

# Strategic Policy and Resources Committee

Friday, 8th October, 2010

## MEETING OF STRATEGIC POLICY AND RESOURCES COMMITTEE

Members present: Councillor Crozier (Chairman); and  
Councillors Adamson, Attwood, Austin, W. Browne,  
Campbell, Hartley, Hendron, Lavery, Newton, Robinson,  
J. Rodgers, Rodway and Stoker.

In attendance: Mr. P. McNaney, Chief Executive;  
Mrs. S. Wylie, Director of Health and  
Environmental Services;  
Mr. S. McCrory, Democratic Services Manager; and  
Mr. J. Hanna, Senior Democratic Services Officer.

### Apologies

Apologies for inability to attend were reported from Councillors D. Browne, N. Kelly and McCarthy.

### Presentation - Belfast Health and Social Care Trust

The Committee was advised that representatives of the Belfast Health and Social Care Trust had been invited to the meeting to provide a presentation on how health and social care services in Belfast were developing, with particular reference on the Trust's current proposals to reorganise the acute services in Belfast.

It was reported that Mr. C. Donaghy, Chief Executive, together with Ms. E. Bannon, Ms. B. Dalzell, Ms. B. McQuillan, Ms. D. Stockman and Mr. R. Hannon, were in attendance and they were admitted to the meeting and welcomed by the Chairman.

Mr. Donaghy thanked the Committee for the opportunity to update the Members on the Trust's "Right Treatment, Right Place" consultation, the aim of which was to seek views on proposals to reorganise the delivery of acute services in Belfast in order to improve health and social care, which he stressed could only be achieved in partnership with the other statutory agencies and local communities.

With the assistance of visual aids, Ms. Stockman outlined which acute services were being considered under consultation and the impact on the five acute hospitals, that is, the Royal Victoria Hospital, Belfast City Hospital, the Mater Hospital, Musgrave Park Hospital and the Royal Belfast Hospital for Sick Children. She reminded the Committee that, following the merger of the four acute Trusts, the new Belfast Trust had been formed in 2007. Subsequently, the New Directions consultation had taken place which had looked at the best way to deliver services in Belfast over the next decade. At that time there had been general support for the proposed focus of services on each site, with:

- (1) Belfast City Hospital as the centre for cancer, renal and a range of general and acute hospital services, with an increased focus on elective services and chronic conditions management;
- (2) The Royal Hospitals as the centre for major trauma services, including a heart centre, with an increased focus on emergency services;
- (3) The Mater Hospital as the centre for ophthalmology services and acute hospital services; and
- (4) Musgrave Park Hospital as the centre for specialist rehabilitation services.

As a result of the aforementioned merger of Trusts, Ms. Stockman pointed out that some services were replicated across two or three sites resulting in duplication of services for patients and the fragmentation of staff skills and expertise. The New Directions document had guided the Trust's approach to the current review, the key drivers of which were to:

- improve clinical linkages between specialities, where possible;
- address current duplication and service efficiency and complement the "Maximising Outcomes, Resources and Efficiencies" modernisation programme;
- deliver the European Working Time Directive, which particularly affected doctors;
- deliver compliance on medical staff quotas;
- meet public expectation to improve service quality;
- act on staff support;
- enable the delivery of services on a reduced capital and revenue budget;
- drive forward service modernisation; and
- reduce the risks associated with the estate.

Ms. Stockman then provided details of those who had been involved in the review, through a Steering Group and individual team projects, the outcome of which had led to the acute services proposals, a summary of which is set out below:

Acute Services Proposals Summary

<u>Service</u>	<u>Current Location (s)</u>	<u>Proposed Location (s)</u>
General Surgery	Emergency and elective services at Royal Hospitals, Belfast City Hospital, Mater Hospital.	Emergency service at Royal Hospitals and elective services at Belfast City Hospital and Mater Hospital
Vascular Surgery	Emergency and elective services at Royal Hospitals and Belfast City Hospital.	Vascular surgery combined together at the Royal Hospitals as part of the centre for major emergency and trauma services.
Gynaecology	Emergency and elective inpatient and day case services at the Royal Hospitals, Belfast City Hospital and Mater Hospital.	Belfast City Hospital for all emergency and elective inpatient and day case services.
Urology	Emergency and elective inpatient and day case services at Belfast City Hospital and Mater Hospital, day surgery at Royal Hospitals.	Belfast City Hospital for all emergency and elective inpatient and day case services.
ENT	Emergency and elective inpatient and day case services at Royal Hospitals and Belfast City Hospital.	Royal Hospitals for all emergency and elective inpatient and day case services.
Ophthalmology	Emergency and elective inpatient and day case services at Royal Hospitals; day cases at the Mater Hospital.	Mater Hospital for all emergency and elective inpatient and day case services and some outpatient services.
Adult Rheumatology and Dermatology	Inpatient, day case rheumatology and biologics at Musgrave Park Hospital. Inpatient Dermatology at Belfast City Hospital. Day case and Biologics dermatology at Belfast City Hospital and Royal Hospitals.	Inpatient rheumatology and dermatology at Belfast City Hospital. Biologics for rheumatology and dermatology at Belfast City Hospital. Day case dermatology at Belfast City Hospital and Royal Hospitals.
Cardiology	General services at the Royal Hospitals, Belfast City Hospital and Mater Hospital. Tertiary services (the catherisation laboratories and associated beds/couches) at Royal Hospitals and Belfast City Hospital.	General cardiology services will remain at the Royal Hospitals, Belfast City Hospital and Mater Hospital. Tertiary services (the catherisation laboratories and associated beds/couches) will centre at the Royal Hospitals.
Paediatric ENT (BCH), Rheumatology and Orthopaedics	Inpatient and day case services at Belfast City Hospital and Musgrave Park Hospital.	Paediatric ENT in Ward 31 EENT at Royal Hospitals; Paediatric Rheumatology at RBHSC, Paediatric Orthopaedics remain at Musgrave Park Hospital.

Ms. Stockman reviewed the potential capital and revenue implications associated with the proposals. In conclusion, she highlighted the benefits which would be achieved for patients, carers and staff.

The deputation then answered a number of questions from the Members and made the following points:

- the main driver behind the changes was not to reduce costs but rather to improve service delivery. However, as a public body operating in the current economic climate, it would be prudent for costs to be considered under the Review;
- the Trust did not envisage nor had any plans for compulsory redundancies as part of the re-organisation of services, but would endeavour to ensure that staff were accommodated as far as possible in relation to the transfer of acute services: For example, the point was made that many auxiliary and support staff would likely wish to be retained at their current locations to help provide the new services, particularly since many were from the local areas;
- the number of staff affected was approximately 1,500, the majority of whom were specialist staff and would wish to move to the same location in order to provide dedicated specialist units;
- the requirement to reduce the number of hospital beds was not part of the acute services review but was an ongoing process of hospital improvement and reform whereby the Trust benchmarked against other hospitals to identify how many beds were actually required to provide the service. Also, a number of developments had already been delivered which facilitated shorter hospital stays and therefore less beds. These included changes to the pre-assessment and day of admission services to ensure the patient was fully informed and fit for surgery and day surgery development where the patients undergoing pre-planned or elective surgery were admitted and discharged on the same day;
- specifically in response to a question on the Mater Hospital, it was noted that there were 290 beds in the Mater and that the Trust did not envisage that number being reduced as part of this review;
- the Trust could not opt out of the Working Time Regulations, but individual doctors could opt out and work more than the maximum forty-eight hours in one week as long as the average over seventeen weeks was less than the forty-eight hours per week;
- the proposal to relocate specialist services to common sites would allow them to be more easily managed which, in time, would help to minimise bureaucracy and assist in reducing waiting times; and

- the Trust was continually reviewing its estate in order to identify risks associated with its buildings and highlight those which were not fit-for-purpose. The capital and revenue costs which had been identified were the minimum required to allow for smaller projects to be undertaken in order to maintain and deliver existing services, acknowledging the significant budgetary constraints now applied and the need to focus on highest risk areas.

The Members outlined a number of considerations that they wished the Trust to take into account:

- the review should ensure that addressing the stark health inequalities which existed in the City of Belfast continued to be at the forefront of decision-making on all Trust reviews and policies. There also needs to be a focus on early intervention services;
- access to services and 'user' friendliness of hospitals' needs to be taken into account, particularly for those in the most deprived neighbourhoods;
- the impact on staff employed from local areas needs to be considered carefully; and
- that further communication was needed in respect of the future of the Mater as the review moved forward.

A number of issues were raised also about mental health provision, however, it was pointed out that that was not part of the specific review.

The Chairman thanked the members of the deputation for their informative presentation and it was agreed that staff associated with the Mental Health Service be invited to a future meeting to provide an update on those services.

Chairman