

JOINT HEALTH SCRUTINY COMMITTEE: MINUTES

Date: Monday, 17 October 2016

Time: 18:00hr

Present: Councillor Sir Peter Brown, Councillor David Jenkins, Councillor Tony Orgee, Councillor Aitken, Councillor Cereste, Councillor Sylvester, Councillor Rush

Apologies: Councillor Lillis, Councillor Sales

1. ELECTION OF TWO JOINT CHAIRMAN/WOMEN

It was resolved:

- 1) To elect Councillor Jenkins and Councillor Cereste as Joint Chairmen of the Joint Health Scrutiny Committee; and
- 2) That Councillor Jenkins would Chair the first meeting of the Committee.

2. WELCOME INTRODUCTIONS AND APOLOGIES

Apologies for absence were received from Councillor Lillis and Councillor Sales.

3. DECLARATIONS OF INTEREST

No declarations of interest were received.

4. TERMS OF REFERENCE

It was resolved to agree the Terms of Reference.

5. CO-OPTION TO THE JOINT COMMITTEE

It was resolved to co-opt as a non-voting member of the Committee Huntingdonshire District Councillor Angie Dickinson.

6. SCRUTINY OF THE PROPOSED MERGER OF HINCHINGBROOKE HEALTH CARE NHS TRUST AND PETERBOROUGH AND STAMFORD HOSPITALS NHS FOUNDATION TRUST

The Committee received a report which outlined the Full Business Case for the proposed merger of Hinchingsbrooke Health Care NHS Trust (HHCT) and Peterborough and Stamford Hospitals NHS Foundation Trust (PSHFT). The

Chief Executive Officer of HHCT, the Chief Executive Officer of PSHFT, and the Deputy Chief Executive Officer of PSHFT provided the Committee with a presentation, which highlighted a number of key issues. These included:

- The clinical case for change;
- Services changes and opportunities at Hinchingsbrooke;
- Clinical integration;
- Wider benefits and opportunities;
- The financial case;
- Benefits and risks;and
- Governance.

Questions were received from 'Hands off Hinchingsbrooke' Community Campaign Group. A written answer to these questions would be provided by officers in due course.

In the course of discussion, the following points were raised:

- The KPMG report was not enthusiastically in support of the proposals. It was advised that KPMG were not asked their opinion on the merger as a whole, but purely on the reasonableness of the figures provided.
- The Committee was happy with the level of public consultation undertaken by the two trusts.
- The Committee questioned the high level of turnover within both organisations and was advised that this was expected to improve following the merger due to the increased attractiveness of the offer.
- No reduction in the level of clinical staff was proposed.
- It was questioned why a combined organisation would be financially sustainable when neither individual organisation was. The Committee was advised that the merged service would offer greater ability to recruit and retain staff and would allow staff to be more available.
- The Chief Executive Officer PSHFT considered that the principle of the Treasury providing funding was agreed, as no new funding was proposed. The Trusts already borrowed from the Department of Health in order to cover their deficits. The Treasury providing funding up from would simply be a different route.
- It was confirmed that the number of public governors for Peterborough would be 6, the same as Huntingdonshire, as the number related to the population the hospitals served.
- It was advised that there was no intention to transfer any services. If this possibility were to be entertained in the future, a public consultation would be required and the proposals brought back for scrutiny.
- Concern was raised that there was no 'plan B' proposed. The Committee were advised that the current proposals reflected one out of four potential options. If problems arise with the merger, certain aspects may be slowed down, in order to work through any issues.

- If the merger did not go ahead there would be a number of services, specifically in Hinchingsbrooke, that would struggle to continue. It was the case that if some services ceased, the remaining services became more difficult to maintain.
- The PSHFT and HHCT were confident that they had tried to learn all possible lessons from past mergers.
- In order to prevent the loss of workers during the merger staff were being regularly updated. No staff had left the Trusts so far. It was considered that the proposals were causing the Trusts to become more attractive as an employer.
- In terms of a transition plan, the Programme Board leading on the merger held regular oversight meetings, following detailed project plans involving 10 separate workstreams. The Trusts' Boards would be presented with an Implementation Plan by the end of November 2016. A Pre-transition Project Plan was already in place.
- Concern was raised over the prospect of ICT transitions. The Committee were advised that this was expected to be the single biggest cost of the merger. Heed had been paid to past mergers and procurements. It was noted, however, that both Trusts' systems were in need of updating, as they were over 20 years' old.
- It was suggested that a letter be written to the Department of Health and MP's supporting the request for funding from the Treasury.

A question was received from a member of the public in relation to the Strategic Estates Partnership (SEP). The Chief Executive Officer of HHCT advised that the SEP was a vehicle to raise capital in order to invest in development, including an Health Campus. This was very different to the PFI vehicles used in the past. All the services within the Health Campus would continue to be run by the NHS.

A written response be provided by officer to the questions raised by 'Hands off Hinchingsbrooke' Community Campaign Group.**ACTION**

A letter would be sent to the Department of Health and local Members of Parliament outlining the Joint Health Scrutiny Committee's support of the newly proposed route of funding through the Treasury.**ACTION**

Advisors to the HHCT and PSHFT would be invited to the next meeting of the Joint Health Scrutiny Committee in order to provide further information on their opinions. **ACTION**

It was resolved to note the content of the summary of the Full Business Case and the attachments provided, subject to the issues raised by the Joint Health Scrutiny Committee regarding the proposals for the merger.

Chairman