

Members are reminded that they must declare all relevant pecuniary and non-pecuniary interests relating to any items of business to be discussed at this meeting

BIRMINGHAM CITY COUNCIL

JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE (BIRMINGHAM AND SANDWELL)

THURSDAY, 25 JANUARY 2018 AT 14:00 HOURS
IN COMMITTEE ROOM 2, COUNCIL HOUSE, VICTORIA SQUARE,
BIRMINGHAM, B1 1BB

A G E N D A

1 NOTICE OF RECORDING/WEBCAST

The Chairman to advise/meeting to note that this meeting will be webcast for live or subsequent broadcast via the Council's Internet site (www.civico.net/birmingham) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

2 APOLOGIES

To receive any apologies.

3 DECLARATIONS OF INTERESTS

Members are reminded that they must declare all relevant pecuniary interests and non-pecuniary interests relating to any items of business to be discussed at this meeting. If a pecuniary interest is declared a Member must not speak or take part in that agenda item. Any declarations will be recorded in the minutes of the meeting.

3 - 6

4 MINUTES OF PREVIOUS MEETING

To confirm the Minutes of the meeting held on 30 November 2017.

7 - 12

5 ONCOLOGY SERVICES AT SANDWELL AND WEST BIRMINGHAM HOSPITAL

Catherine O'Connell, Regional Director, Specialised Commissioning, NHS England; Toby Lewis, Chief Executive, SWB Hospitals NHS Trust; Daniel Ford, Consultant Clinical Oncologist and Clinical Service Lead.

13 - 16

6 **CHANGES TO APMS GP CONTRACTS**

Jayne Salter-Scott, Head of Engagement & Communication, SWBCCG.

17 - 24

7 **URGENT CARE/WALK-IN CENTRE**

Jayne Salter-Scott, Head of Engagement & Communication, SWBCCG.

8 **DATE AND TIME OF NEXT MEETING**

To agree a date and time.

**Birmingham City Council and Sandwell Metropolitan
Borough Council**

Minutes of the Joint Health Overview and Scrutiny Committee

**30 November, 2017 at 2.00 pm
at the Sandwell Council House, Oldbury**

- Present:** Councillor E M Giles (Chair);
Councillors S Downing, B Lloyd and F Shaeen
(Sandwell Metropolitan Borough Council).
- Councillors D Alden, S Anderson, F Cotton and K
Hartley (Birmingham City Council).
- Apologies:** Councillors Z Ahmed (Sandwell) and J Francis
(Birmingham City Council).
- In Attendance:** C O'Connell – Regional Director Specialised
Commissioning, NHS England
G Lineham – Clinical Director Specialised
Commissioning, NHS England
J Kinghorn – Head of Communications and
Engagement Specialised Commissioning, NHS
England
A Williams - Accountable Officer Sandwell and
West Birmingham Clinical Commissioning Group
S Hancock – University Hospitals Birmingham
J Spencer – Healthwatch Birmingham
W Hodgetts – Healthwatch Sandwell

18/17 **Minutes**

Resolved that the minutes of the meeting held on 28th
September, 2017 be approved as a correct record.

**Joint Health Overview and Scrutiny Committee
(Birmingham City Council and Sandwell Metropolitan Borough Council)
30 November, 2017**

19/17 **Oncology Services in Sandwell and West Birmingham**

Further to Minute No. 14/17 (28th September, 2017) representatives from NHS England attended to inform the Committee of the background and circumstances around the temporary relocation of oncology services from Sandwell and City hospitals to the Queen Elizabeth and New Cross hospitals.

Solid Tumour oncology services had been commissioned from Sandwell and West Birmingham Hospitals (SWBH), who had a Service Level Agreement with University Hospitals Birmingham (UHB) for their medical staffing to provide services at Sandwell and City hospitals. In 2015, UHB had given notice to SWBH that they would be unable to continue to support the service. Since this time NHS England had been working to ensure that the service could remain at Sandwell and City hospitals, however it had not been possible and UHB had given final notice in April 2017. The service had continued on a rolling contract basis until an emergency Quality Summit in October 2017 had concluded that an urgent, temporary re-location of the service was required, pending a wider review of cancer services across Birmingham and the Black Country.

