



West Lothian House
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Livingston
EH54 6QG

Deaconess House
148 Pleasance
Edinburgh
EH8 9RS

7 August 2009

A meeting of the **St John's Hospital Stakeholder Group** will be held within the **Large Boardroom, Management Offices, 2nd Floor, St John's Hospital, Howden, Livingston on Friday, 14 August 2009 at 2.00pm.**

A handwritten signature in black ink, appearing to be "Alan Colquhoun".

for Stakeholder Group

Business

1. Apologies.
2. Order of Business.
3. Declarations of interest.
4. Minute of Group Meeting held on 17 July 2009 (herewith).
5. Discussion – Matters Arising from Visit to Dental Suite.
6. NHS Lothian Rezoning Proposals – Update on meeting between Director of Facilities, NHS Lothian, and Public Transport Manager, West Lothian Council, to discuss Transport Issues.
7. Short Stay Elective Surgery Centre Communications Plan Overview (to follow).
8. AOCB.

N.B. A short visit to the new Dental Suite has been arranged for Group Members.
This visit will commence prior to the meeting, at 1.15pm from the Management
Offices, 2nd Floor, St John's Hospital.

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MINUTE of MEETING of the ST JOHN'S HOSPITAL STAKEHOLDER GROUP held within STRATHBROCK PARTNERSHIP CENTRE, BROXBURN on FRIDAY 17 JULY 2009.

Present – Councillors Peter Johnston (Chair), Gordon Beurskens and Ellen Glass; and Bob Anderson (substituting for Theresa Douglas), Maureen Anderson (Patient Representative), Julie McDowell (substituting for Dr Ian McKay) and Dr Charles Winstanley.

Apologies – Theresa Douglas, Dr Ian McKay and Derek Thompson (Staff Representative).

In Attendance – John Jack (Director of Facilities, NHS Lothian) and Andy Yovanovitch (Senior Transportation Officer, West Lothian Council).

1. WELCOME

The Chair welcomed Julie McDowell and Andy Yovanovitch to the meeting. It was expected that Julie McDowell would shortly replace Dr McKay as a permanent Lothian NHS Board representative on the Group.

2. SUBSTITUTES

Councillor Glass wished to record that she was concerned at the prevalence of the use of substitutes at meetings of the Group.

3. MINUTE

The Group confirmed the minute of its meeting held on 17 July 2009 as a correct record.

4. NHS LOTHIAN REZONING PROPOSALS – UPDATE ON TRANSPORT ISSUES

The Chair tabled copies of an email he had received from the Public Transport Manager, West Lothian Council, which contained a short briefing on this matter. As well as confirming that the Director of Facilities had arranged to meet the Public Transport Manager on 21 July 2009, the following points were made:

- Incompatibility of fares structures between bus services would be very difficult to overcome as different bus companies had different fares structures. Even in the medium term this could not be overcome by any public sector organisation influencing commercial bus operations;
- West Lothian Council contracted a bus service from St John's Hospital (SJH) to the Royal Infirmary of Edinburgh (RIE) and although this service was designed primarily to get people to Edinburgh from West Lothian, it could also be used for journeys in the other direction. This was particularly relevant were there to be an increase in demand for travel as a result of rezoning. It was desirable for more users to be encouraged to use this service as this would help make the service financially sustainable;
- There were two long-standing NHS transport groups: a quarterly Travel and Access Group, which dealt with all transport issues (including car parking), and another group involving public transport officers from all local authorities in Lothian, which met specifically about NHS public transport issues. Currently neither group had any project delivery remit;

- Existing public transport funding was already more than fully committed and year on year savings would be necessary. It had been confirmed that the position was the same with City of Edinburgh Council. Fundamentally, it was felt that neither local authority could meet NHS Lothian's aspiration that there be a satisfactory resolution to public transport obstacles, i.e. those issues identified by patients and members of Public Involvement engagement workshops, as detailed in the report on the matter considered by the Lothian NHS Board in November 2008;
- The level of additional demand for travel from Edinburgh that would result from rezoning was unknown, although it was suspected that demand would be low and would change over time.

Consequently, even if funding were available, additional services on the strength of this would not be possible. The practicalities were that existing services on the A8 and A71 routes would remain unchanged, with those not living on these corridors requiring to change buses to get to Livingston, as direct bus services from everywhere else in Edinburgh could not be provided.

Changing buses between services during the day on the A8 and A71 corridors and the city services, which were reasonably frequent, was not considered to be greatly onerous, but doing so at evening or Sunday visiting times, when frequencies could be hourly, would be difficult; and

- In terms of limited disabled and buggy access, the vast majority of buses on the A8 and A71 corridors were low floor, and raised kerbs at bus stops continued to be introduced. Dial-a-Ride and Taxicard services were available to those people who had difficulty using buses, although at a cost to the user. The elderly and disabled did however get free bus travel.

The Director of Facilities highlighted that it would be important to ascertain the expected demand on public transport, were there to be further activity dealt with at SJH through any rezoning of emergency admissions.

