the meeting and make a presentation on some particular issue of concern. A member of the public can also hand in a petition at the meeting but that petition should relate to something on which the body has powers and responsibilities.

5: Right Care, Right Time, Right Place - Quality and Safety Case for Change 9 - 10

Representatives from Calderdale and Greater Huddersfield Clinical Commissioning Groups, Calderdale and Huddersfield NHS Foundation Trust, Monitor and NHS England will be in attendance to present the Quality and Safety Case for Change to Hospital Services in Calderdale and Greater Huddersfield.

Contact: Richard Dunne, Principal Governance and Democratic Engagement Officer – 01484 221000

6: Right Care, Right Time, Right Place - Financial Case for Change and Workforce Challenges 11 - 12

Representatives from Calderdale and Greater Huddersfield Clinical Commissioning Groups, Calderdale and Huddersfield NHS Foundation Trust, Monitor and NHS England will present the Financial case for Change to hospital services in Calderdale and Greater Huddersfield and outline the workforce challenges facing the Trust.

Contact: Richard Dunne, Principal Governance and Democratic Engagement Officer – 01484 221000

7: Project Plan 13 - 14

The Joint Committee will discuss the Project Plan that outlines the Committees planned activities and meeting dates.

Contact: Richard Dunne, Principal Governance and Democratic Officer – 01484 221000

8: Date of Next Meeting

To confirm the date of the next meeting on 22 March 2016 at 3.30pm in the Council Chamber, Town Hall, Huddersfield

Contact Officer: Richard Dunne

KIRKLEES COUNCIL

CALDERDALE AND KIRKLEES JOINT HEALTH SCRUTINY COMMITTEE

Friday 29th January 2016

Present:

Councillor Robert Barraclough
Councillor Andrew Marchington
Councillor Elizabeth Smaje
Councillor Molly Walton
Councillor Howard Blagbrough - Calderdale Council
Councillor Malcolm James - Calderdale Council
Councillor Martin Burton - Calderdale Council
Councillor Adam Wilkinson - Calderdale Council

In attendance:

Anna Basford – Calderdale & Huddersfield NHS
Foundation Trust (CHFT)
Gemma Berriman – CHFT
David Birkenhead – CHFT
Alan Brook – Calderdale CCG
Mark Davies – CHFT
Rory Deighton – Healthwatch Kirklees
Keith Griffiths - CHFT
Andrew Haigh – CHFT
Fatima Khan-Shah – Healthwatch Kirklees
Carol McKenna – Greater Huddersfield CCG
Heather McClelland – CHFT
Jen Mulcahy – Calderdale CCG & Greater Huddersfield
CCG
Steve Ollerton – Greater Huddersfield CCG
Victoria Pickles - CHFT
Catherine Riley – CHFT
Matt Walsh – Calderdale CCG
Owen Williams – CHFT
Penny Woodhead – Calderdale CCG & Greater
Huddersfield CCG
Richard Dunne – Principal Governance & Democratic
Engagement Officer Kirklees Council
Mike Lodge – Senior Scrutiny Support Officer Calderdale
Council

1 Minutes of Previous Meeting

RESOLVED – That the minutes of the meeting of the Committee held on 21 October 2015 be approved as a correct record.

2 Interests

No interests were declared.

3 Admission of the Public

The Committee considered the question of the admission of the public and agreed that all items be considered in public session.

4 Deputations/Petitions

The Committee received deputations from the following people regarding the Proposals for the provision of Hospital Services in Calderdale and Greater Huddersfield: Jenny Shepherd, Paul Cooney, Jane Rendle and Natalie Ratcliffe.

5 Right Care, Right Time, Right Place Programme Update

The Committee welcomed representatives from Calderdale and Huddersfield NHS Foundation Trust (CHFT), Calderdale CCG, Greater Huddersfield CCG and Healthwatch Kirklees to the meeting.

Mr Walsh informed the Committee of the context and background on the work that had taken place on developing the proposals for the future provision of hospital services and outlined the process that the CCG's had followed to reach a decision that they were ready to proceed to consultation.

