

Health Overview and Scrutiny Committee - 12 March 2024

Full agenda papers (and minutes to follow) available at:

<https://glostext.gloucestershire.gov.uk/ieListDocuments.aspx?CId=772&MId=11555&Ver=4>

Key Items

Trust response to Panorama programme on Maternity Services:

There was a heartfelt recognition that there were 3 deaths (2 babies and 1 mother) under the care of the Trust that should and could have had different outcomes. However, although the current Chief Executive – Kevin McNamara – has only been in post for 9 weeks he highlighted the following responses the Trust has made and is making to these tragedies:

- Following the deaths the cases were referred to MNSI (Maternity and Newborn Safety Investigations) and the key recommendations were to undertake a leadership and governance review and to improve risk assessments for planned locations of births
- Since then significant work has been done and changes made to leadership. The temporary closure of the Stroud birthing unit and the ongoing closure of the Cheltenham unit were to maintain patient safety. Stroud has reopened for birthing but its postnatal care and Cheltenham's birthing unit will remain closed until staffing is at a level that will enable safe opening. Two external reviews have been commissioned to investigate both maternal and neonatal mortality rates.
- The new Chief Executive of the Glos Hospitals Foundation Trust is focused on organisational culture. Staff survey results in the past have been poor but Kevin emphasised that he is improving visibility at Board level, that he is confident in the changes that have been made at leadership level and a speak up freedom guardian is in place for staff should they have any concerns they want to raise. He described it 'as improving not improved yet'.
- It was raised that the mortality rate the BBC quoted for Gloucestershire was inaccurate and that an independent organisation 'Embrace' linked to Oxford University had verified this. The BBC did not respond to the Trust's request to correct this or to visit the Trust to enable them to respond within the programme. The Chair of the HOSC Committee has undertaken to write to the BBC to express his concern that they have put out misinformation and did not give the Trust a chance to share how they were responding to the incidents and concerns about staff culture. HOSC have also resolved to invite Embrace to the May meeting to answer questions about their interpretation of the statistics. It was emphasised that none of this is intended to take away from the awfulness of the experiences of the families who were impacted by the Trust's shortcomings and HOSC have requested an update later this year on progress in addressing the recommendations from the internal and external reviews.

Update from the Gloucestershire Local Medical Committee (GLMC)

GLMC asked to present an update to HOSC, raising their concerns about the gaps between funding for GPs and rising patient needs.

- Between 60-90% of General Practice budgets is spent on staffing yet Central Government funding assumes it will be just 44% so they are left to find the shortfall.
- We were told that there are 20% more appointments offered now in Gloucestershire than in 2019 and need is increasing.
- The GMC recommendations are for 1600 patients per person, in Gloucestershire the ratio is approx 1850:1
- Our local surgery in Winchcombe recently published a statement sharing how stretched their budgets and capacities are. They said they had been unable to afford to replace 4 members of staff who recently left and that partner income fell by 20%

last year. They were encouraging self-management of minor illnesses and asking patients to bear with longer waiting times or to be prepared to be asked to go elsewhere for care e.g. local pharmacy. I asked whether there were other practices in Gloucestershire that had also reached a point of putting out a public statement and what was being done to support these practices. I was told that the ICB are being proactive providing Accountants to help with budget setting and other practical support. But the point was made by GLMC that patients are looking for a General Practice that doesn't exist anymore and with the best will in the world GPs can't provide what they did whilst current funding arrangements stand. HOSC will continue to receive updates and monitor progress.

- During questions concerns were raised about the ineffectiveness in the application of S106 in supporting medical centres to improve or increase facilities, something that may be worth picking up on in TBCs S106 policy reviews. I've asked for more information on the specific issues and how these could be addressed.

SWAST Update

We were joined by John Martin, Chief Executive of the SW Ambulance NHS Trust who provided an update on SWAST.

- Ambulance response times are still higher than in Jan 2021 for both Cat 1 & 2
- Cat 1 in Jan 24 10.3 mins (county range 7.2 in Glos to 14.6 in Cotswold – England average 8min 26 seconds) but are slowly improving (albeit up and down each month)
- Cat 2 in Jan 24 35.4 mins (county range 34.2 in Chelt to 51.1 in Cotswold – England average 40min06)
- So there's clearly a rural issue in our county with such variation so responses made by SWAST are:
 - o Increase first responders from 95 to 100
 - o Working with Basics charity to provide Doctor care alongside paramedics and first responders to provide earlier intervention
 - o Increasing the number of double crewed ambulances in rural areas

CAHMS

Following an update on statistics on children and young people's mental health and that over 500 young people are still waiting for CAHMS treatment (numbers have stayed over 500 each month in the last quarter) HOSC has decided to set up a working group to review cyp mental health in the county. This will be added to the workplan.