The Committee noted that the only change to the patient pathway was that those receiving chemotherapy would have to travel to Queen Elizabeth or New Cross hospital for their treatment, depending on their preferred choice. This meant that patients' travel time would be longer and options for support with transport were therefore being explored.

Consultation on the change had not been possible due only six months final notice being given. However, extensive and significant consultation would take place on the wider review of cancer services.

From the discussion, questions and contributions of those present, the following issues were highlighted:-

- Patients did not generally care which organisation provided their care.

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- Members opined that reliance on a single provider was short-sighted and questioned the commissioning skills of NHS England.
- Members expressed concern that if there had been no satisfactory resolution in relation to one service in over two years, why should they have faith that a satisfactory resolution would be found in 12 months?
- NHS England was satisfied that it was acting within the law and was not required to consult on this temporary change.
- Parking at Queen Elizabeth Hospital was already in high demand and chemotherapy patients would almost certainly require spaces for themselves or companions as members felt that it was wholly unacceptable to expect them to use public transport.
- There was concern that the temporary change would become permanent, however UHB had been clear that it did not wish to deliver the service beyond the completion of the wider 12 month review.
- There were differences amongst UHB staff and SWBH staff about technical service specifications and what best practice looked like, which had contributed to the present situation.
- The situation was not about resources and could not be addressed by increasing funding or staffing levels.
- An added consequence of the changes was that it would impact on the viability of the two blood based oncology services in Sandwell and West Birmingham.

The Committee was extremely dissatisfied that no consultation had taken place about the changes and that such an unavoidable situation had been reached. The Committee stated that it would be closely monitoring the situation and would not hesitate to use the powers conferred to it under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 should it become necessary. NHS England acknowledged that the situation was regrettable and assured the Committee that their preference had always, and would continue to be, that services were provided locally. The Committee was assured that there would be a wide an extensive public and patient engagement exercise as part of the wider review of cancer services.

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Members also expressed disappointment that the Chief Executive of Sandwell and West Birmingham Hospitals NHS Foundation Trust had not advised the committee of the future changes to gynaecology services.

Resolved:-

- (1) that an update on the review of cancer services across Sandwell and West Birmingham be provided to the Committee on 25th January 2018;
- (2) that, representatives of Sandwell and Birmingham Hospitals NHS Foundation Trust and University Hospitals Birmingham be requested to attend the meeting on 25th January, 2018.

(Meeting ended at 3.57 pm)

Contact Officer: Stephnie Hancock Democratic Services Unit 0121 569 3189
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Sandwell and Birmingham Joint Health Overview and Scrutiny Committee

Sandwell and West Birmingham Solid Tumour Oncology and Specialised Gynaecology Cancer Surgery Services

Report submitted by: Catherine O'Connell, Director of Specialised Commissioning, Midlands and East

Date: 25th January 2018

1. Purpose

The Purpose of this report is to provide a brief update on the temporary transfer of solid tumour oncology service to the Queen Elizabeth Hospital (QE), University Hospital Birmingham, (UHB), on progress in establishing a cancer review to identify and consult on a long term solution for the service, and on changes to other cancer services at Sandwell and West Birmingham Hospitals (SWBH). It will be supplemented by a presentation outlining the latest position at the meeting of the Joint Health Overview and Scrutiny Committee on 25th January.

