

MINUTE of the SPECIAL MEETING of the COUNCIL EXECUTIVE of WEST LoTHIAN COUNCIL held within COUNCIL CHAMBERS, WEST LoTHIAN CIVIC CENTRE, on 28 JUNE 2017.

Present – Councillors Lawrence Fitzpatrick (Chair), Frank Anderson, Harry Cartmill, Tom Conn, Peter Johnston, Charles Kennedy, George Paul, Damian Timson, Dom McGuire substituted for Kirsteen Sullivan

Apologies – Councillor Kirsteen Sullivan, Peter Heggie, Chris Horne

Absent – David Dodds, Cathy Muldoon

1. DECLARATIONS OF INTEREST

There were no declarations of interest made.

2. PAEDIATRIC SERVICES AT ST JOHN'S HOSPITAL

The Council Executive considered a report (copies of which had been circulated) by the Chief Executive advising of the reduction in Paediatric Services at St John's Hospital in Livingston commencing on 7 July 2017.

The report advised that the Chief officer, Acute Services had written to the Chief Executive on 23 June 2017 to advise of changes to children's inpatient services in St John's Hospital, Livingston due to take effect from 7 July 2017. The details of the letter from the Chief Officer was attached as appendix 1 to the report.

The report recommended that the Council Executive:

1. Note the reduction in Paediatric Services which were due to take effect at St John's Hospital from 7 July 2017; and
2. Decide what action should be taken by the council in relation to this issue.

Motion

Council Executive condemns the failure of NHS Lothian and the Scottish Government to maintain a fully functional service at St John's Hospital over the summer and for the resultant downgrade and significant reduction of service which has occurred.

Council Executive recognises that:

- this closure of the paediatric service is the third in 3 years (also 2012 and 2015)
- West Lothian has the fastest growing young population in Scotland with an under 16 populace of circa 30,000

- families will be forced to travel to the Sick Kids, Edinburgh at a difficult time.

Council Executive further condemns NHS Lothian and the Scottish Government for their subsequent failure to confirm the date when normal paediatric service will resume at St John's Hospital and their unwillingness to rule out that the downgrade of the service at St John's Hospital will not be permanent.

Council Executive restates the position of Council that no downgrade of the paediatric service at St John's Hospital is acceptable, call upon NHS Lothian and the Scottish Government to urgently confirm the date from which the full paediatric service will resume at St John's Hospital and provide a solution which guarantees an all year round service.

Council Executive instructs the Council Chief Executive to write to NHS Lothian to urge them to hold early public meetings throughout West Lothian to explain its decision.

- Moved by Councillor Harry Cartmill and seconded by Councillor Lawrence Fitzpatrick

Amendment

West Lothian Council notes with dismay the decision of NHS Lothian to put in place a temporary restriction on the opening hours of the children's ward at St John's hospital in Livingston from 7 July, to restrict the ward to being operational from 8am to 8pm, Monday to Friday, as an assessment programmed unit.

Council further notes NHS Lothian claim this decision is being made to **"ensure patient safety"** and on the grounds that **"there are not enough doctors available to cover overnight and weekends for the summer months"**

Council further notes however that the attached "Paediatric Rota July 2017" clearly indicates staffing is in place for July to deliver full 24/7 inpatient children's services at St John's.

Council therefore agrees to seek clarity from NHS Lothian on a number of points;

1. What evidence does NHS Lothian have that the July rota is **not** sustainable?
2. What consultation with the doctors and staff of the children's ward took place **before** NHS Lothian took their decision?
3. When were those doctors and staff consulted with?
4. How were they were consulted with?
5. If there was consultation with these staff and concerns raised, what

actions did NHS Lothian take to work with them to remedy the situation and seek cover from any other hospitals (i.e. Edinburgh)?

