

Report to: Partnerships Scrutiny Committee
Date: 20th February 2007
Report of: Executive Member for Health
Subject; Review of Health Services North and South of the Tees: Outcome of Report of Independent Reconfiguration Panel.
Ward: All

1. Purpose of Report

- 1.1 This report advises on the outcome of the Secretary of State of Health's referral to the Independent Reconfiguration Panel of proposed changes to paediatric and maternity services for the North Tees area as part of the wider Review of Health Services North and South of the Tees following the Darzi Review completed in July 2005.
- 1.2 The referral of this matter to the Independent Reconfiguration Panel arose because of objections to the reconfiguration service proposals by the Joint Scrutiny Committee formed by the Local Authorities of Tees Valley, North Yorkshire and Durham County Councils, who did not accept the recommendations relating to the establishment of a consultant led Women's and Children's Centre of Excellence at the University Hospital Hartlepool.

2. Consultations

- 2.1 In preparing this report I have consulted with the Executive Members for Regeneration and Housing and the Director of Regeneration and Development.

3. Background

- 3.1 The Executive in October 2006 considered a report of the Review of Health Services North and South of the Tees. This explained the background to the proposals submitted to the Secretary of State for Health by the former County Durham and Tees Valley Strategic Health Authority following the work of Professor Darzi and the subsequent events including the referral of this matter to the Independent Reconfiguration Panel and the invitation for the Council to make representations to the Panel.
- 3.2 The Executive had in January 2006 agreed a policy position that supported the Darzi Review Report, but particularly drew attention to the need to fully recognise the issue of transport and ease of access to acute hospital services for residents in East Durham. This viewpoint reflected work undertaken by the Partnerships Scrutiny Committee in looking into this matter.
- 3.3 The Council's position was that the Strategic Health Authority's proposals were a comprehensive but balanced package designed to maintain in the North Tees and Hartlepool NHS Trust Board area, two sustainable General Hospitals each with specific specialisms but managed collectively to improve access to health services for the local communities they serve. Within this, it was proposed that the University Hospital Hartlepool should host a new Centre of Excellence in Women's and Children's Services, including consultant-led maternity, paediatric services, gynaecology and breast surgery. Linked to this at the University Hospital North Tees, a 24-hour midwife-led maternity unit should be developed.

- 3.4 As part of the review process the County Durham and Tees Valley SHA was required to establish a Joint Local Authority Overview and Scrutiny Committee to consider the proposals for service change. The Joint Scrutiny Committee produced a report in February 2006 that recommend not proceeding with the implementation of the proposals in respect to the provision of consultant lead maternity and paediatric services at University Hospital Hartlepool.
- 3.5 The Secretary of State's appointed Service Reconfiguration Panel undertook its review work between October and December 2006. As part of their work a number of local consultation meetings were held with interested parties. This included meetings with John Cummings MP and Professor Darzi. The Council secured a meeting with the Panel in November 2006 and also submitted written representations.
- 3.6 The Council in its representations sought to ensure that the Panel clearly understood the acute hospital service needs of residents of East Durham and the strong reliance on the University Hospital Hartlepool and in this context the critical issue of ease of access particularly by public transport both for patients, visitors and staff. It was requested that these consideration be given due weight in any deliberations alongside other clinical and service efficiency considerations. The Council articulated the view that any service changes should accord with the following principles:
- In the North Tees and Hartlepool NHS Trust area the present arrangements of services are accepted as being unsustainable and that the principle of Darzi to bring about greater integration and better redistribution of services between the University Hospital of North Tees and University Hospital of Hartlepool was correct and is supported.
 - Any change in services should lead to improved patient outcomes and improved access to healthcare.
 - Services should as far as possible be located as close to peoples homes as possible, but recognising issues of patient safety and the development of specialisms, it is accepted that some people have to travel to a hospital other than their nearest.
 - The health needs and health deprivation being faced by residents of East Durham should be fully reflected and acknowledged in any decisions on the future acute hospital service arrangements.
 - Taking account of the above considerations would wish to see retained at the University Hospital Hartlepool site, a comprehensive and viable range of acute hospital services.

4.0 Independent Reconfiguration Panels Recommendations to the Secretary of State .

- 4.1 The Independent Reconfiguration Panel presented their report to the Secretary of State on 18th December 2006. The report made a number of recommendations as attached at Appendix 1. A full copy of the report can be inspected by contacting the Director of Regeneration and Development's Office.
- 4.2 In summary the report concludes that the existing consultant-led maternity services at the University of Hartlepool and the University of North Tees make ineffective use of clinical staff, make it extremely difficult to meet current safety standards and do not provide women and children with the quality of service they should be receiving. As such it is felt that that consultant-led maternity and paediatric services should be centralised on one site to improve patient safety, make better use of scarce clinical staff and ensure all training and European Working Time Directive requirements can be met.

