By: Godfrey Horne MBE - Chairman

To: Health Overview and Scrutiny Committee – 20 September 2010

Subject: Women's and Children's Services at Maidstone and Tunbridge

Wells NHS Trust: Update.

Summary

This report sets out for the Committees information the ongoing events/ dialogue on the implementation of the Women's and Children's Services within the Maidstone and Tunbridge Wells NHS Trust.

Introduction

- 1. (1) This report sets out for the Committee's information the ongoing stakeholder events being conducted by the South East Coast Strategic Health Authority as commissioned by the Secretary of State for Health Andrew Lansley CBE in which he has asked for a report to be presented to him by the end of September 2010 having engaged with stakeholders again on the issues of referral made by the Committee which are subject to local assessment and resolution. (see sub paragraph 2(3) below). Attached as Appendix 1 is the letter of referral dated 24 February and 18 March 2010 which were responded to on 1 July 2010. This appendix also includes my subsequent letter dated 2 August 2010 and the response dated 23 August 2010.
- (2) Mr Lansley's letter made it clear that this further assessment and report should not prejudice the work to open the Pembury Hospital as planned, nor the current work in establishing services there.
- (3) However, the Committee will note that Mr Lansley's letter was silent about the provision of Women's and Children's Services at Maidstone Hospital. There remains considerable objection from the public of Maidstone and the surrounding area on the Women's and Children's Services which will remain at Maidstone Hospital if these proposals were implemented (see sub paragraph 2 below)
- (4) Members of the Committee will be aware that the stakeholder events will culminate in a meeting of a "Co-Design Group" taking place at the Hop Farm, Beltring on 22 September 2010 to which Members of this Committee have been invited to observe or participate.

Progress since the last Meeting of the Committee – 3 September 2010

Public Meeting – 9 September – Maidstone Leisure Centre

2. (1) The Committee noted at its meeting on 3 September 2010 the arrangements made by elected Members of the County Council for Maidstone

and the local Maidstone Borough Council to a general public meeting at the Maidstone Leisure Centre on Thursday 9 September 2010.

- (2) This meeting was a significant event in terms of the process set in motion by Mr Lansley following his letter to me dated 1 July 2010. This meeting to date has been the sole opportunity for members of the general public to express their views directly to the Strategic Health Authority and for the Strategic Health Authority to hear first hand the opposition to the impact on the provision of Women's and Children's Services at Maidstone Hospital. The meeting concluded with the overwhelming view that consultant led Women's and Children's Services should remain at Maidstone Hospital.
- (3) I appreciate that the re-assessment with stakeholders to see local resolution to a number of issues referred to the former Secretary of State for Health Andy Burnham by the Committee was not ideal (through the main summer holiday period) but having observed the general public meeting organised by the elected Members of the two Councils in Maidstone I am personally of the view that local resolution to the Committees points of referral cannot be achieved through this process. Members of the Committee are reminded that the points of referral made by the Committee were transport; growing public concern since the original consultation in 2004; lack of ongoing communication/engagement with the public and with their own staff; the state of the Trusts readiness; lack of integration across the Trust; patient choice; demographics; health inequalities and other decisions relating to these services taken elsewhere across the country. Set out below in tabular form is my assessment of the progress made.

Points of Referral	Progress on Assessment/Local
	Resolution
1. Transport	No change since referral – see appendix 2 the letters and responses I have received from the Highway Agency and the County Council Cabinet Member for Environment, Highways and Waste. Unresolved
Growing .public concern since the original consultation on the reconfiguration in 2004	Public concern continues to grow and is enhanced in Maidstone and the surrounding area Unresolved
3. Lack of ongoing communication with the public and their own staff	Engagement with NHS Stakeholders as defined by the NHS has taken place but no discussion with the general public. The Maidstone Councillors for both the County Council and Borough arranged a general public meeting on 9 September 2010. At this meeting the

Points of Referral	Progress on Assessment/Local
	<u>Resolution</u>
	Chief Executive of Maidstone and
	Tunbridge Wells NHS Trust Glenn
	Douglas made a public commitment
	for independent engagement with all
	staff.
	Ongoing
4. The State of the Trusts readiness	No change
	Unresolved
5. Lack of integration across the	No change
Trust	
	Unresolved
6. Patient choice	No change
	Unresolved
7. Demographics	No change
	-
	Unresolved
8. Health Inequalities	No change
	Unresolved
9. Other Independent Reconfiguration	No change
decisions	
	Unresolved

