

Medway Council
Meeting of Health and Adult Social Care Overview and
Scrutiny Committee

Monday, 11 November 2013

8.30pm to 10.30pm

Record of the meeting

Subject to approval as an accurate record at the next meeting of this committee

Present: Councillors: Christine Godwin, Griffin, Adrian Gulvin, Pat Gulvin, Hewett and Wildey (Chairman)

Co-opted members without voting rights

Christine Baker (Medway Pensioners Forum) and Mr Richard Iddenden (Healthwatch Medway)

Substitutes: Councillors:
Cooper (Substitute for Councillor Igwe)
Etheridge (Substitute for Councillor Watson)
Juby (Substitute for Councillor Kearney)

In Attendance: Professor Has Ahmed, Clinical Director for Women's Health
Dr Alison Barnett, Director of Public Health
Alison Burchell, Chief Operating Officer, NHS Medway
Commissioning Group
Steve Hams, Chief Nurse - Medway Maritime Hospital
Barbara Graham, Legal Advisor
Rosie Gunstone, Democratic Services Officer
Karen McIntyre, Head of Midwifery - Medway Maritime Hospital
Barbara Peacock, Director of Children and Adult Services
David Quirke-Thornton, Deputy Director, Children and Adults
Services
Geoffrey Wheat, Chief Nurse, NHS Medway CCG

521 Record of meeting

The record of the meeting held on 20 August 2013 was agreed as correct and signed by the Chairman.

522 Apologies for absence

Apologies for absence were received from Councillors Igwe, Kearney and Watson.

523 Urgent matters by reason of special circumstances

There were none.

524 Declarations of interests and whipping

There were none.

525 Care Quality Commission inspection report on Medway Maritime Hospital Maternity Services

Discussion:

The Chief Executive of Medway NHS Foundation Trust gave an introduction to the unannounced inspection report from the Care Quality Commission (CQC) in relation to maternity services at Medway Maritime Hospital.

He stated that he and the staff of the hospital were very disappointed with the outcome of the inspection, which he said was undertaken using new methodology covering six standards. The findings against these outcomes was as follows:

- Respecting and involving people who use our services – minor concern – action required
- Care and welfare of people who use services – moderate concern – action required
- Management of medicines – moderate concern – action required
- Staffing – major concern – enforcement action taken
- Supporting workers – major concern – enforcement action taken
- Assessing and monitoring the quality of services – major concern – enforcement action taken

He explained that the ratio of midwives to patients had formerly been a recommendation of 1:29 and the hospital had been working towards that target. The ratio was now a requirement and the aim was for the hospital to be compliant with that target by the end of the year. Already the hospital was at a ratio of 1:30 following efforts to recruit new midwives to the service and he emphasised that the recruitment process had been robust to ensure that high quality staff were employed. Following comments made by the Committee he admitted that some basic errors had been made in the maternity service, that some processes had not been adhered to while there was a shortage in staff and accepted that the inspection had brought to light very important omissions and gaps in service, which he agreed was unacceptable. He emphasised that there was an enthusiasm and determination to address all the issues raised speedily.

He referred to close working with commissioners at the CCG on the antenatal pathway to refresh and modernise the service. Responding to Members' questions in particular relating to:

Health and Adult Social Care Overview and Scrutiny Committee, 11 November 2013

- Auditing processes in maternity services
- Staff training and appraisals
- Bereavement training
- Consistency and good practice across the service
- Ongoing availability of the Birth Place
- The importance of dealing with mental health issues promptly

He detailed the actions of the trust in rectifying the areas of concern, particularly in relation to training, appraisals, support of staff and more robust auditing of processes within the maternity service. He stated that where good practice was identified it was rolled out across the service without delay. In relation to bereavement training the Chief Nurse at the hospital stated that there was a senior midwife who was the designated midwife and she had specific training and experience dealing with bereavement. The Birth Place would on occasion still need to be closed but as more staff joined the hospital these closures would be less frequent.

He also outlined the assistance being given to the department from a senior midwife in London as external challenge and support for the service, which had been very helpful.

