

Item 4: Urgent Care Review Programme – Dartford, Gravesham & Swanley

By: Kay Goldsmith, Scrutiny Research Officer

To: Health Overview and Scrutiny Committee, 29 January 2020

Subject: North Kent CCGs: Urgent Care Review Programme – Dartford, Gravesham and Swanley CCG

Summary: **This has been deemed a substantial variation of service by both Kent HOSC and Bexley Council's COSC.**

This report invites the Health Overview and Scrutiny Committee to consider the information provided by NHS Dartford, Gravesham and Swanley.

It provides background information which may prove useful to Members.

1) Introduction

- a) Dartford, Gravesham and Swanley Clinical Commissioning Group (DGS CCG) made the Kent HOSC aware of their Urgent Care Review programme in 2014. In line with NHS England requirements, the CCG proposes to bring urgent care services, currently located across a number of sites, together under a single Urgent Treatment Centre (UTC) model of care.
- b) A public consultation ran from 12 August to 4 November 2019. The proposals as presented were to create a new UTC at either Gravesham Community Hospital or Darent Valley Hospital by autumn 2020.

2) Previous monitoring by HOSC

- a) The Kent HOSC has received regular updates from DGS CCG on its Urgent Care Review programme since 2014. The Committee determined that the proposed changes amounted to a substantial variation to the local health service in January 2019.
- b) Bexley Council's Communities Overview and Scrutiny Committee (COSC) also deemed the proposed changes to be a substantial variation to health services for residents of Bexley.
- c) In line with health scrutiny legislation, Kent County Council and Bexley Council formed a joint health overview and scrutiny committee (JHOSC) for the purpose of health scrutiny consultation with DGS CCG.
- d) Due to timescales, the Kent HOSC received a report from DGS CCG on the outcome of the public consultation at its meeting on 16 December 2019. Two Councillors from Bexley Council also attended and contributed to the

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discussion. That meeting was the final opportunity for Kent and Bexley Councillors to have their views fed into the CCG's Decision-Making Business Case prior to the NHS making a decision

e) Following its discussion on the 16 December, the Committee 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*

f) The CCG Governing Body considered the Decision-Making Business Case on 16 January 2020 and made their final decision.

g) Immediately prior to this HOSC meeting on 29 January 2020, the Bexley and Kent JHOSC will have met to consider the decision of the CCG Governing Body.

3) Next Steps

a) The Terms of Reference of the Bexley and Kent Urgent Care Review Joint Health Overview and Scrutiny Committee required it to consider whether the decision of the DGS CCG on 16 January 2020 should be referred to the Secretary of State. The decision of the Joint Committee will be presented verbally to the HOSC at its meeting on 29 January 2020.

b) As the power of referral was not delegated to the JHOSC, the Kent HOSC is not bound by the JHOSC's recommendation and can determine its own response to the CCG's final decision. The Committee may support the decision, not support the decision, and/or comment on the decision.

c) As set out in the Protocol for the Health Overview and Scrutiny Committee in the KCC Constitution, a substantial variation of service may only be referred to the Secretary of State for Health where one of the following applies:

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- i. The consultation with the HOSC on the proposal is deemed to have been inadequate in relation to content or time allowed;
 - ii. The reasons given for not consulting with the HOSC on a proposal are inadequate; or
 - iii. The proposal is not considered to be in the interests of the health service of the area.
- d) If the HOSC does not feel that any of the above apply to the matter under discussion, it will not be able to make a legitimate referral. It will still be able to monitor the implementation of the service and make comments and recommendations directly to the relevant health provider or commissioner.
- e) If the HOSC believes that one of the reasons above applies, it cannot make a final determination at this meeting. It must agree which of the above grounds provisionally apply and communicate this to the NHS in writing as soon as possible along with the date it will meet to make its final determination. The NHS must be given time to consider and respond to the Committee's decision.
- f) The Committee will meet to consider the NHS response and any other discussions that have taken place, prior to making its final determination.
- g) Any referral to the Secretary of State must contain the following:
 - i. Full evidence of the case for referral;
 - ii. Evidence that all other options for resolution have been explored, along with all additional requirements for the submission of a referral required by legislation and statutory guidance.
 - iii. Where the referral is on the grounds that the Committee believes the proposal is not in the interests of the health service of the area, a summary of the evidence considered must be provided, including any evidence of the effect or potential effect of the proposal on the sustainability or otherwise of the health service of the area.
- h) A decision to support the CCG Governing Body decision, or support with qualifications and/or comments could be made at this meeting.

4. Recommendation

The Committee is asked to consider the decision of the DGS CCG Governing Body on 16 January 2020, along with the recommendation(s) of the Bexley and Kent JHOSC, and take one of the following actions:

- a) Support the decision of the DGS CCG Governing Body and make any additional comments the Committee deems appropriate; or
- b) Specify concerns that the Committee has with the decision of the DGS CCG Governing Body and invite the NHS to a future meeting of the Committee where their response to these concerns will be considered ahead of a final determination by the Committee as to whether or not to refer the decision to the Secretary of State for one of the reasons set out in 3c (i-iii).

Background Documents

Kent County Council (2014) 'Health Overview and Scrutiny Committee (10/10/2014)', <https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=5400&Ver=4>

Kent County Council (2016) 'Health Overview and Scrutiny Committee (26/01/2016)', <https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=6256&Ver=4>

Kent County Council (2017) 'Health Overview and Scrutiny Committee (27/01/2017)', <https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=7507&Ver=4>

Kent County Council (2017) 'Health Overview and Scrutiny Committee (14/07/2017)', <https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=7530&Ver=4>

Kent County Council (2018) 'Health Overview and Scrutiny Committee (23/11/2018)', <https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=7923&Ver=4>

Kent County Council (2019) 'Health Overview and Scrutiny Committee (25/01/2019)', <https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=7924&Ver=4>

Kent County Council (2019) 'Health Overview and Scrutiny Committee (23/07/2019)', <https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=8282&Ver=4>

Kent County Council (2019) 'Health Overview and Scrutiny Committee (16/12/2019)', <https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=8483&Ver=4>

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