

East Sussex Health Overview and Scrutiny Committee (HOSC): Progress Review



Latest updates in blue italics

UPDATED: December 2011

	<i>Issue</i>	<i>Progress Summary</i>	<i>Action</i>
Scrutiny Reviews/in-depth projects			
1.	ESHT Clinical Services Strategy	<p>Comprehensive review of future Trust strategy.</p> <p>6 September 2010 – HOSC Seminar covering context and process for development of strategy.</p> <p>23 January 2011 – HOSC Seminar – overview of Strategic Framework</p> <p>10 March 2011 – HOSC discussed the Strategic Framework, the first part of the clinical strategy. Discussion focused on how partners were being engaged and the impact of the transfer of community health services to the Trust from April 2011.</p> <p>May 2011 – Trust announces maternity review to take place from May-September 2011 as part of clinical strategy development.</p> <p>1 June 2011 – HOSC Seminar – update on the development of the strategic delivery plan.</p> <p>16 June 2011 – HOSC discussed progress with development of strategic delivery plan. ‘Cases for change’ being developed across a number of specialties including acute medicine, cardiology, stroke and trauma and orthopaedics. Maternity review also underway. Consultation on any major service changes expected Autumn 2011.</p> <p>9 September 2011 – HOSC Seminar – update on development of Strategic Delivery Plan</p> <p>15 September 2011 – HOSC discussed proposed models of care across the 8 Primary Access Points which the Clinical Strategy is based around. This included a draft model for maternity which was subject to endorsement by the Maternity Review Board at its meeting on 19th Sept. HOSC welcomed addition of pre-consultation engagement phase to Dec 2011 to inform the development of delivery options, requested a further report on options and agreed to set up a Task Group to provide additional HOSC input.</p> <p>24 October 2011 – First meeting of HOSC Task Group considered progress with option development.</p> <p>18 November 2011 – Second meeting of HOSC Task Group considered progress with options</p>	<p><i>HOSC Task Group meeting January 2012.</i></p> <p><i>Additional HOSC meeting 6 February 2012</i></p> <p><i>HOSC to scrutinise any major service changes Winter Spring/Summer 2012</i></p>

	Issue	Progress Summary	Action
		<p>development and engagement, regional reviews on trauma and vascular services and financial context of clinical strategy.</p> <p><i>24 November 2011 – HOSC received report on options development and overall progress with the Clinical Strategy. HOSC agreed to support Task Group recommendation that any proposals for service reconfiguration should be considered ‘substantial’ change requiring consultation with the Committee. Also agreed Task Group recommendation to support the propose Sussex Trauma and Vascular Network models due to the evidence these will improve patient outcomes.</i></p> <p><i>19 December 2011 – Third meeting of HOSC Task Group considered progress with options development, including outcome of Primary Access Point meetings which had identified a number of options considered unviable. Meeting also considered timeline for 2012. An additional HOSC meeting scheduled for 6 February 2012 to enable proposals to be considered prior to consultation which is provisionally scheduled to start later in February.</i></p>	
2.	Improvement programme for mental health services	<p>20 November 2009 – Richard Ford, Executive Commercial Director SPT gave overview of Better by Design improvement programme. HOSC endorsed strategy on the basis that proposals will benefit East Sussex patients and awaits further detail on specific proposals for change and consultation plans.</p> <p>11 March 2010 - Richard Ford, SPT and Lisa Compton, NHS ESDW/H&R presented specific proposals for changes to inpatient mental health services and associated consultation process. HOSC agreed proposals are ‘substantial development or variation’ to health services requiring formal consultation with the committee. HOSC established Task Group to consider the proposals in more detail, work with neighbouring HOSCs as required and report back to HOSC (Membership: Cllrs Tidy, Rogers, Heaps and Pragnell).</p> <p>17 June 2010 – Richard Ford, SPT and Sam Chittenden, NHS ESDW/H&R responded to the interim report by the HOSC Task Group. Proposals envisage inpatient units at current locations being retained (with some bed reductions) with a longer term possibility to build 1 or 2 new facilities. PCT Boards to take a decision July 2010.</p> <p>2 July 2010 – Final Task Group meeting. Updated final version of report sent to PCTs.</p> <p>29 July 2010 –Joint meeting of PCT Boards – decision to adopt option 2.</p> <p>16 September 2010 – HOSC meeting receives response from NHS ESDW/H&R and SPT to HOSC recommendations. All recommendations accepted. HOSC confirmed support for proposals subject to implementation of recommendations. Task Group to reconvene to consider progress in more detail in</p>	

