

## KENT COUNTY COUNCIL

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### HEALTH OVERVIEW AND SCRUTINY COMMITTEE

MINUTES of a meeting of the Health Overview and Scrutiny Committee held in the Council Chamber, Sessions House, County Hall, Maidstone on Monday, 16 December 2019.

PRESENT: Mr P Bartlett (Chairman), Mr A H T Bowles, Mr N J D Chard, Ms K Constantine, Mr D S Daley, Mrs L Game, Mr P W A Lake, Ms D Marsh, Mr K Pugh (Vice-Chairman), Mr I Thomas, Cllr J Howes, Cllr M Rhodes, Mr B J Sweetland and Mr A M Ridgers

ALSO PRESENT: Mr S Inett, Cllr R Diment and Cllr A Downing

IN ATTENDANCE: Mrs K Goldsmith (Research Officer - Overview and Scrutiny) and Dr A Duggal (Deputy Director of Public Health)

#### UNRESTRICTED ITEMS

##### **1. Membership**

*(Item 1)*

The Clerk informed the Committee that Mrs Chandler was no longer a Member of the Committee.

##### **2. Election of Chairman**

*(Item 3)*

- 1) Mr Chard nominated Mr Bartlett. He was seconded by Mr Pugh. There were no further nominations.
- 2) RESOLVED that Mr Bartlett be elected Chair of HOSC.

##### **3. Urgent item: Election of Vice-Chair**

*(Item 4)*

- 1) As a result of Mr Bartlett being elected to the position of Chair, the Chair agreed that this urgent item be added to the Agenda.
- 2) Mr Bartlett nominated Mr Pugh. He was seconded by Mr Chard. There were no further nominations.
- 3) RESOLVED that Mr Pugh be elected Vice-Chair of HOSC.

##### **4. Declarations of Interests by Members in items on the Agenda for this meeting.**

*(Item 5)*

Mr Chard declared a Disclosable Pecuniary Interest as a Director of Engaging Kent.

## **5. Minutes from the meeting held on 19 September 2019**

*(Item 6)*

RESOLVED that the Committee agreed that the minutes from 19 September 2019 were correctly recorded, and that they be signed by the Chair.

## **6. North Kent CCGs - Urgent Care Review Programme - Dartford, Gravesham and Swanley CCG**

*(Item 7)*

- 1) The Chair welcomed Cllr Downing and Cllr Diment from Bexley Council. They had been invited to attend and participate in the meeting because the Bexley health scrutiny committee had deemed the DGS CCG (Dartford, Gravesham and Swanley Clinical Commissioning Group) urgent care proposals to be a substantial variation of service for their residents. This would be the final opportunity to have their views taken into consideration in the CCG's Decision-Making Business Case.
- 2) Kent County Council's full Council would be considering an item at its meeting on 17 December 2019 on the establishment of a Kent and Bexley Joint Health Overview and Scrutiny Committee (JHOSC). The JHOSC would then consider the CCG Governing Body's decision in late January.
- 3) Dr MacDermott and Ms Adler introduced the item and provided a summary, making especial reference to the public consultation that had taken place. The CCG had received almost 16,500 responses to the survey, many of which were received in the final 72 hours.
- 4) The public consultation demonstrated a preference for option 1 (an Urgent Treatment Centre (UTC) at Gravesham Community Hospital). Option 2 was for a UTC at Darent Valley Hospital.
- 5) Consistent themes throughout the consultation related to ease of access, namely: proximity to site; amount of traffic; and parking availability. It was also clear that communication would be needed with whichever option was chosen, to ensure members of the public knew where to go with different medical needs.
- 6) Ms Adler explained that the next steps would be for the CCG Governing Body to consider the Decision-Making Business Case on 16 January 2020 and make their final decision (the exact timing would be confirmed and circulated to Members of the Committee). That decision would be communicated with the Bexley and Kent JHOSC in late January. There was a hope that the new urgent care model would be in place from July 2020.
- 7) Cllr Diment explained that Bexley's concerns were around the cross-boundary movement of patients as a result of any change to current services. If option 1 were implemented, he was concerned that residents in the east of the county would use the UTC at the Queen Mary's Hospital in Bexley, which was already very busy.