The Head of Midwifery responded to Members' specific queries about the maternity service and explained the bandings for midwives and confirmed that progression within the service from the maternity assistants took place and that staff retention was not a problem.

The Healthwatch Medway representative, and some Members, referred to specific concerns from local residents about the hospital and the Chief Executive undertook to look into any specific areas of concern, from Healthwatch Medway or from Members, in order that they could be addressed. Assurances were asked for, and given by Medway NHS Foundation Trust, that the views and concerns of patients and service users and their carers would be taken seriously.

The Clinical Director for Women's Health referred to the fact that over the years prenatal and postnatal care, including supporting mental health had not been commissioned. The Chief Operating Officer, NHS Medway Clinical Commissioning Group, emphasised that maternity services were commissioned in line with national best practice and that work had been completed last year with all maternity services in Kent and Medway to agree a service specification that was in line with best practice. As with all pathways these will continue to be monitored and reviewed. The Head of Midwifery confirmed that there was a midwife who had a focus on mental health.

The Director of Children and Adults referred to a Big Lottery Bid which was currently being worked on and stated that if successful this would enable improvements to be made as it relates to remodelling of the pathway from conception to age 3.

During debate the Chief Executive of Medway NHS Foundation Trust offered to Members an opportunity for them to visit the maternity unit. The Chairman suggested that any request for a visit should be sent to the Democratic Services Officer to co-ordinate. He also pointed out the Committee's concerns at the contents of the report and requested a timeline of when there might be a report back on progress. The Chief Executive of Medway NHS Foundation Trust confirmed that a report could be brought to the meeting scheduled for 28 January 2014.

Decision:

The Chief Executive of Medway NHS Foundation Trust was thanked for his attendance, noting the concerns of the Committee in relation to the findings of the CQC inspection report, and agreed to update the Committee at its meeting on 28 January 2014.

526 Work programme

Discussion:

The Chairman made the following announcements:

- He referred to receipt of clarification from the mental health trust about the current bed numbers in use at A block, Medway Maritime Hospital, which had been circulated to all Members of the Committee on Friday. He stated that the topic of mental health already featured on the agenda for 18 December meeting with the implementation plan for the proposed acute mental health beds reconfiguration being considered and possibly also the response from the Secretary of State to the Committee's referral back in August.
- A petition signed by 1,654 people relating to St Mary's medical centre in Strood, calling for the roll over of the existing contract to Doctor Pancholi had been received. The petition had been handed to two of the ward members, Cllrs Chitty and Etheridge, and he understood Cllr Hubbard was fully supportive of it. Democratic Services would be processing the petition under the Council's petitions scheme. He stated that whilst it would not be appropriate for the Committee to seek to influence NHS decisions relating to individual contracts of employment the petition would be referred to the NHS England (Kent and Medway) office with a request for the Committee to receive an update on the continuity of provision at St Mary's at its next meeting on 18 December to which the lead petitioners would be invited. A request would be made for the Chairman and spokespersons to be kept informed of development affecting provision in the meantime. An initial briefing from NHS England (Kent and Medway) had been sent to Members of the Committee on Friday.
- The physiotherapy team formerly based at Medway Maritime Hospital will be moving to their new clinic at MCH House, 21 Bailey Drive in Gillingham on Wednesday 20 November. The new clinic, he had been

Health and Adult Social Care Overview and Scrutiny Committee, 11 November 2013

assured, was purpose designed with easy parking and access by public transport.

Note: There was no discussion under this item on the recommendation from the Health and Wellbeing Board for a Healthwatch Medway representative to be added to the membership of the Health Inequalities Task group.

Decision:

- (a) It was noted that the report of the Mental Health Task Group and the outcome of the Committee's referral to the Secretary of State of the proposed reconfiguration of acute mental health inpatient beds would be added to the work programme for 18 December 2013.
- (b) It was noted that a report on St Mary's medical centre would be added to the 18 December meeting items and NHS England (Kent and Medway) and lead petitioners invited to attend.

Chairman

Date:

Rosie Gunstone, Democratic Services Officer

Telephone: 01634 332715

Email: democratic.services@medway.gov.uk

This page is intentionally left blank