	Issue	Progress Summary	Action
		<p>early 2011 before report to HOSC in March 2011.</p> <p>2 Feb 2011 – Task Group met to review progress indicators and produce progress report for HOSC.</p> <p>10 March 2011 – HOSC received progress report from Task Group which recommended supporting the bed closures from June in Eastbourne with four caveats. HOSC supported recommendations.</p> <p>16 May 2011 - Task Group met to check that caveats had been met prior to bed closures.</p> <p>15 September 2011 – HOSC considered progress report. Bed closures had proceeded as planned over the summer. Service performance continued as expected. HOSC supported slight change to bed configuration to better reflect population need and temporary decanting of 1 ward from Eastbourne to Brighton to enable refurbishment works to be undertaken.</p>	<p>Further informal updates as required, particularly in relation to decanting process.</p>
3.	NHS White Paper/reform	<p>July 2010 – Government published ‘Liberating the NHS: Equity and Excellence’ and supplementary consultation papers</p> <p>27 July 2010 – Initial briefing for HOSC as part of HOSC development session</p> <p>6 September 2010 – HOSC seminar on Strategic Health Issues – included discussion on White Paper implications with representatives from NHS ESDW/H&R and ESHT.</p> <p>16 September 2010 – HOSC briefing with Mike Wood, CEO of NHS ESDW/H&R and Keith Hinkley, Director of ASC. HOSC agreed to develop a response to ‘Local Democratic Legitimacy’ consultation.</p> <p>6 Oct 2010 – HOSC response to ‘Local Democratic Legitimacy’ consultation sent to DH (copy to CfPS)</p> <p>18 November 2010 – HOSC meeting item on health inequalities (Director of Public Health Annual Report). Explored key challenges and ongoing work in East Sussex. Touched on future direction of public health work including proposed transfer of responsibility to local authorities.</p> <p>30 Nov 2010 – Public Health White Paper and associated documents published. Weblinks circulated to HOSC.</p> <p>15 Dec 2010 – Govt. response to White Paper consultations published. Key changes from original proposals include: health scrutiny retained and extended, maternity services to be commissioned by GP consortia, pathfinder Health and Wellbeing Board programme, joint health and wellbeing strategy to be required, more options for Councils on commissioning complaints advocacy. Most other proposals proceed as originally set out. NHS operating framework also published – PCTs to be</p>	

	Issue	Progress Summary	Action
		<p>clustered as part of transition by June 2011, tariff reductions, £20bn savings delayed by 1 year to 2015.</p> <p>Headlines and weblinks circulated to HOSC 16 Dec. CfPS summary briefing circulated to HOSC 23 Dec. Plus LG Group briefing on public health commissioning and funding paper published 21 Dec.</p> <p>10 March 2011 – HOSC received presentation on transition including GP consortia and PCT cluster development, provider reforms, public health transfer to the County Council and the development of a Health and Wellbeing Board. HOSC agreed to write to emerging GP consortia.</p> <p>May-June 2011 – national ‘pause’ in progress of Bill and NHS Future Forum-led listening exercise. Future Forum report and government response outlining changes to legislation subsequently published. Bill’s progress restarted July 2011. Public Health command paper published July 2011.</p> <p>16 June 2011 – HOSC discussed establishment of East Sussex Health & Wellbeing Board. Recommended that HOSC Chairman has standing invitation as observer with speaking rights.</p> <p>15 September 2011 – HOSC discussed update on Health and Wellbeing Board. Consultation ended 7 September. Support for role as ‘guardian of health and social care system’ and assembly model. Debate over core membership of the board. HOSC requested written update when membership confirmed.</p> <p>October 2011 – Health and wellbeing update circulated to HOSC Members which included details of Health and Wellbeing Board Membership.</p> <p><i>24 November 2011 – HOSC considered report on transition of public health roles to ESCC. Noted that ESCC had commissioned an independent review of public health and would put together an action plan when the final report had been received. Funding for public health unclear but shadow allocations expected end of 2011. Noted that shadow Health and Wellbeing Board had begun meeting. HOSC agreed to form a joint working group with Audit, Best Value and Community Services Scrutiny Committee to provide ongoing scrutiny input. Cllrs Rogers and Howson to represent HOSC.</i></p>	<p>Add specific aspects of NHS reform to agendas as appropriate.</p> <p><i>Joint working group between HOSC and Audit, Best Value and Community Services Scrutiny Committee to be established</i></p>
4.	Stroke Care Scrutiny Review	<p>HOSC 16 June 2008 – Review Board nominated: Cllr David Rogers, Cllr Angharad Davies, Cllr Beryl Healy, Cllr Eve Martin. Inaugural Review Board meeting 5th August 2008.</p> <p>4 September 2008 – Co-optees: Cllr John Barnes, Chairman, East Sussex Downs and Weald PCT;</p>	