Mr Walsh stated that the CCG's still had work to do before they could confirm the start date and duration of the consultation and explained that the CCG's were committed to working with the Joint Health Scrutiny Committee and Healthwatch Kirklees to agree the consultation materials.

Ms McKenna informed the Committee that all of the outstanding work that had been required to inform the Pre-Consultation Business case had been completed in the timescales previously discussed with the Committee.

Mr Brook stated that the CCG's were focused on ensuring that the processes that they were following were correct and outlined in detail the procedures that the CCG's followed at their meetings.

In response to a committee question on when people would receive an answer to the written questions that were submitted to the Governing Bodies meeting held on the 20 January 2016 Ms McKenna stated that the CCG's response would be issued imminently.

In response to a committee question on the process that would be followed for making the decision to approve the consultation materials and agree when consultation would commence Ms McKenna stated the decision made by the Governing Bodies on the 20 January had agreed that the CCG's were ready for consultation on the basis of the information contained in the Pre-Consultation Business Case (PCBC) and envisaged proceeding to consultation early February.

In response to a committee request to receive details of the Journey Time Assessment Study referenced in the PCBC Ms Mulcahy stated that the information was already in the public domain and was available on the CCG's website.

In response to a committee request to receive the CHFT 5 year Strategic Plan and take into consideration the Health Scrutiny Guidance that explained how commercially sensitive could be received by the Committee Mr Williams stated that the Trust would liaise with its regulators to establish how this information could be provided.

A full Committee question and answer session followed that covered a number of issues that included:

- * A need to consider clinical outcomes as part of the travel analysis.
- * An overview of the potential timeline for the start of the formal consultation phase.
- * A query on why Barnsley Hospital NHS Foundation Trust was not included in the table that showed the impact in attendances at neighbouring hospital trusts.
- * A concern regarding the time that had been allowed for the Joint Committee to comment on the consultation materials.
- * The importance of clear communication and managing people's expectations.
- * An explanation of the legal examination of the PFI contract.
- * The approach that would be taken by CHFT to involving staff in the consultation process.
- * An explanation for the reasons for changing the location site for the Trauma Centre.
- * An overview of the current financial position of the Trust and the impact of operating dual services over two sites.
- * Details of the renegotiated PFI contract and the financial impact of the backlog of maintenance work required at the Huddersfield Royal Infirmary (HRI).
- * The annual repayment costs of the PFI contract.
- * The work being developed by acute hospital trusts on a West Yorkshire footprint and the importance of understanding the interdependencies between the transformation programmes in North Kirklees and Greater Huddersfield.
- * The work being done by Greater Huddersfield on developing a primary care strategy.
- * An overview of the changes taking place in primary care and the increasing trend for practices to merge.

RESOLVED -

(1) That attendees be thanked for attending the meeting.

(2) That the Committees supporting officers be authorised to liaise with attendees to obtain any information that has arisen from the discussion.

6 Calderdale and Greater Huddersfield Hospital and Care Closer to Home Consultation Plan

Ms Woodhead provided the Committee with an explanation of the draft consultation plan and questionnaire and outlined in detail the process that had been followed in developing the consultation materials.

In response to a question from Healthwatch Kirklees Ms Woodhead stated that the CCG's would welcome the assistance of Healthwatch in testing out the consultation questions and obtaining feedback on the format and style of the consultation document.

In response to a question from the Committee Mr Walsh explained that the consultation would be clear that development would be required on both hospital sites although the detail would be informed by the comments and feedback from the consultation.

In response to a question from the Committee Ms Woodhead outlined the process that had been followed in developing the consultation plan that included details of the planned locations and timings of the various consultation events.

Mr Brook informed the Committee of the new proposed model of care that would provide urgent care centres at both hospital sites and would be supported by an emergency care centre located at the Calderdale site.

Ms Woodhead explained that the questionnaire that had been presented to the Committee detailed the outline questions only and would form part of a consultation document that would provide a detailed explanation of the new proposed model of care.