- 8) Ms Adler explained that the CCG had hoped to carry out some intensive work within the Bexley boundary in order to better understand how people access healthcare services and what the impact may be on Bexley services should a Kent service close or relocate. Unfortunately, it had not been possible to do that work before the end of the public consultation. The CCG were however carrying out survey work at Bexley health services on 16 and 17 December as well as in the new year. The information gathered would feed into the Decision-Making Business Case.
- 9) The CCG had analysed what had happened in the past when Darent Valley Hospital had been under pressure and there was no correlation with those patients travelling west to access Bexley services. Dr MacDermott stated that residents in West Kent tended to go south to the Sevenoaks Community Hospital.
- 10) In response to the question about patient flow, it was clarified that Medway Council had not deemed the changes to be a substantial variation of service for their residents. They were not therefore involved in the JHOSC arrangements for this issue.
- 11) Both options 1 and 2 would see the closure of the White Horse walk-in centre (at Fleet Health Campus). Dr Sewell explained that the contract had expired, and an interim 1-year contract was currently in place. That would expire in June 2020. There was no intention to close Fleet Health Campus. Other services were currently available at the site and would continue to be so.
- 12) Members questioned what would happen in the interim between the walk-in clinic closing and the new UTC model being implemented. Dr Sewell explained the walk-in centre could easily be relocated to Gravesham Community Hospital, and there was room within the Minor Injuries Unit there. There would however be additional patients at the Hospital. The challenge was for GPs to see more patients in order to reduce the demand on the walk-in centre.
- 13) Dr Sullivan, local member for Northfleet and Gravesend West, addressed the Committee. She felt that the walk-in centre had had a positive impact on the local community. She was concerned around access issues, especially when Northfleet became gridlocked, as it often did. The upcoming Ebbsfleet development would also see an increase in population, and additional health care services would be needed to meet their needs. She argued that the correct infrastructure must be in place before any changes were made. She reiterated the public preference for option 1 (as demonstrated in the public consultation).
- 14) Dr MacDermott agreed that access to healthcare services was vital. There were several workstreams underway, including the expansion of 111 services and expanding access to GPs. It was accepted that transport and accessibility were real issues. For example, in Gravesend Rural there were no bus connections to Gravesend on Sundays or Bank Holidays. The lack of accessibility was a wider issue and had to be addressed by many organisations.

- 15) Ms Adler explained that there been no final decision made yet in relation to the urgent care options, but that the preferred model would take into account all the information gathered during consultation exercises. The UTC model was recognised and supported by NHS England.
- 16) The Chairman thanked the guests for attending the Committee, and their work on the public consultation. He summarised the Committee's views for inclusion in the final Decision-Making Business Case document.
- 17) RESOLVED that the report be noted and asks that DGS CCG take the following views into account in their Decision-Making Business Case.

The Committee highlighted:

- concern around parking and public transport
- questions as to whether the solution would properly accommodate the rapid recent and future growth of Ebbsfleet and North Bexley
- concerns as to whether there were adequate staffing levels and provision of consultants at the proposed sites
- access to wider services at Darent Valley Hospital
- the need to retain walk in GP services
- the wider impact on both Erith and Queen Mary Hospitals in Bexley
- it had noted the preference for option 1 from the public consultation

## **7. Dermatology Services update**

*(Item 8)*

- 1) Mr Jeffery began by highlighting four brief points:
  - a. DMC Healthcare took over the running of Dermatology Services from Medway Foundation Trust (MFT) in April 2019. The previous service had been failing and needed significant work put into it.
  - b. The initial backlog focus had been on cancer services and cancer patients, and this appeared to have been sorted.
  - c. The second focus was on dealing with the backlog transferred from MFT, which had also been rectified.
  - d. The final focus was on the waiting times being experienced by current patients which the CCG recognised were too high.
- 2) A Member asked what the Tele-Dermatology app was, as referred to on page 30 of the agenda. Mr Jeffery explained that it was a smart phone application that allowed nursing staff to photograph skin and share that with consultants in order to reduce waiting times.
- 3) Mr Inett explained that Healthwatch Kent had not received any feedback about the service since July. There had been a recent public engagement event with DMC Healthcare that had been well received.
- 4) Mr Inett and Mr Jeffery agreed that March 2020 was a realistic timeframe for the Service to have stabilised. At that time, Healthwatch Kent and Healthwatch Medway would undertake a piece of work to evaluate the Service, and Mr Inett offered to bring this to HOSC once complete (likely in summer 2020).

- 5) RESOLVED that the report be noted, and Medway CCG return to HOSC after summer 2020 with an update on performance, accompanied by the service evaluation by Healthwatch Kent and Healthwatch Medway.

**8. Re-commissioning of Community Dental Care (written update)**  
(Item 9)

RESOLVED that the response from NHS England South East be noted.

**9. Work Programme**  
(Item 10)

- 1) The Chair confirmed that the SECAMB item in March will include an update on 111 Services.
- 2) Mr Thomas requested that pharmacy services within hospitals be looked into (in relation to the time taken to dispense drugs to those who have been discharged but still occupy space in a ward whilst they wait for those drugs). The Chair suggested asking relevant acute Trusts this question when they attended HOSC for other items.
- 3) Mr Inett requested that Healthwatch Kent be involved in the Wheelchair Services item on 29 January, which the Chair agreed to.
- 4) RESOLVED that the work programme be noted.

**10. Future meeting dates**  
(Item 11)

RESOLVED that the future meeting dates be noted.

**11. Date of next programmed meeting – Wednesday 29 January 2020**  
(Item 12)