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**SOUTHAMPTON CITY COUNCIL**  
**HEALTH OVERVIEW AND SCRUTINY PANEL**  
**MINUTES OF THE MEETING HELD ON 8 FEBRUARY 2024**

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**Present:** Councillors W Payne (Chair), Houghton (Vice-Chair), Allen, Kenny, Noon, Wood and Cox

26. **APOLOGIES AND CHANGES IN MEMBERSHIP (IF ANY)**

The Panel noted the resignation of Councillor Finn due to being appointed as Cabinet Member for Adults and Health, and the appointment of Councillor Cox in place thereof in accordance with the provisions of Council Procedure Rule 4.3.

27. **DISCLOSURE OF PERSONAL AND PECUNIARY INTERESTS**

Councillor Allen declared that his wife was employed as a Nurse at Solent Health NHS Trust.

Councillor Kenny declared that she was a Member of Southern Health NHS Foundation Trust and her husband was a Governor of Southern Health NHS Foundation Trust.

Councillor Noon declared that he worked in Adult Social Care.

The Panel noted the declarations of interest and considered that it did not present a conflict of interest in the items on the agenda.

**RESOLVED** that Councillor Allen, Councillor Kenny, and Councillor Noon would be involved in the discussion of the items on the agenda.

28. **STATEMENT FROM THE CHAIR**

The Chair noted that Harry Diamond had retired as Chair of Healthwatch Southampton and expressed thank for his contribution to the city through his work with Healthwatch and St John's Ambulance.

29. **MINUTES OF THE PREVIOUS MEETING (INCLUDING MATTERS ARISING)**

**RESOLVED:** that the minutes for the Panel meeting on 30 November 2023 be approved and signed as a correct record.

30. **PRIMARY CARE UPDATE**

The Panel considered the report of the NHS Hampshire and Isle of Wight Integrated Care Board which provided an update on primary care services in Southampton.

Josie Teather-Lovejoy, Deputy Director for Primary Care in Southampton, Hampshire & Isle of Wight (HIOW) Integrated Care Board (ICB); Dr Sarah Young, Clinical Lead for

Southampton, HIOW ICB; and Jo Hannigan, Patient Involvement were in attendance and, with the consent of the Chair, addressed the meeting.

The Panel discussed a number of points including:

- The Additional Roles Reimbursement Scheme (ARRS) had reduced the need for referrals and improved access to specialist support and the funding would be baselined through a national contract.
- The total number of appointments that had been delivered had increased, though this did not make waiting areas busy as more appointments were being delivered across more sites or by telephone or by email.
- More GP surgeries had elected to merge to improve resilience and the range of services available to patients.
- There had not been any cases of Measles in the city however the MMR vaccination uptake rate in the city was below the 95% rate needed for herd immunity.

**RESOLVED** That a short briefing paper would be provided to the Panel on MMR vaccination rates across Southampton and the steps being taken to increase uptake to levels at which community immunity becomes effective.

31. **CONSULTATION ON PROPOSED CHANGES TO ACUTE HOSPITAL SERVICES IN HAMPSHIRE**

The Panel considered the report of the Scrutiny Manager which outlined proposals for changes to services provided by Hampshire Hospitals NHS Foundation Trust (HHFT).

Jo Teape, Chief Operating Officer, University Hospital Southampton; Alex Whitfield, Chief Executive, Hampshire Hospitals NHS Foundation Trust (HHFT); Shirlene Oh, Chief Strategy Officer & Population Health Officer, HHFT; Isobel Wroe, Transformation Director, Hampshire & Isle of Wight (HIOW) Integrated Care Board (ICB); Lara Alloway, Chief Medical Officer, HIOW ICB; Amanda Kelly, Healthwatch Southampton; and Councillor Finn, Cabinet Member for Adults, Health and Housing were in attendance and, with the consent of the Chair, addressed the meeting.

The Panel discussed a number of points including:

- The Emergency Department at University Hospital Southampton served a large population, wider than just those who were resident in Southampton. Decisions on where to take patients for emergency care were based on a number of factors, patients are not always admitted to the nearest hospital. The number of critical cases that were currently transported to the Emergency Department at Winchester Hospital was relatively low.
- The proposals included providing an urgent treatment centre at Winchester, managing waiting lists for common procedures by offering patients treatment at different hospitals, refurbishment of Winchester Hospital and opening a new hospital in 2032.
- As part of the New Hospitals Programme the national team manage the funding, the risks, the contractors and suppliers. The new hospital will have a target to deliver a net zero carbon footprint.

**RESOLVED** that, whilst recognising the process to be followed prior to agreement of the chosen approach, the Panel would be provided with the outline timetable and key milestones for the development of the preferred option identified in the consultation.

32. **MONITORING SCRUTINY RECOMMENDATIONS**

The Panel received and noted the report of the Scrutiny Manager which enabled the Health Overview and Scrutiny Panel to monitor and track progress on recommendations made at previous meetings.

CHAIR



25 April 2024