

## **HEALTH SCRUTINY AND PERFORMANCE PANEL**

**Monday, 25 July, 2011 at 6.00 p.m.**

**Conference Room, Council House, Walsall**

### **Panel Members Present**

Councillor M. Longhi (Chair)  
Councillor R. Carpenter  
Councillor S. Fletcher-Hall  
Councillor R. Martin  
Councillor I. Robertson  
Councillor E. Russell  
Councillor H. Sarohi

### **Portfolio holders present**

Councillor Z. Ali - Communities and Partnerships

### **Officers present**

Peter Davis, Head of Community Care  
Andy Rust, Head of Vulnerable Adults & Joint Commissioning Unit  
Yvonne Thomas, Director of Partnerships (NHS Walsall)  
Amir Khan - Medical Director (Walsall Healthcare Trust)  
Mark Lane, Interim Director, Strategy and Planning (NHS Walsall)  
Paul Bayliss, Area Manager, Black Country North (West Midlands Ambulance Service)

### **78/11 Apologies**

Apologies were received for the duration of the meeting from Councillor V. Woodruff, Councillor D. Turner, Councillor B. McCracken and Paul Davies.

### **79/11 Substitutions**

No substitutions were received for the duration of the meeting.

### **80/11 Declarations of interest and party whip**

There were no declarations of interest or party whip identified at this meeting.

## 81/11 Minutes

The minutes of the previous meeting were noted.

### Resolved

That the minutes of the meeting held on 21 June 2011, a copy having previously been circulated be approved as a true and accurate record.

## 82/11 Petition on Pharmacy Services in Chuckery

The Chair explained that this item would be considered first as members of the public were in attendance. The main points of the report and subsequent discussion were as follows:

- The Interim Director Strategy and Planning (NHS Walsall) explained that the Limes Pharmacy had undertaken a minor relocation from 7-9 Kinnerley Street of under 500m and this was permitted under NHS regulations. An application was received from Ph4macy Ltd for a forty hour contract at 7-9 Kinnerley Street and was rejected by the PCT;
- It was explained that if an application had been made for a one hundred hour service PCT approval would not have been required. Following a Panel query it was further explained that the PCT used a primary needs assessment which considers applications for services below the one hundred hour full time threshold. The appeal process was now underway, although this had not yet been heard as evidence was being gathered;
- Council officers sought reassurances that due process had been followed by the PCT in rejecting the application and suggested that this could be evidenced by the provision of the chronology of the process. A further query centred on whether health and equality impact assessments had been undertaken. The Interim Director Strategy and Planning (NHS Walsall) explained that the PCT would be able to demonstrate that due process had been followed. In addition, there was no requirement to undertake impact assessments. However, given that the appeal was now underway it would be important for the PCT to step back from that process;
- A Panel Member highlighted that Chuckery was an area which suffered from a high level of health inequality and deprivation. The Interim Director Strategy and Planning (NHS Walsall) explained that he would not be able to advise as to the where it might prove effective to lobby against the decision and that there was no requirement to consult with residents over this type of application. He further explained that the relocation of the previous pharmacy to within 500m and the types of services provided was a factor in the decision to reject the application. The pharmacy needs assessment guides against the oversupply of services. The Chair observed that it would be important to enable small businesses to compete with one another and questioned whether such decisions by PCT would be permitted under EU law;
- Councillor Ali expressed a number of concerns regarding the reasons provided by the PCT in rejecting the application. He explained that transport links were not adequate for the elderly and residents with young families to be

able to access alternative pharmacy services which were up to a mile away. In addition, hundreds of residents had been left without easy access to pharmacy services. It was also his view that the overall number of people in the surrounding areas and the proportion of residential housing had been underestimated by the PCT in reaching its conclusion. He also queried whether the focus group used by the PCT in this process was sufficiently representative of local residents. He highlighted the importance of a common sense approach being taken to local need in the provision of services rather than decisions being governed by regulations alone. He concluded by emphasising the importance of the PCT re-establishing a pharmacy in the area. A representative of Walsall LINK explained that central government had stressed the importance of outreach services which pharmacies were central in providing.

In closing the item the Chair summarised the main issues raised and supported the point made by Walsall LINK regarding the importance of outreach services. He also requested that a further item on the issue be heard once the outcome of the Ph4macy Ltd. appeal against the PCT decision was complete.

