



Maternity under scrutiny

HOSC devoted a large part of its March meeting to questioning representatives from East Sussex Healthcare NHS Trust (the new name for East Sussex Hospitals NHS Trust) following public and media speculation about the future of maternity services in Eastbourne and Hastings.

Darren Grayson, Chief Executive of the Trust, told the Committee that some senior clinicians had raised concerns about their ability to recruit enough doctors to staff the two maternity units effectively.

Some concerns had also been raised by inspectors from the Care Quality Commission following a recent visit – their report is due to be published shortly.

Mr Grayson said that he would be seeking external clinical advice and reviewing the situation before coming to any judgement, and that his focus would be on safety for patients.

HOSC questioned Jamal Zaidi, consultant obstetrician and Divisional Director for Women and Children to understand the cause of the concerns. He highlighted difficulties in recruiting doctors in training and other 'middle grade' doctors, who do much of the day to day work on the labour ward alongside midwives, due to the relatively small size of the units and a general shortage of trainees.



HOSC challenged the Trust representatives on whether alternative ways of staffing the units had been considered. Mr Grayson responded that the maternity strategy agreed in East Sussex was based on current staffing structures, and additional funding of £3.1m per year had been allocated to support this. However, he assured HOSC that the Trust would look at other similar sized units elsewhere and he would ensure the issues being raised by doctors were subject to external challenge.

Strategic solution

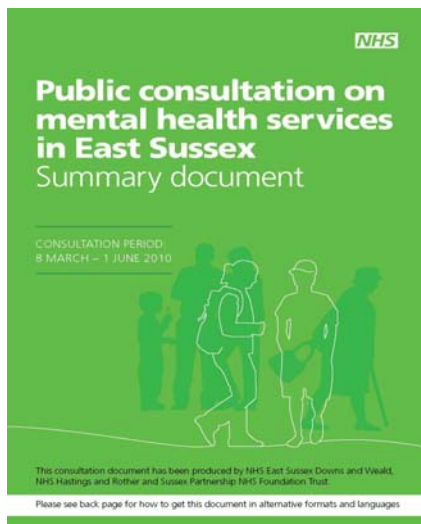
HOSC heard that a strategic solution to the problems was needed, as short-term fixes had been shown to be ineffective. When asked whether staff training needs would take priority over patient needs, Mr Grayson assured the Committee that training was only one factor to be considered alongside others including the needs of women and their families. However, he highlighted that it was not possible to provide the service without the necessary staff.

Councillor Sylvia Tidy, HOSC Chairman, said, "I fully expect HOSC to return to this issue in the coming months. HOSC will expect to be consulted on any long-term or permanent changes to maternity services".

****Update – May 2011****

The Trust has announced that a four month review of maternity and related services will be undertaken, starting in May. The review will be led by Marie Grant, a midwife by background and former Director of Nursing & Midwifery at St George's Hospital, London. It will take into account best practice from around the country and involve local people and stakeholders.

HOSC assesses progress on mental health



HOSC has recommended that the next stage of changes to mental health services should go ahead from June 2011.

Plans agreed by NHS East Sussex Downs and Weald and NHS Hastings and Rother in 2010 will see a reduction in the number of inpatient beds alongside the development of community services which offer alternatives to going into hospital.

Following a detailed review last year HOSC had supported the plans, but said the bed reductions should be implemented when community services had shown good progress and when commitments made in the consultation document were being met. HOSC also wanted to see improved involvement of service users and carers in the process of change.

HOSC Members Councillors Sylvia Tidy, David Rogers, Carolyn Heaps and Peter Pragnell who undertook the original review, met with NHS representatives again in February 2011 to assess progress. They reviewed a large amount of data on the performance of community services, a detailed progress report from the NHS and sought the opinions of service user representatives who had previously given their views to HOSC.

Their conclusion, which was endorsed by HOSC, was that sufficient progress has been made in developing community services to enable the reduction in beds to go ahead in June 2011. There is evidence that a significant number of the existing beds are not being used by East Sussex residents and that alternatives to admission are increasingly available. The closure of 20 beds at the Department of Psychiatry in Eastbourne will enable improvements to take place including better separation of male and female patients and moving the crisis team onto the ward area to work more closely with ward staff.

HOSC has emphasised, however, that support for these changes does not mean that the development of community services is complete. Further changes are planned over the coming months and it is recognised that care will need to continually evolve and improve.

HOSC has attached some conditions to its support for the implementation of bed closures including recommendations that service user and carer involvement should be clearly set out and that 10 beds in Hastings, which have already closed, should be kept on standby as a backstop for 6 months as part of the transition.

HOSC's recommendations were supported by the joint Board meeting of NHS East Sussex Downs & Weald/Hastings & Rother on 31st March. The full report is available on the HOSC website: www.eastsussexhealth.org. The Committee will consider progress in September.

Children's heart surgery consultation

HOSC has agreed to contribute to a joint response from HOSCs in the South East Coast region to a national consultation on changes to children's heart surgery.

The consultation recommends reducing the number of hospitals in England which perform very specialist children's heart surgery from 11 to 6 or 7 in order to improve standards. The consultation also proposes that these specialist centres work with other local hospitals in a network to provide ongoing care.

