

## **HORTON JOINT HEALTH OVERVIEW & SCRUTINY COMMITTEE**

**MINUTES** of the meeting held on Friday, 27 November 2020 commencing at 2.00 pm and finishing at 3.02 pm

### **Present:**

**Voting Members:** Councillor Arash Fatemian – in the Chair

Councillor Hannah Banfield  
Councillor Rebecca Breese  
Councillor Kieron Mallon  
Councillor Wallace Redford  
Councillor Alison Rooke  
Councillor Sean Woodcock

**Co-opted Members  
(Non-voting):** Dr Keith Ruddle

**By Invitation:** Dr Bruno Holthof, Chief Executive OUH; Professor Sir Jonathan Montgomery, Chair of the Trust; Tony Delaney, Communications and Engagement Manager for OCCG; David Walliker (OUH); Catherine Mountford, Oxfordshire Clinical Commissioning Group.

### **Officers:**

Whole of meeting: Martin Dyson (Policy); Steve Jorden, Corporate Director Commercial Development, Assets and Investment & Monitoring Officer; Sukdave Ghuman, Glenn Watson, Principal Governance Officer; Sue Whitehead (Law & Governance)

*The Scrutiny Committee considered the matters, reports and recommendations contained or referred to in the agenda for the meeting, together with an addenda tabled at the meeting and agreed as set out below. Copies of the agenda and report and addenda are attached to the signed Minutes.*

## **1/20 ELECTION OF DEPUTY CHAIRMAN** (Agenda No. 1)

The Chairman, Councillor Fatemian proposed and it was agreed that the Deputy Chairman should rotate around the two voting co-opted members. He further proposed that Councillor Wallace Redford, continue as Deputy Chairman for the remainder of this Municipal Year and it was seconded and .

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### **RESOLVED:**

- (a) to agree that the role of Deputy Chairman rotate around the two voting co-opted members; and
- (b) that Councillor Redford be elected as Deputy Chairman for the remainder of this Municipal Year.

### **2/20 APOLOGIES FOR ABSENCE AND TEMPORARY APPOINTMENTS**

(Agenda No. 2)

Apologies were received from Councillor Neil Owen and from Councillor Sean Gaul (Councillor Phil Chapman substituting).

### **3/20 DECLARATIONS OF INTEREST**

(Agenda No. 3)

There were none.

### **4/20 MINUTES**

(Agenda No. 4)

The Minutes of the meeting held on 19 September 2019 were approved and were to be signed by the Chairman at the next opportunity.

### **5/20 PETITIONS AND PUBLIC ADDRESS**

(Agenda No. 5)

The Chairman had agreed the following requests to address the Committee:

Roseanne Edward  
Councillor Andrew McHugh, Cherwell District Council  
Keith Strangwood

### **6/20 CONFIRMING THE UPDATED TERMS OF REFERENCE**

(Agenda No. 6)

The Chairman, Councillor Arash Fatemian introduced the revised terms of reference that had been considered by the respective health overview and scrutiny committees and had been approved at the respective council meetings.

Councillor Fatemian commented that they gave the Committee an expanded remit to scrutinise the OUH masterplan and vision for the Horton hospital.

He emphasised that this did not take away from the original maternity terms of reference, so the annual review of maternity services and maternity being part of the ongoing masterplan falls within the terms of reference of the Committee.

**RESOLVED:** To confirm the updated terms of reference.

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### 7/20 RESPONDING TO THE IRP AND SECRETARY OF STATE RECOMMENDATIONS

(Agenda No. 7)

The Committee had made a referral to the Secretary of State following its meeting on 19 September 2019. The Committee had before the referral from this Committee to the Secretary of State, together with supporting documents; the response of the Secretary of State; a further letter to the Secretary of State from the Chairman of this Committee; advice sought on the prospect of a judicial review on the Secretary of State's decision and a recommendation on next steps.

Keith Strangwood, referred to page 18 of the agenda papers relating to the Terms of Reference of this Committee. Paragraph 7 (d) stated that referral to the Secretary of State on the Horton Masterplan would be only on a number of grounds, the first of which referred to inadequate consultation but only included consultation with local authorities and excluded consultation with other stakeholders. Keith Strangwood sought an assurance from the Committee that there would be consultation with stakeholders such as Keep the Horton General as they had been involved throughout. The Chairman, Councillor Arash Fatemian explained that the point highlighted was solely about the power to refer and related only to statutory consultees. He gave an assurance that Keep the Horton General and other stakeholders would continue to be involved by this Committee.

Keith Strangwood spoke in support of a judicial review noting that the request for a review by the Independent Reconfiguration Panel had been refused as there had not been a substantial change from previous referrals. Keith Strangwood referred to the document evidence contained in the latest referral of the impact of the closure. He suggested that this was new material that should have led to an examination by IRP and if there was a chance that a judicial review could be successful then it should be pursued.

