



Leicester
City Council

Minutes of the Meeting of the
HEALTH SCRUTINY COMMITTEE

Held: TUESDAY, 14 FEBRUARY 2006 at 5.30pm

P R E S E N T :

Councillor Westley - Chair
Councillor Green (Liberal Democrat Spokesperson)
Councillor O'Brien (Conservative Spokesperson)

Councillor Dempster

Councillor Sood

CO-OPTED MEMBER

Stephanie O'Donovan, Eastern Leicester Public & Patient Involvement Forum

IN ATTENDANCE

Rod Moore, Assistant Director of Public Health

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41. DECLARATIONS OF INTEREST

Members were asked to declare any interests they may have in the business on the agenda and/or indicate that Section 106 of the Local Government Finance Act (1992) applied to them.

Councillor Westley declared a non-prejudicial interest in that he had a relative who was employed at the Leicester Royal Infirmary.

**42. CONSULTATION ON NEW STRATEGIC HEALTH AUTHORITY
ARRANGEMENTS IN THE EAST MIDLANDS: ENSURING A PATIENT-LED
NHS**

It was agreed to address this item alongside the item, "Configuration of NHS Ambulance Trusts in England".

43. CONFIGURATION OF NHS AMBULANCE TRUSTS IN ENGLAND

Maggie Boyd from the Leicestershire, Northamptonshire and Rutland Strategic Health Authority and Kam Desai and Paul St Clair from the East Midlands Ambulance Trust submitted documents which set out proposals for the creating of a new single Strategic Health Authority (SHA) for the East Midlands and the

configuration of NHS Ambulance Trusts in England.

It was explained that the proposals were a result of a number of factors such as the need to ensure services were fit for purpose, the need to strengthen commissioning, improve health and free up resources. The organisations would be co-terminus with regional boundaries. It was envisaged that the Ambulance Service would become a mobile health service, providing links to services other than just Accident and Emergency, such as mental health teams. It would also allow paramedics to treat more people out of the hospital. The role of the new SHAs was explained and it was stated that it would be about overseeing a high quality, safe and fair service, with an emphasis on building capacity and commissioning.

Members asked for assurance that adequate consultation meetings would be held, as a previous consultation on changes to an ambulance station had not sufficiently reached affected parties. It was felt that it was important to let the public know how services were likely to change, and the benefits these changes would bring them. It was explained to Members that several formal and informal consultations had already taken place across the affected area. Concern was also expressed by Members regarding the map for proposed ambulance configuration, as it did not mention cities, particularly Leicester, which could result in people feeling that the service would not be relevant to them.

Members asked how the proposed SHA would ensure health care would be developed in line with City residents, how it would ensure greater choice and community involvement, and how it would be monitored. Officers explained that the purpose of the proposal was to interlink services with others in the area. No specifics were available as yet, as this was the consultation stage for the collection of views and opinions ahead of the final decision by the Secretary of State, and that such matters would be the responsibility of the new organisation, although the focus would be on a patient-led service. Members agreed that it was an important role of the Committee to ensure this happened and recognised the role of the Public and Patient Involvement Forums (PPIF) in auditing and probing.

Members asked how the proposed ambulance service would remain responsive to the needs of Leicester residents, what assurances could be given that services would improve and the level of funds they foresaw being reinvested in front-line services over the next few years. Officers stated that no specifics were available as yet, as this was the consultation stage and that this would be the responsibility of the new organisation. It was stated that there was a need to understand the communities and that improvement to the service would be assisted with the realignment of technology. Possible changes to the traditional staffing were outlined and how this could mean more people being treated at home.

Members also asked for details about current levels of on-call ambulances, how this would improve and what effect changes in shift patterns would have on patient appointments. It was agreed that a written response would be

provided to Members of the Committee which would address the questions from a City perspective.

The benefits of providing information leaflets to all residents explaining how the new services would work were discussed. Officers from the SHA stated that they would investigate a variety of methods of communication. Members suggested that the SHA could share ideas with the Council's Communication Section.

Members asked how staff had reacted to the proposals for changes in the Ambulance Service and it was stated that the reaction was generally positive and that the proposal would allow staff to use a variety of skills.

Members stated that they wished to see an improvement at GP surgeries with regard to general dissatisfaction of users, particularly with reception service and people being struck off lists, as this would impact on delivery. It was explained that work had been done in improving the patient experience and this would be included in performance management in future. Stephanie O'Donovan stated that the PPIF had done a questionnaire in GP surgeries which could provide evidence of satisfaction levels.

RESOLVED:

- 1) That the Committee's general support for the proposals for a single SHA and Ambulance Service for the East Midlands be noted by the SHA, subject to assurances that services would be developed around the needs of local residents and that changes would lead to an improvement in service.
- 2) That written responses, directly relating to the City, be provided to Members of the Committee with regards to questions asked about levels of on-call ambulances within the city, the impact of changes in shift patterns, responsiveness and accountability of the new organisation and the reason behind the advertising for a chairman before the consultation has ended.
- 3) That a letter be sent to the Department of Health on behalf of the Committee expressing concern that Leicester is not mentioned on the map for proposed ambulance configuration.

45. CLOSE OF MEETING

The meeting closed at 6.30pm.