	Issue	Progress Summary	Action
		<p>Cllr Martyn Forster, Adult Social Care Scrutiny Committee joined Review Board.</p> <p>HOSC 16 September 2008 – Objective endorsed as follows: <i>to assess and make recommendations on the stroke care provided to East Sussex residents, with particular focus on awareness and prevention, provision of acute services and the integrated provision of rehabilitation and long-term support.</i></p> <p>17 October 2008 – visit to Irvine Unit and panel discussion with GP, Occupational Therapy, Speech and Language Therapy and Community Rehab Team representatives.</p> <p>4 November – visit to Egerton Unit, the Conquest Hospital and panel discussion.</p> <p>20 November – visit to stroke unit at Royal Sussex County Hospital, Brighton.</p> <p>18 December – visit to Wilmington Ward, Eastbourne DGH</p> <p>HOSC 19 March 2009 – HOSC endorsed final report. 6 month, 12 month and 18 month monitoring agreed. Key recommendations (summarised):</p> <ul style="list-style-type: none"> • Actions to improve public and staff awareness of stroke • Defined prevention and follow up pathways • Commissioning diagnostics to national standards well ahead of 10 year timescale • Improved access to rehabilitation, including ‘slow-stream’ rehabilitation • Consistent model of community rehabilitation and voluntary sector support across the county • Access to psychological support within rehabilitation • Access to a contact point for information <p>6 July 2009 – Rachel Harrington, Kate Russell NHS ESDW/H&R gave response of local healthcare organisations to HOSC recommendations. Stroke Programme Board has four work streams which have been tasked to act on 141 recommendations made over the last 3 years by various bodies.</p> <p>11 March 2010 – HOSC received update report from Jane Strong and Nicky Murrell, NHS ESDW/NHS H&R. HOSC welcomed progress to date including introduction of 24/7 thrombolysis, vascular health checks, scanning improvements and new stroke specification. Ongoing challenges highlighted included recruitment of specialist staff, availability of community rehabilitation, engaging all GP practices in health check programme.</p> <p>16 September 2010 – HOSC considered progress report from Jane Strong and Nicky Murrell, NHS ESDW/H&R. Focus of work now on rehabilitation pathways. Ongoing challenges with acute unit capacity to be addressed through improved and earlier rehabilitation. Irvine Unit, Bexhill to become</p>	

	Issue	Progress Summary	Action
		<p>specialist rehabilitation unit. 24/7 thrombolysis introduced from 6 April 2010. Performance on scanning and TIA clinics improved. Jane Strong leaving to become Clinical Matron at the Irvine Unit.</p> <p>16 Dec 2010 – Chairman meeting with CEO and Chair of ESHT – discussed recent stroke peer review which had highlighted areas for improvement</p> <p>26 May 2011 – Chairman meeting with CEO. Commitment to stroke services improvement emphasised, particularly to increase number of specialist consultants.</p> <p>16 June 2011 – Progress report from Alistair Hoptroff, NHS Sussex and Dr James Wilkinson and Jane Darling, ESHT. Stroke consultants at ESHT to be doubled from 2 to 4, scan target been met at ESHT over last few months. Improvements still needed on % of time patients spend on stroke unit.</p>	<p>HOSC 8 March 2011 (provisional) – further progress report. Also a workstream within Clinical Strategy</p>
5.	<p>Nutrition, Hydration and Feeding in Hospitals Scrutiny Review</p>	<p>6 July 2009 - Review initiated. Review Board: Cllr Sylvia Tidy, Cllr Alex Hough (Chairman), Cllr Ruth O'Keeffe, Cllr Eve Martin, Cllr Diane Phillips. Brighton, West Sussex and East Sussex Local Involvement Networks (LINKs) will carry out visits to acute hospitals and question patients.</p> <p>12 November 2009 – Witness session – individual sessions – Lead for dietetics and lead nurse from BSUH and ESHT. Age Concern/Help the Aged update on outcomes from 'Hungry to be Heard' campaign – national representative and Chief Executive Aged Concern East Sussex</p> <p>12 February 2010 – Review Board met to take stock of evidence to date, agree priorities to focus on for remainder of the review and to discuss planned LINK visits.</p> <p>29 June 2010 – Review Board met to receive findings of LINK visits.</p> <p>17 August 2010 – Review Board discuss LINK findings and possible recommendations with Trust reps.</p> <p>16 September 2010 – HOSC approved final report and agreed to seek response from Trusts.</p> <p>w/c 20 September 2010 – Final report sent to CEs of BSUH and ESHT. Press release issued.</p> <p>18 November 2011 – Trusts presented initial response/action plans. All recommendations accepted (some require further investigation). ESHT asked to provide timescales and further detail in future reports. Some specific follow up requests agreed with Review Board Chairman Dec 2010.</p> <p>16 June 2011 – HOSC received progress reports from ESHT and BSUH. Evidence of some progress but more needed, especially at ESHT.</p> <p>July 2011 – CQC published Dignity and Nutrition report on ESHT – some issues highlighted.</p>	<p>HOSC to consider progress report 8 March 2011 (provisional)</p>