Keith Strangwood noted that the response from the Secretary of State had been received in September 2020 and he asked what actions had been taken since then; whether there had been further contact with the Secretary of State and whether Horton HOSC members had been notified of the position.

Roseanne Edwards commented that she had been impressed by the referral to the Secretary of State from this Committee and felt that it was distinctly different to previous referrals. She expressed concern that the response had been received in the middle of September and that having not been told about it had been unable to do anything about it and now in terms of legal powers there was little time to take action.

Roseanne Edwards referred to the Masterplan and noted that she had been to Oxfordshire Clinical Commissioning Group Board meeting yesterday. Information provided to the Board noted that the Government had listed 40 capital spend projects and only 8 more were to be agreed. Referring to the Vision Roseanne Edwards commented that the Masterplan was lacking in detail, with no financial information and no detailed strategy and in her view was unlikely to be successful in getting funding.

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Councillor Andrew McHugh, Cherwell District Council, spoke against pursuing a judicial review. The shared Vision provided an opportunity to work in collaboration to achieve a hospital fit for the future.

Councillor Fatemian introduced the item commenting that he had written to the Secretary of State following receipt of the response requesting an urgent review of the decision as he felt that there had been a misunderstanding of the arguments raised by the referral. No reply had been received. He had hoped for a further review and noted that options moving forward were limited. He had asked through the Leader of Oxfordshire County Council for a legal view from the Head of Legal Services on the likely success of a judicial review. He noted that the Committee had no powers to seek legal advice or to seek judicial review and that this would need to be done via one or a combination of the Councils. The legal opinion was that a judicial review would have only 30% chance of success. The view that such action was unlikely to succeed was shared by Sir Tony Baldry, former Member of Parliament for Parliament. It was for the Committee to decide whether to accept the advice but Councillor Fatemian questioned the wisdom of pursuing legal action in the light of the expert advice received.

Councillor Fatemian expressed disappointment at the response received and confirmed that he continued to believe that the downgrade of maternity services was not in the best interests of local mothers and babies. He paid tribute to the testimony of brave mothers and father who had come forward to share their experiences; and to the hard work of this Committee and organisations like Keep the Horton General. The campaign would not end as the OCCG had pledged to regularly review maternity provision at the Horton and this Committee had an important role in holding them to account on this promise for an annual review. The Committee would work positively with the Trust to realise and implement a Vision for the future of the Horton hospital.

During discussion the following points were made, and various views were expressed both in favour and against pursuing judicial review:

- The result of the referral was very disappointing. A great deal of hard work had gone into it and the Committee had heard a lot of personal testimonies on the impact the closure had caused. However, it was important that the Committee continue to oversee and scrutinise plans going forward with a focus on the future of Horton hospital.
- The legal view had been sought and it would be perverse to ignore it because it was unpalatable. Even should the Committee decide it wished to pursue a judicial review it would be necessary to persuade at least one of the three Councils to take the necessary action and it was felt that this was unlikely.
- The Vision was a hope for the Future and a decision to seek judicial review could jeopardise that pushing it into the distance. The Committee now had a role as a critical friend.
- The arguments put forward to the Secretary of State had not been understood and although taking the legal advice seriously it was only advice. It was about being the voice of our residents even if the judicial review was unsuccessful.
- In agreeing with the views of the three speakers a member felt that it was important for the Committee to be brave. The costs were not that great, and it

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was suggested that use could be made of the councillor priority fund. There was a moral obligation to constituents to follow all possible avenues for action.

Following a vote by roll call it was:

**RESOLVED:** (by 6 votes for to 2 against) to:

RECOMMEND to the OCCG Board:

- (a) that OCCG undertake the review referred to in their decision paper of the 26th September 2019 and as reflected as an annual review by the Secretary of State letter dated the 15th of September 2020; and
- (b) the review is required to be undertaken as a matter of urgency.

### **8/20 MASTERPLAN FOR THE HORTON HOSPITAL**

(Agenda No. 8)

The Committee considered a paper that provided an update on recent developments at the Horton General Hospital (HGH), in light of changes made during COVID-19, and sets a longer-term vision for the hospital. The paper covered the HGH response to COVID-19, recent service improvements at HGH and Oxford University Hospital's (OUH) System Vision for HGH.

The following representatives of OUH Oxfordshire Clinical Commissioning Group (OCCG) attended for this item:

Dr Bruno Holthof, Chief Executive OUH; Professor Sir Jonathan Montgomery, Chair of the Trust; Tony Delaney, Communications and Engagement Manager for OCCG; David Walliker (OUH); Catherine Mountford, Oxfordshire Clinical Commissioning Group.

