

**Minutes of: JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE
FOR PENNINE ACUTE NHS TRUST**

Date of Meeting: 23 April 2019

Present: Councillor Roy Walker (Bury Council)
Councillor Stella Smith (Bury Council)
Councillor Colin McLaren (Oldham Council)
Councillor Derek Heffernan (Oldham MBC)
Councillor Raymond Dutton (Rochdale MBC)
Councillor Linda Robinson (Rochdale MBC)
Councillor Norman Briggs (Oldham MBC)

Also in attendance: Nicky Tamanis: Deputy Chief Finance Officer, Salford Royal and Pennine Acute
Jo Purcell: Deputy Director North East Sector
Andrew Lynn, Group Director of Communication & External Affairs
Barry Williams, External Partnership Manager
Siobhan Moran, Northern Care Alliance

Public Attendance: No members of the public were present at the meeting.

Apologies for Absence: Councillor Gavin McGill (Bury Council)
Councillor Ann Stott (Rochdale MBC)

1 APOLOGIES FOR ABSENCE

Apologies were detailed above.

2 DECLARATIONS OF INTEREST

There were no declarations of interest.

3 PUBLIC QUESTIONS

There were no public questions.

4 MINUTES

It was agreed:

That the minutes of the meetings held on 15th January 2019 be approved as a correct record.

5 RECOUPING MONEY FROM NON-NHS PATIENTS

Nicky Tamanis, Deputy Director of Finance attended the meeting to provide members with an overview of NHS financial charges for overseas visitors. The Deputy Director reported that the Trust follows the NHS charges to overseas

visitors regulations 2015, which have been amended recently. Migrants, visitors and former residents of the UK must pay for their care when they are in England.

With regards to overseas visitors from the EU/EEA; the Trust receives the full National Tariff payment if the patient has a valid EHIC as well as an incentive payment of an additional 25% of the tariff for supplying timely information to the Department of Health. This income in 2018/19 was c £1.02 million plus £0.3 million incentive payment. For those patients without an EHIC card the patients are invoiced directly at tariff.

As for non EU/EEA patients the Trust receives the full tariff for A&E and any subsequent urgent treatment charges and overseas patients seeking UK asylum from the relevant CCG. All other overseas patients are invoiced directly. This is at full tariff plus 50% in accordance with the Regulations. For 2018/19 this was c£1.2m (0.2% of turnover). As per established debt collection processes, once the Trust has exhausted all other routes, the services of a debt collection agency (CCI) are used to support the recovery of outstanding debt

Those present were given the opportunity to make comments and ask questions and the following points were raised:

Members discussed the implications for overseas charging as a result of Britain leaving the European Union. It is envisaged that if the EHIC is no longer used the Trust will recoup costs as they do now for non-EU patients.

Responding to a Member's question the Deputy Director of Finance reported that the Trust's Audit Committee would decide to write off any debt. The debt would be recorded and flagged up if the patient was to enter the country again.

It was agreed:

The officers be thanked for their attendance.

6 UPDATE ON SRFT STRATEGIC OUTLINE CASE

Andrew Lynn, Group Director of Communication & External Affairs, provided members with an update in respect of Salford Royal's proposed formal acquisition of Royal Oldham, Fairfield and Rochdale sites and cementing the future of these sites as part of Northern Care Alliance NHS Group. The presentation contained information in respect of the following areas:

- The Northern Care Alliance's Vision and Values
- The Transaction Programme and Time frame
- Salford Royal Foundation Trust Strategic Case Overview
- Benefits for staff and patients
- Disaggregation of the Pennine Acute Services
- Next Steps

Those present were given the opportunity to make comments and ask questions and the following points were raised:

Responding to a Member's question, the Group Director reported that there will be no reduction in workforce as a result of these proposals, the Trust will still be delivering the same services. Responding to concerns raised about parking across the sites and in particular at Salford Royal the representative present confirmed that a parking review was underway.

With regards to what services will be provided where in relation to NMGH/FGH the Group Director reported that services could be acquired and moved or provided by NMGH via a Service Level Agreement. The Group Director reported that work is underway to ascertain what services are currently provided and which ones need to continue to be provided going forward.