	<i>Issue</i>	<i>Progress Summary</i>	<i>Action</i>
Committee items			
6.	CQC inspection of ESHT	<p>February 2011 – CQC unannounced inspection of 5 ESHT sites.</p> <p>10 March 2011 – Discussion on Maternity Strategy included reference to concerns raised by CQC during their inspection.</p> <p>17 May 2011 – CQC inspection reports published. Major concerns identified at Eastbourne DGH and the Conquest. CQC require immediate action and longer term action plans. Reports sent to HOSC.</p> <p>1 June 2011 – HOSC seminar – presentation from CQC on their findings. ESHT representatives respond to findings and give assurances that action will be taken.</p> <p>16 June 2011 – HOSC receives report from ESHT on their response to the CQC findings. Immediate, medium term and longer term actions being taken. Some issues require long term cultural change.</p> <p>July 2011 – CQC reports on follow-up visit and Dignity and Nutrition inspections published. Ongoing issues to be resolved. Major issue of record-keeping requires action by 2 September 2011.</p> <p>September 2011 – CQC report on April follow-up visits published. Evidence of progress being made but more needed to embed improvements and ensure consistency.</p> <p>September 2011 – CQC undertake further follow-up inspection.</p> <p><i>24 November 2011 – HOSC considered update report from ESHT. Trust believes there is evidence of significant process at all levels but not yet full compliance. Awaiting report of CQC's follow up visit. ESHT Board to undertake further self-assessment of compliance in January 2012. Aim for compliance by March 2012. HOSC welcomed progress to date and agreed to continue to liaise with CQC.</i></p>	<p>HOSC agreed to primarily liaise with CQC to track progress to avoid duplication. Some issues will be addressed via clinical strategy.</p> <p><i>Awaiting publication of CQC report on their September follow-up visit</i></p>
7.	Children's Cardiac Surgery consultation	<p>28 February 2011 – consultation launched on model of care including proposed reduction in number of specialist units and network approach to outreach in local hospitals.</p> <p>10 March 2011 – HOSC agreed that proposals are not 'substantial variation' for East Sussex as patients already travel to London and will continue to do so. HOSC agreed to contribute to a regional response from the SE HOSCs network.</p> <p>May 2011 – SE HOSCs response to consultation agreed and submitted.</p> <p>November 2011 – Royal Brompton win judicial review of process. Decision making delayed until Spring 2012.</p>	<p>Follow progress of decision making process.</p>

	Issue	Progress Summary	Action
8.	Vaccination - cervical cancer	<p>Human Papilloma Virus (HPV) vaccination due to be introduced by NHS East Sussex Downs and Weald (ESDW) and NHS Hastings and Rother (H&R) from Autumn 2008.</p> <p>27 November 2008 – Alison Smith, Children’s Services Commissioning and Strategic Development Manager and Joanne Bernhaut, Consultant in Public Health, NHS ESDW/H&R outlined the HPV vaccination programme. This year all 12-13 years old will be offered the vaccination in the schools based programme. During 2008/09 17-18 year old women are being offered the vaccine via GPs.</p> <p>20 November 2009 – HOSC encouraged by progress uptake at immunisation 3 in August 2009 – ESDW 68% and H&R 75%. Additional information sought from Joanne Bernhaut to supplement information noted in her HOSC update paper.</p>	HOSC will continue to monitor vaccination uptake
9.	Developing maternity services in East Sussex (see also ‘Fit for the Future’ section of completed work for full history)	<p>16 September 2008 – HOSC received update from Vanessa Harris, Acting Chief Executive, NHS ESDW/H&R, on plan to take forward Independent Reconfiguration Panel (IRP) recommendations following Secretary of State’s decision to reject original proposals. Also information on improving ante and post natal care and development of maternity dashboard.</p> <p>3 October 2008 – NHS ESDW/H&R published plan for taking forward IRP recommendations.</p> <p>27 November 2008 – HOSC received update from Vanessa Harris, Director of Finance and Ali Parsons, Strategy and Project Manager, NHS ESDW/H&R. Progress on improving ante and post natal care and outreach services welcomed but pace of change disappointing. HOSC requested the planned timescales and expected outcomes of the various projects underway. Projects include Hastings pilot Family Nurse Partnership, perinatal mental health and geographical working for midwives.</p> <p>January 2009 - Maternity Services Clinicians’ Forum and Maternity Services Development Panel set up to oversee development of new maternity strategy to include model for maintaining consultant-led services in both Eastbourne and Hastings.</p> <p>19 March 2009 – Mike Wood, Chief Executive, Dr Diana Grice, Director of Public Health, Jenny Phaure, Programme Manager, Ali Parsons, Strategy and Projects Manager, NHS ESDW/H&R presented Maternity Strategy for East Sussex, Network proposal for sustainable consultant-led services and engagement plan. HOSC indicated support for direction of travel in the Strategy and network approach.</p> <p>6 July 2009 - Mike Wood, Chief Executive, Lisa Compton, Director of Public Engagement and Corporate Affairs, Jenny Phaure, Programme Manager, NHS ESDW / NHS H&R gave progress report.</p>	

