KENT AND MEDWAY NHS JOINT OVERVIEW AND SCRUTINY COMMITTEE

Friday, 3rd November, 2023

10.00 am

Council Chamber, Sessions House, County Hall, Maidstone









AGENDA

KENT AND MEDWAY NHS JOINT OVERVIEW AND SCRUTINY COMMITTEE

Friday, 3rd November, 2023, at 10.00 amAsk for:Kay GoldsmithCouncil Chamber, Sessions House, CountyTelephone:03000 416512Hall, MaidstoneCouncil Chamber, CountyCouncil Chamber, County

Membership

Kent County Council	Mr P Bartlett (Chair), Mr N Chard, Ms K Constantine, and Ms S Hamilton
Medway Council	Cllr S Campbell, Cllr D McDonald, Cllr S Shokar and Cllr D Wildey (Vice-Chair)

UNRESTRICTED ITEMS

(During these items the meeting is likely to be open to the public)

Item

- 1. Membership
- 2. Apologies and Substitutes
- 3. Election of Chair
- 4. Election of Vice-Chair
- 5. Declaration of interests by Members in items on the Agenda for this meeting
- 6. Minutes from meeting held on 6 December 2022 (Pages 1 4)
- 7. East Kent Transformation Programme (Pages 5 10)

Timings*

EXEMPT ITEMS

(At the time of preparing the agenda there were no exempt items. During any such items which may arise the meeting is likely NOT to be open to the public)

*Timings are approximate

Benjamin Watts General Counsel 03000 416814

26 October 2023

KENT AND MEDWAY NHS JOINT OVERVIEW AND SCRUTINY COMMITTEE

MINUTES of a meeting of the Kent and Medway NHS Joint Overview and Scrutiny Committee held in the Council Chamber, Sessions House, County Hall, Maidstone on Tuesday, 6 December 2022.

PRESENT: Mr P Bartlett (Chairman), Cllr D Wildey (Vice-Chairman) and Mr N J D Chard

PRESENT VIRTUALLY: Ms K Constantine, Ms S Hamilton

IN ATTENDANCE: Mrs K Goldsmith (Research Officer - Overview and Scrutiny)

UNRESTRICTED ITEMS

57. Declaration of interests by Members in items on the Agenda for this meeting

(Item 2)

Mr Chard declared that he was a Director of Engaging Kent.

58. Minutes from the meeting held on 26 April 2022

(Item 3)

RESOLVED that the minutes from the meeting held on 26 April 2022 were a correct record and they be signed by the Chair.

59. Specialist Vascular Services Review

(Item 4)

Present for this item: Su Woollard, Transformation Delivery Manager (Vascular), NHS England, Dr Christopher Tibbs, Medical Director, NHS England, Simon Brooks-Sykes, Associate Director Strategy and Population Health, K&M NHS, Tracy Rouse, Director Strategic Change and Population Health, K&M NHS, Nicky Bentley, Director of Strategy and Business Development, EKHUFT, Tom Lovegrove-Bacon, Senior Strategic Development Manager, EKHUFT

Virtually present for this item: Dr Alison Davis, Chief Medical Officer, Medway NHS Foundation Trust and Sabahat Hasson, Communication and Engagement Lead, NHS England.

- 1. The Chair welcomed the guests and asked them to introduce themselves. The Committee then turned to questions.
- 2. A Member asked whether outcomes had improved since elective and emergency services for Abdominal Aortic Aneurysm (AAA) had moved to Kent and Canterbury Hospital in January 2020. Dr Tibbs explained that there had not been enough patients treated to adequately respond, but they were

confident that the service had improved as evidenced by a reduced length of stay, a reduced number of people on call, and efficiencies.