- 4.3 It is proposed that a new modern hospital should be procured within easy reach of people in Hartlepool, Stockton, Easington and Sedgefield, to replace the existing out of date hospital buildings at North Tees and in Hartlepool. However prior to a the new hospital option being advanced, the Panel's Report concluded that consultant-led maternity and paediatric services should be centralised at the University Hospital of North Tees with a midwife-led maternity unit and a paediatric assessment unit - in addition to elective surgery and emergency medical services - provided at the University Hospital of Hartlepool. The reasons given for basing the interim provision at North Tees is that:
- Paediatric surgery and paediatric medicine should be based on the same site.
 - The risk to sustainability of services in the North Tees area, as locating the services at Hartlepool would result in more women from the Stockton on Tees area electing to use the James Cook University Hospital rather than Hartlepool.
 - Considerable additional finance would be required to convert buildings at the University Hospital of Hartlepool, which would take time to deliver. By contrast, only minor works were seen to be required at the University Hospital of North Tees site that has recently had refurbishment works completed within its maternity unit.
- 4.4 The report also recognises that the North Tees and Hartlepool NHS Trust with local authorities will need to develop new transport links to meet the needs of staff, patients and carers in the planning of new service provisions. The Panel noted a widespread concern about transport difficulties between the hospital sites and the combined Trust and a local authority transport group have already undertaken a large amount of work on developing public transport links. Initiatives to improve accessibility from Hartlepool, Easington and Sedgefield were though seen to be urgently required and essential.
- 4.5 The Panel also recorded that Hartlepool Hospital is a highly valued institution and should continue to provide a range of existing and new services, including the establishment of a midwife-led maternity unit and a paediatric assessment unit. It was noted that in many instances, women could be most appropriately cared for by a midwife. It was also seen as important that a paediatric assessment unit should be made available on the Hartlepool site open from morning until late evening.
- 4.6 In terms of other services, the Panel noted that the Hospital has become recognised as a centre for elective surgery and this role should continue with elective operations being undertaken there, including inpatient breast surgery and gynaecological day surgery and an emergency medical service.
- 4.7 Finally the Panel's Report emphasises that all services that do not have to be provided within a hospital setting should be placed within the heart of communities. Primary care health centres should continue to be developed locally to provide treatment for a large number of medical conditions and community midwifery should be improved.

Secretary of States Decision

- 4.8 The Secretary of State has now considered the report and has confirmed in a letter to the Chair of the Joint Local Authority Health Scrutiny Committee and to other stakeholders that she has accepted the report's recommendations. This effectively brings the review process to a conclusion. It is now a matter for the North Tees and Hartlepool NHS Trust in consultation with the relevant Primary Care Trusts to work towards the implementation of the agreed proposals.

5.0 Next Step Options

- 5.1 The Leader of the Council has written to the Secretary of State to express disappointment at the outcome and the fact that it is considered that this will weaken the role of University Hospital Hartlepool as a general hospital facility to the detriment of residents in East Durham.
- 5.2 Further, it is felt that the Council cannot accept the concluding recommendation of the Panel's report that "key community leaders and stakeholders should all give their full support to the successful implementation of these proposals for the benefit of local people".
- 5.3 The Council's policy position on the Review is established (as detailed in para 3.2 and 3.6 above). The Darzi Review proposals were supported and in their implementation, the issue of transport and ease of access to acute hospital services for residents in East Durham needed to be recognised, along with the retention at the University Hospital Hartlepool site, of a comprehensive and viable range of acute hospital services.
- 5.4 As such the Council cannot offer full support for the proposals of the Reconfiguration Panel. Further evidence is seen to be required as to what "successfully implemented" means in practice against the aim of securing improved access to hospital based services for residents of East Durham and sustaining Hartlepool Hospital for the immediate future. There is a need to carefully examine what (if any) are the identifiable benefits of the changes in services for Easington District.
- 5.5 The Partnerships Scrutiny Committee's views are sought on how they might assist to ensure the implementation of the planned service reconfigurations for paediatrics and maternity services and safeguarding the sustainable future on University Hospital Hartlepool is delivered so that the benefits of the changes can be shown to help meet the Council's objective to secure improved access to health services for residents of East Durham. The Committee might therefore wish to consider:
- Undertaking a review to determine the identifiable benefits to East Durham of the Review outcome recommendations.
 - Engaging with Hartlepool Borough Council's Health Scrutiny Committee on this matter to ascertain their views.
 - Invite the North Tees and Hartlepool NHS Trust to explain how they will work to plan services to address the needs and accessibility issues facing residents of Easington District arising from the proposed changes.
 - Consider the implications of the proposed changes on access to and usage of other acute hospital services in Sunderland and Durham and the impacts this might have on the District's residents.

