

**CANNOCK CHASE COUNCIL**  
**MINUTES OF THE MEETING OF THE**  
**HEALTH SCRUTINY COMMITTEE**  
**THURSDAY 25 SEPTEMBER 2014, AT 4:00 P.M.**  
**IN THE CIVIC CENTRE, BEECROFT ROAD, CANNOCK**

**PART 1**

PRESENT: Councillors:

Gamble, B. (Chairman)  
Freeman, Miss. M. (Vice-Chairman)

Jones, R.

Preece, J.

By invitation: Representatives from Cannock Chase Clinical Commissioning Group (CCG) Dr. J. McMahon, Dr. M. Huda and Ms. L. Miller.  
Staffordshire County Council Representative – Councillor Mrs. C. Mitchell  
Also present: Parsons, Mrs. H. – Healthwatch (Staffordshire)

**10. Apologies**

Apologies for absence were received from Councillors Mrs. S.M. Cartwright, Mrs. H.M. Sutton and Mrs. M.A. Davis, Health and Wellbeing Portfolio Leader.

**11. Declarations of Interests of Members in Contracts and Other Matters and Restrictions on Voting by Members**

No declarations of interests in addition to those already confirmed by Members in the Register of Members Interests were made.

**12. Proposed changes to the Minor Injuries Unit (MIU) – Cannock Chase Hospital**

The Chairman welcomed representatives from Cannock Chase Clinical Commissioning Group who gave a presentation to Members concerning Cannock Chase Hospital Minor Injuries Unit consultation.

The presentation consisted of the following:

- Current Model of service provided set against a background of a deficit of approximately £9.4 million
- Healthy Staffordshire Select Committee which had also included workshops being held with other clinicians
- Actions taken following the Healthy Staffordshire Select Committee

recommendations

- MIU Data Analysis including MIU attendances April 2013-March 2014, attendances by hour of arrival, attendance by GP practice, attendances by presenting condition and discharge outcome. There were many variations and more attendances during the summer months
- Patient Engagement including reasons for attending and Patient Comments
- Options which included doing nothing, Decommission or the preferred option which was to Reduce Hours. This option would depend on negotiations with the Partnership Trust
- Current Access to Services
- Proposed Access to Services
- Addressing Primary Care Access

Members were then given the opportunity to ask questions.

The Staffordshire County Council Member referred to the current financial situation that the CCG was experiencing and was not happy that it was proposed to reduce the hours of the MIU unit, particularly as the late night A&E service had ceased at Stafford Hospital. She also reported that there was difficulty trying to obtain same day appointments at GP Surgeries and was not surprised that the MIU was being utilised for minor illnesses.

Dr. Huda, representing the CCG referred to the urgent care model as set out in the Bruce Keogh Review (<http://www.nhs.uk/NHSEngland/keogh-review/Documents/uecreviewupdate.FV.pdf>) and hoped that the model could be implemented in the next 18-24 months, although changes were needed with the current services first and constraints were currently imposed whilst waiting for the national programme.

A Member again also raised concern with difficulty trying to obtain GP appointments for the same day, and was of the opinion that this problem required some sort of priority. If this was resolved, it could possibly alleviate the need for patients to go to A&E and the MIU.

Dr. McMahon commented that each GP had an independent contract with NHS England and they were not commissioned or contracted by the CCG, on this basis it would be very difficult for the CCG to force GPs to change the way they operated. He highlighted that there were approximately 1500 missed appointments last year at GP practices and that a more efficient system was required where patients could cancel appointments.

Dr. McMahon referred to the hours of operation at Corby Minor Injuries Unit and the model they had adopted and explained that the CCG wanted to ensure continuity of services and hopefully a better outcome for patients.

A Member expressed concern due to the lack of GPs available and the problems with attracting them. She also reported that in her opinion it appeared that the public viewed the deficit as the main reason to make changes to the MIU which was of concern to many. She highlighted that

communication methods had improved and hoped this would continue.

Lynn Miller explained that it was of benefit to work with the Council and other organisations to communicate and hopefully put across to the public the messages the CCG wanted to convey particularly into the future.

The Chairman referred to the current financial pressures and financial plan of the CCG and was keen to know if the plan had been finalised, and if so, was there a guarantee that there would be no further cuts.

Dr. McMahon reported that making cuts would make no sense financially. The CCG was already in special measures under Section 18. The CCGs Auditors had already reported to the Secretary of State concerning the current financial position of the CCG, and would continue to do so.

In response to a question raised by a Member concerning communication on services, it was reported that campaigns would be held in all areas together with leaflet dropping in respect of the 'Choose Well Campaign'. It was important that the public were aware of the services being offered and information and guidance being made available for the public to identify the service to use depending on the illness.

It was also noted that as part of the communication and 'Choose Well Campaign' some consideration should be given to producing a leaflet for GP surgeries in order that the right message is conveyed to the public concerning the services offered.

The Chairman referred to the potential reduction of hours at the MIU and the urgent care model as set out in the Keogh Review. It was suggested that implementing a similar model at Cannock in the future would take place, however he was keen to know how the services would run and was keen to make sure that any gap between services would not last.

Dr. McMahon advised that the out of hours GP services for Cannock Chase currently undertaken by Badger Medical Service would end in March 2015, and it was intended to run a partial closer in line with the new contractual obligations which would commence in April, 2015. A quality impact assessment had been undertaken and the clinical risk was minimal, this would be an alternative for patients to use.

It was reported that the tender document would make it clear that appropriate transport was provided when transferring patients and this would become part of the new contract, as this service did not currently exist.

It was reported that with regard to the current NHS 111 service it was intended that some work would be undertaken to make the service more accessible allowing patients to access healthcare.

The representative of Healthwatch referred to the core hours and was keen

to know if they would be moved. It was explained that the preferred option was to reduce the hours and open from 11am-7pm, although patients were currently attending before this time and they needed to be signposted to the correct place for their need. It was reported that a meeting was planned with Staffordshire and Stoke-On-Trent Partnership Trust to discuss how patients waiting would be dealt with.

Dr. McMahon referred to the need to access GPs and reported that there may be a case to offer a telephone service and insert some slots before 11am which may ease the problem. However, it was highlighted that this would result in some appointments being wasted.

RESOLVED:

- (A) That an email with the Committees response be forwarded to the CCG concerning the MIU consultation
- (B) That an update be placed on the Agenda in 6 months time.

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CHAIRMAN

(The meeting concluded at 6.00 p.m.).