Trust Board Minutes

NHS Gloucestershire Care Services NHS Trust

Board Meeting on 30th August 2018 at 12:15 pm
Forest Hills Golf and Leisure
Mile End Road, Coleford, Gloucestershire GL16 7QD

30th August 2018

Board Members	
Ingrid Barker	Chair (Voting Member)
Paul Roberts	Joint Chief Executive (Voting Member)
Graham Russell	Non-Executive Director (Voting Member)
Jan Marriott	Non-Executive Director (Voting Member) from 2pm
Sandra Betney	Director of Finance/Deputy Chief Executive (Voting Member)
Susan Field	Director of Nursing (Voting Member)
Candace Plouffe	Chief Operating Officer (Voting Member)
Neil Savage	Director of Workforce & OD
Dr. Mike Roberts	Medical Director (Voting Member)
In attendance	
Gillian Steels	Trust Secretary
Louise Moss	Deputy Trust Secretary
Bilal Lala	Insight Programme, NED Development
12.15-1pm 3.30pm	5 members of the public C. 60 members of the public

Ref No.	General Business
01/0818	**Apologies for Absence and Confirmation the Meeting is Quorate** Apologies were received from Nick Relph, Non-Executive Director. Richard Cryer, Non-Executive Director. Susan Mead, Non-Executive Director and David Smith - Executive Director for Transition. It was confirmed that the meeting was quorate. The Chair welcomed attendees, including a number of members of public, to the meeting.
02/0818	**Declarations of Interest** Declarations of Interest previously declared were noted. The Chair highlighted her ongoing declaration as Joint Chair of 2gether NHS Foundation Trust and GCS. The Chief Executive highlighted his ongoing declaration as Joint Chief Executive of 2gether NHS Foundation Trust and GCS.
06/0818	**Questions from the Public** Specialist Stroke Rehabilitation Unit It was noted that a number of written questions had been received from members of the public and that the written responses would be provided on the Trust's website within the next 7 days.

	It was noted that following queries raised within one question received that the Board paper relating to the Specialist Stroke Rehabilitation Unit had been updated, with the revised paper added to the Trust's website and issued to the individual who had raised the question. The Joint Chief Executive outlined the decision making process which had been undertaken relating to the Sepcialist Stroke Rehabilitation Unit and confirmed that it was in line with due process. He confirmed that the Gloucestershire Clinical Commisioning Group had confirmed that they wanted to commission the service. He advised that this meeting would be considering the specialist stroke unit proposal, and that this would be distinct from any considerations relating to the Minor Illness and Injury Units which were part of wider discussions within One Gloucestershire which were being considered at this meeting. It was confirmed that the Trust's Board papers had been available on the Trust's website a week prior to the meeting in line with usual practice. It was confirmed that the Health and Care Oversight and Scrutiny Committee (HOSC)had agreed that formal consutation on the proposal was not required. The Joint Chief Executive advised that given this context there was no purpose to befer making a decision on the proposal.
03/0818	**Specialist Stroke Rehabilitation Unit** The Chief Operating Officer outlined the context for the proposal advising that as part of the One Gloucestershire Sustainability and Transformation Plan work in reducing clinical variation, a business case had been developed for the development of a Community stroke rehabilitation unit. This reflected peer reviewed national evidence that improving the quality and intensity of specialist rehabilitation and care in an appropriate environment improves patient outcomes. The Chief Operating Officer advised that as part of the work to identify the best site an external resource had been used to undertake a bed modelling exercise. The options appraisal and bed model had confirmed that the Vale Community Hospital would be the preferred site for the proposed unit. This would create a 14 bed community centre of excellence for stroke in this hospital, with 6 beds remaining for general subacute and rehabilitation care. She commented on recent research on "Your Bed is Best" and the Trust's work on reducing length of stay in community hospitals as part of this. She confirmed there was no intention to move MSK services. It was noted that when the matter had been discussed at the Health and Care Oversight and Scrutiny Committee (HOSC) the need to consider transport across the wider system had been flagged. It was confirmed this would be raised as a system issue. The Joint Chief Executive commented that he would highlight this with partners, and would propose that the Integrated Care System had a workstream which considered transport, whilst recognising that transport was not a statutory health matter The Chief Operating Officer outlined the care and new opportunities that would be provided through the proposed unit, highlighting that it was an exciting opportunity for the County to catch up with best practice nationally. It was confirmed that the catchment for the unit would be Gloucestershire patients. It was confirmed that the county was working

