

**MINUTES**  
**HEALTH IN DACORUM**  
**11 OCTOBER 2022**

**Councillors:** Allen  
Beauchamp  
Bhinder (Chairman)  
Guest (Vice-  
Chairman)  
Hollinghurst  
Johnson  
Pringle  
Sinha

**Officers:**  
MSells

**Also Attendance:** Edie Glatter: Dacorum Patients Group

The meeting began at 7.30 pm

**1**                    **MINUTES**

The minutes of the previous meeting were reviewed and agreed. Cllr Guest commented that there had not been any minutes to sign from during the pandemic. An inaudible response was provided and Cllr Guest asked if it could be arranged for Cllr Bhinder to sign the minutes electronically. It was confirmed that the approval of minutes led to the process of an electronic signature.

**2**                    **APOLOGIES FOR ABSENCE**

Cllr Maddern  
Cllr Durrant  
Kevin Minier

**3**                    **DECLARATIONS OF INTEREST**

There were no declarations on interest

**4**                    **PUBLIC PARTICIPATION**

There was no public participation.

## 5

### **WARD ISSUES**

Cllr Allen referred to comments regarding the sub-surgery on Boxmoor High Street, noting that St. John's Road has a sub-surgery open one day a week, and whilst Boxmoor is more accessible for the elderly, it is closing. Cllr Allen stated that he hoped to ask Dr. Fernandes if this was the case and how they would ensure the needs of Boxmoor residents are being met. Cllr Guest commented that the branch surgeries in Boxmoor and Gadebridge have closed and that she would investigate further before informing Mneells for dissemination to the committee.

Cllr Allen noted that Parkwood Drive has had a significant amount of investment and that he felt it retrogressive to close down the outreach they have further afield, and whilst the new building is appreciated, accessibility needs to be considered, particularly for those who struggle to travel. Cllr Bhinder noted his agreement and stated that they require reasoning behind the action. Cllr Guest confirmed that she would address this in her enquiries with Parkwood.

**ACTION:** Cllr Guest to investigate closure of Boxmoor and Gadebridge branch surgeries and send information to MSells for circulation to Committee

## 6

### **THE VISION FOR HEMEL HEMPSTEAD HOSPITAL**

Before proceeding with the presentation, Cllr Bhinder noted Cllr Beauchamp's statement. Cllr Guest asked that the statement be considered after the presentation.

EGlatter presented the DHAG vision for the future of Hemel Hempstead Hospital ("HHH"), noting that they are proposing that the local hospital be the centre of a truly integrated health service for the Dacorum community. Integration is necessary to ensure Hemel Hempstead is a truly integrated service with West Herts Teaching Hospitals Trust, social services, Herts Community Trust, Herts Partnership Trust, social care and the voluntary sector all on one site. The Northumbria Healthcare Foundation Trust model is an example model, which still has wards in its community hospitals after the A&E hospital was built, providing some elective surgery, oncology, stroke rehabilitation and care of the elderly, with each hospital having a wide range of other services, and was rated 'outstanding' by the CQC. The Trust has also started to roll out a new home care service with no waiting list.

Looking at services that could be provided at HHH, EGlatter suggested that rehabilitation wards are vital to take patients from A&E and specialist hospitals to prevent bed-blocking and enable patients to gain independence through specialised care. The Day Centre should also be reopened and run by well-trained senior and district nurses, and district nurses should also be based at HHH to provide a vital role in the community. The Urgent Treatment Centre should be maintained and expanded as it is a well-run service that consistently meets its targets. Preventative services, a full range of diagnostic tests and phlebotomy and x-ray services should also be at HHH. On the wider issues, educational, training and library facilities at HHH are a valuable resource and should be kept as a venue for health and social care providers, and could also accommodate the Dacorum Healthy Hub. Dacorum could be a centre for innovation and should look at the feasibility of setting up community health and social care services through a neighbourhood model, as piloted by other trusts across the country. The outsourcing of services should also be ceased to prevent concerns around quality, accessibility, communication and follow-up

appointments. Services from the Health and Wellbeing Centre should be brought to HHH when the lease ends in 2026 to help centralise services and improve access.

