

# Public Document Pack



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DATE: 6 October 2017

Dear Councillor

**HEALTH AND ADULT SOCIAL CARE AND COMMUNITIES OVERVIEW AND  
SCRUTINY COMMITTEE - THURSDAY, 12TH OCTOBER, 2017**

I am now able to enclose, for consideration at next Thursday, 12th October, 2017 meeting of the Health and Adult Social Care and Communities Overview and Scrutiny Committee, the following report that was unavailable when the agenda was printed.

**Potential relocation of outpatient services- Handforth- Consultation  
evaluation (Pages 3 - 12)**

Yours sincerely

Helen Davies

Scrutiny Officer

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## **Adult Social Care and Health Overview and Scrutiny Committee**

### **Relocation of Outpatient Clinics from Handforth Clinic**

#### **Final Briefing note on outcome of public consultation and presentation to East Cheshire NHS Trust Board**

## **1 Public Consultation**

In July 2017 East Cheshire Trust entered a public consultation process to ensure it fully understood the concerns and issues about the proposed changes. This was as per the agreement with Cheshire East Council's Health and Adult Social Care and Communities Overview and Scrutiny Committee (OSC) at its June meeting. The consultation period commenced 24 July 2017 and closed on 03 September 2017.

East Cheshire Trust (ECT) through its communication team has engaged with local councillors and the local patient participation group in order to agree the best approach to engage with the local population.

### **1.1 Process**

A consultation document was drawn up which outlined the key issues and context. At the conclusion of the existing lease agreement the Trust would need to transfer a number of Consultant led Outpatient Services from Handforth Health Centre. It also described the Trust's proposed course of action. The consultation document invited the submission of general comments and observations.

Copies of the consultation document were delivered and posted to relevant locations, including Handforth Clinic, Handforth Health Centre (GP Surgery) and the nearby library and pharmacy. Posters describing the consultation were displayed through the Handforth Health Centre and Clinic. The consultation was promoted via a press release issued to the local media and social media channels operated by the Trust and partner organisations.

The Trust carried out several face-to-face engagement visits to the site, encouraging patients and visitors to complete consultation submissions. The proposals were also discussed with the Trust's Patient Reference Group.

Respondents were able to submit their views by two methods, via a form on the Trust's website or via paper.

## 1.2 Responses

In total 19 paper responses to the consultation were received by the trust and 69 responses were submitted via the trust's website, making a total of 88. The findings from these responses can be seen in the table in the section below.

A written response was received from Handforth Parish Council which is attached in Appendix 1. This is critical of the Trust's proposals, mainly focussing on questioning rental cost arrangements and space utilisation. As previously described the funding arrangements were complex. The lease between the GP Partners and NHS Property Services has been historically set on a "peppercorn" rent and were due to end in two phases of May and October 2017. It has been agreed by all parties involved that these leases will continue until October 2017 and now end together.

## 1.3 Themes

The main themes which emerged from responses to the document were as below:

Issue	Details	Particularly affects	Health Sector Responses
Transport	A number of respondents felt the proposals should not be implemented because of poor public transport services between Handforth and the trust's Macclesfield, Congleton and Knutsford sites. Bus services are said to be infrequent and train links highly impractical. Time, cost and inconvenience were cited as key factors. Challenges finding parking spaces at MDGH were also mentioned frequently and a Cheshire East Council consultation on proposed reductions to some bus services was referred to often.	<ul style="list-style-type: none"> <li>• Elderly patients</li> <li>• People with disabilities</li> <li>• People on lower incomes without private transport</li> </ul>	<ul style="list-style-type: none"> <li>• A limited local survey highlighted a very small proportion of people were using public transport to access services (approx. 5%)</li> <li>• There are alternative services to East Cheshire Trust in the area should patients decide to express this choice</li> </ul>
Capacity/increasing population	<p>It was cited that a large volume of new homes are to be built in and around Handforth and so this will lead to increased patient numbers.</p> <p>Questions were raised over the ability of clinics to be delivered at neighbouring trust sites without a corresponding increase in waiting times, both for appointments to be made and 'on the day' waits.</p>	N/A	<ul style="list-style-type: none"> <li>• The proposal protects delivery of community services in the local area.</li> <li>• The Trust understand the landlord intends utilising some of the released space for delivery of Primary Care</li> <li>• An assessment was undertaken of the capacity at other ECT sites and concluded that there are sufficient slots available to re-provide services and not have a detrimental impact on waiting times</li> </ul>

De-localisation of services	Many respondents queried why services were apparently being centralised and taken away from a community venue against the trust/Caring Together's stated aim of providing more care in community venues/patients' own homes.	<ul style="list-style-type: none"> <li>Elderly patients</li> <li>People with disabilities</li> <li>People on lower incomes without private transport</li> </ul>	<ul style="list-style-type: none"> <li>The proposal affects the delivery of consultant outpatient services but protects delivery of community services in the local area.</li> </ul>
Quality of services	Several responses praised the efficiency and quality of outpatient clinic provided at Handforth and claimed a similar level would not be provided at alternative sites.	N/A	<ul style="list-style-type: none"> <li>There is no expected reduction in the quality of reception, assessment or treatment provision at the new locations</li> <li>Diagnostics availability is greater at the transfer locations, resulting in reduced number of patient visits and hence improved quality</li> </ul>

The general response from the public (including staff) was to leave the services as they currently are, and for the trust to accept that it should incur an increase in cost.

