HAMPSHIRE COUNTY COUNCIL

Report

Committee:	Health and Adult Social Care Select Committee	
Date of Meeting:	17 May 2018	
Report Title:	Proposals to Develop or Vary Services	
Report From:	Director of Transformation & Governance	

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1. Summary and Purpose

- 1.1. The purpose of this report is to alert Members to proposals from the NHS or providers of health services to vary or develop health services provided to people living in the area of the Committee.
- 1.2. Proposals that are considered to be substantial in nature will be subject to formal public consultation. The nature and scope of this consultation should be discussed with the Committee at the earliest opportunity.
- 1.3. The response of the Committee will take account of the Framework for Assessing Substantial Change and Variation in Health Services (version agreed at January 2018 meeting). This places particular emphasis on the duties imposed on the NHS by Sections 242 and 244 of the Health and Social Care Act 2006, includes new responsibilities set out under the Health and Social Care Act 2012, and takes account of key criteria for service reconfiguration identified by the Department of Health.
- 1.4. This Report is presented to the Committee in three parts:
 - a. *Items for action:* these set out the actions required by the Committee to respond to proposals from the NHS or providers of health services to substantially change or vary health services.
 - b. *Items for monitoring:* these allow for the monitoring of outcomes from substantial changes proposed to the local health service agreed by the Committee.
 - c. *Items for information:* these alert the Committee to forthcoming proposals from the NHS to vary or change services. This provides the Committee with an

- opportunity to determine if the proposal would be considered substantial and assess the need to establish formal joint arrangements
- 1.5. This report and recommendations provide members with an opportunity to influence and improve the delivery of health services in Hampshire, and to support health and social care integration, and therefore assist in the delivery of the Joint Health and Wellbeing Strategy and Corporate Strategy aim of maximising well being.

Items for Action

2. Hampshire Hospitals NHS Foundation Trust: Outpatient, X-ray and community midwifery services in Whitehill & Bordon: Reprovision of services from alternative locations or by an alternative provider

Context

- 2.1 The NHS, or any provider of NHS services, is required to consult the health scrutiny committee on any substantial or temporary variations to the provision of the health service, and to provide any information that the committee may require to enable them to carry out scrutiny of the planning, provision and operation of this service.
- 2.2 The HASC has previously considered issues relating to the Chase Community Hospital in Whitehill and Borden, the last update having been received in November 2014. At that time the HASC heard that progress was being made in attracting additional use of the Site.
- 2.3 Since then, the housing development planned in Whitehill and Borden has been included in the 'Healthy New Towns' programme. Whitehill and Bordon is being transformed from a garrison to a green and healthy town. A complex, multi partner, 15 year programme will deliver 3,350 new homes, a new town centre with new leisure centre, secondary school, cinema and health hub and 80 hectares of suitable alternative natural greenspace. A core ambition within the Healthy New Town programme in Whitehill & Bordon is the development of a new town centre health facility to be delivered in 2020. The stated aim was to provide everything that is currently included within the Chase Community Hospital plus innovative, state-of-the-art models of care from the new health facility.

Update

2.3 Hampshire Hospitals Foundation Trust currently provides outpatient, x-ray and community midwifery services from the Chase hospital, however, the Trust is proposing to re-provide these services from alternative locations. The key reasons for this change are: the declining share of activity coming to HHFT from Bordon GPs; the low numbers of patients attending clinics at The Chase; the

disproportionate costs of renting space relative to the activity delivered; and the relative distance of Bordon from HHFT main hospital bases.

- 2.4 The CCG has been in discussion with local GP practice representatives about the proposal to re-provide HHFT services currently offered at Chase Community Hospital at the Trust's other sites. The CCG is also involved in discussions with alternative providers to bring replacement services to Whitehill and Bordon.
- 2.5 The HASC has a duty to consider whether the proposals constitute a substantial change in service, and if so, whether the proposal is in the interest of the service users affected. This should be informed by consideration to the scale of the impact of the change on those using the service.
- 2.6 A Report (see Appendix) has been received from the Hospital Trust providing further detail.