HHH is at serious risk as the Trust's CEO described at the Trust board meeting on 6th October funding for diagnostic equipment at St. Albans and that there was no promise of new equipment for HHH, despite a previous promise for MRI and CT machines. HHH's MRI has been replaced by a mobile scanner, which doesn't provide as good resolution, and the Trust will be neglecting some moderate and low-level backlog maintenance despite having the option to complete it all, resulting in the eventual closure of the hospital due to neglect. The Trust has predicted an increase in attendance at Watford Hospital by 30%, compared to just 6% at HHH, suggesting that more patients will be going to Watford.

EGLatter concluded that DHAG need to point the way to a more sensible and sustainable health provision in Dacorum.

Cllr Allen thanked EGLatter for the presentation and asked what the next steps will be in campaigning for quality health services in Dacorum.

Cllr Bhinder suggested that the Committee look further at the presentation with a view to developing a document from DBC and that the work falls under the remit of the Committee.

Cllr Beauchamp echoed the comments and agreed with the direction proposed by the Chair. Cllr Beauchamp commented that a new single centralised hospital has long been sought for residents though this faced continual resistance due to individual aspirations of hospitals based in Watford and St. Albans. Cllr Beauchamp stated that the Committee should focus on the core services required to support the local needs of the population within the context of any available funding should the government not be willing to provide 100% availability for the West Hertfordshire Hospital Trusts project and should be in line with availability of resources, technology and deliverability. It should be complementary to a new hospital that will provide key emergency and elective surgery needs of the population. Current funding requirements of around £1.2bn will potentially not be available to meet the aspirations of the Trust and if the clear need of the core diagnostic services can't be demonstrated then further services will be withdrawn and funding will be prioritised for Watford. Cllr Beauchamp continued that the Committee should ensure that any funding for HHH improvements must be adequate to provide what has been outlined and other services to be determined by the Committee, which should include MRI, CT, ultrasound, x-ray, DEXA scanning, UTH, ENT and audiology as a minimum. Routine outpatient services should also be provided, including oncology, orthopaedic, maternity and stroke treatments, as well as inpatient care for rehabilitation.

Cllr Bhinder remarked on the NHS using local community centres for clinics rather than the hospital.

Cllr Bhinder confirmed that Cllr Beauchamp's statement would be included in the minutes.

Cllr Guest commented that the Council's policy is to support a new hospital on a new site to service Hemel Hempstead and Watford and that this should continue, though this is not currently happening, and whilst there is continued support, the best

healthcare for residents needs to be fought for. Cllr Guest clarified that they need to support the best deal for what is available now.

Cllr Bhinder recommended that the item be discussed further at coming meetings.

ACTION: Cllr Beauchamp's written statement to be included in the minutes.

## **7 BOOSTER VACCINATION AVAILABILITY**

Cllr Bhinder checked that all Committee members had received Dr. Fernandes' statement on vaccine availability.

Cllr Allen commented that the statement from Dr Fernandes didn't address the core issue that a significant number of residents don't feel the service is accessible as the booking online process only works well with a phone and that bookings are steering people out of their communities or town. Cllr Allen queried why enough appointments aren't being provided in Dacorum or Hemel Hempstead for residents.

Cllr Beauchamp noted that booking a fourth Covid booster on the day when dates were released meant you were allocated anywhere other than a local centre, noting that he was allocated an appointment in Harpenden and no Hemel Hempstead vaccination centres were online. Cllr Beauchamp noted that several community centres are now providing vaccinations alongside local pharmacies, and that he hoped current vaccine centres would remain to support the roll out of the flu vaccine as well as the Covid booster for over 50s.

Cllr Bhinder agreed with Cllr Allen's comments in regard to Dr Fernandes' response.

Cllr Beauchamp referred to Cllr Bhinder's earlier comments regarding community centres being used for the provision of core services, noting that family centre services have been provided, including vaccinations for babies, and this presence was maintained during Covid.