6. Are NHS Lothian prepared to pay staff to cover any additional shifts required to maintain the rota?
7. Why is no provision being made at St John's to cover weekends given the reduced GP, ambulance and public transport services available? What assessment has been made of the impact on patient safety of this decision?
8. Have the board discussed this decision with ambulance crew/management and what is their assessment of the likely impact on their services with having to transfer patients 24/7?
9. If the ward is reduced to 08.00 – 20.00 then referrals will actually stop at 16.00, if any patients come after this time and need admission to hospital then it can regularly take up to 4 hours for an ambulance to attend. What is the Board's assessment of ambulance cover during the summer period, their ability to cope with the increased demand this decision imposes upon their service and the impact on patient safety?
10. What is the Board's assessment of the impact of their decision on parents/carers who do not have transport and so find it difficult enough to get to St. Johns?. What is the Board's assessment of the impact on patient safety of an extra 40 mins or more of travel on sick children?
11. Have the board discussed this decision with A&E & Out of Hours staff & also GP's as it will also impact & put added pressure on these services?
12. Have the board considered speaking with the unions involved, i.e unison or the RCN (royal college of nursing) as some paediatric nursing staff will be required to work within St. John's A&E to support overnight with children attending. However these staff, during the last temporary closure were also expected to look after adults as well. As some nurses are trained paediatric nurses only they do not feel competent to do this. What assessment of this matter took place before the decision to restrict the children's ward hours was made and how will this issue be resolved?
13. Currently there are two APNP trainees at St John's when fully qualified are these nurses to be retained at St John's?
14. Have the board considered the impact of their decision on ENT waiting list/consultants as their restriction on the children's ward will have an impact on waiting list times. Parents who have arranged time off work and had their children's treatments planned for the summer holidays, so their children don't miss school, are likely to be impacted on by this decision. How will this matter be resolved?

15. An indefinite period for this restricted service is wholly unacceptable. Staff and patients cannot be expected to be left in limbo for an indefinite period, so what exactly is the Board's definition of the summer period?

Council asserts that the current circumstances do not justify the NHS Lothian decision to suddenly cease provision of paediatric out of hours services at St John's hospital and that the NHS Lothian proposal actually exposes our local children to greater risks than keeping the 24/7 inpatient services open.

Council therefore agrees to request an all party meeting with NHS Lothian involving West Lothian councillors, MSPs and MPs to demand that NHS Lothian immediately reverses their decision to restrict paediatric services at St. John's Hospital from 7th July and to secure agreement from NHS Lothian to;

1. Fully consult with doctors and staff at St John's hospital to ensure a safe and robust rota is in place to deliver 24/7 inpatient paediatric services at St John's during the summer months and beyond.
2. Commit to paying staff, as required by NHS terms and conditions, to deliver any additional shifts to fully maintain 24/7 inpatient paediatric services at St John's Hospital.
3. Take all necessary steps to ensure full staff cover is available to maintain 24/7 inpatient paediatric services at St John's Hospital.

Council further asserts that the provision of 24/7 paediatric services at St John's Hospital in Livingston is absolutely essential to the health and well-being of the West Lothian Community. West Lothian, Scotland's 9th largest council area, is amongst the fastest growing communities in Scotland, and with 20% of our population under 15, we have one of the youngest populations in the country. West Lothian also faces considerable challenges to more effectively tackle the health inequalities that blight our lives. Currently over 2000 children live in areas identified as being within the most disadvantaged 15% in Scotland as measured by Scottish Indices of Multiple Deprivation. Children's services at St John's are easily accessible and deliver an excellent quality of care, underpinned by strong ties with our local GP's and community health services.

Council further asserts its commitment to;

1. providing services that are child-centred, developed in partnership with other organisations and with families themselves;
2. that tackle inequalities, and focus on improved outcomes for children.
3. targeted and universal services provided by key partners focused and localised to ensure that they meet the individual needs of children and young people in West Lothian.

4. Services responsive to local need ensuring that families get the best care close to home within their own community to prevent or lessen the impact of health issues.

Council expresses strong concerns that the fragmentation of services and city-centric service planning will lead to children and young people unable to easily access to essential services and ultimately could lead to vulnerable children and their families becoming more at risk of neglect and harm.

Council therefore agrees that the integration of acute services at St John's Hospital, including Children's services, into the West Lothian Health and Care Partnership is an essential step towards shifting the balance of care from acute hospital settings into our communities and to further developing the early intervention and preventative initiatives that are so fundamental to the effective tackling of health inequalities and to delivering better health outcomes for our community and agrees to;

1. Immediately enter into discussions with NHS Lothian to integrate services, as above, into the West Lothian Health and Care Partnership.
- Moved by Councillor Peter Johnston and seconded by Councillor Frank Anderson

A copy of the paediatric rota was appended to the amendment but due to data protection would not be published.

Following debate a joint position was agreed as follows:-

Joint Motion

Council Executive condemns the failure of NHS Lothian and the Scottish Government to maintain a fully functional service at St John's Hospital over the summer and for the resultant downgrade and significant reduction of service which has occurred.