- 3. A Member asked how the consultation process had engaged with hard-toreach groups, such as the Gypsy, Roma and Traveller (GRT) community. Mr Brooks-Sykes summarised the types of consultation methods used during the 6-week period. These included online surveys, written information, focus groups and workshops. Professional support was provided by an independent organisation who helped reach a diverse range of people, including those who had accessed vascular and related services in the past. One to one interviews had also been conducted along with two focus groups.
- 4. Dr Davis gave an example of a direct action that had occurred as a consequence of concerns raised during the public consultation. Transport had been raised as a concern which led to a patient transport group being established for patients and families.
- 5. The Committee asked to be provided with a copy of the Equality Impact Assessment (EqIA).
- 6. Ms Hasson confirmed a list of the communities and organisations engaged during the public consultation were detailed in the consultation report.*
- A Member was concerned about the timing of the staff consultation, to be held 12 December – 10 January 2023, and questioned whether it should be delayed until later in January. Dr Davis provided assurance that staff had been engaged throughout the journey and were aware, and supportive, of the plans.
- 8. Medway Foundation Trust was gathering information to understand which staff would be affected by the TUPE process. NHS colleagues were united in their conviction that any further delay would not be welcomed by staff. In addition, Dr Tibbs explained that Medway Hospital's Vascular services had been unsustainable for some time and any further delay would require additional locum staff to maintain a required level of service.
- 9. A Member raised concerns around the impact of industrial action and bank holidays on the statutory timetable for staff consultation. Dr Davis explained the Trust would take into account how industrial action would effect employees and that it would be carried out in a kind and respectful way. She also confirmed that bank holidays were not included in the statutory period, and that the Trust would absolutely meet its statutory duties.
- 10. The Chair echoed the requirement for the staff consultation and TUPE process to follow the legislation in relation to the impact of industrial action.

- 11. Dr Davis confirmed not all Medway staff would be affected by the move as some services were staying at the Medway site. She also said there would be wider opportunities once the centre of excellence was established.
- 12. A Member voiced their concern about a further service being reduced at Medway Hospital but felt that it was the right move for Vascular services. They also welcomed the comprehensive consultation that had been undertaken.
- 13. Dr Davis confirmed that patients taken care of under a network benefited from better outcomes. Data would be collected, benchmarks compared, and best practice shared to evidence the improved quality of service.

RESOLVED that

- the Committee supports the decision of the Kent and Medway Integrated Care Board (ICB) and Specialist Commissioning at NHS England regarding the interim solution for the delivery of vascular services in East Kent and Medway
- ii) the relevant NHS bodies be asked to consider that the TUPE consultation is carried out according to statute whilst taking into account industrial action

**post meeting note*: A list of stakeholder and community organisations contacted is listed in Appendix 7 of the attached document: <u>Vascular - Consultation report -</u> <u>Appendices.pdf (kent.gov.uk)</u> This page is intentionally left blank

- By: Kay Goldsmith, Scrutiny Research Officer to the Kent Health Overview and Scrutiny Committee
- To: Kent and Medway NHS Joint Overview and Scrutiny Committee, 3 November 2023

Subject: East Kent Transformation Programme

Summary: This report invites the Kent and Medway NHS Joint Overview and Scrutiny Committee to consider the information provided by NHS Kent and Medway.

1) Introduction

- a) The East Kent Transformation Programme was established to improve outcomes for patients, make East Kent Hospitals an exciting place to work and provide modern, fit for purpose hospitals.¹
- b) Proposals were shortlisted to two options, which are:
 - i. Two site emergency department model with William Harvey Hospital as the Major Emergency Centre
 - ii. One site emergency department model with Kent and Canterbury Hospital as the Major Emergency Centre
- c) Detailed in a Pre-Consultation Business Case (PCBC), both options have been assessed as requiring the same level of financial investment from the NHS (£460 million), but the second option includes private investment.

2) Previous scrutiny

- a) The Committee received its last formal update in April 2022, when it was informed about the application for capital investment of £460 million that had been submitted to the Department of Health and Social Care (DHSC) under the Government's New Hospital Programme October 2021. Whilst a decision was pending, the project team were undertaking market testing around the two options to ensure both were viable before public consultation commenced.
- b) Local clinicians were clear that a successful capital application was required before any formal consultation took place.
- c) In May 2023, the Government announced the names of the five hospitals that would be rebuilt under the Programme – East Kent was not included on the list.

¹ Kent and Medway Integrated Care Systemage 5 <u>https://www.kmhealthandcare.uk/transformation-projects/east-kent</u>

d) The NHS has been invited to attend today's meeting and provide an update on the next steps following the unsuccessful funding bid.

