

HOSC/20/11

Committee Health Overview and Scrutiny

Date 1 June 2011

Mid Area Forum: Health Inequalities Scrutiny

(To be introduced by Councillor Bob Boyce)

Under delegated authority from the Health Overview and Scrutiny Committee, the Mid Essex Area Forum established a Task and Finish Group to consider health inequalities in Mid Essex. The final report of the Task and Finish Group was supported by the Mid Area Forum on 3 March 2011 and is attached for formal consideration.

It was agreed at the Mid Area Forum that, in view of additional comments made at the meeting, that the minutes on the discussion should also be forwarded with the report to highlight the further issues raised and this is also attached.

EXTRACT FROM THE UNAPPROVED MINUTES OF THE MID ESSEX AREA FORUM MEETING HELD ON 3 MARCH 2011

7. Mid Area Forum: Health Inequalities Scrutiny

(a) Introduction

The Forum received the final report (AFM/03/11) on the review of Health Inequalities in Mid Essex, undertaken by a Task and Finish Group ('the Group'). The background to the formation of the Group, the process followed for the scrutiny, emerging issues and the final findings and recommendations were outlined.

Councillor Bob Boyce, who chaired the Group specifically thanked Jane Richards, from Mid Essex PCT, who had attended all the meetings of the Group and who provided a substantial amount of statistical evidence for the Group during its scrutiny.

It was noted that the conclusions from the scrutiny were evidence based and that some of them applied across the whole mid Essex area (such as improved and consistent provision of phlebotomy and audiology services) and were not solely localised findings.

(b) Issues in Witham

Councillor Lager acknowledged the thorough work done by the Group and that they had clearly observed and addressed their terms of reference regarding health outcomes across the Mid Essex area. The Group had focussed on accessibility to health services and transport issues, and this was where some additional concerns were now being raised. In particular, concerns were expressed over the limited health services available in Witham and that most people attending local clinics still needed referral to Broomfield Hospital as the clinics were unable to treat minor injuries. In addition, the number of GPs serving the Witham area was felt to be insufficient and with inadequate facilities.

The issues identified in Witham had been discussed with Priti Patel, Member of Parliament for Witham, who was to raise these concerns with both the Chief Executive of Mid Essex Primary Care Trust and representatives from the emerging local GP consortia.

The Deputy Town Clerk for Witham Town Council added that there was increasing pressure for local residential development in Witham and suggested that there needed to be more joint working with neighbouring authorities on strategic planning matters, particularly including provision of health facilities.

(c) Broomfield Hospital

It had been long term health policy to centralise as many services as possible on the Broomfield site for both clinical and cost effective reasons but it was not to the benefit of residents living long distances away, some of whom would have preferred a more localised community hospital. Future funding streams for any new community hospital were uncertain at present. With the increasing concentration of certain services at Broomfield Hospital, it had evolved and developed into a much larger estate. Public transport only delivered passengers to the main reception site whereas many passengers, who may be infirm and not particularly mobile, would then need to visit other parts of the hospital estate located quite considerable distances from the reception area. Whilst it was reported that the hospital were already addressing the issue of inadequate wheelchairs being available upon arrival at the hospital (which had been highlighted in the scrutiny report), there also were ongoing discussions with the hospital and local MP to look at the viability of running an internal shuttle bus to operate across the site.

It was also suggested that there was an inequity of ability to pay for car parking charges at Broomfield hospital with visitors charged in advance before knowing exactly how long they would be at the site, and that the charges should be levied upon leaving calculated on how long one was actually on site.

(d) Conclusion

Thereafter, it was concluded that the Forum supported the findings and recommendations arising from the scrutiny and agreed to refer the final report to the Health Overview and Scrutiny Committee for formal consideration. However, in view of additional comments made at the meeting, it was suggested and agreed that the minutes on the discussion should also be forwarded with the report to highlight the further issues raised.