## 2 Out-patient services at Handforth Health Centre – CEO presentation to ECT Trust Board Public meeting 29 September 2017

Due to a change at national level in the way rental payments are calculated the Trust faced an increase in costs for the provision of services at Handforth. Given the challenging financial position faced by the Trust, and wider health economy, a decision was needed as to either relocating services to other premises or reducing service expenditure elsewhere in the Trust to enable the services to continue at Handforth.

ECT Board documents for September included the paper which was shared with OSC in June; this gave the Board a fuller background to the issue which proposes to transfer outpatient clinics but retain community services at Handforth. It was confirmed to Board that the Trust had embarked on a public consultation during the period 24 July to 03 September 2017.

The Board were informed of the summary position:

- c.2,700 appointments per annum are provided at the health centre for outpatient services (c.475 individual patients). This represents c.50 patients/week or 10 per weekday.
- 50% of these patients live in Handforth (SK9 postcode) with others travelling from other areas.
- We would wish for patients to remain under our care; however other NHS Providers offer similar services, meaning that care could be received from within 2 miles from Handforth and up to 9 miles if they travel to Macclesfield.
- Transport was raised as a concern and a sample of 48 patients attending the health centre showed 42 travelled by car and only 2 had used public transport (1 of whom was from outside of Cheshire East). It is recognised that travel to Macclesfield will increase pressure on car parking availability. Some patients may choose alternative providers in

the Wilmslow and South Manchester locality, where travel time and parking may be less of a concern.

- A quality impact assessment has been undertaken.

It was confirmed to Board that the ECT Executive team recognised:

- the desire of the public to maintain the status quo in terms of service provision
- is pleased that a solution has been found with the building Landlord to retain sufficient space to be able to continue to provide community services from the health centre
- recognises the impact on individuals however the total volume of patients affected is relatively small when looking at overall outpatient services
- recognises the impact in terms of travel on individuals however takes notice of the vast majority of patients currently travel by car and for most services have local alternatives in addition to Macclesfield
- there is no impact on staff numbers whilst recognising that some staff may have increased travel
- confirms the ability to accommodate the activity at other locations without increased cost
- is unable to identify further savings to offset the £65,000 increased cost in continuing to provide the current level of service.

In summary East Cheshire Trust Board supported the recommendation from the Executive Team to transfer the consultant led outpatient services from Handforth to other ECT locations.

Neil Evans  
Director of Commissioning  
Eastern Cheshire CCG

Steven Redfern  
Deputy Director of Operations  
East Cheshire Trust

04 October 2017

### **Appendix 1 – Handforth Parish Council submission**



Handforth Parish  
Council submission to

### **Appendix 2 – Response to questions from Health and Social Care and Communities OSC July 2017**



Handforth briefing  
note for OSC - July 21

## Adult Social Care and Health Overview and Scrutiny Committee

### Relocation of Outpatient Clinics from Handforth Clinic

#### Additional Content for requested Briefing note

Following attendance at the June Overview and Scrutiny Committee the CCG was asked to explore in further detail access availability to alternative providers.

#### 1. How do people access Handforth Health Centre Outpatient Clinics now?

A survey of patients attending Handforth Health Centre showed that the overarching majority use car travel now (88%) with small numbers using the bus or walking (4%). This would suggest that in light of the relatively local provision, outlined in the original paper, that there would have a limited impact on usage.

	BUS	CAR	MOBILITY TRANSPORT	TAXI	WALKED	Grand Total
sk9	2	19			2	23
sk12		13				13
wa16		1				1
sk11		1	1			2
sk6				1		1
sk7		1				1
sk8		4				4
sk10		1				1
cw12		2				2
	2	42	1	1	2	48

## **2. NHS Funded transport support**

As described in the initial paper there are two ways the NHS would support a patient's transport to attend the appointments proposed to be transferred:

### **a. Patient Transport**

This service will collect, from their home, patients who would have difficulty attending their appointment using other transport forms due to their mobility or health issues. There is no charge for using this service it is funded by the local CCG.

