Thurrock: An ambitious and collaborative community which is proud of its heritage and excited by its diverse opportunities and future

Orsett Hospital Task & Finish Group

The meeting will be held at 7.00 pm on 10 October 2019

Committee Room 1, Civic Offices, New Road, Grays, Essex, RM17 6SL

Membership:

1

Councillors Victoria Holloway, Fraser Massey, Sara Muldowney, Shane Ralph, Joycelyn Redsell and Elizabeth Rigby

Agenda

Open to Public and Press

Page

13 - 14

2	Minutes	5 - 12

To approve as a correct record the minutes of the Orsett Hospital Task and Finish Group meeting held on 7 November 2018.

3 Urgent Items of Business

Apologies for Absence

- 4 Declaration of Interests
- 5 Review of Terms of Reference
- 6 Sustainability and Transformation Plan (STP) Update *(Report to Follow)*
- 7 Date for Next Meeting

Queries regarding this Agenda or notification of apologies:

Please contact Jenny Shade, Senior Democratic Services Officer by sending an email to direct.democracy@thurrock.gov.uk

Agenda published on: 2 October 2019

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DECLARING INTERESTS FLOWCHART – QUESTIONS TO ASK YOURSELF

Breaching those parts identified as a pecuniary interest is potentially a criminal offence

Helpful Reminders for Members

- Is your register of interests up to date?
- In particular have you declared to the Monitoring Officer all disclosable pecuniary interests?
- Have you checked the register to ensure that they have been recorded correctly?

When should you declare an interest at a meeting?

- What matters are being discussed at the meeting? (including Council, Cabinet, Committees, Subs, Joint Committees and Joint Subs); or
- If you are a Cabinet Member making decisions other than in Cabinet what matter is before you for single member decision?

Does the business to be transacted at the meeting

- relate to; or
- likely to affect

any of your registered interests and in particular any of your Disclosable Pecuniary Interests?

Disclosable Pecuniary Interests shall include your interests or those of:

- your spouse or civil partner's
- a person you are living with as husband/ wife
- a person you are living with as if you were civil partners

where you are aware that this other person has the interest.

A detailed description of a disclosable pecuniary interest is included in the Members Code of Conduct at Chapter 7 of the Constitution. Please seek advice from the Monitoring Officer about disclosable pecuniary interests.

What is a Non-Pecuniary interest? – this is an interest which is not pecuniary (as defined) but is nonetheless so significant that a member of the public with knowledge of the relevant facts, would reasonably regard to be so significant that it would materially impact upon your judgement of the public interest.



If the interest is not already in the register you must (unless the interest has been agreed by the Monitoring Officer to be sensitive) disclose the existence and nature of the interest to the meeting Non- pecuniary

If the Interest is not entered in the register and is not the subject of a pending notification you must within 28 days notify the Monitoring Officer of the interest for inclusion in the register

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Unless you have received dispensation upon previous application from the Monitoring Officer, you must:

- Not participate or participate further in any discussion of the matter at a meeting;
- Not participate in any vote or further vote taken at the meeting; and
- leave the room while the item is being considered/voted upon

If you are a Cabinet Member you may make arrangements for the matter to be dealt with by a third person but take no further steps Declare the nature and extent of your interest including enough detail to allow a member of the public to understand its nature

▼ You may participate and vote in the usual way but you should seek advice on Predetermination and Bias from the Monitoring Officer.

Our Vision and Priorities for Thurrock

An ambitious and collaborative community which is proud of its heritage and excited by its diverse opportunities and future.

- 1. **People** a borough where people of all ages are proud to work and play, live and stay
 - High quality, consistent and accessible public services which are right first time
 - Build on our partnerships with statutory, community, voluntary and faith groups to work together to improve health and wellbeing
 - Communities are empowered to make choices and be safer and stronger together
- 2. **Place** a heritage-rich borough which is ambitious for its future
 - Roads, houses and public spaces that connect people and places
 - Clean environments that everyone has reason to take pride in
 - Fewer public buildings with better services
- 3. **Prosperity** a borough which enables everyone to achieve their aspirations
 - Attractive opportunities for businesses and investors to enhance the local economy
 - Vocational and academic education, skills and job opportunities for all
 - Commercial, entrepreneurial and connected public services

Minutes of the Meeting of the Orsett Hospital Task & Finish Group held on 7 November 2018 at 7.00 pm

Present:	Councillors Victoria Holloway, John Kent, Joycelyn Redsell, Elizabeth Rigby and Luke Spillman
Apologies:	Councillor John Allen
In attendance:	Roger Harris, Corporate Director of Adults, Housing and Health Jenny Shade, Senior Democratic Services Officer

Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website.