6. Implications

Financial:

- 6.1 There are no direct financial implications arising from this report.

Legal:

- 6.2 There are no direct legal implications.

Policy

- 6.3 There are no direct policy implications

Risk:

- 6.4 No risk assessment has been undertaken as this was a consultation related exercise.

Communication:

6.5 The views of the Council will be communicated by a Press Release.

7.0 Corporate Implications

Corporate Plan and Priorities

7.1 Consideration of this matter reflects the Council's priorities to 'Build a Healthy Community' and to advocate for 'Quality Services for all our People' through community leadership and the promotion of well-being.

Social Inclusion

7.2 The submission of representations on the reconfiguration of services between North Tees and Hartlepool hospitals represents a commitment by the Council to work to reduce health inequalities and social exclusion.

Other Implications

7.3 There are no equality and diversity issues, e- government, procurement, sustainability and crime and disorder implications directly arising from the report.

8.0 Conclusion

8.1 I would ask that the Partnerships Scrutiny Committee:

1. Receive my report on the outcome of the Secretary of State for Health's decision on the future of paediatric and maternity services for the North Tees and Hartlepool NHS Trust area based on advice from the Independent Reconfiguration Panel.
2. Note the view of the Executive Members involved in this work that that the Council cannot accept the concluding recommendation of the Panel's report that "key community leaders and stakeholders should all give their full support to the successful implementation of these proposals" because of its failure to address the key concerns of the Council in supporting the Darzi based review proposals.
3. Consider the actions the Committee could take to ensure that the implementation of these proposals do fully addresses the health needs and accessibility issues faced by the communities of East Durham.

Background Papers.

1. Report to Executive, October 2006.
2. Independent Reconfiguration Panel report submitted to the Secretary of State For Health, 18 December 2006
3. Letter from Secretary of State for Health to Chair of Section 7 Joint Consultation Committee, January 2007

Further information Contact:

Richard Prisk, Director of Regeneration and Development.

Independent Reconfiguration Panel North Tees and Hartlepool**EXECUTIVE SUMMARY**

1. It is not an option for the location of maternity and paediatric services to stay the same. People north of the Tees deserve access to maternity and paediatric services of at least comparable quality and safety to those provided south of the Tees.
2. Consultant-led services for both maternity and paediatrics should be centralised on one site to improve patient safety and to make the most effective use of scarce clinical staff and meet all training and European Working Time Directive requirements.
3. A modern hospital to replace the existing out of date hospital buildings should be provided on a new site in a well situated location accessible to the people of Hartlepool, Stockton-on-Tees, Easington and Sedgefield.
4. Further initiatives are needed to improve the provision of primary and community care, including community midwifery. All services that do not need to be provided in a hospital setting should be placed in the heart of communities in line with implementing the White Paper *“Our health, our care, our say: a new direction for community services”*.
5. Until the new hospital is open, consultant-led maternity and paediatric services should be centralised at the University Hospital of North Tees to ensure their continued integrity, safety and sustainability.
6. Until the new hospital is open, a midwife-led maternity unit and a paediatric assessment unit should be provided at the University Hospital of Hartlepool in addition to elective surgery and emergency medical services, taking into account best practice.
7. New initiatives supported by the NHS and local authorities are required to meet the transport needs of patients, carers and staff between the University Hospital of Hartlepool and the University Hospital of North Tees and the communities they serve. The North East Ambulance Service should be involved at an early stage in discussions about all changes to patient services.
8. The most specialised neonatal services serving Teesside as a whole should be located in the new hospital.
9. Other more specialised hospital services serving Teesside as a whole should be provided at the James Cook University Hospital and the new hospital north of the Tees determined by the optimum relationship with other clinical services and where capacity can be found.
10. With the North Tees and Hartlepool NHS Trust moving towards foundation trust status, key community leaders and stakeholders should all give their full support to the successful implementation of these proposals for the benefit of local people and to bring years of uncertainty to an end.