

Report from Suffolk County Council Health Scrutiny Committee meeting 24 Jan 2024

West Suffolk Council represented by Councillor Sue Perry, substituting for Councillor Andrew Martin.

YouTube link:

[Suffolk County Council, Health Scrutiny Committee - 24 January 2024 - YouTube](#)

Agenda and reports: [Meeting Documents - Committee Minutes \(suffolk.gov.uk\)](#)

1. Norfolk and Suffolk NHS Foundation Trust (NSFT) mental health services

To seek assurance from Norfolk and Suffolk NHS Foundation Trust (NSFT) and system partners that recommendations and actions from the Grant Thornton review (GTR) and subsequent co-produced work can be effective in improving mortality recording, reporting, relationships with bereaved families and it is hoped, prevention.

Representatives from NSFT and Suffolk and North-East Essex (SNEE) and Norfolk and Waveney ICBs were present.

Summary

- Good progress made with implementing recommendations and actions, however Healthwatch Suffolk have withdrawn from the Learning from Deaths Action plan Management Group.
- Joint 'informal' scrutiny with Norfolk Health Scrutiny Committee to be explored.

Progress to date:

- **Data**
 - New data pathways and audit trail implemented.
 - Standard operating procedure (SOP) development in progress
- **Reporting**
 - Standardised reporting (to boards) structure agreed
 - Improved staff access to data - in progress
 - Attendance at the Norfolk and Waveney ICB Learning from Deaths forum.
 - Guidance and training on admin procedures for discharge and caseload reviews - in progress.
 - Membership of the Learning from Deaths forum in SNEE ICB.
- **Partnership working**
 - Working with GPs, coroners, registrars and medical examiners to improve data on cause of death – ongoing

- Data sharing with other trusts established
- Update the Trust's Learning from Deaths policy – ongoing
- **Governance**
 - Audit and external review processes – in progress.
 - Learning from Deaths Action Plan Management Group established to replace the current internal executive led Grant Thornton Action Plan Programme Management Board. Membership to include NSFT Executives, service users, carers, bereaved relatives, SNEE and N&W ICB Quality/Safety Representatives, Healthwatch and Public Health leads. It will be informed by the draft action plan produced by a collaborative working group (see below). Draft terms of reference were presented.

Co-production

A collaborative working group met several times and developed a draft action to address concerns raised by the authors of the Forever Gone report. This will feed into the work of the Trust Learning from Deaths Action Plan. It is recognised that people experiencing complex grief require more support to participate in co-production.

Healthwatch Suffolk

A representative from Healthwatch Suffolk made a statement at the end of the meeting. HWS will not participate in the Learning from Deaths Action plan Management Group as it does not consider that genuine independent lived experience has been included in the review process, the formation of the group or its draft Terms of Reference.

Trust Leadership

Caroline Donovan joined the NSFT as Chief Executive in November 2023 and has set four strategic priorities: Improving health, care, culture and value. Learning from deaths is one of the ten large-scale change programmes underpinning these.

External initiatives

- The implementation of the statutory medical examiner system across England in April 2024 will require a discussion between the attending doctor and the medical examiner's office for every death to improve quality of death certification. Medical Examiners and their teams are meeting monthly across Suffolk to track progress.
- The ICB led Suffolk Trauma Informed Mortality Meeting will meet for the first time in March 2024, with representatives from primary care, acute and mental health providers, local public health services and bereaved relatives.

2. West Suffolk Hospital Future Systems Programme Update

Gary Norgate, Director for the Future System Programme

The main hospital building is constructed from Reinforced Autoclaved Aerated Concrete (RAAC) planks. Robust risk mitigation is underway to ensure the safety of staff and patients pending the delivery of the new hospital.

There is a revised capital funding envelope in excess of £800m.

The primary focus areas for the programme have been:

- Implementation of the co-produced clinical strategy
- Design review with input from the national New Hospital Programme (NHP)
- Satisfying pre-commencement planning conditions and preparing the construction site

The clinical strategy has highlighted the increased potential for collaborative working. There are proposals to increase capacity by make increased use of the new Elective Surgery Centre at Colchester and increased outpatient services Newmarket Hospital.

Designs of the new hospital have been expertly reviewed by the NHP and NHSE Regional team. This has largely supported the conclusions drawn from co-production.

The translocation of turf from the construction site to new location to protect rare wax cap and other fungi has been successful. This fulfils a pre-commencement planning condition.

Key risks:

- Securing sufficient capital
- Ongoing affordability of operating a new hospital,
- Attracting a construction partner from within a limited pool
- Maintaining services during transition

Mitigation:

- Being part of the NHP.
- Panel of senior finance managers ESNEFT, WSFT, NHSE Region and ICB to understand and manage costs.

Timetable:

The timetable to enable a completion date of 2030 is very tight:

- Agreement to proceed to outline business case (OBC) by end February 2024
- Procure Primary Build Partner – End July 2024
- OBC approved - April 2025
- Full planning permission – end September 2025
- Full business case approved – February 2026
- Construction commences – February 2026