

## **HEALTH SCRUTINY COMMITTEE**

Meeting: 7 July 2009

At: 6.00 pm

### **PRESENT**

Councillor Tom McGee (Chair) in the chair; Councillor Hazel Lees (Vice-Chair); Councillors Walter Brett, Christine Corris, Chris Gordon, Bryan Leck, June Somekh and Craig Wright.

### **1. MINUTES**

The Minutes (copies of which had been circulated) of the meeting held on 26 May 2009 were approved as a correct record and signed by the Chair.

### **2. DECLARATIONS OF INTEREST**

No declarations of interest were made.

### **3. CALL-IN**

There were no items to consider.

### **4. ST THOMAS DEVELOPMENT FULL BUSINESS CASE**

The Committee had been engaged in the ongoing monitoring of the St Thomas Development with particular regard to the ways in which patients, carers and other stakeholders had been consulted on the design and delivery of the project.

A report was submitted (copies of which had been circulated) setting out the full Business Case for the St Thomas Development. The report was a draft document showing working progress.

The Final Business Case was under consultation before its submission to the Primary Care Trust Board (PCT Board) and Strategic Health Authority (SHA) for approval. In addition to the report, the Committee received a presentation and was informed that it was essential that the development should be sustainable on an annual basis once it was open. The Committee was also given details of new college and health facilities together with the consultation process which had been adopted. It was envisaged that the college would link into the hospital and share learning and facilities. Local groups would also be encouraged to use appropriate facilities on offer.

Councillors expressed their satisfaction with the consultation arrangements and that potential concerns had been allayed through a liaison group which had involved neighbours, local businesses and the builders, who had subscribed to the 'Considerate Contractor' scheme. The Committee was also informed that local materials would be used as much as possible.

In answer to Councillor's questions, it was reported that the neighbouring church had been consulted and that there would be 'catch areas' to add further safety to the potential vertical drops which would be present due to the design of the building. Funding for the scheme was as secure as was possible in the current economic climate and that services such as podiatry, pharmacy and the credit union had been linked together located to provide the easiest and most convenient access available. It was noted however, that there were no plans to provide a dentistry service at present. The facilities would be available on a walk-in basis and that hard-to-reach people would be sought and encouraged to take advantage of the available services.

Stockport PCT would own the building and would seek to provide the most cost effective way of providing the various services. In respect of the proposal to devolve decision making to front line staff, it was reported that a joined up approach would be adopted through NHS Stockport and Stockport PCT.

RESOLVED – That the report be noted.

## **5. STOCKPORT NHS FOUNDATION TRUST ANNUAL PLAN 2009/10 – 2011/2012**

The Annual Plan of the Foundation Trust was submitted (copies of which had been circulated) which outlined the activities and progress made during 2008/9, together with details of the Trust's forward plans for 2009/10-2010/11. In addition, the Committee received a brief presentation which summarised the key points within the annual plan with a particular focus on finance and addressing key performance risks.

It was recognised that the Stockport NHS Foundation Trust was now entering into a sustained period of financial constraint and was therefore focussed on financial issues. It was reported that the process of administration to accident and emergency wards had been redeveloped and that the 18 week milestone targets had been achieved at 90%.

Discussion ensued with regard to MRSA targets. It was reported that the target remained at 12 although there were 15 cases in 2008/09 (16 in 2007/08). The aim was to reduce this to zero cases by March 2010, through a substantial awareness campaign which would focus on all parties and procedures.

Further questions were asked in respect of mixed sex accommodation on hospital wards. The Trust had lodged a successful bid for Government grant funding of £1.8m and this would be spent on segregating critical care and assessment areas. In addition, Councillors asked questions with regard to the failure to achieve the four hour accident and emergency target together with the apparent surplus funding at the end of the financial year. This was due to slippages on the capital account on operating expenses which were billed at the end of the financial year. The pathway from accident and emergency to hospital admission had been re-evaluated, and this would lead to a more efficient system.

In addition, it was reported that discharge planning projects would help improve discharge procedures. Councillors asked additional questions in respect of car parking charges and commented on the need for consideration of the retention of

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Foundation Trust membership when staff had retired from service in order for them to retain a formal interest and help contribute in the future. Further comments were made in respect of the need to improve car parking arrangements at Stepping Hill Hospital which would help alleviate parking nuisance experienced by residents that neighboured the site.

RESOLVED – (1) That the report be noted.

(2) That a future report and presentation be requested in respect of hospital hygiene and proposed pandemic control.

### **6. OVERVIEW OF THE HEALTH AND WELL-BEING PARTNERSHIP PERFORMANCE MONITORING**

A report was submitted (copies of which had been circulated) detailing the health and well-being performance monitoring information as presented to and monitored by the Health and Wellbeing Partnership.

The Committee requested that in future, questions should be submitted in advance to allow answers to be given at the meeting and that the report should include indicators and targets and indications of where these were not being achieved.

In response to a Councillor's question, it was commented that new school meal menus were being adopted and that focus on key issues, such as heart disease, should be considered later in the year.

RESOLVED – That the report be noted.

### **7. PROGRESS REGARDING ARRANGEMENTS FOR HEALTH SCRUTINY COMMITTEE'S CONSULTATION ON OLDER PEOPLE'S HEALTH SERVICES – PROGRESS UPDATE**

The Assistant Chief Executive (Strategy and Democracy) submitted a report (copies of which had been circulated) setting out arrangements for the Scrutiny Committee's consultation on older people's health services.

Councillors commented on the need for Councillors to report back to the scrutiny officer with bullet points on key issues raised at the proposed consultation meetings with older people. It was also suggested that the issue of older people's activities at care homes should be raised during consultation.

RESOLVED – That the report be noted.

### **8. AGENDA PLANNING**

A representative of the Assistant Chief Executive (Strategy and Democracy) submitted a report (copies of which had been circulated) setting out the planned agenda items for the Committee's next three meetings, Forward Plan items which fell within the remit of the Committee and progress with the resolutions made at previous meetings during the current municipal year.

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RESOLVED – That the report be noted.

The meeting closed at 8.05pm.

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