2. Introduction

NHS England Specialised Commissioners, in conjunction with Sandwell and West Birmingham CCG (SWBCCG), are currently working with providers across Birmingham and the Black Country to ensure the sustainability of the solid tumour oncology service for the Sandwell and West Birmingham population, in addition to a number of other cancer services currently provided at Sandwell and West Birmingham NHS Trust (SWBH). The main service areas affected by this work are:

- Solid Tumour Oncology for Sandwell and West Birmingham patients
- Specialist Gynaecological Oncology Surgery Service
- Sandwell and City Hospital Acute Oncology Service

It should be noted that in addition to the services listed above, SWBCCG is also working with SWBH on changes to the Haemo-oncology service at the Trust. This service is not the subject of this paper.

3. Solid Tumour Oncology Chemotherapy for Sandwell and West Birmingham Patients

3.1 Background

Following UHB giving notice in 2015 to SWBH to withdraw consultant input to the SWBH service, NHS England (NHSE) has been working with both trusts for the last two years to find a way to continue to support Solid Tumour Oncology Services at Sandwell and City hospitals. Despite numerous attempts to facilitate an agreement to keep services at SWBH, including escalation to the Regional Directors of NHSE and NHS Improvement (NHSI), it was decided in September 2017 that a contingency plan was needed that relocated the service for 12 months whilst a review is completed to consider the options for a safe and sustainable long term solution for services.

At a Quality Summit held in October 2017 it was decided that the current service was unsustainable because consultant oncologist staffing would be withdrawn by UHB from the 23rd October 2017, when the Service Level Agreement terminated. At this meeting a contingency plan was agreed to transfer patients to UHB (QE) for 12 months, with an option for patients to transfer their care to Wolverhampton if they prefer. A Sandwell Oncology Transition Board has been established to oversee the mobilisation and operation of the contingency plan.

3.2 Progress to date

Robust plans are being implemented to ensure the safe transfer of 2,673 patients who are currently having treatment at SWBH, and the 1,200 new referrals into the service that are anticipated over the next 12 months.

Lung and Skin cancer patients requiring chemotherapy and oncology follow up have now been transferred to UHB. In this cohort there are 120 patients and to date there have not been any major reported transport issues or patients declining treatment.

The transfer of Upper and Lower GI cancer patients has commenced. Plans and pathways look robust, with the possible need for additional transport support in exceptional cases.

The Breast Cancer pathway began to move on December 21st 2017 with a completion date of the 5th February 2018.

Significant and ongoing communication and engagement is taking place with patients, public, staff and other stakeholder groups. This includes individual patient letters being sent, face to face discussions with patients in clinics, and patient events being held at both City and Sandwell Hospitals.

NHS England specialised commissioners were notified in December that the Gynaecological Medical Oncology Service at SWBH may be unsustainable due to

staffing issues once the other solid tumour oncology services have transferred. This was not originally within the scope of the contingency plan, however, it has been agreed with UHB that the service should also transfer to Queen Elizabeth Hospital from March 2018 for an interim period while the future provision of these services is determined.

3.2 Next Steps

NHS England specialised commissioners, together with the local CCG, have initiated a review of solid tumour oncology services and acute oncology services for the populations of Sandwell and West Birmingham. Public, patients and other stakeholders will be engaged in the design of specialist cancer services for their locality with formal public consultation expected. Commissioners have stated that their intention is that the service should be local and accessible for the population of Sandwell and West Birmingham. The timescale for the review will allow for a decision on the future service model and mobilisation by the end of 2018.

3.3 Stakeholder concerns

On the 30th November, a meeting of the Sandwell and Birmingham Joint Overview and Scrutiny committee expressed significant concern, criticising the inability of the local health system to resolve the issues leading to the temporary transfer of the service to the QE. The Committee made it clear that they expected the review being undertaken by commissioners to ensure that the service be located within the geography of Sandwell and West Birmingham in the future. A further meeting is scheduled for the 25th January where both commissioners and providers will be present.

4. Specialist Gynaecological Oncology Surgery Centre Service

4.1 Background

Sandwell and West Birmingham Hospitals NHS Trust (SWBH) served notice on 'all Centre Gynaecological Cancer Surgery' on the 29th June 2017. This service is commissioned by both NHS England and SWBCCG. Significant work, including external scrutiny of clinical databases, was necessary to confirm the scope of the service under notice. The review of activity undertaken early this year indicated that a new provider will need to plan for approximately 400 cases per year (circa 60/40% split between NHSE and the CCG respectively).