1. Appointment of Chair

The Democratic Services Officer outlined the process for the nomination and election of Chair and Vice-Chair.

Councillor J Kent nominated Councillor Holloway as Chair. Members agreed to this nomination.

RESOLVED:

Councillor Holloway was appointed as Chair of the Orsett Hospital Task and Finish Group.

2. Appointment of Vice Chair

Councillor J Kent nominated Councillor Spillman as Vice Chair. Members agreed to this nomination.

RESOLVED:

Councillor Spillman was appointed as Vice Chair of the Orsett Hospital Task and Finish Group.

3. Purpose of Committee

Members were referred to the aim of the Orsett Hospital Task and Finish Group which were to scrutinise the current proposed closure process of Orsett Hospital to include the proposed transfer of services, the timings and the operational position of the integrated medical centres and to have a clear focus on the future of Orsett Hospital and to address alternative proposals.

4. Urgent Items of Business

There were no items of urgent business.

5. Declaration of Interests

Councillors Holloway, Rigby and Redsell declared a non-pecuniary interest as they were members of the Health and Wellbeing Overview and Scrutiny Committee.

6. Terms of Reference

Members agreed to the Orsett Hospital Task and Finish Group Terms of Reference as set out in the agenda.

7. Information Pack

Members were referred to the background and current information such as reports from Overview and Scrutiny Committees, information on Orsett Hospital services and the proposed Integrated Medical Centres, press articles and case studies.

Councillor J Kent stated the information pack was useful and very comprehensive and was pleased to see that site visits would be arranged. Councillor J Kent stated that it was disappointing that no NHS representatives were present to answer Members questions and that Member's disappointment should be minuted.

Councillor Holloway echoed Councillor J Kent's comments and stated that input from NHS representatives was vital and stated her disappointment with the lack of NHS presence.

Roger Harris stated that Tom Abel and Mandy Ansell were both formally invited and a position statement had been provided and tabled for Members information.

Councillor Spillman stated that NHS representatives had to be held to account with regards to the bold statements that the NHS were making.

Councillor Holloway stated that there was cross party support for the integrated medical centres but a reassurance on the closure of Orsett Hospital was needed so that Members can then assure residents. More information was needed on the thought process and the rational of closing of Orsett Hospital so that Members can be reassured and then reassure residents.

Councillor Redsell stated that to retain resident support and confidence in the new integrated medical centres it was vital that information was forthcoming and to ensure the integrated medical centres had the services resident's need.

Councillor Holloway asked what options had been considered for keeping Orsett Hospital open and had improving the transport links been considered.

Councillor Redsell as a member of the Bus User Group stated that the bus companies were getting involved and that conversations were taking place.

8. Sustainability and Transformation Plan (STP) Update

Members received a NHS briefing note on the impact of the Southend on Sea Council's referral to the Secretary of State on the STP.

Roger Harris, Corporate Director of Adults, Housing and Health updated Members with the following background information on the STP.

- On 6 July 2018 the Joint Committee of the five Clinical Commissioning Groups across mid and south Essex agreed to 19 recommendations which included the recommendation to close Orsett Hospital.
- It had been agreed that Orsett Hospital would not close until all integrated medical centres were up and running.
- That no clinical services would be moved out of Thurrock.
- On the 9 October 2018, Southend Council agreed to refer the STP to the Secretary of State with regard to the stroke services and the consultation process.
- With this in effect not everything had stopped with the planning and preparation work would continue.
- NHS would not agree to any decisions until the referral had been resolved.
- It was unclear whether the Secretary of State would squash the consultation completely or agree otherwise.
- Southend Council prepared a letter to the Secretary of State setting out the formal reasons why the consultation and stroke services were inadequate and demonstrate that a comprise had been made locally.
- The Secretary of State would then send the referral to the Independent Reconfiguration Panel who would consider the matter together with evidence and to seek specialist advice.
- The Independent Reconfiguration Panel would provide advice to the Secretary of State. There are no deadlines for the Secretary of State to make any decisions.

Councillor Holloway requested clarification on what services were going to which integrated medical centre and when these would be moved. Asked whether these services would be moved once an integrated medical centre was built or when all four centres were finished. Clarification on what Orsett Hospital would look like once services start to be moved out. Councillor Holloway requested to see clear plans.