### **Resolved**

That:

1. the Panel receive a report informing them of the outcome of the Ph4macy Ltd. appeal to the NHS Litigation Authority to operate a pharmacy in at 7-9 Kinnerley Street, Chuckery, Walsall.

and;

2. the Panel be advised, in writing, on the process for decision making on pharmacy locations including how the process takes into account EU Law in ensuring that small businesses can compete with each other.

### **83/11 Specialist Vascular Surgery Services for Dudley, Wolverhampton and Walsall**

The Medical Director (Walsall Healthcare Trust) introduced the report. The main points of the report and subsequent discussion were as follows:

- Plans were now underway for the establishment of a common hub for the performance of vascular surgery. This has been prompted by evidence that patient outcomes were improved where a single centre of excellence operated covering a population of at least 800,000. Only specialist aortic surgery, cardiovascular and surgery within the skull, will be undertaken at the hub, with initial, follow-up appointments and minor surgery undertaken at local hospitals;
- Following a Panel query the Medical Director (Walsall Healthcare Trust) explained that residents will still retain freedom of choice regarding which hospital they receive treatment, with the exception of specialist treatment. He

also explained that all relevant issues, including consulting with West Midlands Ambulance Service regarding the location of the hub would be considered. However, the clear benefit would be significantly improved outcomes for patients receiving specialist treatment which he anticipated would override concerns regarding location;

- The Medical Director (Walsall Healthcare Trust) also explained that the business case for the hub was still to be developed. However, the business case for an Abdominal Aortic Aneurysm Screening centre had been established. It has been determined that the centre will not need to sit within the hub and a tendering exercise is now to be undertaken for a suitable provider;
- Following a Panel query the Medical director explained that a total of thirty-nine patients in the previous year whom, following recovery from a mini-stroke and subsequently recovered, had received carotid endarterectomy surgery. This was in line with national performance levels. An audit of all cases was undertaken and all met with National Institute for Health and Clinical Excellence (NICE) guidelines.

## **Resolved**

That the report be noted.

## **84/11 PCT System Plan**

The Interim Director Strategy and Planning (NHS Walsall) introduced the presentation. The main points of the presentation and subsequent discussion were as follows:

- The Walsall System Plan has been developed based on a national template. It sets out how NHS Walsall will achieve its local strategic health objectives over the next four years. It is a flexible plan which will be able to take account of changing circumstances;
- A number of health and financial challenges exist for the Black Country, this process will be supported by a Joint Strategic Needs Assessment (JSNA) which it will be important to ensure is a live document. Officers agreed to provide the Panel with a report to a future meeting which sets out how regularly the document is updated. The Chair emphasised the importance of the JSNA being a forward looking document;
- The Interim Director Strategy and Planning (NHS Walsall) explained that a key aspect of the System Plan was a planning framework and engagement across the health economy. Other key components included finance and key performance indicators, while demographic changes would create a number of potential pressures. The Panel heard that joint Planning and Delivery with Social Care is a key issue which had been addressed in the Plan for 2011/12. Council officers explained that it would be critical for partners to seek to assist people in leading healthy and independent lives and manage demand on local services;
- The Interim Director Strategy and Planning (NHS Walsall) explained that Quality, Innovation, Prevention and Productivity (QIPP), were overarching

aims identified at a national level. The Chair expressed concern regarding price efficiency which will see hospitals receiving a reduced tariff per operation carried out. He emphasised the importance of ensuring that any savings achieved were correctly recorded;

- Officers agreed to provide the Panel with an update on the current position regarding local statutory health care arrangements at its next meeting.

### **Resolved**

That:

- (1) the Panel will receive guidance regarding the ongoing management of the Joint Strategic Needs Assessment;
- (2) the Panel will receive a update regarding local statutory health care arrangements at its next meeting;

and

- (3) that the report be noted.

### **85/11 West Midlands Ambulance Service response times**

The Panel agreed that further information would be required in order for this item to be considered. Officers agreed to provide a narrative for the performance information, together with setting the performance data out for the respective area partnership areas. The Area Manager Black Country North (West Midlands Ambulance Service) also offered Members the opportunity to visit any of the sites proposed for closure as the service progresses plans to establish a number of hubs.

### **Resolved**

That:

- (1) a further narrative and performance data by area partnership areas would be provided at the next meeting;

and

- (2) the report be noted.

### **86/11 Date of Next Meeting**

The Chair informed Members that the date of the next meeting would be 5 September, 2011 at 6:00pm.

**Termination of meeting**

The meeting terminated at 8.23 p.m.

Signed: .....

Date: .....