EGlatter noted an efficient scheme was being run at the hospital and this was stopped due to cost, adding that using more community centres results in less oversight to ensure they are working to the correct standards. EGlatter voiced concerns about how syringes were stored at the pharmacy where she received her vaccine, noting that this highlights that centres are not being monitored correctly.

Cllr Guest noted that she is a practising community pharmacist, and whilst she does not provide Covid vaccinations, she confirmed that pharmacies do have to follow standard operating procedures and they do provide flu vaccines as well a range of travel vaccines.

Cllr Guest commented on the Covid booster roll out and the anecdotal evidence regarding there being a lack of choice on where the vaccine can be given.

Cllr Bhinder suggested that the comments be fed back to Dr Fernandes regarding Covid vaccine distribution in Dacorum.

Cllr Beauchamp stated that the item could also be addressed at tomorrow's Council meeting and that he and Cllr Guest would raise this at the meeting.

EGlatter asked if the vaccination team at the ICB organises the vaccinations rather than CCGs, noting that it was stated in the ICB's minutes that they were doing this at some pharmacies and that 1 out of 3 GP practices in PCNs would provide vaccinations. It was noted that the ICB contact details would be provided to MSnell to contact rather than Dr Fernandes.

Cllr Allen noted that he had received a text from his surgery with 3 options, though only one surgery had availability, whereas residents who raised their concerns were going through a different channel that led them to pharmacies. Cllr Allen suggested that the multiple pathways could be confusing for the end user. Cllr Bhinder asked that this comment be raised at tomorrow's Council meeting. Cllr Beauchamp commented on a similar experience with the flu vaccination and that the IT systems need to be addressed.

ACTION: Cllr Allen to send ICB vaccination team contact details to MSells for a response on Covid distribution in Dacorum.

## **8 COUNTY COUNCIL HEALTH SCRUTINY COMMITTEE REPORT**

Cllr Beauchamp confirmed that he was not present at the last meeting due to Covid and therefore no report was presented.

EGlatter queried why there was no mention at the meeting regarding the poor performance of the Hospital and Ambulance Trusts, noting that only 4.64% of handovers from ambulances at Watford were completed in 15 minutes, with the best performing hospital in the region doing 42.63%. EGlatter noted that there are similar issues with A&E waiting times with 37.5 people seen in 4 hours.

Cllr Guest confirmed that there would be an update on the East of England Ambulance Trust at tomorrow's Council meeting.

Cllr Beauchamp noted a recent experience regarding a relative where East of England Ambulance Trust stated there would be a 5-hour wait for an ambulance and that it would be quicker to take them into hospital. The relative was not seen until the next day. EGlatter also noted a recent experience, stating that their brother had a heart attack and was informed there would be a 5-hour wait for an ambulance. A relative took them into hospital, where he had a cardiac arrest and was attended to by the crash team.

Cllr Bhinder noted the seriousness of the situation regarding the ambulance service

## **9 COUNTY COUNCIL ADULT CARE SERVICES REPORT**

Cllr Guest noted the report.

Cllr Allen queried the direction of the government regarding the funding of adult services given the withdrawal of the National Insurance increase that was intended to fund the improvement of services. Cllr Guest advised that if the National Insurance had come in, most would have gone to the NHS, and confirmed that they are still awaiting the Social Care white paper.

Cllr Bhinder confirmed that they would focus on health provision in Dacorum over the coming meetings.

Cllr Guest noted that a West Herts Hospitals Trust representative used to attend committee meetings and asked if MSells could ask for a representative to attend to provide an update. MSells confirmed that they continue to be invited to every meeting. Cllr Guest remarked that she understood why they may be unwilling to attend and suggested that they be asked to provide an update on what Hemel Hempstead will be getting.

Cllr Bhinder noted the rise in Covid cases and suggested that a Covid update be added to the next meeting's agenda. Cllr Guest confirmed that Jim McManus could provide this update.

There being no further business, Cllr Bhinder closed the meeting at 8:27pm.

ACTION: MSells to ask West Herts Hospital Trust for a representative to attend the next meeting to provide an update.

ACTION: MSells to ask Jim McManus to provide a Covid update at the next meeting.

The Meeting ended at 8.27 pm