3) Joint Scrutiny

- a) Regulation 23 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 requires relevant NHS bodies and health service providers to consult a local authority about any proposal which they have under consideration for a substantial development or variation in the provision of health services in the local authority's area. This obligation requires notification and publication of the date on which it is proposed to make a decision as to whether to proceed with the proposal and the date by which Overview and Scrutiny may comment.
- b) The Medway Health and Adult Social Care Overview and Scrutiny Committee (HASC) considered the proposals relating to Transforming Health and Care in East Kent on 16 October 2018. They determined that the reconfiguration constituted a substantial variation in the provision of health services in Medway.
- c) The Kent Health Overview and Scrutiny Committee (HOSC) considered the item on 21 September 2018. The Committee also deemed the changes to be a substantial variation in the provision of health services in Kent.
- In line with Regulation 30 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013² the Kent and Medway NHS Joint Overview and Scrutiny Committee (JHOSC) the JHOSC may:
 - make comments on the proposal;
 - require the provision of information about the proposal; and
 - require the relevant NHS bodies and health service providers to attend before it to answer questions in connection with the consultation.
- e) The legislation makes provision for local authorities to report a contested substantial health service development or variation to the Secretary of State. This only applies in certain circumstances and the local authority and relevant health body must take reasonable steps to resolve any disagreement in relation to the proposals.
- f) The JHOSC may consider whether the reconfiguration should be referred to the Secretary of State under regulation 23(9) of the 2013 Regulations. The

² When NHS bodies and health services consult more than one local authority on a proposal which they have under consideration for a substantial development of or variation in the provision of health services in the local authorities' areas, those local authorities must appoint a Joint Overview and Scrutiny Committee (JHOSC) for the purposes of the consultation.

Committee must recommend a course of action to the relevant Overview and Scrutiny Committees.

g) The JHOSC cannot itself refer a decision to the Secretary of State. This responsibility lies with the Kent County Council HOSC and/or the Medway Council HASC.

4) Recommendation

a) The JHOSC is invited to note the report.

Background Documents

Kent County Council (2018) '*Health Overview and Scrutiny Committee* (27/04/2018)', https://democracy.kent.gov.uk/ieListDocuments.aspx?Cld=112&Mld=7846&Ver=4

Kent County Council (2018) '*Health Overview and Scrutiny Committee (08/06/2018)*', https://democracy.kent.gov.uk/ieListDocuments.aspx?Cld=112&Mld=7918&Ver=4

Kent County Council (2018) '*Health Overview and Scrutiny Committee (20/07/2018)*', https://democracy.kent.gov.uk/ieListDocuments.aspx?Cld=112&Mld=7919&Ver=4

Kent County Council (2018) 'Health Overview and Scrutiny Committee (21/09/2018)', https://democracy.kent.gov.uk/ieListDocuments.aspx?Cld=112&Mld=7921&Ver=4

Medway Council (2018) 'Health and Adult Social Care Overview and Scrutiny Committee (16/10/2018), <u>https://democracy.medway.gov.uk/mgAi.aspx?ID=19800</u>

Kent County Council (2020) 'Kent and Medway Joint NHS Health Overview and Scrutiny Committee' (06/02/2020), https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=757&MId=8624&Ver=4

Kent County Council (2020) 'Kent and Medway Joint NHS Health Overview and Scrutiny Committee' (28/09/2020), https://democracy.kent.gov.uk/ieListDocuments.aspx?Cld=757&Mld=8675&Ver=4

Kent County Council (2021) 'Kent and Medway Joint NHS Health Overview and Scrutiny Committee' (17/03/2021), https://democracy.kent.gov.uk/ieListDocuments.aspx?Cld=757&Mld=8769&Ver=4

Kent County Council (2021) 'Kent and Medway Joint NHS Health Overview and Scrutiny Committee' (02/12/2021), https://democracy.kent.gov.uk/ieListDocuments.aspx?Cld=757&Mld=8940&Ver=4

Kent County Council (2022) 'Kent and Medway Joint NHS Health Overview and Scrutiny Committee' (26/04/2022), https://democracy.kent.gov.uk/ieListDocuments.aspx?Cld=757&Mld=9001&Ver=4 Item 7: East Kent Transformation Programme

Contact Details

Kay Goldsmith Scrutiny Research Officer, KCC <u>kay.goldsmith@kent.gov.uk</u> 03000 416512



East Kent Transformation Programme

Briefing for Joint Health Overview and Scrutiny Committee

This briefing provides an update on plans to transform hospital services in East Kent following the decision earlier this year not to include East Kent Hospitals in the next round of national NHS funding.

Background

In 2017 the NHS in East Kent proposed two potential options to transform local hospital services, following extensive engagement with clinicians, patients, the public, and our partners. A capital allocation was required before the NHS could proceed to public consultation.