The difficulty in defining the patient cohort that would move delayed the issuing of expressions of interest to new providers until the end of September 2017.

4.2 Progress to date

On the 25th October 2017 NHS England received a proposal from a consortium of providers for the re-provision of Sandwell Gynaecological Oncology Surgery centre

activity. The consortium is comprised of Birmingham Women's and Children's Hospital (BWCH), University Hospitals Birmingham (UHB) and Royal Wolverhampton Trust (RWT) and is hereafter referred to as the "Consortium".

The Consortium proposes a two centre service model that delivers complex gynaecological cancer surgery at both UHB and RWT.

NHS England supports this proposition in principle and is in negotiation with the Consortium. There are a number of issues that require resolution to allow final agreement to be reached.

- **Clinical Compliance** – NHS England needs to confirm that the two centre approach proposed by the Consortium is compliant with clinical standards. Initial indications are that the model will be compliant.
- **Performance Management** – Providers have requested some dispensation on performance against cancer standards whilst the service is transferred. We have agreed with NHSI colleagues that a time limited transition agreement on performance would be appropriate.
- **Commercial model** – The Consortium has indicated that capital and non-recurrent funding is needed to mobilise the new service model. As NHS England do not have access to capital, alternative commercial models are being considered to ensure the financial viability of the new model. There is likely to be a significant cost pressure for commissioners.

It is intended that agreement is reached over the next few weeks. The consortium of providers has indicated that they will need at least 3 months to mobilise this service and possibly 6 months as there are now limited opportunities to transfer nursing staff via TUPE.

4.3 Extension of service provision at Sandwell

NHS England has agreed an extension of the notice period to the end of March 2018. NHS England has also agreed to provide interim financial support as the Trust will have to maintain staffing levels through the extension period by using agency cover. NHS England has indicated that they would support reasonable additional cost over tariff income if this can be evidenced by the Trust.

5. Sandwell and City Hospital Acute Oncology Service (AOS)

5.1 Background

The oncology consultants that currently support the AOS service at Sandwell and City Hospitals will no longer be available as clinics move to UHB as part of the contingency plan. As a result new arrangements need to be put in place to ensure that patients at the hospitals have access to a safe and robust Acute Oncology Service.

5.2 Progress to date

An interim clinical model has been agreed as part of the clinical workstream of the Transition Oversight Board. UHB have been asked to provide this interim service but staffing and funding has yet to be finalised. Normally AOS is funded through the in-patient admission funded by the CCG, but this model assumes oncology services will be on site to support these arrangements. As Sandwell will only be employing a small number of non-solid tumour oncologists, commissioners recognise that additional funding may be required for the duration of the contingency plan.

5.3 Next Steps

NHS England is in the process of finalising the staffing model and funding arrangements. This will allow the new model to be mobilised in early 2018 before the last group of oncologists leave the SWBH in February.

6 Summary

NHS England has been required to make a number of commissioning interventions to ensure the sustainability of a range of cancer services currently delivered at SWBH. Interim arrangements and contingency plans are currently being mobilised to ensure the sustainability of these services over the next 12 months. During this period NHS England and SWBCCG will undertake a review of the solid tumour oncology services and AOS for the Sandwell and West Birmingham population, the output of which will inform the future design of these services in that locality.

Between the publication of the papers for the meeting of the Joint HOSC on 25th January and the meeting itself, there will be a meeting of both the Oversight Board and the Project Board. This will allow for the latest position, progress, plans and timetable to be presented to the HOSC at that meeting.