Councillor Beurskens considered that in order to take this matter forward properly it would be necessary to identify whether it fell within the remit of the Rezoning Sub-Group, which was led by the Medical Director, or this Group. He was keen that this needed to be clear for governance reasons.

Councillor Beurskens questioned why absolute resolution of issues identified by patients and members of Public Involvement engagement workshops was necessary before rezoning could proceed. He was minded that the main recommendation in the report considered by the Lothian NHS Board on 28 November 2008 on the matter, appeared to be phrased in this way. He was of the opinion that a commitment to progressing the issues outlined should be adequate at this stage to allow NHS Lothian Board to decide when rezoning would take place.

Dr Winstanley advised that NHS Lothian were attempting to respect the comments made by patients and users in view of the difficulties which would be faced in using public transport to get from Edinburgh to SJH. He was minded that it seemed more within the gift of local authorities to make this easier by, for example, facilitating flexible routes and a solution to overcome the varying fares structures. He hoped that, as a minimum at this stage, an undertaking could be given by the local authorities in

question to seek to identify future issues and set out potential ways in which these could be addressed.

Dr Winstanley highlighted however that, as it stood, the likely increase in numbers of passengers using public transport were rezoning to proceed had not been calculated. He added that consequently the exact operational issues which may relate to any increase in usage could not be substantiated.

Councillor Glass indicated that in the future she would like to see more Edinburgh residents making use of the SJH to Edinburgh bus link which was contracted by the Council.

Following a question from Councillor Glass in relation to the refunding of travel expenses for those travelling outwith NHS Lothian for treatment, the Director of Facilities advised that the policy for 'out of area' travel differed from that of 'inter-area' travel and that subsidies for 'out of area' travel were covered by funds allocated for that purpose by the Scottish Government.

Dr Winstanley proposed that it might prove helpful if the local authorities concerned gave an undertaking to jointly evaluate public transport problems were the rezoning proposals to proceed, and what potentially could be done to address these problems going forward. This would effectively require an agreement to assess unmet public transport need were rezoning to proceed.

The Director of Facilities commented that he looked forward to meeting with the Council's Public Transport Manager on 21 July 2009 to discuss this proposal, and other public transport matters relating to the rezoning proposals, in further detail.

Councillor Beurskens reiterated the point that commencement of the rezoning proposals should not be predicated on the absolute solution of the issues raised through the public engagement workshops. He indicated that he supported working towards the resolution of these issues however he conceded that these were longstanding issues which could not be addressed quickly. He hoped that the rezoning proposals could be progressed and a timescale for implementation agreed by NHS Lothian Board without the caveat that these issues needed to be resolved in their entirety first.

The Director of Facilities was of the opinion that one major issue was the lack of interchangeability of tickets across operators and local authority boundaries.

The Senior Transportation Officer highlighted that such ticketing issues had always been a stumbling block when it came to bus services between West Lothian and Edinburgh. He advised that this was down to a commercial unwillingness on the part of operators and that the larger companies were reluctant to change from the current position. He continued to inform the Group that furthermore, over the last 12 months, a trend had emerged where many operators were even not willing to consider running services on routes deemed to be commercially viable. He was minded that continuing to engage the smaller operators to discuss opportunities presented by taking on certain routes and enhancements to other services would be key going forward.

The Senior Transportation Officer was further minded that were Lothian Buses to be persuading to consider bringing their operations back into West Lothian then this could open the potential to investigate new, flexible or enhanced routes between West Lothian and Edinburgh. The Chair however indicated that this outcome was unlikely

when considering recent discussions between the Council and Lothian Buses.

Bob Anderson supported the point made by the Senior Transportation Officer, as his experience of Lothian Buses operating between Midlothian and Edinburgh was a very positive one. He was minded that this was because of increased competition between the major bus companies, and that a similar scenario in West Lothian would have a great effect.

Bob Anderson also agreed with the point raised by Councillor Glass that more people needed to make use of the existing SJH to Edinburgh service. He suggested that the publicity for the service should be revamped from the perspective of travel to Edinburgh and from Edinburgh.

Councillor Glass also suggested that any future publicity could also include details of other services which could connect to the route.

The Director of Facilities indicated that a key element was to ensure that the public, and specifically patients, were given a choice of what travel options were available.

Dr Winstanley suggested that there may be merit in the Council's transportation officers raising the matter of an anticipated rise in numbers of people presenting at SJH due to the development of the Short Stay Elective Surgery Centre (SSESC), during any future discussions held with the smaller bus operators. The Senior Transportation Officer indicated that this point would be worth exploring with all operators.

The Senior Transportation Officer agreed that the revamping of publicity for the service and the reprinting of timetables was something that could be done.

The Chair was minded that were publicity to be revamped and timetables reprinted then copies needed to be made available for members of the public in places such as GP surgeries and libraries.

The Chair advised that the Council could reprint the timetables for circulation within in West Lothian and that discussions could also be held with colleagues in Edinburgh about how the information could be circulated there. He added that a feature on the service could be posted on the Council's website and in Bulletin which was distributed to every household in West Lothian.

The Chair asked whether Lothian NHS Board could take a decision for rezoning to go ahead even though the perfect public transport solution was not in place.