The National Audit Office identified that East Kent Hospitals was among seven trusts removed from a list used to choose 40 new hospitals announced in October 2020¹. When applications opened for the next round of schemes for investment from the New Hospitals Programme (NHP) in July 2021, the Trust submitted an expression of interest for £460 million to fund either of the two transformation options. A detailed pre-consultation case detailing these options was approved by NHS England in August 2021 and identified as the South East region's priority investment scheme.

The Trust was informed in May 2023 that it had not been selected as one of the next schemes to receive NHP funding. The Department of Health and Social Care received 128 expressions of interest from 100 trusts, including East Kent Hospitals. The five schemes chosen all carried significant safety risks related to Reinforced Autoclaved Aerated Concrete (RAAC).

Recent investments to improve services

In recent years the Trust has successfully secured targeted investment for new and improved buildings to improve services including:

- £30 million to expand the emergency departments at Queen Elizbeth the Queen Mother (QEQM) and William Harvey hospitals, due to complete later this year;
- £14m for a new orthopaedic surgical centre at Kent and Canterbury Hospital, with four new operating theatres and renovations to wards, opened July 2021;
- £16m for a new 24-bed critical care unit at William Harvey Hospital, opened April 2022;
- £5m to develop the county's first Community Diagnostic Centre at Buckland Hospital to improve access to diagnostic tests and scans, commencing late 2021;
- £5m to expand interventional radiology services at Kent and Canterbury Hospital, with a new theatre and patient facilities opening in May 2022, followed by a newly renovated theatre opening in March 2023.

Current position and next steps

Despite these significant improvements for patients, the lack of NHP funding required to transform services for the long term means that the Trust faces significant clinical and infrastructure safety risks. These will continue to manifest and accelerate without significant new investment to address them. The investment required is significantly greater than the Trust's limited capital resources.

In late 2021 the Trust calculated that at least £211m capital investment was needed maintain safe services over the next five years. This included essential upgrades to our aging hospital estate, some

¹ Progress with the New Hospital Programme. <u>National Audit Office</u>, 17 July 2023.



buildings dating back to the 1930s, and to replace medical devices and equipment that are essential for safe patient care. The Trust is undertaking an updated assessment of the costs associated with critical infrastructure and backlog maintenance, and the emerging and potential future risks.

Maternity

The Trust is seeking £123 million to build new maternity units at QEQM and William Harvey hospitals that meet modern building standards, provide patients and families with a dramatically improved environment to give birth in, and for staff to work in. The birthing rooms at both hospitals are too small to fit essential equipment and the number of staff required in emergency situations. The rooms also lack ensuite facilities for families, or any space for clinical teams to train. At QEQM an additional obstetric theatre is required as currently, if the unit's theatre is busy, patients are taken through the hospital to its main theatres.

External investment is required to deliver this much-needed transformation of both units as without it, maternity alone would consume almost all of the Trust's capital allocation over the next five years (£130m total), preventing investment to address critical infrastructure risks and replacing aging medical equipment.

NHS partners across East Kent, Kent and Medway and the South East region are working together closely to identify sources of additional funding to deliver these improvements for patients and staff.

East Kent Health and Care Partnership Estates Strategy Group

Kent and Medway Integrated Care System is made up of four Health and Care Partnerships whose role it is to bring together hospitals, community care, mental health, GPs, social care, ambulance, local councils and the voluntary sector to improve the health and wellbeing of people living in east Kent. The footprint for East Kent Health and Care Partnership (HCP) includes East Kent Hospitals.

Building a better integrated infrastructure is a key enabler to improving health and care service delivery. East Kent HCP, along with the three other HCPs in Kent and Medway, has been tasked with producing its own Estates Strategy by December 2023. The strategy is expected to include high level plans for the next five years. It will be helpful, where appropriate, to look at a longer period and to base decision on long term population need planning.

East Kent HCP has autonomy to draft the Estates Strategy according to the local population health and care needs. The aim of this work is to set up a series of engagement events with key stakeholders across East Kent including Primary Care, Acute, Community Trusts, Mental Health, Kent Health and Social Care, Voluntary Sector and District Borough Councils to work with system partners to ensure the strategy is co-produced and local feedback and partnership working is achieved. Additionally, the ambition is to design a strategy that can be jointly implemented by all system partners.

The final draft Estates Strategy will go through the Health and Care Partnership Governance group "East Kent Estates Strategy Group" for formal sign off and this will be shared with Kent and Medway ICB Estates team. The priorities that are identified within the Estates Strategy will set out a vision and ambition for estates transformation for the East Kent geography and will provide a foundation for managing business cases for capital investment for the future.

Ends.