East Sussex children with rare heart conditions already travel to London for surgery and will continue to under the plans, so it is not a major change. But local HOSCs will make comments in response to the consultation on aspects such as the role of local hospitals and would encourage local families affected to respond. Find more information at: www.specialisedservices.nhs.uk/safeandsustainable



A new direction for East Sussex Healthcare



In March, HOSC reviewed the first part of East Sussex Healthcare Trust's Clinical Strategy. The Strategy aims to set out the Trust's future direction and its approach to developing its services over the next 5 years.

The strategy is being developed in two stages. Stage 1 – the strategic framework – describes the Trust's aims, objectives and priorities. Stage 2 is the development of a strategic delivery plan which will set out in more detail how the priorities will be delivered, including the amount of change that will be needed.

HOSC questioned the Trust's Director of Strategy, Dr Amanda Harrison, about how well partners such as GPs and local authorities had been involved in the development of the strategy. She assured the Committee that GP representatives are directly involved in the three main areas covered by the strategy – planned care, emergency care and integrated care. Adult Social Care and Children's Services had also been involved. An event had been held earlier in March to look at developing care for older people – one of the Trust's priority areas. This had highlighted a need to focus on planning people's discharge from hospital.

Dr Harrison said that engagement and consultation would be undertaken on specific proposed service changes as required and that the Trust would want to discuss possible changes with HOSC. HOSC will receive a report on stage 2 of the strategy at the Committee's next meeting on 16th June.

NHS Reforms in the spotlight

HOSC has examined how national reforms to the NHS are beginning to be implemented locally in East Sussex.

Ali Parsons, Strategy and Projects Manager for the East Sussex Primary Care Trusts (PCTs) outlined how PCTs are being 'clustered' together to work across larger areas during a transitional period as responsibility for commissioning (planning and buying) services is gradually handed over to groups of local GPs. This means that East Sussex PCTs are working with West Sussex and Brighton & Hove in a 'Sussex cluster' with a single Chief Executive, Amanda Fadero, previously the head of Brighton & Hove PCT. HOSC was assured that there would still be a focus on individual areas within the cluster, including a locality manager for East Sussex. HOSC heard that groups of GPs in East Sussex are beginning to form 3 'commissioning consortia'. They aren't expected to take on full responsibility for commissioning until at least April 2013 but in the meantime will start to take on their new role in stages, working at different paces.

The reforms also potentially have significant impact on providers of healthcare as the NHS could be opened up to more competition from the private and voluntary sectors. All NHS Trusts are expected to become Foundation Trusts, or have their services absorbed by a Foundation Trust.

Dr Diana Grice, East Sussex's Director of Public Health, outlined the implications of national policy on public health. Lead responsibility will pass from the PCTs to East Sussex County Council. A Health and Wellbeing Board will be established to oversee the assessment of local needs and the development of a health and wellbeing strategy, and to see that local commissioning plans reflect these. It is hoped that a shadow Board will be established from September 2011. HOSC will have an input into its development and a key role in holding the board to account in the future. Find more NHS reform information at: www.dh.gov.uk



News in brief

National NHS listening exercise

Since HOSC's March meeting the government has announced a national listening exercise during a break in the parliamentary process for the Health and Social Care Bill which sets out proposed reforms to the NHS. An 'NHS Future Forum' has been set up to gather views about the reforms and report back. Further details of any proposed changes to the planned reforms are expected in June/July. Further details at: www.healthandcare.dh.gov.uk

Brighton & Sussex Hospitals set out Foundation plans

Brighton and Sussex University Hospitals NHS Trust, which runs hospitals in Brighton and Haywards Heath, is consulting on its plans to become a Foundation Trust. The consultation, which ends on 13th May, asks for views on the Trust's aims and its arrangements for establishing a Council of Governors. People are also able to sign up as a Trust Member. More information at www.bsuh-ft.org.uk or by calling 0800 731 0319.

Next HOSC meeting

10am Thursday 16th June 2011 at County Hall, Lewes

For webcast recordings and meeting details see our website: www.eastsussexhealth.org

HOSC – March 2011

East Sussex County Council:

Cllr Sylvia Tidy - Chairman

Cllr David Rogers OBE - Vice Chairman

Cllr Carolyn Heaps

Cllr Philip Howson

Cllr Ruth O'Keeffe

Cllr Peter Pragnell

Cllr Barry Taylor

Eastbourne Borough Council

Cllr Alex Hough

Hastings Borough Council

Cllr Eve Martin

Lewes District Council

Cllr Carolyn Lambert

Rother District Council

Cllr Angharad Davies

Wealden District Council

Cllr Diane Phillips

Voluntary services' representatives:

Mr Maurice Langham

East Sussex Seniors Association

Mr Dave Burke (role –share)

Hastings Counselling and Hastings and

Rother Rainbow Alliance and

Ms Julie Eason (role –share)

East Sussex Advice Plus

East Sussex Local Involvement Network:

Ms Janet Colvert

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East Sussex Health Overview and Scrutiny Committee (HOSC) is managed by East Sussex County Council and works in partnership with Eastbourne Borough Council, Hastings Borough Council, Lewes District Council, Rother District Council and Wealden District Council

