

KENT COUNTY COUNCIL

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 Thursday, 2 December 2021.

PRESENT: Cllr D Wildey (Chair), Cllr T Murray, Cllr W Purdy, Mr P Bartlett (Vice-Chairman), Mr N J D Chard and Ms S Hamilton

ALSO PRESENT:

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

UNRESTRICTED ITEMS

43. Membership

(Item 1)

RESOLVED that the change in KCC membership following the May election be noted.

44. Election of Chair

(Item 3)

Mr Bartlett proposed, and Cllr Purdy seconded, that Cllr Wildey be elected Chair of the Committee. There were no other nominations.

RESOLVED that Cllr Wildey be Chair of the Committee.

45. Election of Vice-Chair

(Item 4)

Cllr Wildey proposed, and Mr Chard seconded, that Mr Bartlett be elected Vice-Chair of the Committee. There were no other nominations.

RESOLVED that Mr Bartlett be Vice-Chair of the Committee.

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

(Item 5)

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

47. Minutes from the meeting held on 17 March 2021

(Item 6)

RESOLVED that the minutes from 17 March 2021 meeting were correctly recorded and that they be signed by the Chair.

48. East Kent Transformation Programme

(Item 7)

In attendance for this item: Rachel Jones, Executive Director of Strategy and Population Health, K&M CCG, Simon Brookes-Sykes, Associate Director, East Kent Programme, K&M CCG, Jonathan Purday, Lead South-East Vascular Network, Nicky Bentley, Director of Strategy & Business Development, EKHUFT

1. The Chair drew the Committee's attention to a draft letter to the Secretary of State for Health and Social Care, attached to the agenda as Appendix A. The Committee agreed that the letter should be signed by Mr Bartlett (Chair of the Committee when the letter was drafted) and sent after the meeting.
2. Rachel Jones introduced the paper and ran through the key points from the agenda paper. She explained that whilst the Pre-Consultation Business Case (PCBC) had been through the Kent & Medway CCG and NHS England assurance process, the options could not continue to public consultation until capital funding was secured. In July 2021, the Department of Health & Social Care had invited expressions of interest from NHS Trusts wishing to be considered for inclusion in the next wave of the Health Infrastructure Plan (HIP). East Kent Hospitals University NHS Foundation Trust (EKHUFT) submitted a bid in September 2021, but results were not expected until April/ May 2022.
3. Members of the Committee asked whether the proposals would help to address health inequalities in the area, and whether they were compatible with the "levelling up" agenda. Ms Jones acknowledged that there were significant inequalities, not just health based, across Kent and Medway. Investment was undertaken with the intention of reducing inequalities, though this was often in relation to a specific disease area (such as stroke). She explained that as part of her role she was the lead for Population Health in the county. She said that partners across sectors needed to work together to tackle inequalities. For example, there was a mismatch between children leaving school and struggling to find work, whilst hospitals were calling out for staff. The Population Health Development Programme had been created to address those problems. The East Kent Transformation Programme was one part of that journey.
4. Ms Jones made clear that both options under the proposal would have to be viable for implementation. Financial diligence was needed for both, and the expected costs were being looked at again in light of the impact of covid-19 on infrastructure projects. Both options required a similar level of investment (around £460 million).
5. Ms Jones believed the decisions around which 8 bids should be included in the latest HIP wave would be made within the highest levels of the NHS. It

was vital that the county of Kent was visible to decision makers, and all parties united on their desire to improve services in East Kent under one of the two options. If East Kent was not successful with its HIP bid, there was no plan B.

6. Members were keen to support the bid and felt the letter to the Secretary of State was one way of achieving that. They supported the proposal as it would benefit the residents and families of those in Kent and Medway.
7. A member expressed disappointment that the poor state of William Harvey Hospital's buildings was not made clear during the Stroke Review and questioned whether the success of the HASU at William Harvey would be dependent on the capital funding from the HIP. Ms Jones explained that was not the case, as the HASU investment came with £32m and would deliver a new stroke unit, separate to the current estate. For Vascular services, East Kent had invested their own capital money to manage the additional capacity. Estates were a national problem for health services.
8. Members asked about the recruitment and retention of health staff, which would be vital to the success of either option. Ms Jones accepted that staffing was a national cause for concern, and whilst the options under the proposal would not solve the issue, they would be a step in the right direction as working in East Kent would become more attractive (through providing modern facilities in which to work and consolidating specialisms would allow for improved rotas and working conditions).
9. Members accepted the argument that centralising specialist staff resulted in improved outcomes for patients. There was concern though that there was a national shortage of some specialists, which was not a new phenomenon. There was also concern that these specialists were being directed away from Medway who would also like to see improved recruitment and job offerings in the local area.
10. Members thanked the guests for their attendance and report, and Members were in agreement that the HIP bid provided an opportunity for the whole county.
11. RESOLVED that
 - i. The report be noted.
 - ii. The letter of support (Appendix A) be sent to the Secretary of State at the conclusion of the meeting.

49. Date of next meeting: to be confirmed

(Item 8)

- (a) **FIELD**
- (b) **FIELD_TITLE**