

Shaping Your Local Health Services
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Sevenoaks
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Reconfiguration of Hospital Services in the South of West Kent
(Priority Three)

At their meeting of 1 November 2004, Maidstone Borough Council's External Scrutiny Committee considered the discussion document regarding Trauma and Orthopaedics and the consultation document for proposals for Women's and Children's Services. Members were joined by Rose Gibb, Chief Executive; Frank Sims, Director of Modernisation and Strategic Development; and a team of clinicians (Dr Julian Webb, Dr Charles Unter, Mr Paul Skinner, Mr Phillip Bamford, Ben Stevens and Jillian Duffy) from Maidstone and Tunbridge Wells NHS Trust who assisted the Committee in their deliberations.

Members of the Committee discussed the possible impact of the proposals and agreed that the following points would form the Committee's formal response to the two documents.

- 1 Response to Priority Three Issues
 - 1.1 When considering the proposals for both Trauma and Orthopaedics and Women's and Children's Services, Members felt that two particular issues needed attention prior to any transfer of services: transport and the establishment of community hospitals.
 - 1.2 With regard to transport, it is clear that changing the location of service provision will have an impact on patients, visitors and staff. Concerned by the poor road infrastructure between Maidstone and Pembury and the need for better public transport to the hospitals, the Committee felt strongly that the NHS Trust must understand the needs of patients, staff and visitors and act to improve the public and private transport infrastructure to, and between, the two hospitals.
 - 1.3 Regarding community hospitals, the Committee noted that proposals for both Trauma and Orthopaedics and Women's and Children's Services will mean that more patients are cared for in a community setting, whether that be in a community hospital or in a midwife-led birthing unit. As Maidstone does not yet have a community hospital, Members raised

concerns that services would be reorganised before facilities were up and running in the Borough, thereby disadvantaging local people.

- 1.4 With these issues in mind, Members stressed that any acceptance of proposals put forward by the NHS Trust is subject to a commitment from the NHS to ensure that responsive public and private transport mechanisms and high standard community care facilities are in place before moving services.

2 Trauma and Orthopaedics

- 2.1 With regard to the options set out in the discussion document on Trauma and Orthopaedics, Members of the External Scrutiny Committee agreed with the assertion that elective orthopaedics and orthopaedic trauma services should not be provided in such a way that would facilitate the risk of infection. However, they remained unconvinced that this would mean that the two services could not be provided at both Maidstone and Pembury Hospitals. Members felt that the approximate £5.7m needed to do this was a small proportion of a £200m budget and, given Ms Gibb's record of successful financial management so far, the Committee believed that it should be possible to provide high quality services at both hospitals.
- 2.2 With regard to the NHS Trust's preferred option for trauma and orthopaedics again Members stressed that the case has not yet been made for orthopaedic trauma to be focussed at Pembury, rather than at Maidstone. Members felt strongly that there is insufficient evidence that focussing orthopaedic trauma services at Pembury hospital would be 'best for most'. Indeed, given the local motorway and A-road infrastructure already in place close to Maidstone, Members felt that access to the hospitals is in fact better at Maidstone compared with Pembury, especially in cases where orthopaedic trauma services are needed after accidents on local motorways, for example.
- 2.3 Linked to this, Members felt that there are a number of transport issues that will have a significant impact on the accessibility of services which still have not been addressed. Members were pleased to hear an acknowledgement by the NHS Trust that they have a responsibility for ensuring that people can access their services, and return home after using services. Prior to any further discussion of proposals for the future of trauma and orthopaedics there must be a robust study of the needs of patients, staff and visitors; the existing public and private transport infrastructure and ways of improving the infrastructure; and the impact of each option for moving services to different sites. To fulfil their responsibility, the NHS Trust must have a clear understanding of these issues and respond to these needs appropriately.
- 2.4 With this in mind, the Committee strongly recommended that the NHS Trust works together with Maidstone Borough Council to lobby Kent Council as the Highways Authority to bring about the vital improvements to the road infrastructure between Pembury and Maidstone.
- 2.5 The proposals will bring about an increased number of patients being cared for/rehabilitated in community settings following orthopaedic care. There is clearly a need for the local NHS Trusts to work with Kent County Council's Social Services department on issues relating to health and social care to ensure that support is available to rehabilitate and care for

people in their own homes or at community hospitals. Furthermore, Members stressed that the community hospitals needed to care for these patients must be up and running before any services are moved to avoid any deterioration in service/care. The Committee strongly requested that firm and detailed plans for community hospitals are included in the forthcoming consultation document on orthopaedic trauma and elective orthopaedics.