A full Committee question and answer session followed that covered a number of issues that included:

- * An update that covered the financial aspects of the proposals.
- * How the local proposals linked to the wider national agenda as outlined in the Keogh report on urgent and emergency care.
- * The importance of obtaining financial support from central government to implement the proposed new model of care.
- * The need to ensure that the Committee was able to have sight of the full consultation document before the start of the consultation period.
- * The importance of ensuring that the consultation public events were structured to be as accessible to as many people as possible.
- * A suggestion that during the consultation period the CCG's should also run an information campaign to raise awareness of public use of Accident and Emergency services.
- * The increased role of the NHS 111 service in supporting the new model of care.
- * The importance of ensuring that there was public confidence in the services that would be provided by the urgent care centres.
- * A request by Healthwatch Kirklees to be provided with an opportunity to test the consultation materials before proceeding to consultation.
- * Healthwatch Kirklees intention to consult with the public and service users and inform scrutiny of the outcomes of these discussions.
- * A concern over the appropriateness of undertaking telephone surveys.
- * Details of what on-line information would be available.
- * The work that would be done in promoting key messages and frequently asked questions through social media and other forms of communication.

- * An overview of the CCG's assurance process and the role of the Consultation Institute.
- * Details of the work that would be undertaken by both local authorities to promote the consultation on the Council websites.
- * The Committee's request that the CCG's took into account the statutory holidays and consider extending the 12 week consultation period.
- * The importance of ensuring that the planned roadshows took place at all wards located in the areas served by Greater Huddersfield CCG and Calderdale CCG.
- * That all consultation materials should include a description of the services that would be provided at the acute site and the planned site.
- * The need to promote the services that would be provided in the community.

RESOLVED -

That the Committee request that Commissioners:

- (i) Consider extending the 12 week consultation period;
- (ii) Provide the Committee with final drafts of the consultation material for comment;
- (iii) Test the consultation questions before commencement of the consultation;
- (iv) Confirm the consultation timescale to include the date when the response from the Committee is required and the date a decision will be made as to whether to proceed with the proposals.

7 Terms of Reference and Working Arrangements

The Committee discussed its revised Terms of Reference and Working arrangements.

RESOLVED -

That the Committee agree the revised Terms of Reference and working arrangements.

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KIRKLEES COUNCIL			
COUNCIL/CABINET/COMMITTEE MEETINGS ETC			
DECLARATION OF INTERESTS			
Name of Councillor			
Item in which you have an interest	Type of interest (eg a disclosable pecuniary interest or an "Other Interest")	Does the nature of the interest require you to withdraw from the meeting while the item in which you have an interest is under consideration? [Y/N]	Brief description of your interest

Signed: Dated:

NOTES

Disclosable Pecuniary Interests

If you have any of the following pecuniary interests, they are your disclosable pecuniary interests under the new national rules. Any reference to spouse or civil partner includes any person with whom you are living as husband or wife, or as if they were your civil partner.

Any employment, office, trade, profession or vocation carried on for profit or gain, which you, or your spouse or civil partner, undertakes.

Any payment or provision of any other financial benefit (other than from your council or authority) made or provided within the relevant period in respect of any expenses incurred by you in carrying out duties as a member, or towards your election expenses.

Any contract which is made between you, or your spouse or your civil partner (or a body in which you, or your spouse or your civil partner, has a beneficial interest) and your council or authority -

- under which goods or services are to be provided or works are to be executed; and
- which has not been fully discharged.

Any beneficial interest in land which you, or your spouse or your civil partner, have and which is within the area of your council or authority.

Any licence (alone or jointly with others) which you, or your spouse or your civil partner, holds to occupy land in the area of your council or authority for a month or longer.

Any tenancy where (to your knowledge) - the landlord is your council or authority; and the tenant is a body in which you, or your spouse or your civil partner, has a beneficial interest.

Any beneficial interest which you, or your spouse or your civil partner has in securities of a body where -

- (a) that body (to your knowledge) has a place of business or land in the area of your council or authority; and
- (b) either -

the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body; or

if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you, or your spouse or your civil partner, has a beneficial interest exceeds one hundredth of the total issued share capital of that class.