Councillor Spillman asked Roger Harris whether he was concerned about the consultation process. Roger Harris stated that through meetings the Council had shown concern but broadly the process had been robust and the

consultation had been extended to ensure everyone got an opportunity to have their say.

Councillor J Kent asked how many referrals had the Secretary of State upheld on. Roger Harris stated that he would have to check this information.

Councillor J Kent questioned Roger Harris on his understanding on what the impact of the referral would be. Roger Harris stated that was more of a question for the NHS to provide a response and stated this would be an opportunity to consolidate some clinical services, recruit primary care staff in centres of excellence and the clinical services provided would be more robust.

Councillor J Kent questioned whether there would be any problems with recruiting staff. Roger Harris stated that the new centres of excellence would provide an opportunity to recruit the specialist and associated staff.

Councillor Spillman asked for long term plans on the centres development. Roger Harris stated that it would be hard to sustain clinical specialisms at all the proposed centres therefore specialist centres of excellent would be built across the region.

Councillor Rigby questioned whether the referral to the Secretary of State made by Southend Council had an effect on the integrated medical centres. Roger Harris stated that potentially this could have an impact as the NHS were significant financial contributors and would be head lease holders for the centres. That the Council would not recommend going out to tender and would not be confirming any contracts.

Councillor Holloway questioned whether the opening of the integrated medical centres was dependent on the closure of Orsett Hospital and what would happen if Orsett Hospital did not close. Roger Harris stated the proposed integrated medical centres were dependent on primary care partnerships offering a wide scale and range of services. The integrated medical centres had been designed around the range of services and would still go ahead but would fundamentally be a different style of building. Roger Harris stated that it was unlikely that all four centres would be finished at the same time but phased over time.

Councillor Holloway stated until timescales were known Members and residents would not have the confidence and stated that NHS Partners should continue to treat patients and invest into services.

Roger Harris provided an update on the Integrated Medical Centres.

Tilbury and Chadwell was being led by the Council with plans well advanced with a design team in place providing architect drawings and application will be presented to the Planning Committee in the New Year. A consultation had taken place in October. Thurrock Hospital owned by EPUT. This integrated medical centre would be slightly different as this site was seen as the most central area where fixed services such as minor injuries and renal dialysis would be located. A planning team had been established to look at reconfiguring the whole site which would address some of the parking concerns.

Corringham was being led by NELFT. Planning permission had been granted and a design team had been commissioned but would be on hold until the Secretary of State made by Southend Council had been confirmed.

Purfleet would be built as a commitment made between Thurrock Council and Purfleet Regeneration Limited, for a health centre to be provided in the heart of the development and would be included in Phase 1 of the development.

Councillor Holloway stated that if Orsett Hospital did not close whether a medical facility on Orsett Hospital site be built to consider population growth and need for services. Roger Harris stated that was a question for NHS but that a need for general practitioners would always be needed but would be offered on a different scale to what was already being proposed.

Roger Harris stated that the development of the integrated medical centres was happening at different stages and being led differently but all would have a common element.

Members agreed that a list of questions be prepared and presented to the NHS representative for responses to which these would then be presented at the next Task and Finish Group.

Councillor Spillman stated the integrated medical centre process had to be more tangible for residents to understand what services are going where and when.

Councillor Spillman requested clarification that services would allocated before Orsett Hospital was knocked down. Councillor Spillman stated there had been no details of such service allocation.

Councillor Redsell stated it was vital that all services were located together and in the right place.

Councillor Holloway requested more information on the plans for service allocation and asked whether the People's Panel had engaged with residents on service needs. These details were vital to ensure that Members can keep residents informed.

Councillor J Kent questioned how the broad range of services currently available at Orsett Hospital would work when they are broken down into pieces and spread far and wide.

Councillor Holloway stated there was a fundamental need on the transformation of services being offered. Although in agreement with the

vision but practical terms had failed and should be carried out more practically which Members should need to feed into. Councillor Holloway questioned what the process was in deciding to close Orsett Hospital rather than invest and what were the decisions were to close rather than to provide more transport routes. Councillor Holloway questioned what models had been looked at in making these decisions. Councillor Holloway stated that residents felt that the decision to keep Orsett Hospital had been snatched away from them and that communication had been poor. Councillor Holloway asked had the NHS partners thought about how residents would get to the new integrated medical centres and what the thought process was. Councillor Holloway questioned whether consideration had been made to keep a hub on the Orsett Hospital site and if not, why not.

