

Notice of Special Meeting and Agenda Audit, Scrutiny and Petitions Board

Date	Time	Venue
Monday, 23 May 2016	12:00	CMR 1, Council Headquarters, Renfrewshire House, Cotton Street, Paisley, PA1 1AN

KENNETH GRAHAM
Head of Corporate Governance

Further Information

This is a meeting which is open to members of the public.

A copy of the agenda and reports for this meeting will be available for inspection prior to the meeting at the Customer Service Centre, Renfrewshire House, Cotton Street, Paisley and online at www.renfrewshire.cmis.uk.com/renfrewshire/CouncilandBoards.aspx

For further information, please either email democratic-services@renfrewshire.gov.uk or telephone 0141 618 7112.

Members of the Press and Public

Members of the press and public wishing to attend the meeting should report to the customer service centre where they will be met and directed to the meeting.

Membership

Councillor Bill Brown: Councillor Maria Brown: Councillor John Caldwell: Councillor Eddie Grady:
Provost Anne Hall: Councillor James MacLaren: Councillor Bill Perrie:

Councillor Jim Sharkey (Convener): Councillor Cathy McEwan (Depute Convener):

Items of business

Apologies

Apologies from members.

Declarations of Interest

Members are asked to declare an interest in any item(s) on the agenda and to provide a brief explanation of the nature of the interest.

- 1 Ward 15 (Children's Ward) Royal Alexandra Hospital 3 - 14**
(Lead Officer Colin Grainger)

Report by Lead Officer

To: Audit, Scrutiny and Petitions Board

On: 23 May 2016

Report by: Lead Officer

Heading: Review of Ward 15 (Children's Ward) Royal Alexandra Hospital

1. Summary

- 1.1 At its meeting on 30 November 2015, the Audit, Scrutiny and Petitions Board agreed to the recommendations and review programme outlined in respect of providing an informed, evidence-based Council view of any consultation regarding the future of Ward 15 at the Royal Alexandra Hospital in Paisley.
- 1.2 The purpose of this Board meeting is to allow members the opportunity to discuss, with representatives from the NHS GGC, the services provided at Ward 15, currently and in the future.
- 1.3 The following report outlines the progress made by the Lead Officer in terms of taking forward the review since the last meeting on 25 April. A key area of progress has been the response from NHS GGC on questions arising from the Board's meeting on 25 April.

2. Recommendations

- 2.1 It is recommended that the Audit, Scrutiny and Petitions Board:
 - Notes the progress of the review;
 - Notes the purpose of this meeting;
 - Notes the response provided by the NHS Greater Glasgow and Clyde to questions raised at the Board meeting on 25 April; and

- Notes that the review's electronic survey consultation form has been highlighted through the Council's social media pages and feeds.

3. Progress

Purpose of Board Meeting 23 May

3.1 At its meeting on 21 March the Audit, Scrutiny and Petitions Board agreed to schedule a special meeting to be attended by representatives from NHS GGC. The purpose of this Board meeting is to provide members with an opportunity to discuss, with representatives from the NHS GGC, the services provided at Ward 15, currently and in the future. Other areas the Board may wish to consider are:

- Data on needs assessment and demand for services;
- Specific data on levels of activity for the new Royal Hospital for Children since its opening e.g. admissions, A and E attendances etc;
- Staffing information in relation to both the Royal Hospital for Children and Ward 15 at the Royal Alexandra Hospital e.g. staffing numbers, breakdown by professions etc.;
- Further discussions on the options appraisal exercise undertaken as part of the previous review of provision in 2011/12;
- Plans for future consultation regarding the future delivery of services from Ward 15; and
- Any quality or inspection related reports for both sites that could be shared with this board.

Response from NHS GGC

3.2 At its meeting on 25 April the lead officer provided information, submitted by the NHS Greater Glasgow and Clyde (NHSGGC), relating to an Options Appraisal exercise carried out by the NHS in 2011/12.

3.3 Three follow up questions were raised by members in relation to this Options Appraisal exercise. It was agreed that the Lead Officer would contact colleagues in NHSGGC to seek answers to these questions.

3.4 The individual questions and responses are listed below.

a) In terms of the options appraisal sessions that took place over 3 events in November/December 2011, can you provide information on the numbers of people who attended the events and which organisations they represented?