Update on public consultation

Future of contracts at three GP practices

Options for the future of two GP practices in Sandwell and one in West Birmingham

- Malling Health*, Parsonage Street, West Bromwich
- Malling Health Great Bridge Health Centre, West Bromwich
- Summerfield GP and Urgent Care Centre*, Winson Green, Birmingham

6 week consultation being developed to launch in February

** This consultation is only about the GP practice element.*

Case for change

- These 3 GP practices all have APMS or alternative provider medical services contracts
- This type of contract often provides for additional services to the standard GP contract
- These contracts are temporary and they are due to expire on 31st March 2019
- We are therefore looking at what services we need to commission to meet the needs of local patients, now and in the future.

Consultation approach

- Comprehensive consultation document
- Online and paper questionnaires
- Six public meetings in community venues near to the three practices
- Letters to all patients at these three practices and to other local stakeholders
- Media and social media presence

Update on public consultation

Improving access to local healthcare services

Improving access to local healthcare services

Focus on:

- Improving access to primary and urgent care services
- The future of walk-in centre services
- Supporting people to self-care.

12 week consultation being developed to launch in February

Key stage in our planning

- We have extended access to primary care, meaning more appointments are now available with your local GP or practice nurse.
- We have improved NHS 111, with more access to clinical advice via this service.
- The contracts for our two local walk-in centres (Parsonage Street Walk-in Centre and Summerfield Urgent Care Centre) are coming to an end and we need to review how these services are provided in future.
- There are new national requirements for urgent care which means we are required to change how we provide walk-in centre services.
- The NHS is under greater pressure than ever before and we know we need patients to take control of their own healthcare and to help us reduce this pressure.

What our patients have told us

- Patients tell us that they are often confused about where to access care; which service is right for them; and when services are available.
- Access is a real issue – both in terms of wanting services to be close to home and availability of appointments.
- People are not being seen in the right healthcare setting at the right time.
- People feel that further improving access would support them to use the urgent care system more appropriately
- Improving access would increase patient satisfaction and outcomes by ensuring continuity of care.

Options being consulted upon

Option 1

Improve access to primary care, increase capacity and, invest in improved triage and more self-care support for local people in addition to the closure of Parsonage Street Walk-in Centre and Summerfield Urgent Care Centre.

- The walk-in centres at Parsonage Street and Summerfield Urgent Care Centre would close from 31st March 2019.
- The new Sandwell Urgent Treatment Centre would open on the current Sandwell General Hospital site. The timing of the opening of this new facility would coincide with the opening of the Midland Metropolitan Hospital.
- There would be increased investment in primary care across the area enabling an increase in appointments and extended opening hours 8am-8pm and at weekends.
- We would improve triage of patients, ensuring that patients are directed to the right service first time by encouraging and promoting the use of NHS 111 and the Ask NHS app.
- We would introduce more self-care support in general practices through the installation of automated self-care advice kiosks and the existing Ask NHS app. This will support behaviour change towards increased self-care. We want the public's views on other mechanisms which may assist with self-care.

Options being considered

Option 2

Re-procure an Urgent Treatment Centre with walk-in facility for West Birmingham in addition to the Sandwell Urgent Treatment Centre on the current Sandwell General Hospital site.

- The walk-in centre at Parsonage Street would close from 31st March 2019.
- The new Sandwell Urgent Treatment Centre would open on the current Sandwell General Hospital site. The timing of the opening of this new facility would coincide with the opening of the Midland Metropolitan Hospital.
- A walk-in centre available 8am-8pm would be re-procured for West Birmingham.

Consultation approach

- Comprehensive consultation document
- Online and paper questionnaires
- Face-to-face and telephone surveys
- Four public meetings across Sandwell & West Birmingham including one near each of the walk-in centres.
- Targeted focus groups with seldom heard communities and the nine protected characteristics
- Widespread distribution of consultation document to stakeholders, community groups, community settings
- Media and social media presence

Consultation approach

- Regular engagement with key stakeholders
- Full analysis by independent consultation partners
- Decision to be made by Sandwell & West Birmingham CCG Governing Body in June 2018