Councillor Spillman stated that were so many unanswered questions with insufficient details and expressed again his disappointment that no NHS representative was not present to answer questions and make clear the final delivery model.

Councillor Redsell stated that Thurrock Hospital undertakes a lot of services and that reconfiguration of the site would address residents parking concerns. Councillor Redsell stated that Orsett Hospital was an old building which was only half occupied.

Councillor Spillman questioned Thurrock Council's health responsibility to residents and at what stage would the Council have concerns over the services being offered and where. Roger Harris gave Members the reassurance that services would definitely be going into the integrated medical centres. Information such as the number of patient volumes, the design of the services and that some clinics would be going into more than one of the centres.

Councillor Holloway questioned the transition period of transferring services from Orsett Hospital to the integrated medical centres and where services would be available. Councillor Holloway asked for reassurance that once one integrated medical centre was built what would happen with the services remaining at Orsett Hospital. Councillor Holloway stated that it could take years for further integrated medical centres to be built and that the Council should be planning for every eventuality.

Councillor Rigby questioned whether one of the integrated medical centres could replicate the services being offered by Orsett Hospital as it would make sense to have a central unit. Roger Harris stated that only a small number of services would be replicated in one centre such as minor injuries and dialysis.

Councillor Redsell stated that Orsett Hospital would not be able to cope with the potential increase to the borough and that the integrated medical centres were required which could also potentially take some of the services out of Basildon Hospital. Councillor Rigby stated that the integrated medical centres plans should be basic with the flexibility to change once development in the borough increased.

Roger Harris stated that a vigorous commitment had been made to keep all the services in Thurrock within the four integrated medical centres and to be clear that it was about the service delivery and not about the building.

Councillor J Kent stated it was not about the building but the service delivery to ensure that residents had confidence and faith that the services would be delivered. Councillor K Kent asked where the general practitioners planned to go into the Tilbury site were coming from. Roger Harris stated that general practitioner services had already been commissioned with the Clinical Commissioning Group and NHS England that two practices would be sited within the Tilbury site with patient lists of over 12,000.

Councillor J Kent stated that general practitioner services should be moving closer to residents and not further away. Roger Harris confirmed that not all general practitioners were moving into the integrated medical centres.

9. Dates for Next Meeting

Democratic Services will look at the municipal calendar for dates.

Members agreed that NHS representatives should again be formally invited to attend.

10. Next Steps

Democratic Services will look for available dates in the municipal calendar and invitations to attend will be sent to NHS representatives.

Democratic Services will arrange a site visit to Orsett Hospital in the New Year.

The meeting finished at 8.21 pm

Approved as a true and correct record

CHAIR

DATE

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Agenda Item 5

Orsett Hospital Task and Finish Group

Terms of Reference

Aim:

To scrutinise the current proposed closure process of Orsett Hospital to include:

- the proposed transfer of services;
- the timings and the operational position of the integrated medical centres;
- to have a clear focus on the future of Orsett Hospital and to address alternative proposals.

Membership:

6 elected Members (to be decided on politically proportion)

Chair:

The Chair and Vice-Chair shall be elected by the membership of the Task and Finish Group at its first meeting. The appointment will last until the work of the Task and Finish Group is complete.

Duration:

The Task and Finish Group shall continue until such time as all business of the Task and Finish Group is complete. The proposed end date of the Review will be February 2019.

Activities:

The Task and Finish Group will undertake all but not exclusively the following activities:

September 2018	Seek membership nominations from Group Leaders	
September/early October 2018	Convene first meeting to:	
	 Meet with Officers and receive general information pack on the Orsett Hospital Issue Agree any public consultation process (for example focus group) Invite any witnesses who will be needed to provide background information on the Topic Identify patient groups affected by closure and seek information from them Undertake any research on the topic for Task and Finish Group 	
November 2018	Undertake a site visit to Orsett Hospital	
December 2018	Hold witness session with CCG, NHS and Chair of Health and Wellbeing Board	
January 2019	Consult with HealthWatch and Thurrock Coalition	

Early February 2019	Site visit to proposed locations of the Integrated Medical Centres
February 2019	Meet to formulate recommendations Write report
	Bring back report to Task and Finish Group/Health and Wellbeing Overview and Scrutiny Committee and Cabinet