NHS GGC Response:

Over the three days of option appraisals held at The Glynhill Hotel regarding Ward 15, RAH, in 2011, the attendees were as follows:

Tuesday 29 November 2011	Monday 5 December 2011	Tuesday 5 December 2011
23 attended	11 attended	8 attended
6 x Public Partnership Forum 2 x Patients Panel 3 x childrens charities 1 x elected member 11 x family members 4 x paediatric staff	3 x Public Partnership Forum 1 x Patients Panel 3 x family members 4 x paediatric staff	1 x Public Partnership Forum 2 x childrens charities 2 x family members 3 x paediatric staff

b) The information provided by NHS GGC, on 30 March 2016, notes that option 4 - maintain the current children's inpatient service at Ward 15, RAH until 2015, and then transfer inpatient services to the Royal Hospital for Children, Glasgow, emerged as the preferred option of the consultation sessions. It is also noted that the review of Ward 15 was subsequently incorporated within the wider Clinical Services Review (CSR). In light of the CSR, can you provide comment of the current status of the preferred option of the earlier consultation sessions?

NHS GGC Response:

The Board's preferred option at the outset of the CSR was:

Option 4: Maintain the current children's inpatient service at Ward 15, RAH until 2015, and then transfer inpatient services to the new Royal Hospital for Children, Glasgow.

The engagement and discussions of the CSR did not change this status and it continues to be the Board's preferred option.

c) Can you provide information on when the NHS GGC Board were informed that the preferred option would be incorporated within the wider Clinical Services Review?

NHS GGC Response:

The proposal to incorporate the preferred option into the CSR was agreed by the Board on the 21 February 2012.

A copy of the Board paper has been included at Appendix 1.

Inviting individual responses

- 3.5 As noted at the board's meeting on 25 April, individuals or groups who may wish to feed into the review, can now access an electronic survey form through the Renfrewshire Council website. The survey can be found at the following location:

<http://www.renfrewshire.gov.uk/article/3655/Review-of-Ward-15-Childrens-Ward-at-Royal-Alexandra-Hospital-Paisley>

A copy of the consultation form has also been included in Appendix 2.

- 3.6 Since the last meeting the survey has been highlighted via the Council's Facebook page and Twitter feed. The information collected through the online survey will be used by the Lead Officer to document and gather the views of all interested parties to the review.

Implications of this report

- 1. Financial Implications – none.**
- 2. HR and Organisational Development Implications – none.**
- 3. Community Plan/Council Plan Implications – none.**
- 4. Legal implications – none.**
- 5. Property and Assets implications – none.**
- 6. Information Technology implications – none.**
- 7. Equal & Human Rights implications –** The recommendations contained within this report have been assessed in relation to their impact on equalities and human rights. No negative impacts on equality groups or potential for infringement of individuals' human rights have been identified arising from the recommendations contained in the report because it is for noting only. If required following implementation, the actual impact of the recommendations and the mitigating actions will be reviewed and monitored, and the results of the assessment will be published on the Council's website.
- 8. Health and Safety implications – none.**
- 9. Procurement implications – none.**
- 10. Risk implications – none.**
- 11. Privacy impact – none.**

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List of background papers: None

Greater Glasgow and Clyde NHS Board

**Board Meeting
21 February 2012**

Board Paper No. 12/05

Chief Operating Officer, Acute Services Division

**REVIEW OF PAEDIATRIC INPATIENT SERVICES,
WARD 15, ROYAL ALEXANDRA HOSPITAL**

RECOMMENDATION

Board Members are asked to receive this paper which provides an update on the review of the paediatric inpatient service at the Royal Alexandra Hospital (RAH) and approve the recommendation that a full review of the overall service provision should be incorporated into the wider strategic review of clinical services across NHSGGC to ensure that all of the implications in relation to other services are considered within the wider strategic framework.

1 Context

- 1.1 As part of the discussions at the NHS Board meeting in June 2011 in relation to the Financial Plan the Board agreed to explore as part of the process of clinical and financial reviews the potential to consider the relocation of the in-patient paediatric service from Ward 15, Royal Alexandra Hospital (RAH) to the Royal Hospital for Sick Children (RHSC). Any such proposals would only be taken forward with full engagement with stakeholders prior to any launch of formal public consultation and a report back to the NHS Board for approval. At the September 2011 NHS Board meeting it had been reported that discussions were being held which has included a meeting with Renfrewshire Council regarding paediatric services provided from Ward 15 at the RAH.
- 1.2 In reviewing the work carried out to date, it is acknowledged that a number of issues require further consideration. It was initially thought that this proposal involved a discrete ward transfer, however, in undertaking the detailed analysis, a more complex picture of clinical interdependencies has emerged. Some of these interdependencies are linked to regional and/or national clinical service reviews such as neonatology. To take cognisance of the emerging picture it is, therefore, proposed that the work undertaken to date is taken forward as part of the wider strategic review of acute services in NHSGGC during 2012/13 to ensure that all implications in relation to other services are fully considered within that wider strategic framework.