Recommendations

HASC to agree:

- Whether the proposed change constitutes a substantial change
- Whether the proposed change is in the interest of the service users affected
- To agree any recommendations to the NHS bodies concerned regarding how to take their proposals forward, and to agree whether/when to request a further update.
- 3. Southern Health NHS FT: Plans to develop Secure Forensic Mental Health and Learning Disabilities Services

Context

- 3.1 Southern Health NHS Foundation Trust provides a range of Secure Forensic Mental Health Services for adults and young people across Hampshire. The Trust is proposing to change the use of Woodhaven (currently a Low Secure Hospital for adults with a learning disability), to re-design it to become an Adolescent Low Secure Hospital. This will provide up to 14 beds primarily for young people from the south of the country. To accommodate the patients currently being supported at Woodhaven, they plan to build a brand new bespoke 10 bedded Low Secure Forensic Residential Unit on their main Tatchbury Mount site adjacent to Woodhaven. To make use of current resources this replaces Rufus Lodge, currently an unused clinical building onsite.
- 3.2 To allow the redesign of the Woodhaven site to take place, the Trust plans to temporarily move the patients based in Ashford Ward at Woodhaven, to Ashurst

Ward at Ravenswood House (Medium Secure Forensic Hospital based in Fareham).

- 3.3 The HASC has a duty to consider whether the proposals constitute a substantial change in service, and if so, whether the proposal is in the interest of the service users affected. This should be informed by consideration to the scale of the impact of the change on those using the service.
- 3.4 A Report (see Appendix) has been received from Southern Health providing further detail.

Recommendations

HASC to agree:

- Whether the proposed change constitutes a substantial change
- Whether the proposed change is in the interest of the service users affected
- To agree any recommendations to the NHS bodies concerned regarding how to take their proposals forward, and to agree whether/when to request a further update.

Items for Monitoring

4. NHS North Hampshire Clinical Commissioning Group and NHS West Hampshire Clinical Commissioning Group: Transforming Care Services in North and Mid Hampshire

Context

- 2.1 The now-disbanded Health Overview and Scrutiny Committee (HOSC) agreed that the proposals for the future of hospital services in north and mid Hampshire constituted a substantial change in service in <u>January 2014</u>. At this time, these proposals were to either:
 - a) Centralise critical care services on the site of Basingstoke and North Hampshire Hospital and invest in Royal Hampshire County Hospital in Winchester as a general hospital treating the majority of patients in the local community; or
 - b) Build a new 300-bedded critical treatment hospital between Basingstoke and Winchester to treat the 15%-20% sickest patients or those at highest risk and invest in both the Royal Hampshire County Hospital and Basingstoke and North Hampshire Hospital as general hospitals treating the majority of patients in their respective communities.

Background

2.3 The HASC have received update items on proposals for hospital services in North and Mid Hampshire since this time, with the most recent in January 2018. At that meeting, the HASC heard that the preferred option agreed by the CCGs was to continue work to develop options for centralising services on the existing HHFT sites (in Andover, Basingstoke and Winchester). The option to consult on building a standalone critical treatment hospital would not be progressed further, with the CCGs citing unaffordability as the main reason for this. The HASC requested the CCGs and Trust return to the May meeting to provide an update on progress with developing the preferred option.

Update

- 2.7 A report (see Appendix) has been received from the CCGs and Hospital Trust providing an update. Work has been focusing on:
 - a) transforming services to provide care in the community in a more integrated, proactive and preventative way, and therefore reduce the need for hospital based care
 - b) reconfiguring acute services
 - c) estate and capital implications for the local healthcare system

Recommendations

2.11 That the Committee:

- a. Note the progress on developing the agreed options for 'transforming care services in North and Mid Hampshire'.
- b. Makes any further recommendations on this item following discussions held during the meeting.

CORPORATE OR LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic growth and prosperity:	No
People in Hampshire live safe, healthy and independent lives:	Yes
People in Hampshire enjoy a rich and diverse environment:	No
People in Hampshire enjoy being part of strong, inclusive communities:	Yes

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document	<u>Location</u>
None	

IMPACT ASSESSMENTS:

1. Equalities Impact Assessment:

1.1 This is a covering report which appends reports under consideration by the Committee, therefore this section is not applicable to this covering report. The Committee will request appropriate impact assessments to be undertaken should this be relevant for any topic that the Committee is reviewing.

2. Impact on Crime and Disorder:

2.1 This is a covering report which appends reports under consideration by the Committee, therefore this section is not applicable to this covering report. The Committee will request appropriate impact assessments to be undertaken should this be relevant for any topic that the Committee is reviewing.

3. Climate Change:

3.1 How does what is being proposed impact on our carbon footprint / energy consumption?

This is a covering report which appends reports under consideration by the Committee; therefore this section is not applicable to this work report. The Committee will consider climate change when approaching topics that impact upon our carbon footprint / energy consumption.

3.2 How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?

This is a covering report which appends reports under consideration by the Committee, therefore this section is not applicable to this work report. The Committee will consider climate change when approaching topics that impact upon our carbon footprint / energy consumption.