

Improvement and Scrutiny Committee – Health

14 September 2020

Report of the Director of Legal Services

SOUTH YORKSHIRE, DERBYSHIRE AND NOTTINGHAMSHIRE JOINT HEALTH OVERVIEW & SCRUTINY COMMITTEE – CURRENT WORK PROGRAMME

1. Purpose of the Report

To inform the Committee of the current work programme of the South Yorkshire, Derbyshire and Nottinghamshire Joint Health Scrutiny Committee.

2. Information and Analysis

Derbyshire County Council has been a member of the South Yorkshire, Derbyshire and Nottinghamshire Joint Health Scrutiny Committee (JHSC) since 2016 when the JHSC was established at the request of the Joint Clinical Commissioning Groups providing services across the region. In February 2016, Council approved the appointment of the Chair of the County Council's Health Scrutiny Committee to represent the Council on the JHSC.

Cllr. David Taylor (this Committee's Chairman) currently represents the County Council on the JHSC and this report provides an update on the recent work of the JHSC.

2.1 Children's Surgery and Anaesthesia

In June 2017 the Joint Committee for Clinical Commissioning Groups (JCCCG) for South Yorkshire and Bassetlaw took a decision to change the way some children's surgery and anaesthesia services are provided in South and Mid Yorkshire, Bassetlaw and North Derbyshire. At that time, the JCCCG agreed to clinical recommendations that children needing an emergency operation for a small number of conditions, at night or at a weekend, would not be treated in hospitals in Barnsley, Chesterfield and Rotherham, and would instead have their surgery at Doncaster Royal Infirmary, Sheffield Children's Hospital or Pinderfields General Hospital in Wakefield.

Since that decision, a number of factors have changed which mean that a new recommendation has been put forward by local clinical experts. The new recommendation is for surgery for three of the four conditions covered by the previous decision (post-tonsillectomy bleeding, foreign body in the airway, torsion of the testes) to continue being provided in the local District General Hospitals, i.e. with no change to the current provision. The recommendation for the fourth condition – suspected appendicitis – is that for children aged under 8, and for children with complex needs, appendicectomies should be

conducted at Sheffield Children's Hospital. This would affect around 45 children a year from across the region.

The Joint CCGs have a number of sources of information showing the views of patients, the public, parents and carers from across South Yorkshire and Bassetlaw on potential changes to children's surgery. In total over 3500 responses have been received about this issue over the course of the last four years. The involvement that has taken place over the four years has used a mixed method approach to reach out to local communities, including paper copies of documents, postcards and flyers distributed to hospitals, GP practices, libraries and children's centres, dental practices, campaign groups, town halls, community venues and organisations; public events in towns and communities as well as those locations in South Yorkshire, Derbyshire and Nottinghamshire where patients access services commissioned by the Joint CCGs, digital communications and engagement; broadcast and print media coverage; social media; a significant amount of engagement activities with seldom-heard communities.

At the meeting of the JHSC on 28 July 2020, the Joint CCGs recommended to the JHSC that, due to the significant efforts that have been made over the last four years to hear from the South Yorkshire, Derbyshire and Nottinghamshire public about their views on changes such as the one proposed for appendicectomy, a further full public consultation on the proposed change, which will only affect approximately 45 children a year, is not necessary.

Across all of the patient involvement responses there were two key conflicting areas of feedback:

- The desire for children to receive the best possible specialist care, and being willing to travel to the Sheffield Children's Hospital to receive that;
- The desire for children to be seen and treated in the local hospital.

Despite these areas of conflicting views, there is clear consensus around the need for children to receive safe, caring, quality care and treatment; to be seen and treated by knowledgeable staff; for there to be great communication (between children, parents, carers and their clinicians – and also between hospitals) and in the speed of appointments.

In the most recent engagement that has taken place, specifically seeking views on the proposed appendicectomy changes, 86% of respondents were in favour of the change, rising to 95% when taking into account the participants' likelihood to be affected by the change (ie parents/ carers with children aged under 8, or who may have children in the future).

The Health Scrutiny Regulations provide no legal definition of 'substantial development or variation' and the Joint CCGs therefore sought the views of the South Yorkshire, Derbyshire and Nottinghamshire JHSC with regards to whether the Committee believed the proposed change to appendicectomy surgery for under 8s (affecting approx. 45 children per year) is substantial and

would therefore trigger the duty to consult with the local authority under the s.244 Regulations.

Having considered the report of the Joint CCGs, and having the opportunity to question the report authors at the meeting, the JHSC agreed that there was no further requirement to consult with the relevant Local Authorities under the s244 regulations.

2.2 Hyper Acute Stroke Unit

After a comprehensive review of hyper acute stroke services across South Yorkshire and Bassetlaw, a strong clinical case for change underpinned the development of a new model to improve access to high quality urgent specialist stroke care, informed by the evidence to improve outcomes for patients.

The model included a Stroke Managed Clinical Network to support the development of networked provision and the consolidation of hyper acute stroke care at Doncaster Royal Infirmary, Royal Hallamshire Hospital (Sheffield) and Pinderfields Hospital (Wakefield). It also included the continuation of existing provision at the Royal Chesterfield Hospital.

The South Yorkshire and Bassetlaw (SYB) model of hyper acute stroke unit (HASU) care was successfully enacted in 2019 and is being delivered in accordance with the HASU service specification. Providers are working to meet all expectations of this within agreed timescales.

- The pathway is being monitored closely by all partners with support from the newly established South Yorkshire and Bassetlaw Stroke Hosted Network.
- Since enacting the changes, a total of 590 Rotherham and Barnsley stroke patients have received their HASU care in Sheffield, Wakefield and Doncaster. Work is ongoing to monitor patient flow and patient activity numbers. Patients are moving through the agreed pathway as expected and all partners are working together to support seamless transfer of care.
- Feedback from patients and their families to staff on the ground continues to be positive. All partners remain committed to realising the full benefits for patients.
- The latest Sentinel Stroke National Audit Programme (SSNAP) report suggests that all HASU's are offering high quality services to patients as achieving A and B SSNAP level scores.
- The SYB Stroke Hosted Network was launched in January 2020. It will continue to support and monitor the HASU Pathway as part of its work programme.
- During the COVID-19 situation the pathway has been sustained and delivered in line with the HASU service specification. There has been some reduced demand for stroke beds within SYB as a whole but this is now returning

to normal levels. Strong links have been established between the Network and national stroke leaders which has ensured that NHS England guidance on stroke services during COVID-19 has been followed within SYB.

3. Health Considerations

The representation of Derbyshire County Council on the Sheffield NHS Joint Health Scrutiny Committee continues to provide the opportunity to protect and promote the interests of communities in North Derbyshire which are served by Health providers from the Sheffield and North Derbyshire area.

4. Legal Considerations

The Health Scrutiny Regulations (Regulation 30) 2013 require local authorities to work as a joint committee where health organisations must consult with more than one local authority scrutiny committee on substantial reconfiguration proposals. These are referred to as mandatory joint health scrutiny committees.

5. Other Considerations

In preparing this report the relevance of the following factors has been considered: financial, human resources, human rights, equality of opportunity, environmental, property, crime and disorder and social value considerations.

6. Key Decision

No

7. Is it necessary to waive the call-in period?

No

8. Background Papers

Public reports submitted by the Joint CCGs to the meeting of the South Yorkshire, Derbyshire and Nottinghamshire Joint Health Scrutiny Committee on 28 July 2020.

9. Officer Recommendation

The Committee is asked to note the recent work of the South Yorkshire, Derbyshire and Nottinghamshire Joint Health Scrutiny Committee.

Simon Hobbs
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