Members discussed the financial impact of disaggregating services, the Deputy Director reported with regards to income, there is a national tariff, the corporate function are more difficult to separate. The majority of corporate staff will TUPE over in to the SRFT.

With regards to the budget/financial position at the Salford Royal, the Trust's turnover is approximately £650 million, it is envisaged that the Northern Care Alliances budget turnover will be £1.3 billion.

It was agreed:

Further information will be provided in July in respect of the Trust's financial position.

7 HR UPDATE

It was agreed:

1. In the absence of a representative from the Trust's Human Resources Department, it was agreed that this item would be deferred for consideration at the next meeting.
2. Recruitment, retention and workforce update will be a standing agenda item. The Trust will provide further information in respect of the high vacancy rates in medical/dental across the Trust.

8 PENNINE DRAFT QUALITY ACCOUNT

Siobhan Moran, Northern Care Alliance, attended the meeting to provide an overview of the Trust's quality account, the presentation contained information with regards to the quality achievements, aims, a review of quality improvement projects 2018/19 as well as priorities for improvement and statement of assurances from the board.

The Northern Care Alliance representative reported some of the Trust's quality achievements;

- Stroke services at Fairfield are rated in the top 9 best performing units out of 209 hospitals nationwide according to Sentinel Stroke National Audit Programme (SSNAP) audit data.

- End PJ paralysis initiative launched across all Pennine sites in 2018, and the Wolstenholme intermediate care unit at RI won 'Best Event' in the national End PJ Paralysis Awards.
- Victoria breast care unit at Oldham was awarded the Christie Quality Mark for the second time
- Fairfield has become the first hospital in the UK to pledge to be part of the Homeless-Friendly programme – helping rough sleepers receive care before they fall dangerously ill.

Members discussed the information presented in the report. Members discussed the mortality rates, palliative care and also hospice provision. The Chair expressed concern that on reading the report you are unable to cross-check progress with issues recently identified in the CQC inspection report.

Members discussed the format of the document and wanted to place on record their concern that it is not user friendly and not an easy document to interpret as a lay person.

9 PENNINE PLANNED TRANSFER OF SERVICE

Jo Purcell: Deputy Director North East Sector attended the meeting to provide members with an update in respect of the transfer of community services currently provided by Pennine Care Foundation Trust to the Northern Care Alliance.

In December 2018, the Pennine Care Board approved the "Trust Strategy 2019-22: Maximising Potential". The strategy provided details of the Trust plans to focus on mental health and well-being and community services to be fully divested. The service will transfer from 1st July 2019 and there should be no difference in how service are provided going forward.

Responding to a members question in respect of risk, the Deputy Director North East Sector reported that the risks are not new and include, high vacancy rates for district nurses, end of life support and paper based records. A risk sharing agreement will be developed collaboratively over the next two years.

Members discussed the issues in respect of recruiting to district nurses; the Deputy Director reported that this is due to a multitude of factors, a number of staff are approaching retirement and the posts are in high demand. Once the service transfer to the Salford Royal Foundation Trust a recruitment plan in respect of this particular area will be developed.

10 URGENT BUSINESS - ESTATES AND FACILITIES

- Andrew Lynn, Group Director of Communication & External Affairs informed the meeting that Sally Bradley, former Clinician at Pennine Acute had sadly passed away as a result of the Sri Lanka bombings. Sally was a well-respected clinician, GP and former director of Public Health in Manchester, between December 2009 to August 2011, she was Deputy Medical Director for the Pennine Acute Hospitals NHS Trust and then assumed the role of

Medical Director until January 2013, where she made a significant personal and professional contribution to patient safety and public health.

- Capital Estates briefing – Member asked for further updated information in respect of the Estates strategy, including capital spend, car parking review and any additional investment
- The Chair placed on record his thanks to Councillor Heffernan who is standing down at the forthcoming local elections.

**COUNCILLOR
Chair**

(Note: The meeting started at Time Not Specified and ended at Time Not Specified)