### **b. Hospital Travel Cost Scheme**

Where a patient is eligible for means tested benefits as they are on a low income they can recover the costs of their travel.

## **3. Volunteer Driver Scheme**

Following the discussion with the OSC members at the June meeting further research has been undertaken which has identified that there is no volunteer driver scheme in the Wilmslow and Handforth locality. East Cheshire NHS Trust and NHS Eastern Cheshire CCG would be happy to work with Cheshire East Council in engaging with the voluntary sector to try and stimulate the development of such a service. However, based on the analysis in section 1 the demand for a service of this nature may be more limited than perhaps was forecast.

The CCG has made a number of observations as part of the current consultation in relation to bus services in Cheshire East.

## **4. Capacity for patients in the services to be transferred is retained**

The original paper showed that there were alternative providers who offered the services which are proposed to move.

East Cheshire NHS Trust can confirm that the same capacity is scheduled to be re-provided at alternative ECT sites. We are proposing to move the following outpatient clinics from Handforth Clinic and deliver them from Macclesfield District General Hospital instead:

- Orthopaedics
- Gynaecology
- Urology
- Breast Surgery
- Audiology
- Paediatrics



We are proposing to move the following outpatient clinics from Handforth Clinic and deliver them from Knutsford and District Community Hospital instead:

- Rheumatology
- Respiratory Medicine

Additionally:

- Midwifery clinics would move to OakencloUGH Children's Centre, Colshaw Drive, Wilmslow
- General Surgery clinics will be delivered from both Macclesfield Hospital and Congleton War Memorial Hospital.

### 5. Consultation

Public consultation commenced 24<sup>th</sup> July 2017 with expectation to conclude 3<sup>rd</sup> September 2017. East Cheshire Trust through its communication team has engaged with local councillors (Cllr Burkhill and Cllr Mahon) and the local patient participation group in order to agree the best approach to engage with the local population.

Neil Evans  
Director of Commissioning  
Eastern Cheshire CCG

Steven Redfern  
Deputy Director of Operations  
East Cheshire Trust

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Transport:

**Rail travel** between Handforth and Macclesfield is virtually a non-starter. The passenger has to get to Handforth Station (unusable by anyone dependent on wheelchair or pushchair), take a train to Cheadle Hulme, take a southbound train to Macclesfield, then a bus or taxi to Macclesfield Hospital.

**The 130 bus** service from Handforth Health Centre to Macclesfield Hospital is an exceedingly uncomfortable 45 bus stops – potentially 90 on a return journey. The number of uncomfortable jolts and turns would be distressing for people with some conditions.

**Using the car** means finding a parking place at Macclesfield Hospital, a near impossible problem.

The Parish Council submits this as its formal response to the current consultation by the Trust and the Commissioning Group, and also asks these views to be fully taken into account by Cheshire East Council's Health and Adult Social Care and Communities Overview and Scrutiny Committee. “

Ashley Comiskey Dawson  
Clerk to Handforth Parish Council



**Handforth Parish Council**

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30/08/2017

Handforth Parish Council is extremely concerned at the proposals by the East Cheshire NHS Trust and the East Cheshire Clinical Commissioning Group, to terminate the provision of a number of clinical services at the Handforth Health Clinic. The loss of these services would be a serious retrograde step for local residents of both Handforth and Wilmslow. This loss would be significantly magnified as the developments under the Local Plan are realised, since the number of households in the area is expected to grow by some 3,000, virtually doubling the potential attendees at the Health Centre. Furthermore the cost (and major inconvenience) to residents of travelling to alternative sites far outweighs the costs to the Trust of continuing to provide these services in Handforth. We object to the proposals and urge the Trust and the CCG to reconsider, and at least to defer them for two years whilst alternative arrangements can be discussed with Handforth Parish Council and all parties who have expressed objections to the proposals.

It is also notable that the health professionals in the two Handforth GP surgeries do not support the proposals.

The report submitted by the Trust and the CCG to Cheshire East Council stated that in the 12 months to February 2017, there were 2,713 clinic appointments of the kind that would be relocated. This averages out to 11 appointments per working day. One would expect a single consulting room to be adequate to carry out these appointments. If we can assume a room of (say) 150 sq ft, at normal rents in Handforth of between £10 and £20 per square foot pa, then that would suggest a maximum true cost of no more than £3,000 pa. We cannot see how the figure of £67,000 is explicable.

Indeed, at market rates the £67k would equate to a space of at minimum over 300 sqm in Handforth, and substantially over 200 sqm even with heavy service charges. If the services to be relocated require this amount of space in (principally) Macclesfield General hospital, then the true cost there should have been taken into account in the Trust's proposals, but it has not. There is no likelihood that perhaps 200sqm or more (assuming it is efficiently used) could be accommodated in a major hospital without incurring heavy costs.