Professor Sir Jonathan Montgomery introduced the paper and emphasised that the prize they all sought was for a hospital everyone could be proud of. There were a number of stages to gaining that prize and community support was essential. Professor Sir Jonathan Montgomery commented that the Trust recognised the need to gain the trust of the community. He appreciated that the current position might not seem as concrete as some might like but the Trust was committed to working with the Committee and to the importance of consultation. He noted the agreed list of capital projects and emphasised that the key was in how the Trust could overcome the disappointment of not being in that first tranche of projects. He outlined the activity that had taken place since to pursue their case for inclusion in the next agreed projects. They would also investigate other options, but these were unclear at this time.

David Walliker, Chief Digital and Partnerships Officer, referring to the paper outlined the way that covid had altered the way that the Horton delivered care, recent developments at the Horton and the vision for the future.

Bruno Holthof commented that work was ongoing to secure funding as one of the remaining 8 capital projects funded by Government, but he had been asked about a Plan B if not successful. He noted that the allocation of funding in the NHS had changed in the past year. It was linked to the Integrated Care System (ICS)

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development. Capital funding would be allocated to the South East Region and then to the ICS - (Buckinghamshire, Oxfordshire and Berkshire (BOB)). The BOB ICS would receive a capital budget each year and this would then be allocated following discussions across all of the partners. During the past year he confirmed that they had been using all possible channels for capital bidding. For example, the MRI scanner for the Horton was part of a regional bid for diagnostic equipment. The improvements to A&E were also as a result of a regional bidding process. If not successful in gaining funding as one of the 8 remaining hospitals under the national funding programme they would need to explore every single remaining avenue for capital funding.

Trust representatives responded to questions:

- Asked about the likelihood of success of any Horton hospital bid within the BOB Bruno Holthof gave an assurance that they were all very active in defending the case for the Horton hospital at the BOB level. Professor Sir Jonathan Montgomery added that no-one could say with certainty the likelihood of success but that the regional team understood all the issues involved and were making the arguments that they felt were most likely to succeed.
- Asked about staff retention Bruno Holthof stated that turnover rates were going down in all specialities and recruitment was improving so the Trust was confident that they would build the workforce necessary to operate the Horton in the future.
- Asked about the position on the details of the masterplan Bruno Holthof replied that advisers had been appointed and work had begun on translating the system vision into a masterplan. It was important to have the Vision as the basis of the bidding. It was important to now work on the detail of the tactical bidding. If unsuccessful then there would be a need to look at other routes and possibly need to be less ambitious as the capital would be less than if successful in the national bidding process.
- Asked how the Trust was expecting this Committee to work with them and the timescales involved Bruno Holthof replied that the process was uncertain at this time. There was no information available on the release of additional capital to the NHS. This would be a multi-year programme and at this stage the Trust did not know how much would be awarded or over how many years.
- Asked about recent developments for closer working with Katherine House Hospice Bruno explained that this was as a result of an approach by the Hospice and was not directly linked to this discussion. Professor Sir Jonathan Montgomery added that the sustainability of a wide range of services in North Oxfordshire was a commitment of the Trust and this development would help understand communities even better than currently but was not linked to a commissioning invitation from the commissioning group.
- Asked about the future of the buildings on the site, Bruno Holthof confirmed that this would be dependent on the capital funding obtained.
- Reference was made by the Committee to a recommendation to the OCCG Board following the Phase 1 consultation in September 2017 about plans to facilitate between 60-90k out-patient appointments per year transferring from the JR to the Horton. Whilst accepting that the numbers would have changed over time it was presumed that some capital funding would have been lined to this proposal and some capital allocated to upgrade facilities. It was queried how much money had been allocated and where it now sat. Bruno Holthof confirmed that the move of

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out-patients from the JR to the Horton was to have been within the existing facilities. He confirmed that the numbers had decreased due to several factors including the NHS Five Year Plan to reduce the number of out-patient appointments. This was being done by, for example, eliminating follow up appointments or moving them to a virtual platform. What was important was that as many appointments happened as locally as possible and with facilities that meant that tests could happen at the same time. That was why the investment in scanning equipment had been so important.

- Responding to a suggestion that it would be helpful to see a list of the improvements that had been envisaged, with information on those that had been done and those not yet done Catherine Mountford, OCCG, advised that at the time of the proposals no capital funding had been allocated. The intention had been to work first with existing facilities. If new build became necessary, then a business case would have needed to be developed.
- Responding to a query from the Chairman about next steps and the need to engage the Committee as early as possible in the development of the Masterplan, Professor Sir Jonathan Montgomery advised that he was nervous of giving a commitment to an exact date to return to the Committee with details during the ongoing Covid-19 pandemic. A further wave could delay matters. The Chairman stressed that it be as early as possible and suggested that the first quarter of 2021 would be reasonable at the moment.

..... in the Chair  
Date of signing ..... 2021