	Issue	Progress Summary	Action
		<p>Focus on plans for engaging local people and organisations. Summary of maternity services set-up in community asked for. HOSC endorses engagement plan.</p> <p>24 September 2009 – Jenny Phaure and Ali Parsons updated HOSC. Final Maternity Strategy to be submitted to PCT Boards in November. PCTs and ESHT debating cost to try and agree a figure for the two site model. Community services are in place but concerns on the rate of progress.</p> <p>20 November 2009 – Mike Wood, Jenny Phaure and Lisa Compton updated HOSC. HOSC endorsed the strategy with the agreement that geographic working be moved into the implementation plan. Dr Richard Brown, Chairman, Medical Director, Surrey and Sussex Local Medical Committee also spoke at HOSC about GPs concerns on geographical working.</p> <p>25 January 2010 – seminar held for HOSC members to discuss a range of issues with representatives from ESHT, NHS ESDW/H&R and MSDP.</p> <p>February 2010 – Implementation plan circulated to HOSC Members.</p> <p>11 March 2010 – Mike Wood and Jenny Phaure presented update report – strategy now agreed and focus shifted to implementation, although financial negotiations with ESHT ongoing. HOSC agreed to monitor progress on a six monthly basis, focusing on outcomes and using the maternity dashboard as key tool. Reports should reflect the whole of East Sussex, including Trusts based outside the county.</p> <p>16 September 2010 – Jamal Zaidi, Debra Young, Jane Hentley, ESHT and Ali Parsons NHS ESDW/H&R presented progress report. Good progress on c-section rates, development of referral pathway with primary care and consultant availability. Ongoing challenges with middle grade doctor and midwifery staffing. HOSC requested improvements to dashboard presentation.</p> <p>February/March 2011 – public and media speculation regarding possible temporary closure of a maternity unit at ESHT.</p> <p>10 March 2011 – HOSC received update on maternity strategy. ESHT confirmed no plan to close a unit but safety concerns due to recruitment of doctors had been expressed and were being investigated. Indicated that a sustainable solution is needed, not short-term measures.</p> <p>May 2011 – ESHT announced maternity review to be undertaken as part of wider clinical strategy development – see separate section above for further updates.</p>	<p>Future reports as part of clinical strategy updates (see above)</p>
10.	HERMES Referral Management	<p>31 October 2009 – System (to help GPs refer to most appropriate service) launched (managed by Harmoni) following successful pilot. HOSC decided to check how the system embeds over first 6 months, usage figures and any issues raised by GPs. Also what impact it is having on reducing</p>	

	Issue	Progress Summary	Action
	System	<p>unnecessary A&E attendances and hospital admissions.</p> <p>17 June 2010 – Nicky Murrell and Gillian Hamer, NHS ESWD/H&R presented HOSC with an assessment of the impact of the system. Usage had exceeded expectations with future developments to include a new IT system to enable better data collection and analysis to widen access to other health professionals. HERMES allowing commissioners to identify service gaps and commission new or redesigned services as required to avoid unnecessary hospital admissions.</p>	<p>HOSC to be notified of new service developments as they arise</p>
11.	Older people's mental health services (OPMH)/ Dementia Strategy	<p>20 March 2008 – Andrew Dean, Associate Director Older People's and Forensic Services, Sussex Partnership NHS Trust outlined plans on local strategy for reducing bed based provision for acute assessment of organic mental health needs (e.g. dementia) in favour of community based assessment, including specific proposals for Milton Court, Eastbourne and Beechwood Unit, Uckfield.</p> <p>HOSC set up a Task group to scrutinise aspects of the specific proposals including consultation plan and investment in community services. HOSC also requested a presentation on wider strategy for older people's mental health services to set context for specific proposals.</p> <p>16 June 2008 HOSC – Report back from Task Group was endorsed and HOSC received joint presentation on the wider strategy for older people's mental health services from Andrew Dean, Associate Director Older People's and Forensic Services, Sussex Partnership NHS Trust, Kate Dawson, Head of Strategic Commissioning (Mental Health Social Care and Supporting People), Adult Social Care, East Sussex County Council and Martin Packwood, Commissioning Manager, East Sussex PCTs. Key themes – prevention, provide more care, closer to home, reduce hospital admissions, improve joint working, more intensive home care, sheltered housing, extra care housing schemes</p> <p>23 July 2008 – Task Group met and considered consultation feedback. Task Group endorsed proposals subject to its recommendations.</p> <p>16 September 2008 – Task Group's final response and recommendations noted. Agreed to monitor progress on community and inpatient care for older people with organic mental health needs.</p> <p>24 September 2009 – Martin Packwood, Joint Commissioning Manager for Mental Health, NHS ESDW/NHS H&R/ESCC; Neil Waterhouse, Service Director OPMH, SPT; Nigel Hussey, Commissioning Manager, NHS ESDW/NHS H&R updated HOSC. Impact of National Dementia Strategy, East Sussex initiatives underway and additional funding obtained.</p> <p>As regards Beechwood unit, HOSC endorsed SPT's implementation of the proposals for inpatient acute assessment beds and associated developments in community services for older people with</p>	