Council Executive recognises that:

- this seriously restricted operation of the paediatric service is the third in 5 years (also 2012 and 2015)
- West Lothian has the fastest growing young population in Scotland with an under 16 populace of circa 30,000
- families will be forced to travel to the Sick Kids, Edinburgh at a difficult time.

Council Executive further condemns NHS Lothian for their subsequent failure to confirm the date when a normal paediatric service will resume at St John's Hospital and for their unwillingness to rule out that the downgrade of the service at St John's Hospital will not be permanent.

Council Executive restates the position of Council that no downgrade of the paediatric services at St John's Hospital is acceptable, calls upon NHS Lothian and the Scottish Government to urgently confirm the date from which the full paediatric service will resume at St John's Hospital and provide a solution which guarantees an all year round service.

Council asserts that the current circumstances do not justify the NHS Lothian decision to suddenly cease provision of paediatric out of hours services at St John's hospital and that the NHS Lothian proposal actually exposes our local children to greater risks than keeping the 24/7 inpatient services open.

Council therefore agrees to request an all-party meeting with NHS Lothian involving West Lothian Councillors, MSPs and MPs to demand that NHS Lothian immediately reverses their decision to restrict paediatric services at St John's Hospital from 7th July and to secure agreement from NHS Lothian to:-

1. Fully consult with doctors and staff at St John's hospital to ensure a safe and robust rota is in place to deliver 24/7 inpatient paediatric services at St John's during the summer months and beyond.
2. Commit to paying staff, as required by NHS terms and conditions, to deliver any additional shifts to fully maintain 24/7 inpatient paediatric services at St John's Hospital.
3. Take all necessary steps to ensure full staff cover is available to maintain 24/7 inpatient paediatric services at St John's Hospital.

Council therefore instructs the Chief Executive to write to NHS Lothian and the Scottish Government to seek clarity on the following points:-

1. What evidence does NHS Lothian have that the July rota is not sustainable?
2. What consultation with the doctors and staff of the children's ward took place before NHS Lothian took their decision?
3. When were those doctors and staff consulted with?
4. How were they were consulted with?
5. If there was consultation with these staff and concerns raised, what actions did NHS Lothian take to work with them to remedy the situation and seek cover from any other hospitals (i.e. Edinburgh)?
6. Are NHS Lothian prepared to pay staff to cover any additional shifts required to maintain the rota?
7. Why is no provision being made at St John's to cover weekends given the reduced GP, ambulance and public transport services available? What assessment has been made of the impact on patient safety of this decision?

8. Have the board discussed this decision with ambulance crew/management and what is their assessment of the likely impact on their services with having to transfer patients 24/7?
9. If the ward is reduced to 08.00 – 20.00 then referrals will actually stop at 16.00, if any patients come after this time and need admission to hospital then it can regularly take up to 4 hours for an ambulance to attend. What is the Board's assessment of ambulance cover during the summer period, their ability to cope with the increased demand this decision imposes upon their service and the impact on patient safety?
10. What is the Board's assessment of the impact of their decision on parents/carers who do not have transport and so find it difficult enough to get to St. John's? What is the Board's assessment of the impact on patient safety of an extra 40 mins or more of travel on sick children?
11. Have the board discussed this decision with A&E & Out Of Hours staff & also GP's as it will also impact & put added pressure on these services?
12. Have the board considered speaking with the unions involved, i.e. unison or the RCN (royal college of nursing) as some paediatric nursing staff will be required to work within St. John's A&E to support overnight with children attending. However these staff, during the last temporary closure, were also expected to look after adults as well. As some nurses are trained paediatric nurses only they do not feel competent to do this. What assessment of this matter took place before the decision to restrict the children's ward hours was made and how will this issue be resolved?
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15. An indefinite period for this restricted service is wholly unacceptable. Staff and patients cannot be expected to be left in limbo for an indefinite period, so what exactly is the Board's definition of the summer period.
16. What workforce planning is being undertaken to ensure this unacceptable situation does not reoccur.

Council Executive also instructs the Chief Executive to write separately to NHS Lothian urging them to hold early public meetings throughout West

Lothian to explain its decision.

Unanimously agreed at Council Executive on 28 June 2017 by:-

Councillor Lawrence Fitzpatrick, Leader of the Council, Labour Group Leader

Councillor Peter Johnston, SNP Group Leader

Councillor Damian Timson, Conservative Group Leader

Decision

To approve the terms of the joint motion.