	to develop one strategy for the county in relation to community services, whether within a community hospital or not. It was reciognised that Cheltenham and Gloucester did not have community hospitals and that the Gclousertsgire Clinical Commissioning Group was considering how best to commission complex care at home to support patients from these areas. The Chief Operating Officer confirmed that the Trust worked to ensure patients were treated as near to home as possible and outlined processes to support this: GP Direct admission, transfer back to more local beds when available, working to support patient flow through the system and work with social care. The Director of Nursing commented that the Unit would provide much needed services for Gloucestershire which should improve outcomes for people living with strokes and their carers. The Chief Operating Officer outlined the significant investment in workforce which would be put in place to support the unit to provide 7 day therapy and Speech and Language. Nicola Strother Smith queried whether the Trust was confident it could recruit to support the unit and also requested assurance that any transfers from the acute hospital would be made at appropriate times. The Chief Operating Officer advised that the service would be part of a pathway, not a stand alone service and that the proposal would reduce fragmentation, with specialist roles being attractive for recruitment. The Director of Nursing commented that the shared workforce would provide resilience and support effective learning. The Director of HR and OD commented on the benefits such a unit would provide for the workforce, and the opportunity for research and development. It was confirmed that GCS was working with the acute trust to work to avoid transfers at night. Nicola Strother Smith queried whether a Quality Equality Impact Assessment had been undertaken. It was confirmed that it had been , and that it had been reviewed by the Clinical Reference Group. Additionally one had been undertaken as part of the Business Case for the Gloucestershire Clinical Commissioning Group. The Director of Finance welcomed the significant investment that was being made by the Gloucestershire Clinical Commissioning Group in the community. She queried whether Gloucestershire could manage the volume of stroke cases within the county within the proposed unit and the basis for the assumptions that the number of superstranded patients could be reduced. The Chief Operating Officer confirmed the proposal was supported by the bed modelling. It was confirmed that Gloucestershire Hospitals NHS Foundation Trust welcomed the proposal as a mechanism to step down patients to a specialist unit. The Chief Operating Officer confirmed that if the proposal was agreed that the process for implementation would commence. The Chair queried how the unit would improve diagnostics and medical care. The Chief Operating Officer advised that the networking with Gloucestershire Hospitals NHS Foundation Trust would support this. She advised that enhanced level of therapy would be available for all patients.

	The Board: **(i)** **CONFIRMED** its intent to be the provider of a Specialist stroke rehabilitation unit**;** **(ii)** **AGREED** the recommendation that a 14 bedded specialist stroke rehabilitation unit be sited at the Vale Community hospital, with the remaining 6 beds available to offer local provision alongside the Stroud hospital inpatient unit**;** **(iii)** **NOTED** that existing outpatient services (such as MSK services) will not be relocated to another hospital as a result of siting this specialist stroke rehabilitation unit at the Vale hospital; (iv) **RECOGNISED** the concerns raised in the engagement concerning transport, and the need to work with wider system partners on how to improve transportation to facilitate easier access to health and care services, as this is an issue that impacts on many services delivered in Gloucestershire.

The Meeting broke for a Joint Seminar

The meeting was preceded by a Joint Seminar with the Gloucestershire Clinical Commissioning Group Governing Body to receive information about the following:

- The outcome of engagement on the location of a new hospital;
- Equality Impact Analysis;
- Travel and Transport Analysis *and*
- Citizens' Jury process and recommendations

This involved the provision of reports available on the Forest of Deran Website, presentations and an opportunity to ask questions of the presenters to inform their decision making in the related Board/Governing body meeting.

Ref No.	General Business
04/0818P	**Apologies for Absence and Confirmation the Meeting is Quorate** Confirmed as above. The Chair welcomed the Board and members of the public to the meeting, noting that it was a Board meeting in public, not a public meeting. She confirmed that the Board understood the importance of the decision and took its responsibilities seriously. It recognised the unique nature of the area, the pride of members of the community and the heritage. She affirmed that the Board embraced the commitments of the NHS constitution and the tenet that "the NHS belongs to the people". She thanked the members for their participation in the community engagement. She set out GCS's responsibilities in relation to the decision re location and the role of the Gloucestershire Clinical Commissioning Group Governing Body as commissioner of the services.
05/0818	**Declarations of Interest** Noted as above.

