

## HEALTH LIAISON BOARD

Minutes of the meeting held on 5 February 2020 commencing at 12.00 pm

Present: Cllr. Piper (Chairman)

Cllr. Parkin (Vice Chairman)

Cllrs. Dr. Canet, Perry Cole, G. Darrington, Foster and Parkin

Apologies for absence were received from Cllrs. Harrison and Hunter

Cllrs. P. Darrington, Dyball and Griffiths were also present.

### 22. Minutes

Resolved: That the Minutes of the Health Liaison Board held on 6 November be approved and signed by the Chairman as a correct record.

### 23. Declarations of Interest

No additional declarations of interest were made.

### 24. Action from Previous Meeting

There were none.

### 25. Update on Patient Transport Services

The Chairman welcomed Tom Maidman, Manager of G4S Patient Transport Services and James Ransom, Head of Surgical Elective Care at West Kent CCG, who was the lead Commissioner of the Service to the meeting. A [supplementary agenda](#) with additional information from G4S had been circulated. The non-emergency patient transport service had been provided by G4S across Kent and Medway CCGs since July 2016. Following a rebasing exercise in March 2018, supported by the CCG, there was a deployment of additional staff and vehicles which resulted in improved service levels and performance stabilisation by merging Kent & Medway, Darent Valley Hospital and Renal patients.

The data provided covered the period of November 2018 to November 2019. On average 27,000 journeys a month were carried out and the contract was the largest of its kind due to the number of residents. Members looked at the key performance indicators and were advised that the minimum standards expected was 80% for on time arrivals and not more than 75 minutes early for outpatient arrivals.

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Members discussed the figures and asked questions of clarification. In response, Members were advised that during November 2019, the minimum standard had dropped to below the 80% target and this was due to one of the larger hospitals in Kent dealing with an emergency situation. As a result, those patients who were fit enough, were being discharged earlier which had a knock on effect for those requiring patient transport services. There were also road blocks which also had an impact.

The meeting was advised that it would not be possible to have a standard of 100% for outpatient arrivals, as there were too many variables outside the control of the team. To ensure that standards and patient expectations were met, calls were made the day before the journey to confirm that travel was still required and the collection time. A call or text to confirm that the driver was on route was also made. All vehicles were tracked and once on the ambulance the Hospital Liaison Officer was notified.

The Manager of G4S Patient Transport Services advised that in November 2019 there were 6 missed appointment time slots. If the appointment was missed due to the travel, there would be an assessment carried out for the risk of harm and the patients, in most cases, would be seen at the next available appointment slot. Missed appointments were reported weekly to the Commissioners.

In response to questions regarding journeys made from the hospital to home, Members were advised that no more than 1% would wait more than 4 hours for pick up. The Head of Surgical Elective Care advised that hospital discharge could take a variable amount of time due to staffing or other issues. It was acknowledged that waiting over 4 hours for pickup was a long time and it was hope that this would continue to improve.

Members discussed that need for designated collection and drop of points in hospitals which would help make the transition easier.

*Action 1: For the Head of Housing and Health to write a letter to Maidstone and Tunbridge Wells Hospital for a designated and signed area for patients pick up and drop off.*

In response to a question, Members were advised that if a patient were to require medical care on the journey, a provision could be provided for the patients escort to be there. There was a criteria that had to be met as it was a space that a patient required being taken up. Journeys were based on patients pick up and drop off requirements.

Members discussed the complaints figures provided and noted that over the 18 month period the number of complaints had dropped. This was due to the steps taken from when the initial contract started and the figures did not necessarily represent every journey travel by patients as some renal patients would not complete a survey every time G4S was used. Members were also advised that in the event of adverse weather a decision would be taken 7 days in advance whether the journeys were necessary. It would be a decision taken by the Commissioners

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for which appointments needed to be met. A majority of the ambulances did not have air suspension and were in the process of being replaced.

The Manager of G4S Patient Transport Services agreed to provide Members with additional information including the escort criteria, West Kent Performance figures, mileage bands, and the patient criteria for G4S travel.

The Board thanked and showed their appreciation to the Manager of G4S Patient Transport Services and the Head of Elective Surgical care for their attendance.

Resolved: That the report and update be noted.

At 1pm the Chairman adjourned for the comfort of Members and Officers and at 1.10pm the meeting reconvened.

### CHANGE IN ORDER OF AGENDA ITEMS

The Chairman, with the Board's agreement moved agenda items 5 and 6 to follow after agenda item 9.

#### 26. Update on NHS Urgent Care Services in Dartford, Gravesham & Swanley

The Committee considered the report which detailed the requirement for all areas in England to have Urgent Treatment Centres offering the same NHS Services in a timely manner. An extra-ordinary meeting of the (DGS) Dartford, Gravesham and Swanley CCG took place on 16 January 2020, and Members were updated by Cllr Perry Cole on the new location of the NHS urgent care services.

Members were informed that Cllr Perry Cole's notes had been published in the supplementary agenda and that, following a large number of mixed responses the consultation had received, a third option was discussed. It was highlighted that Bexley Health Overview & Scrutiny Committee had raised concerns over the further impact to their CCG if the DGS CCG were to conclude that the Gravesend Community Hospital site be chosen as the location for the new Urgent Treatment Centre. Other themes that emerged from the responses included proximity to sites, traffic, public transport and cost of parking.

As a result of feedback, a third option was agreed. As part of a networked urgent care services model, there would be Urgent Treatment Centres at Gravesham Community Hospital and one co-located with A&E at Darent Valley Hospital which would provide additional critical care.

It was expected that the two linked Urgent Treatment Centres would be in place by summer 2020 as part of the first phase towards fully networked sites providing 'joined up' urgent care services for the people of Dartford, Gravesham and Swanley.

Members expressed concern over whether there would be enough staff to cover the two sites.

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The Chairman thanked Cllr Perry Cole for the update.

Resolved: That the report be noted.

### 27. Updates from Members

The Chairman tabled the amount of money received from section 106 agreements and how this was spent. He advised that he had also queried whether there was an increase in GP numbers rather than just facilities. He also informed the Board, that he had recently been a user of the 'Hospital at Home Service'. It was a well-developed service which was particularly helpful for those who had extra support at home, rather than having to be in hospital.

Members discussed their concerns with staff shortages and retention of staff. Wages and hours of work were also discussed and members queried the number of GP vacancies and support workers within the district. Members discussed CCG Board meetings and whether any Member of the Board would wish to attend.

*Action 2: For the Head of Housing and Health to circulate the future dates of the CCG Governing Body meetings.*

### 28. Workplan

It was agreed that the Men's Shed project, would be invited to attend the June meeting of the Board and GP Finance would be extended to include work force planning.

### 29. Update on Local Care Plans

This item was deferred to a future meeting of the Board, to allow for the Clinical Commissioning Groups (CCGs) to attend.

### 30. Update on CCG District Nursing Services

This item was deferred to a future meeting of the Board, to allow for the Clinical Commissioning Groups (CCGs) to attend.

THE MEETING WAS CONCLUDED AT 2.00 PM

CHAIRMAN