	Issue	Progress Summary	Action
		<p>organic mental health needs.</p> <p>16 September 2010 – Update on dementia strategy from Martin Packwood, Joint Commissioning Manager, NHS ESDW/H&R/ESCCr and Neil Waterhouse, Service Director OPMH, SPT. Dedicated dementia commissioning group established including 3 GPs. £1.5m extra investment in 10/11 from regional transformation fund but future funding challenging. Window of opportunity to transform services. Collaborative process of service redesign underway between PCTs and ASC looking at totality of dementia resources. Beechwood update – still plan to return beds to Eastbourne but no firm plans as yet – depends on suitable premises becoming available.</p> <p>15 September 2011 – update on dementia strategy from Martin Packwood, Joint Commissioning Manager and Dr Lindsay Hadley, GP representative. Dementia action plan continues to be implemented, engagement of GPs strengthened. Introduction of new Memory Assessment Service deferred to April 2012 as agreement not reached with SPFT. Now developing a new primary care based model with GPs. One aspect of service redesign is to disinvest in some services currently providing social care type activity to release funds to invest in new models. HOSC agreed to reconvene Mental Health Task Group to examine dementia service redesign in more detail</p> <p><i>23 November 2011 – HOSC Mental Health Task Group meeting to examine service redesign, principally the introduction of a Memory Assessment Service to improve rates of diagnosis, a new Dementia Support Service, expansion of the Dementia Advisor Service and continuation of Carers' Breaks service. These developments to be funded through decommissioning of four day hospitals (service users to be redirected to alternative care). Task Group supported the direction of travel due to the overall benefits and better use of resources. Group also made a number of recommendations regarding communications.</i></p> <p><i>24 November 2011 – verbal report to HOSC from Task Group Chairman.</i></p>	<p><i>Email update on progress with service redesign early 2012 to inform decision on whether Task Group needs to meet again</i></p>
12.	NHS Dentistry	<p>This item remains from an original list of potential topics generated by HOSC in October 2003.</p> <p>Full details of the new dental contract provisions are available on the Department of Health website: <i>What you need to know about changes to NHS dentistry in England.</i></p> <p>HOSC: 23 June 2006 –highlighted concerns and requested further report.</p> <p>22 September 2006 HOSC view: The new dental contract has not helped NHS dentistry services in East Sussex. HOSC remains concerned that some of the most vulnerable people may not be receiving dental treatment and health inequalities are not being addressed adequately.</p>	

	<i>Issue</i>	<i>Progress Summary</i>	<i>Action</i>
		<p>HOSC: 30 November 2006 noted that:</p> <ul style="list-style-type: none"> PCTs and dentists are still embedding new contract changes PCTs consider there is a match between provision and need. Higher numbers of dentists are now accepting NHS patients. Contract disputes reduced and resolved. No major impact in localities of rejected contracts. Contract has no major long term impact on Emergency Dental Services. Estimate £1m patient charges deficit this year. <p>HOSC endorsed the proposal for Community Dental Services (CDS) clinics based in Crowborough and Heathfield to close and patients to be transferred to enhanced Uckfield and Hailsham clinics. HOSC's endorsement is subject to the service consulting all affected patients and resolving any additional transport requirements.</p> <p>HOSC maintaining a watching brief on waiting times for CDS patients which are considered to be poor even with the anticipated improvements. (After 12 months: Heathfield from 10 to 8 weeks and Crowborough from 24 to 17 weeks.)</p> <p>30 November 2007 HOSC – Jane Hewitt and Phil Hamlin updated HOSC. HOSC advised: 4,000 more NHS dental patients were treated in East Sussex in 24 previous months to 31 March 2007. Over 85% of dental patients said their dental appointment was as soon as necessary. Access to NHS dentistry in county generally meets targets.</p> <p>Special Care Dental Services – no issues emerged from closure of Crowborough and Heathfield clinics. Proposed merger of Seaford clinic and Peacehaven delayed.</p> <p>HOSC asked for numbers and locations of NHS dentistry surgeries which have wheelchair access. Patients Association Dental Report published March 2008.</p> <p>4 March 2008 – Emergency Dental Services Review workshop held. Cllr Lambert attended for HOSC.</p> <p>27 November 2008 – Jane Hewitt, Dental Services Development Manager updated HOSC. Waiting times reduced and number of dentists accepting NHS patients increased since a year ago. HOSC asked for comparative data for NHS dentistry access amongst other PCTs nationally. Also notification when consultation on plans for special care dental services in Seaford and Newhaven is due to begin.</p> <p>2 February 2009 – HOSC contributed to Department of Health review of NHS dentistry by Professor Jimmy Steele. Extract of contribution...improvements are welcome. However, HOSC continues to</p>	

	<i>Issue</i>	<i>Progress Summary</i>	<i>Action</i>
		<p>hear anecdotal evidence that some people perceive access to NHS dentistry to be difficult...’ HOSC also asked what an appropriate target figure for NHS dentistry access should be.</p> <p>20 November – HOSC noted services are now available at 88 practices across East Sussex and the number of practices accepting new NHS patients has increased to 58. The number of practices with wheelchair access has increased to 53. Media campaign to increase awareness undertaken. HOSC members asked to submit any additional queries.</p> <p>August 2010 – PCT briefing paper on proposed changes to special care dental services in Hastings. Proposed closure of clinic in Ore and transfer to more accessible clinic in St Leonards. HOSC invited to submit any comments.</p> <p>December 2010 – Update paper received from Alan Lewis, NHS ESDW/H&R in response to HOSC request. Covered access (continues to improve), special care dental services and emergency dental services. Circulated to HOSC for information/questions 13 Dec 2010.</p>	<p>HOSC will continue to monitor access and specific developments as they arise</p>
13.	<p>Foundation Trust Status – East Sussex Hospitals NHS Trust</p>	<p>May 2007 –East Sussex Hospitals NHS Trust (ESHT) announced they will be seeking foundation trust status. HOSC in preliminary discussions on the issue and its likely impact on Trust’s strategic direction.</p> <p>ESHT consultation started in July 2007.</p> <p>14 June 2007 – Preliminary meeting between HOSC and Trusts representatives.</p> <p>21 September 2007 HOSC – response to ESHT consultation. Consultation period ended 29 September 2007. Foundation Trust application to be submitted 1 November 2007.</p> <p>27 November 2007 – letter from Chairman of Trust – deferring application.</p> <p>17 March 2009 – HOSC Chairman met with Kim Hodgson, Chief Executive and representatives, ESHT. Application now due to be submitted to SHA July 2009.</p> <p>19 March – HOSC agreed to write letter re-affirming HOSC endorsement of the Trust’s proposed strategy for development of services should the Trust achieve Foundation Trust status.</p> <p>1 July 2009 – Letter re-affirming HOSC endorsement sent. Included concerns on the fact that Foundation Trust board meetings are not held in public.</p> <p>28 August 2009 – Letter from Chairman of ESHT explaining further delay in FT application. If FT application successful, ESHT will hold public meetings.</p> <p>March 2010 – Letter from Chairman of ESHT - Kim Hodgson leaves ESHT 31 March 2010 to be</p>	