06/0818	**Questions from the Public** Forest of Dean It was noted that a number of written questions had been received from members of the public and that the written responses would be provided on the Trust's website within the next 7 days. The Joint Chief Executive summaried the themes covered within the questions and provided a response to the issues raised, confirming that the full responses would be covered as above: A number of oral questions were then raised. It was confirmed that no decision on closure of the current Forest hospitals had been made. A number of stages would be taken forward before this. An Outline Business Case and a Full Business Case would be developed. A question on Lydney policy was then raised. It was confirmed a full answer to this question would be provided within 7 days. It was also confirmed that both the GCS Board and the Gloucestershire Clinical Commissioning Group Governing Body had had access to the information provided to the Citizens' Jury including the demographic information provided.
Ref No.	**Leadership and Strategy**
07/0818	**Forest of Dean Hospital – Proposed Location** The Board had been provided with detailed documentation covering: • The outcome of engagement on the location of a new hospital; • Equality Impact Analysis; • Travel and Transport Analysis *and* • Citizens' Jury process and recommendations It was noted that the joint engagement undertaken by NHS Gloucestershire Clinical Commissioning Group (GCCG) and Gloucestershire Care Services NHS Trust Board (GCS) ended on 3 July 2018. The engagement formed part of the evidence presented to the Citizens' Jury which took place from 30 July – 3 August 2018. It was noted that in line with national guidance, while recognising that NHS bodies are not bound by the views of expressed by those who took the opportunity to respond to the engagement and participated as members of the Forest of Dean Citizens' Jury, both GCCG and GCS were committed to ensuring that these views were fully considered and taken into account as part of any decision making process. It was noted that the Board was being asked to consider the recommendation of the Citizens' Jury to build a new Community Hospital in the Forest of Dean in Cinderford; and to consider other recommendations/observations made by the Citizens' Jury. The Board noted the Outcome of Engagement, independent Equality Impact Analysis and Travel and Transport Analysis as part of its decision making. It was noted that the Trust Board was also asked to consider any recommendations made,

	to ensure these are addressed in the final business case and/or future intentions The Board considered the recommendations following this six week engagement and Citizens' Jury recommendations relating to the location of a New Community Hospital in the Forest of Dean. Nicola Strother Smith, Non-Executive Director, commented on the clarity and informativeness of the seminar and the papers provided to support the decision making process. She requested further information on when equality impact sensitivity testing would take place and how it would work. The equality specialist, who had presented to the seminar, was invited to comment by the Chair. He advised that relevancy testing should continue through the whole process, using a feedback loop, in discussion with individuals with lived experience. The Chief Executive confirmed that the Trust would take these matters forward outside the meeting using best practice guidance to support the process. Graham Russell, Non-Executive Director, advised that he had been very impressed by the Citizens'Jury process, the comprehensiveness of the information provided, the thoroughness of the approach, the commitment of the Jury and the involvement of local people. He confirmed that this would be very helpful as the Board as it considered this important decision. He queried whether there would be further engagement on services and this was confirmed. The Chief Executive advised that this would involve local people and clinicians. Jan Marriott, Non-Executive Director, commented on the travel information and the need to understand the implications of the assessment. The Chief Executive reiterated this and highlighted the recommendation relating to transport which would take forward these issues. He reflected that transport had also been recognised as a concern during the discussions on the Stroke Rehabilitation Unit earlier in the meeting. It was recognised that the Trust would need to consider primary care services as part of the process. The Chief Operating Officer confirmed that the Community Hospital was only one element of the Trust's services, and that the aim was for services to be provided as close to home as possible. The Director of Finance highlighted the work that would need to be done as part of the business case, and the need to ensure transport was a key part of this. The Director of Nursing commented on the workforce implications of the plans, commenting that it would be an opportunity to recruit staff and ensure provision of best quality care in the community supported by our education partners. The Board considered the recommendations within the report: **Recommendation 1: Case for Change** The GCCG Governing Body/Gloucestershire Care Services NHS Trust Board is asked tore-confirm its continuing support for the Case for Change, with specific reference tocommunity hospital services. **Recommendation 2: Bed Modelling** The GCCG Governing Body/Gloucestershire Care Services NHS Trust Board is asked to: 1) Note the comments that have been expressed through the public consultation with regard to the number of beds that will be included in a new community hospital in the Forest of Dean. 2) Confirm that at this point in time no final bed numbers have been agreed for a new hospital in the Forest of Dean.

3) Confirm that the shared aim is to provide sufficient capacity within the Forest of Dean to meet local need, with specific reference to meeting the needs of people who require multi-disciplinary active rehabilitation and/or sub-acute care, while also promoting new models of care which reduce the need for hospital admission and support reduced length of stay in hospital.

4) Confirm a shared commitment to work actively to test new models of care in Gloucester City and Cheltenham Town, with the aim of providing clear pathways and more local care where possible and appropriate.

5) Commit to undertaking further work, as part of the wider whole system bed modelling, to provide the rationale and evidence base for the proposed bed numbers to be included within a new community hospital in the Forest of Dean.

6) Confirm that this work will be completed before the final design of a new community hospital is agreed, and that it will be shared widely with colleagues in the Forest of Dean.