- 2.6 As a final comment regarding Trauma and Orthopaedics, the Committee were concerned by a comment from a local physiotherapist in the audience that there is no orthopaedic physiotherapy input into the NHS Trust Reconfiguration Implementation Team. Members recommended that this be rectified as soon as possible.

3 Women's and Children's Services

- 3.1 In response to the proposals outlined in the consultation document on Women's and Children's Services, Members accepted the principle that obstetrics and paediatrics service provision must be linked together for an efficient and specialised care system to be provided. Whilst Members *reluctantly* accepted the rationale behind the proposals to centre obstetrics at Pembury hospital with a midwife-led birthing unit at Maidstone, they felt that a number of concerns had been raised. Members acknowledged that travelling to Pembury for elective epidural and caesarean procedures is likely to be manageable for expectant parents and families in that it is planned, however Members were not convinced that adequate risk assessment has been taken into account with incidences where a woman or baby develops complications during labour or shortly after birth and needs to be transferred. The Committee remained concerned that transferring patients at a highly stressful time could increase anxiety and pose a threat to the health of mother and/or baby. Members therefore strongly emphasised the requirement to assess the need for transfer as early as possible, assessing the risks whilst being mindful of the impact of factors such as traffic congestion and roadworks on the ease of transfer.
- 3.2 As with the comments regarding Trauma and Orthopaedics, Members felt that there are a number of transport issues that have yet to be addressed (see paragraphs 1.2, 2.3 and 2.4 above). Again, the Committee stressed that ensuring that an improved transport infrastructure that is responsive to the needs of services users is in place before moving services should not be seen as merely an 'ideal', but a necessity.
- 3.3 Noting that a feasibility study for a midwife-led birth unit is to be undertaken, Members were keen for this to be carried out as soon as possible and for the findings of the feasibility study to be considered as part of this consultation period. As with recommendations regarding community hospitals (see paragraphs 1.3 and 2.5 above), should the proposals for Women's and Children's Services be adopted then the necessary birthing units must be in place prior to any movement of services to Pembury hospital.
- 3.4 With regard to focussing inpatient paediatrics at Pembury, the Committee stressed that as some families will be required to travel further than at present when their child is in hospital it is vital that facilities are provided for parents to stay overnight at the hospital if necessary to comfort their child.

3.5 For information, Members requested details from the Maidstone and Tunbridge Wells NHS Trust regarding babies cared for in Special Care Baby Units (SCBU): how many babies are transferred to SCBU, what proportion of total births does this represent, and where are these babies transferred to?

4 General point

4.1 Inadequate staffing levels and difficulties in recruiting and retaining staff were held up as key problems driving the proposed changes to services. Members felt strongly that greater investment in recruiting, training and retaining staff is required and suggested that developing teaching hospital status and/or training placements for new nurses and doctors training with Christchurch University College at Canterbury and the University of Greenwich at Chatham, for example, could help to counteract these problems.

I, and my colleagues on the External Scrutiny Committee, look forward to hearing feedback from this consultation process.

Yours sincerely,

Cllr James Cook
Chairman of the External Scrutiny Committee
(On behalf of Maidstone Borough Council's External Scrutiny Committee)

cc Rose Gibb, Chief Executive, Maidstone and Tunbridge Wells Hospital Trust
Frank Sims, Director of Modernisation and Strategic Development,
Maidstone and Tunbridge Wells Hospital Trust
Nigel Howells, Chief Executive, Maidstone Weald Primary Care Trust
Maidstone Borough Council Cabinet
Kent County Council and East Sussex County Council Joint Select Committee

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