

**MINUTES OF A MEETING OF THE SCRUTINY COMMISSION FOR HEALTH ISSUES
HELD AT THE COUNCIL CHAMBER, TOWN HALL ON 20 SEPTEMBER 2012**

Present: Councillors B Rush (Chairman), Y Maqbool, J Stokes, D McKean, B Saltmarsh, N Shabbir and A Sylvester

Also present David Whiles, LINKs Representative
Katie Baxter, Youth Council Representative
Matthew Purcell, Youth Council Representative

Officers Present: Terry Rich, Executive Director of Adult Social Care
Geeta Pankhania, Public Health Programme Manager
Alan Mack, Director of Corporate Development & Performance
Angus Maitland, Chief Operating Officer, Peterborough and Stamford Hospitals NHS Foundation Trust
Dr Peter Reading, Interim CEO of Peterborough and Stamford Hospitals NHS Foundation Trust
Dr John Randall, Medical Director
Chris Wilkinson, Director of Care Quality and Chief Nurse
Alex Daynes, Senior Governance Officer
Marie Southgate, Lawyer
Joan Tiplady, Peterborough and Stamford Hospitals NHS Foundation Trust

1. Apologies

Apologies were received from Councillors D Lamb and K Sharp.

2. Declarations of Interest and Whipping Declarations

None were received.

3. Minutes of meeting held on 17 July 2012

The minutes of the meeting held on 17 July 2012 were approved as an accurate record.

4. Call In of any Cabinet, Cabinet Member or Key Officer Decisions

There were no requests for call-in to consider.

The chairman advised the committee that item 7 on the agenda, would be dealt with after item 5.

5. Equality Delivery System – Update (PSHFT)

Joan Tiplady introduced a report giving detailed information in respect of the Equality Delivery System (EDS) outcomes that had achieved a red rating (grading) including that progress reports were now made regularly to the Trust Board and an e-learning programme for staff had been started.

Comments and responses to questions included:

- The action plan to achieve the goals can be circulated to the Commission;

- An update can be submitted to the Commission in six month's time;
- Regular reporting was every 3 months depending on the work achieved in that time;
- The ratings had not been re-graded following actions to improve them. This would need an external rather than internal grading and may take a year to see full results; and
- Pensioners groups could be included in the workshops to assess the re-grading of the EDS outcomes.

ACTIONS AGREED

The Committee agreed that:

1. The Action Plan for improvement to be circulated;
2. A further updated report to be submitted in six months;
3. Pensioner groups should be included in the next grading workshop.

7. Equality Delivery System – Update (NHSP)

Alan Mack and Geeta Pankhania introduced a report following a request from the Commission's meeting on 21 June 2012 for detailed information in respect of the Equality Delivery System (EDS) outcomes that were 'red' rated. An internal assessment had been undertaken to indicate progress made but this would need ratifying by an external assessment.

Comments and responses to questions included:

- The ratings would be looked at again in January and published in April 2013. It was expected that the current amber ratings would show as green in 2013/14; and
- Robust plans to address the red ratings were implemented in July.

ACTION AGREED

A full assessment report would be submitted to the Commission after the publication of the ratings in April 2013.

6. Peterborough and Stamford Hospitals NHS Foundation Trust

The Interim Chief Executive Officer of Peterborough and Stamford Hospitals NHS Foundation Trust introduced a report providing and update on the Trust including the strategy to improve its financial position, which would include attracting more patients, expanding successful services such as cancer treatment, improve and expand current services and a possible long term special subsidy from Government.

Comments and responses to questions included:

- The £54 million Government Grant last year enabled bills to be paid off but still the same operational deficit remained, another similar arrangement would be needed this year to maintain the current deficit level;
- Expecting a reduction in funding over next five years per patient from government to factor into financial plans along with inflation and falling patient numbers from NHS Cambridgeshire could see a further £50 million revenue loss;
- Predicted patient numbers and expected referrals from GPs must be looked at again for accuracy to reflect changing healthcare needs of the population;
- Some patients were still referred to Addenbrookes for specialist care;
- Birth rate was rising nationally but there was a relatively high population in Peterborough of 'birthing age'. South Lincolnshire residents were also using