Recommendation 3: Travel and Access
The GCCG Governing Body/Gloucestershire Care Services NHS Trust Board is asked to:
1) Note the importance of travel and access for people in the Forest of Dean.

2) Ensure that travel and access issues are reflected in any consideration of location, should there be a decision to progress the preferred option.

3) Commit both organisations to work with partners to support wider ambitions to improve public transport and access routes within the Forest of Dean.

4) Commit both organisations to continuing to work with community transport providers to promote the use of their services.

Recommendation 4: Planning for demographic growth
The GCCG Governing Body/Gloucestershire Care Services NHS Trust Board is asked to:
1) Confirm that the assumptions for demographic growth will be reviewed and updated to reflect the most current information, working in partnership with the Forest District Council and town councils as necessary;

2) That should the decision to approve the preferred option be made, this information will be available to the forum established to consider the optimal location.

Recommendation 5: Heritage and Legacy
The GCCG Governing Body/Gloucestershire Care Services NHS Trust Board is asked to:

1) Note the strong views of local people with regard to the history and legacy associated with the two sites.

2) Note that, should the preferred option be progressed, and should either or both sites become surplus to requirements, options for the future of each site will be progressed to realise best value.

Recommendation 6: Detailed Service Planning
The GCCG Governing Body/Gloucestershire Care Services NHS Trust Board is asked to:
1) Reconfirm that the approach was to seek the views through consultation on the preferred option for a single new hospital, and views on the criteria for location.

2) Commit to ensuring that, if a decision is taken to approve the preferred option, there will be a process established to ensure that local people are engaged and involved in the detailed service planning, reflecting an ongoing commitment to co-production.

Recommendation 7: NHS Financial Framework
The GCCG Governing Body/Gloucestershire Care Services NHS Trust Board is asked to:
1) Ensure that in all future engagement and communication it is made clear that should the preferred option be progressed, this will be achieved through the investment of NHS capital;

2) Note that should the preferred option be approved, there will be a commitment to ensure that the optimal levels of efficiency are realised, noting the need to secure year-on-year cost improvements and a wish to achieve this with minimal impact on patient care.

Recommendation 8: Alternative Options
The GCCG Governing Body/Gloucestershire Care Services NHS Trust Board is asked to:
1) Confirm the assessment that no new options, which met the objectives set out in the consultation, were identified through the consultation feedback which had not been considered as part of the options appraisal to determine the preferred option.

Recommendation 9: Impact Assessment
The GCCG Governing Body/Gloucestershire Care Services NHS Trust Board is asked to:
1) Recommit to ensuring that, what-ever option is progressed, there will be a clear process to assess the quality and equality impact, with particular reference to people with protected characteristics.

The Board **Agreed** the Recommendations set out below:

	Recommendation 10: Criteria and approach for appraising location and site Should the decision be taken to approve the preferred option, the GCCG Governing Body/Gloucestershire Care Services NHS Trust Board is asked to: 1) Confirm the criteria to be used to enable an objective consideration of a preferred **location** (in or near Cinderford, Coleford or Lydney) will be: • It should be a location which maximises access for the population of the Forest of Dean, and no further than 30 minutes by car, for the majority of Forest of Dean residents, mindful of: ○ the population characteristics of those who will use the services in a community hospital (urgent care, inpatient care, outpatients, diagnostics etc.,) taking in to consideration planned and potential population growth; ○ the needs of key partners who will support the community hospital including the ambulance service, patient transport providers, and other health and care providers; ○ relative accessibility of other options to access care, recognising that some people will choose to use other health facilities either within or outside of Gloucestershire; ○ public and private transport issues impacting on access. • It should have the support of local health and care professionals. • It is in an area which offers the greatest opportunities for co-location with primary care (e.g. GP services) and/or other related health and wellbeing services. • It is in an area which offers greatest potential to support the wider economic regeneration plans within the Forest of Dean. 2) Confirm that a Combined Panel will be commissioned with the purpose of applying the agreed criteria and making a recommendation on location. 3) Confirm that the site criteria that will be used will include the following: • It is able to accommodate a building/buildings and parking provision which meet current and future service requirements. • It is accessible by car or public transport. • is available and affordable to enable completion of works by 2021/2022 • It will be able to secure appropriate planning permission. • It offers the potential for pleasant surroundings, green space, views, etc. • It is a site that offers a design and development which provides best value for money for the public purse. The Board **approved** the 10 recommendations.
08/0818	**Any Other Business** There was no further business.
09/0818	**The meeting closed at 16.30.**
Date of the Next Meeting	

It was agreed that the next meeting of the Board will be held on: Thursday 27th September 2018.

Chair's Signature: **Date:**