Name of meeting: Calderdale and Kirklees Joint Health Scrutiny Committee

Date: 9 March 2016

Title of report: Right Care, Right Time, Right Place – Quality and Safety Case for Change

Is it likely to result in spending or saving £250k or more, or to have a significant effect on two or more electoral wards?	No
Is it in the Council's Forward Plan ?	No
Is it eligible for "call in" by Scrutiny ?	No
Date signed off by <u>Director</u> & name Is it signed off by the Director of Resources? Is it signed off by the Acting Assistant Director - Legal & Governance?	No – The report has been produced to provide the context to the Committee discussions with Calderdale and Greater Huddersfield CCG's, Calderdale and Huddersfield NHS Foundation Trust and other key health stakeholders.
Cabinet member portfolio	Prevention, Early Intervention and Vulnerable Adults

Electoral [wards](#) affected: All

Ward councillors consulted: N/A

Public or private: Public

1. Purpose of report

1.1 To provide members of the Calderdale and Kirklees Joint Health Scrutiny Committee with the context to the discussions with Calderdale and Greater Huddersfield Clinical Commissioning Groups (CCGs), Calderdale and Huddersfield NHS Foundation Trust (CHFT) and other key health stakeholders on the proposals for the future provision of hospital services in Calderdale and Greater Huddersfield.

2. Key Points

2.1 As outlined in the Calderdale and Kirklees Joint Health Scrutiny Committee (JHSC) Terms of Reference a key role of the JHSC will be

to scrutinise the proposed hospital services configuration and its impact on patients and the public.

- 2.2 Calderdale and Greater Huddersfield CCG's have published a Pre-Consultation Business Case (PCBC) that outlines the case for transforming health services in Calderdale and Greater Huddersfield and describes the clinical quality and financial drivers for change and the nature of the challenging choices that are presented to commissioners
- 2.3 The PCBC describes a number of reasons for why change is needed which will be considered in detail by the JHSC to help inform its review of the new proposed model of care.
- 2.4 A key reason for change that has been identified in the PCBC is the need to ensure that CHFT can deliver high quality and safe services that provide a greater consistency in outcomes for patients across Calderdale and Greater Huddersfield.
- 2.5 Senior representatives from the organisations detailed above will be attendance to provide the context and background to the quality and safety case for change to include: an explanation for why change is needed; an overview of the current position; and outline how the new model of care will help to meet and maintain national standards of care and provide a greater consistency in patient outcomes.

3. Implications for the Council

This is a report for information.

4. Consultees and their opinions

Not applicable

5. Next steps

That the JHSC takes account of the information presented and considers the next steps it wishes to take.

6. Officer recommendations and reasons

That the JHSC considers the information provided and determines if any further information or action is required.

7. Cabinet portfolio holder recommendation

Not applicable

8. Contact officer and relevant papers

Richard Dunne, Principal Governance & Democratic Engagement Officer, Tel: 01484 221000 E-mail: richard.dunne@kirklees.gov.uk

9. Assistant Director responsible

Julie Muscroft, Assistant Director: Legal, Governance & Monitoring



Name of meeting: Calderdale and Kirklees Joint Health Scrutiny Committee

Date: 9 March 2016

Title of report: Right Care, Right Time, Right Place – Financial Case for Change and Workforce Challenges

Is it likely to result in spending or saving £250k or more, or to have a significant effect on two or more electoral wards?	No
Is it in the Council's Forward Plan ?	No
Is it eligible for "call in" by Scrutiny ?	No
Date signed off by <u>Director</u> & name Is it signed off by the Director of Resources? Is it signed off by the Acting Assistant Director - Legal & Governance?	No – The report has been produced to provide the context to the Committee discussions with Calderdale and Greater Huddersfield CCG's, Calderdale and Huddersfield NHS Foundation Trust and other key health stakeholders.
Cabinet member portfolio	Prevention, Early Intervention and Vulnerable Adults

Electoral [wards](#) affected: All

Ward councillors consulted: N/A

Public or private: Public

1. Purpose of report

1.1 To provide members of the Calderdale and Kirklees Joint Health Scrutiny Committee (JHSC) with the context to the discussions with Calderdale and Greater Huddersfield Clinical Commissioning Groups (CCGs), Calderdale and Huddersfield NHS Foundation Trust (CHFT) and other key health stakeholders on the proposals for the future provision of hospital services in Calderdale and Greater Huddersfield.