2 Background

- 2.1 By way of background, Ward 15 at the Royal Alexandra Hospital provides paediatric inpatient services to the Clyde area. It consists of 28 bed spaces, made up of 16 inpatient beds, a six bedded area for short stay medical assessment and a six bedded area for day

care and planned investigations. Alongside the ward, there is an outpatient department and the PANDA Centre which provides community led child development facilities including therapies. Following the transfer of Ward 66 from Southern General Hospital (SGH) to RHSC in March 2012, Ward 15 will be the only remaining acute inpatient facility for children in NHSGGC out with the Royal Hospital for Sick Children.

2.2 The service and associated activity currently provided in Ward 15 at the RAH, which has been reviewed is set out in the table below:

Service Provision	Activity
Emergency inpatient care	2000
Elective inpatient care	600
Short Stay Medical Assessment	2,200
Day Surgery/Day Medical Care (including planned investigations and treatment)	825
Total	5,625

2.3 Alongside the ward, there is an outpatient department which provides a full range of clinics and sees around 4,500 patients per year. This outpatient service was not part of the review undertaken. Adjacent to the ward is the PANDA Centre which provides community led child development services. As with the outpatient service, this was not part of the service review.

2.4 It is recognised that the paediatric inpatient service at RAH interfaces with a number of other services, which require to be considered as part of the wider and more strategic review, including:

- Emergency Department & Adult Medical Services
- Maternity Unit/Neonatal Intensive Care Unit
- Surgery and Anaesthetics Directorate, specifically ENT, Ophthalmology, Orthopaedics, General Surgery, Anaesthetics and Critical Care
- Diagnostic Services

3 Drivers for Change

3.1 In terms of quality of care for the paediatric patients the proposal under consideration initially was to transfer all paediatric inpatient services from RAH and to the RHSC in 2012. This would ensure full access to specialist paediatric care for the patients and would involve the transfer of all activity related to inpatient beds, day surgery and day medical investigation facilities to RHSC.

3.2 Recognising the challenge of maintaining the current inpatient model, early consideration of the potential changes to service delivery in relation to the new Children's hospital is also required. It is viewed as important that the current planning and redesign for the new Children's hospital incorporates the needs of the Clyde paediatric population to ensure full and equal access to dedicated children's services.

3.3 Modernising Medical Careers is a major reform of postgraduate medical education and will have an impact on medical staff provision in clinical areas within West of Scotland Boards with anticipated loss of up to 40% of medical middle grade paediatric trainee doctors. Incremental reductions are already underway, however, the impact of these changes on the

paediatric service in NHSGGC will be significant from 2012/13 onwards, when maintaining the current rota and clinical cover for the existing number of hospital sites for paediatrics, neonatology and maternity services will be very difficult to sustain with fewer doctors. In addition, revised Home Office immigration regulations have led the Directorate to consider the future service configuration to mitigate the impact of reduced numbers of medical staff.

- 3.4 Transferring all inpatient paediatric services from RAH to RHSC in 2012 was estimated to make a saving of around £1m in revenue costs.

4 Process to Date

- 4.1 A review of the current services provided for children at RAH has been carried out by the Directorate. This has involved a detailed analysis of the activity flows and range of services offered to consider the impact of potential changes to the current service model. Work has been undertaken to consider the impact of this activity change in relation to the other services listed above with whom the paediatric service interfaces. This has included discussions with key stakeholders such as the Emergency Department, maternity and neonatology services and the Scottish Ambulance Service (SAS). A number of these interfaces are complex and are difficult to consider in isolation from the wider strategic context.
- 4.2 As this proposal is deemed to be major service change, the process outlined by the Scottish Government in CEL 4(2010) requires to be followed. In line with this requirement, pre-consultation engagement has been carried out, overseen by the Scottish Health Council. This has involved activities to engage with key stakeholders including drop in sessions and sessions with the Community Engagement teams for patients and families as well as staff.

5 Recommendation

Board members are asked to approve the recommendation to incorporate the review into the wider strategic consideration of clinical services across NHSGGC to ensure that all of the implications in relation to other services are fully explored and that a fully integrated solution covering the whole range of services is defined rather than undertaking this review as a single exercise.

Chief Operating Officer – Acute Services
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Appendix 2



Renfrewshire
Council

Royal Alexandra Hospital Ward 15

1. Ward 15 - Children's Ward

1. What is your home postcode?

2. Are you...?

A service user?

A patient?

A parent / guardian?

A relative?

A friend?

A member of a local
group?

Other (please specify)

3. Please tell us about your own views of the services provided at Ward 15 (Children's Ward), Royal Alexandra Hospital, Paisley?