Answer by the Secretary of State for Health to a question raised by the Helen Grant Member of Parliament for Maidstone and the Weald – 7 September 2010

- (4) The following is summarised from Hansard"If local GPs fail to support reconfiguration plans en masse if say 97% fail to do so- what would be the Secretary of State's response?"
- (5) Mr Lansley "As I said in response to a previous question, one of the four criteria that I set out on 21 May was that reconfigurations must have the support of local general practitioners as the future commissioners of services. To that extent, a reconfiguration that did not have the support of local general practices would not be able to meet that test"

Outcome from the Westminster Hall Debate – 14 September 2010

(6) At the conclusion of the debate Health Minister Anne Milton applauded the campaign to keep Women's and Children's Services at Maidstone Hospital. She added that Mr Lansley will have the final say at the end of September when he receives the local assessment he has requested.

3. New Criteria

- (1) The Committee are also reminded that in his letter to me dated 1 July Mr Lansley asked that four key tests for service change, which are designed to build confidence within the service, with patients and communities be applied:
 - a. support from GP commissioners;
 - b. strengthened public and patient engagement;
 - c. clarity on the clinical evidence base; and
 - d. consistency with current and prospective patient choice.
- (2) It is my conclusion in terms of these four tests:-
- (a) that the re-configuration as far as Maidstone Hospital is concerned does not have the support of GPs in Maidstone or the surrounding area (see subparagraph 2 (4) and (5) above and Appendix 3 letter from the Maidstone Division of the British Medical Association supports this view)
- (b) the surface has barely been touched in terms of public and patient engagement;
- (c) the health economy has set out with clarity the clinical evidence bas for the reconfiguration. However, I would draw the Committees attention to a National Institute for Health and Clinical Evidence (NICE) guidance note "Intrapartum Care" published in September 2007Evidence statement on economic evaluation of planning place of birth" "There is at present insufficient evidence to make a like-for-like comparison of place of birth in terms of clinical effectiveness. Therefore the model (this refers to the Birthing Unit) cannot currently inform recommendations for place of birth based on cost-effectiveness, and better outcomes data are needed to inform future decision making"
-The GDG was unable to determine whether planning birth in a non-obstetric setting is as safe as birth in an obstetric unit. This was because the data from the included studies consistently showed a non-significant increase in perinatal mortality (including perinatal imortality that is directly related to intarpartum events) in non-obstetric settings.

Co-Design Event – 22 September 2010

4. This event to which all Members of this Committee have been invited to attend and participate is a significant event before the response for Mr Lansley is prepared by the South East Coastal Strategic Health Authority. Attached as Appendix 4 is a letter from Julia Ross, Director of Strategy and Communications, NHS West Kent and my subsequent reply.

Conclusion.

5. (1) Members of the Committee have welcomed the opportunity of attending the stakeholder events which presented a challenge for the Health economy to arrange through the summer holiday period.

- (2) Achieving local resolution to the points of referral made by the HOSC has not proved possible and opposition to the proposals and the impact on the provision of Women's and Children's Services at Maidstone hospital has continued to grow.
- (3) The Health Overview and Scrutiny Committee has considered very carefully the four new criteria which the Secretary of State has asked all reconfigurations (including this one) to address. The Committee has taken into account the views of GP commissioners in the Maidstone area who are overwhelmingly opposed to the removal of a consultant led maternity and paediatric services at Maidstone Hospital.
- (4) Many of the original points of referral by the Committee remain unresolved and frankly cannot be resolved locally. For that reason my recommendation to the Committee is that the Committee should resolve to:-
- (a) Insist that this report and the minute of this meeting and the views of the Committee are included as an unaltered addendum to the report the South East Coast Strategic Health Authority is preparing for the Secretary of State for Health;
- (b) in a letter I will prepare separately for the Secretary of State for Health request that he instigates a full review of this reconfiguration by the Independent Reconfiguration Panel or takes the decision himself to resolve the issue for the residents of Kent and in particular Maidstone and the surrounding area.
- (c) that this Committee (which serves all the residents of Kent) supports the residents of Maidstone and the surrounding area for the retention of consultant led Women's and Children's Services at Maidstone Hospital and asks that a decision is taken as soon as possible in the best interests of the people of Kent.

Paul D Wickenden - Overview Scrutiny and Localism Manager