	Issue	Progress Summary	Action
		<p>replaced by Darren Grayson as interim Chief Executive pending permanent replacement.</p> <p>June 2010 – Darren Grayson confirmed as Chief Executive of ESHT</p> <p>July 2010 – NHS White Paper says that all Trusts must become FTs, or part of an FT, within 3 years</p> <p>Dec 2010 – Chairman meeting with CE and Chair of ESHT – aim for FT status 2014 following development/implementation of clinical strategy</p> <p>16 June 2011 – CE confirmed ESHT still aiming to apply for FT status in 2013 despite DH relaxation of 2014 deadline. Dependent on robust Clinical Strategy.</p>	<p>HOSC to follow developments (see separate item on ESHT Clinical Strategy above)</p>
14.	Foundation Trust Status - BSUH	<p>8 September 2009 – Brighton and Sussex University Hospitals NHS Trust announced plans for Foundation Trust and aim to be authorised in autumn 2010.</p> <p>20 November 2009 – Duncan Selbie, Chief Executive and Alex Sienkiewicz, Company Secretary, BSUH briefed HOSC on proposals to submit application for Foundation Trust status. Assurance that Board meetings would continue to be held in public.</p> <p>July 2010 – NHS White Paper says that all Trusts must become FTs, or part of an FT, within 3 years</p> <p>September 2010 – Letter from Duncan Selbie, CEO. BSUH no longer pursuing merger talks with QVH, will pursue own FT application.</p> <p>Feb-May 2011 – BSUH consultation on FT proposals. HOSC sent letter in response May 2011.</p>	<p>HOSC to follow developments</p>
15.	Brighton and Sussex University Hospitals (BSUH) NHS Trust 3Ts	<p>October 2008 – BSUH contacted HOSC to arrange presentation on Teaching, Trauma, Tertiary Care (3Ts) outline business case. This involves redevelopment of the Royal Sussex County Hospital site.</p> <p>6 July 2009 – Presentation by Duncan Selbie, Chief Executive and Nick Groves, Associate Director (3T Service Modernisation), BSUH. HOSC endorses the approach of the teaching hospital and the benefits of being a teaching establishment. HOSC is encouraged to see the progress to date. £450 million development (funding to be sought from Treasury). Three stages to the construction which is scheduled to begin in summer/autumn of 2010. Final stage is expected to be completed by July 2019. Mike Wood, Chief Executive NHS ESDW / NHS H&R gave the PCTs' perspective – supports the development overall but it is important that it fits with local services. HOSC will receive update information reports as the programme progresses and at key stages e.g. decamp plans, funding decisions and construction timing.</p> <p>17 June 2010 – Presentation by Duncan Selbie, Chief Executive and Duane Passman outlining the</p>	

	Issue	Progress Summary	Action
		<p>stages of the development to establish RSCH as a level 1 major trauma centre and building a new cancer centre. They highlighted the need for a full planning application to be made and that flexibility had been built into the scheme to accommodate further development.</p> <p>15 September 2011 – Update from Duane Passman, Director of 3Ts. HOSC considered issues including funding, patient information, design issues, decanting and parking. Planning application submitted September 2011 with outcome expected by January 2012.</p> <p><i>December 2011 – Brighton & Hove City Council announced special Planning Committee meeting on 27 January 2012 to consider the application.</i></p>	<p>HOSC to receive update on outcome of planning process and further report at start of decanting process.</p> <p>Visit to Royal Alex to be arranged</p>
16.	Infection control	<p>Performance of local NHS on infection control targets, notably Clostridium Difficile (C Diff) and Methycillin Resistant Staphylococcus Aureus (MRSA).</p> <p>February/March 2009 - Outbreak of C Diff at Eastbourne DGH caused temporary closure of hospital to non-emergency admissions. Trust remains below its annual target for infections.</p> <p>17 March 2009 – HOSC Chairman met with Kim Hodgson, Chief Executive and Dr David Scott, Medical Director of East Sussex Hospitals Trust (ESHT) to gain assurances regarding action being taken in response to outbreak.</p> <p>2 April 2009 – HOSC Chairman met with Irene Dibben, Chairman, ESHT to discuss action being taken and latest situation.</p> <p>8 April 2009 – HOSC Chairman letter to Irene Dibben requesting report for July 2009 HOSC and weekly updates on C Diff status during April.</p> <p>6 July 2009 – Kim Hodgson, Chief Executive and Dr Barry Phillips, Director of Infection Prevention and Control presented report analysing the causes and lessons learnt from the C Diff outbreak at Eastbourne DGH. Outbreak declared over on 14 April 2009. Infection rates for C Diff and MRSA have now dropped off dramatically. HOSC noted the Trust’s approach to infection control and lesson learnt. Trust now has a rapid response team and can ‘bomb’ rooms with deep clean equipment.</p> <p>July 2010 – ESHT supplied briefing reviewing recent infection control issues and actions. HOSC invited to raise any issues.</p> <p>7 December 2010 – Email from CEO of ESHT to inform HOSC of norovirus outbreak at EDGH, closure of 3 wards. Information circulated to HOSC.</p> <p>April 2011 – ESHT finished the year within targets for C Diff and MRSA</p>	<p>HOSC maintaining watching brief on infection levels and retain the option to request further reports if required</p>