Peterborough and Stamford Hospitals for maternity services. The new maternity ward could cope with 5,000-6,000 births a year (currently 4,680);

- The report considers revenue costs so does not include any potential income from a sale of the former District Hospital site which would only affect one year of budget;
- Any use of the income from the sale of the site would be considered at that time;
- A transformation fund was set aside to manage any internal changes, many of the planned financial improvements were aimed at reducing costs rather than increasing income;
- £11 million of £13.2 million savings target had already been identified for this year;
- Savings needed to reduce the £50 million deficit would be very substantial – would need district wide service adjustments;
- Peterborough and ten other Trusts were in breach of terms from Monitor, the public accounts committee;
- Currently assessing and trying to reduce costs of PFI contract obligations;
- Services don't need to be cut to save money e.g. faster treatments, treating more patients and cutting of wasteful practices, would increase revenue;
- Not yet known which services may receive less investment going forward - this would be addressed for future budgets as some processes and services create money whereas others cost money for the hospital to deliver;
- Funding/grant from Government of around £26 million would be needed each year along with generation of new business of the same figure to tackle the deficit;
- Latest census figures were not reflected in these plans, only activity changes as advised by Monitor – more patients did not necessarily mean more funding;
- Limited public funding led to a reliance on PFI models for growth; and
- A separate accountancy firm was reviewing the PFI contract which could result in savings far higher than the cost of employing the firm.

Angus Maitland introduced the section of the report concerning operational performance to July 2012 highlighting that the hospital was on track to comply with Monitor targets including Accident and Emergency treatment and admittance times with further actions in place to ensure its continued compliance. It was further highlighted that one of the radiotherapy machines had been out of action for a period of time thereby reducing the number of patients being treated at the hospital.

Comments and responses to questions included:

- Full reports and information on red rated items would be available by April 2013;
- Routes for Ambulances to the hospital were directed by the Ambulance Trust, not the Hospital Trust;
- Performance on complaints was consistent although faster response times for complaint letters were needed – this would be addressed in October;
- A business case for a new linear accelerator was expected to be submitted in November 2012 which, if successful, could see another machine operational by Spring 2014 at the earliest; and
- Quick turn around times for Ambulances at the Emergency Department meant some Ambulance crews were more inclined to use Peterborough hospital for emergency cases than other nearby hospitals.

John Randall introduced the section of the report concerning Stamford and Rutland Hospital. Highlights included:

- Continuing support for the hospital in Stamford;
- Need to redevelop part of the site;
- Could include a Health and Social Care function in the future;
- Range of services provided from the site to be reviewed with a view to increasing; and

- No decision made on the retention of the operating theatre yet.

Comments and responses to questions included:

- Some patients attend Stamford hospital as a preference over Peterborough;
- A partner, possibly a charitable organisation, would be looked for to assist in any redevelopment to include additional facilities and services in order to increase revenue; and
- Looking to ensure long term future of the hospital.

ACTIONS AGREED

1. Investigate if previous Hospital Board members could return for scrutiny regarding financial decision around PFI;
2. Updated financial strategy to be submitted in early 2013; and
3. Future agenda item needed to assess use of funds from sale of hospital site.

8. Forward Plan

The Commission received the latest version of the Council's Forward Plan, containing key decisions that the Leader of the Council anticipated the Cabinet or individual Cabinet Members would make during the course of the following four months. Members were invited to comment on the Plan and, where appropriate, identify any relevant areas for inclusion in the Committee's work programme.

Comments and responses to questions included:

- Scrutiny on the consultation regarding the proposal to close two care homes would be held on 1 November; and
- The consultation event finished on 15 October 2012.

ACTION AGREED

The Commission noted the Forward Plan.

9. Work Programme

Members considered the Committee's Work Programme for 2012/13 and discussed possible items for inclusion.

The Senior Governance Officer advised that the additional dates on the programme were to advise reporting officers of report submission dates and were not relevant to the work of the Members.

The Senior Governance Officer to the meeting advised Members on the call-in process for executive decisions.

ACTION AGREED

To confirm the work programme for 2012/13 and the Senior Governance Officer to include any additional items as requested during the meeting.

10. Date of Next Meeting

Tuesday 1 November 2012.

The meeting began at 7.00pm and finished at 9.00pm

CHAIRMAN