THIS SET OF MINUTES IS NOT SUBJECT TO "CALL IN".

OVERVIEW AND SCRUTINY COMMITTEE
(ADULT SOCIAL CARE AND HEALTH)

SPECIAL MEETING HELD AT THE TOWN HALL, BOOTLE
ON TUESDAY 27TH JULY, 2021

PRESENT: Councillor Thomas (in the Chair)
Councillor Myers (Vice-Chair)
Councillors Brodie-Browne, Cluskey, Halsall, Irving, John Joseph Kelly, Killen and Riley (Substitute Member for Councillor Jones)

ALSO PRESENT: Mr. B. Clark, Healthwatch Representative
Mr. R. Hutchings, Healthwatch Representative
Councillor Moncur, Cabinet Member – Health and Wellbeing

13. INTRODUCTIONS

The Chair welcomed Members and Officers to the Special Meeting of the Committee and introductions took place.

14. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Jones; and Councillor Cummins, Cabinet Member – Adult Social Care.

15. DECLARATIONS OF INTEREST

No declarations of any disclosable pecuniary interests or personal interests were received.

16. HYPER-ACUTE STROKE SERVICE

The Committee considered the report of the Chief Legal and Democratic Officer requesting the Committee to consider proposals for the reconfiguration of the hyper-acute stroke services across North Merseyside and West Lancashire, as set out at Appendix A to the report, and seeking to determine whether the proposals constituted a substantial development or variation in services for Sefton residents. Appendix A to the report set out the background to the matter; the current position in North Mersey and West Lancashire; the clinical model of care; scrutiny and assurance; engagement and communications; indicative timeline and milestones; and a conclusion.

Stroke care was currently provided by Liverpool University Hospitals, at both the Royal Liverpool and Aintree sites; and Southport and Ormskirk Hospitals NHS Trust. The proposal was for a comprehensive stroke centre on the Aintree Hospital site, co-located with specialist services provided by

the Walton Centre; and with post-72 hours care provided closer to home at either Aintree, Broadgreen or Southport Hospitals.

Carole Hill, Director of Strategy, Communications and Integration, Liverpool and Knowsley Clinical Commissioning Groups; and Fiona Taylor, Chief Officer for the Sefton Clinical Commissioning Groups, were in attendance to present the proposals and to respond to questions raised by Members of the Committee.

Members of the Committee asked questions/raised matters on the following issues:

- The proposals were broadly welcomed.
- The higher proportion of older residents in Southport.
- Whether services could be improved at Southport Hospital.
- Concerns were held regarding travel times from Southport to Aintree Hospital when time was of the essence.
- Concerns were raised that patients would not behave as the model expected them to do so and that patients would present themselves at Southport Hospital A&E.
- Turnaround times for ambulances at Southport Hospital A&E and consistency of performance. Up-to-date performance could be provided within the health provider performance dashboard.
- It appeared to be preferable to receive excellent care that was slightly delayed.
- Concerns were raised regarding ambulances having to negotiate Switch Island and the busy traffic conditions there.
- The national FAST campaign regarding strokes and the possibility of undertaking a local campaign.
- The importance of the North West Ambulance Service (NWAS) being part of the proposed new clinical model of care.
- The costs of the proposals.
- The public consultation to be undertaken.
- Capacity for the proposed model.
- Investment for the repatriation part of the proposed model.
- Whether transportation for repatriation closer to home could be destabilising for the patient.
- The length of time taken for an ambulance to travel from Southport to Aintree Hospital. Information could be obtained from NWAS.
- Worst case scenarios for the journey time were required.
- The percentage of patients who would be repatriated closer to home.
- Costings for the post-72 hours care to be provided at Southport Hospital.
- Whether the proposed model was a result of pioneering research.
- Whether the proposed model could cause a “brain drain” from Southport Hospital.
- The possibility of providing traffic control for traffic lights when ambulances passed through Switch Island.
- Scanner capacity as part of the proposed model.

- The possibility of site visits for relevant Members to look at the Whiston Hospital model and at the Aintree Hospital site.
- Whether St. Paul's Eye Unit should be involved in the proposed model.
- The knock-on effect to community services as a result of the proposed model, if early discharge was achieved. Discussion could take place with the Executive Director of Adult Social Care and Health.
- How to avoid patients being "lost in the system".
- Capacity and the workforce for the proposed model.

The Senior Democratic Services Officer presented the report of the Chief Legal and Democratic Officer and highlighted the criteria to be considered in considering whether a proposal was substantial.

It was moved by Councillor Myers, seconded by Councillor Halsall that:

> The proposals for the reconfiguration of the hyper-acute stroke services across North Merseyside constituted a substantial development / variation in services for Sefton residents.

Following a show of hands, the Chair declared the motion was carried unanimously and it was:

RESOLVED:

That the Committee considers that the proposals for the reconfiguration of the hyper-acute stroke services across North Merseyside constitute a substantial development / variation in services for Sefton residents.