Potential 'reactive' topics

These are topics which the local NHS organisations are likely to raise with HOSC and HOSC may need to respond to. It is expected that further topics will arise during the year but those below are those we are currently aware of.

	Issue	Summary	Action
1.	Sussex Trauma Network	Now being considered as part of Clinical Strategy. HOSC Clinical Strategy Task Group considering briefing paper 18 November 2011 and supported the proposals.	<i>HOSC to receive update on progress mid-2012</i>
2.	Sussex Vascular Network	Now being considered as part of Clinical Strategy. HOSC Clinical Strategy Task Group considering briefing paper 18 November 2011 and supported the proposals.	<i>HOSC to receive update on progress mid-2012</i>
3.	NHS 111	<i>Procurement of a new non-emergency single point of access telephone service. Procurement being managed regionally. South East Coast HOSC Chairmen received briefing at regional meeting with Strategic Health Authority 7 December 2011. HOSC involvement to continue through regional network.</i>	<i>Update at next regional network meeting 14 March 2012</i>

Topics being considered

These are topics identified by HOSC as potential areas of work in the future.

	Issue	Summary	Action
1.	End of life care	8 September 2009 – look at how national strategies are being implemented locally and summary of practice in East Sussex e.g. good practice, role of hospices, funding issues	Consider as future topic when capacity allows
2.	Immunisation and infectious diseases	Possible future agenda item or briefing on take up of immunisations and reporting of infectious diseases. Link to HPV item. 8 September 2008 – possible issue should swine flu cases rise substantially. Information request on status of MMR vaccination and cases of measles August 2010 – Issue raised re excess winter deaths in Lewes District – possible link to uptake of flu vaccination. Further research Sept-Nov 2010. 12 Jan 2011 – Winter deaths issues explored at meeting with NHS ESDW/H&R.	Watching brief - Information request if issues emerge

	Issue	Summary	Action
		Satisfactory explanations of data given and preventative actions in place to address issues, including encouraging uptake of flu jab.	
3.	Prison health Care	<p>PCTs recently taken over responsibility for prison healthcare. Lewes prison recently expanded capacity. Link to mental health services. Possible future agenda topic? Nigel Foote to attend. <i>N.B LINK may be undertaking work on this topic.</i></p> <p>8 September 2009 – will prison services be contracted out by the PCTs? Need to consider mental health and drug use aspects as well as impact of increased number of secure beds at Hellingly.</p> <p>Nov 2010 – Prison Health Needs assessment supplied by NHS ESDW/H&R and follow-up questions asked and responses received.</p> <p>Dec 2010 – prison health likely to be area of community services for early market testing – see Transforming Community Services item above.</p> <p>April 2011 – Prison healthcare transferred from PCTs to Sussex Partnership Trust.</p>	Possibly schedule item to coincide with market testing process if not duplicating LINK work

HOSC Contacts

Claire Lee, Scrutiny Lead Officer

Tel: 01273 481327

E-mail: Claire.lee@eastsussex.gov.uk

East Sussex Health Overview and Scrutiny Committee, County Hall, East Sussex BN7 1SW

Tel: 01273 481327

Fax: 01273 481485

East Sussex HOSC website: www.eastsussexhealth.org

NHS South East Coast website: www.southeastcoast.nhs.uk

Department of Health website: www.dh.gov.uk

Acronyms Glossary

ASC – Adult Social Care

BSUH – Brighton and Sussex University Hospitals NHS Trust

CQC – Care Quality Commission

ESDW – East Sussex Downs and Weald
ESHT – East Sussex Hospitals Trust
GP – General Practitioner
H&R – Hastings and Rother
HOSC – Health Overview and Scrutiny Committee
LINK – Local Involvement Network
NHS - National Health Service
PCT – Primary Care Trust
RSCH – Royal Sussex County Hospital (Brighton)
SECAMB – South East Coast Ambulance Service NHS Trust
SHA – Strategic Health Authority
SPFT – Sussex Partnership NHS Foundation Trust