2. Key Points

2.1 Two key drivers for change that have been identified in the Pre-Consultation Business Case (PCBC) is the financial case for change and the workforce challenges that face CHFT.

- 2.2 The PCBC outlines the financial pressures and challenges for commissioners and providers and highlights that without change commissioners would not be able to provide sufficient resource to deliver a financially stable health economy and the required improvement in clinical standards.
- 2.3 The PCBC also outlines the financial position of the CCG's and CHFT and the pressures that face the whole of the Calderdale and Greater Huddersfield health economy.
- 2.4 In addition to the financial case for change workforce challenges is also identified as a key factor driving the need for reconfiguration and impacts on issues related to the quality and safety and financial cases for change.
- 2.5 Senior representatives from the organisations detailed above will be attendance to provide the context and background to the financial case for change and outline the key workforce challenges.

3. Implications for the Council

This is a report for information.

4. Consultees and their opinions

Not applicable

5. Next steps

That the JHSC takes account of the information presented and considers the next steps it wishes to take.

6. Officer recommendations and reasons

That the JHSC considers the information provided and determines if any further information or action is required.

7. Cabinet portfolio holder recommendation

Not applicable

8. Contact officer and relevant papers

Richard Dunne, Principal Governance & Democratic Engagement Officer, Tel: 01484 221000 E-mail: richard.dunne@kirklees.gov.uk

9. Assistant Director responsible

Julie Muscroft, Assistant Director: Legal, Governance & Monitoring

CALDERDALE AND KIRKLEES JOINT HEALTH SCRUTINY COMMITTEE- PROJECT PLAN (V10)

DATE	ACTIVITY
Formal Meetings	
<u>Meeting 1</u> Wednesday 9 March (pm)¹ Venue – Huddersfield	The need for change: <ul style="list-style-type: none"> • Quality and safety of patient care • Workforce challenges to inc. staff recruitment and retention (to include input from the Royal College of Nursing and other trade unions) • The Financial case (to include input from Monitor)
<u>Meeting 2</u> Tuesday 22 March (pm) Venue - Huddersfield	Future model of Care: <ul style="list-style-type: none"> • Urgent Care • Emergency and Specialist Emergency Care • Intensive Care Unit • YAS (NHS 111 Service) • W.Yorks Urgent & Emergency Care Vanguard • Input from NHSE
<u>Meeting 3</u> Wednesday 6 April (pm) Venue – Halifax	Future model of care: <ul style="list-style-type: none"> • Planned Care • Maternity Services • Paediatric Services • Diagnostics
<u>Meeting 4</u> Tuesday 19 April (pm) Venue – Halifax	<ul style="list-style-type: none"> • Patient accessibility to include transport, travel, parking and costs. • Patient flows to include impact on surrounding acute trusts • YAS • CHFT estates • Input from Y & H Clinical Senate

¹ All meetings to commence from 3:30 pm

<u>Meeting 5</u> Date and Venue TBC	Future model of care: <ul style="list-style-type: none"> • Community based care proposals to inc. Calderdale CCG CC2H and GHCCG CC2H • Primary Care • Impact on social care
Other Activities	
Visits to HRI and CRH	Estates 2 March. Clinical visits TBC
Drop in sessions	TBC
Working with Healthwatch	ongoing
Interim review of the consultation process	TBC
Health and Well Being Boards – to consider how proposals fit with the Joint Strategic Assessments	To be discussed
Evidence from members of the public and other key stakeholders (Calderdale)	Ongoing – specific meetings TBC
Evidence from members of the public and other key stakeholders (Kirklees)	Ongoing – specific meetings TBC