Dr Winstanley was of the opinion that a pragmatic approach was necessary. He was minded that, at the very least, West Edinburgh residents needed to be appeased that every effort would be made to identify and address unmet need by whatever means. He added that he accepted that the anticipated increase in the number of people travelling to SJH were rezoning to proceed was unquantifiable at this stage, however he expected that were the local authorities in question to be responsive to monitoring and evaluating unmet need and attempting to address this in the future, for example by giving a statement of intent, then this would go some way towards moving the issue forward.

The Chair was of the opinion that this would be an easy statement to make but would be difficult to deliver against the current backdrop of certain operators withdrawing services and public sector budget constraints. He advised that he did not envisage

that the Council would have any issue with evaluating and monitoring public transport usage in order to identify whether or not there were any gaps in service. He added that the difficulty however would be committing to fund any gap were it to be identified.

Dr Winstanley clarified that the Council was not being asked to make a commitment to funding any gap, were it to be found, but that Lothian NHS Board would need to be persuaded that the local authorities in question would monitor and evaluate public transport usage over time to gauge the extent of any difficulties and consider potential solutions to said difficulties if, or when, they arose. He highlighted that were the Council to make such an undertaking then this may move the rezoning proposals closer to implementation.

Bob Anderson indicated that he agreed with Dr Winstanley's comments.

The Senior Transportation Officer highlighted that there were good links between the senior transportation officers of each local authority in the region and accordingly it would not be a problem to set up a forum to discuss issues such as routes, other transport options and finance. He advised however that the key stumbling block at this time would be the issues relating to resources.

The Director of Facilities advised that were such meetings of senior transportation officers to take place to discuss these issues then he would be support the attendance of NHS Lothian officers, were they invited to attend.

Dr Winstanley was of the opinion that there would be considerable merit in the leaders of each local authority in the region collectively pressuring operators on the issue of hospital transport, and in particular, highlighting the revenue opportunities latent in running services to, from and between hospital buildings.

The Chair indicated that he would be glad to get actively involved in such an approach and indeed engage the other council leaders, once further information had emerged from the meeting between the Director of Facilities and the Public Transport Manager scheduled for 21 July 2009.

Decisions -

1. To note the briefing from the Public Transport Manager and the Group's discussion on the public transport issues relating to NHS Lothian's rezoning proposals;
2. To agree that the Group receive feedback from the meeting between the Director of Facilities and the Public Transport Manager scheduled for 21 July 2009;
3. To support the principle that more people should be encouraged to make use of the existing SJH to RIE / RIE to SJH service, as contracted by the Council;
4. To note that were the Council to undertake to monitor and evaluate public transport usage over time to gauge the extent of any difficulties, and consider potential solutions to said difficulties if, or when, they arose, then this may assist in persuading Lothian NHS Board to move the rezoning proposals closer to implementation; and

5. To support the principle that leaders of each local authority make efforts to apply collective pressure on bus operators on the issue of hospital transport, and in particular, to highlight the revenue opportunities latent in operating services to, from and between hospital buildings.

5. GROUP WORKPLAN

The Chair informed the Group that he had met with the Director of Public Health and Health Policy to discuss progress with the planning of the proposed work on assessing the health and healthcare needs of the West Lothian population. This work related to a number of items on the Group Workplan. He advised that the Director of Public Health and Health Policy had confirmed that the planning of the work was on track and would be reported to the October meeting of the Group, notwithstanding the priority currently being given to work on Swine Flu. He added that the Director of Public Health and Health Policy was looking forward to working closely with Council partners in the CHCP.

Councillor Beurskens recalled concerns raised by Theresa Douglas at previous meetings relating to governance issues and in particular that this Group did not encroach on or duplicate the remit of the CHCP.

Dr Winstanley informed the Group that a list of the all of the proposed work would be reported to the CHCP Board. He added that some of that work would relate to acute services at SJH with the findings being reported to this Group, and that some of the work would relate to buildings and services away from SJH and that fell within the remit of the CHCP. Decisions would be taken on any actions that required to be taken once the findings were available and had been assessed.

Decision -

To note the position.

6. AOCB

(a) Group Visits

Dr Winstanley suggested that a visit be arranged to the new Dental Suite at SJH. Maureen Anderson suggested that it may also be worthwhile attempting to arrange a visit to the new Endoscopy Suite. The Director of Facilities advised that he would liaise with the CHCP Director and the Clerk to progress these suggestions, were the Group in agreement.

Decision -

To agree that the Director of Facilities liaise with the CHCP Director and the Clerk to progress the arrangements for the suggested visits.

(b) Car Parking at St John's Hospital

The Chair was minded that there may be merit in exploring a park and ride facility for SJH, operating from the car park at Almondvale Stadium.

The Director of Facilities welcomed the suggestion as an option that merited further exploration. He advised that there were other issues relating to parking which also required to be overcome, such as traffic volumes, ticketing and finance, and highlighted that a number of potential options were currently being assessed prior to being discussed in more detail through NHS Lothian's governance structure.

The Chair undertook to provide the Director of Facilities with contact details for Gladedale (East Scotland) Ltd with whom discussions about the potential for a park and ride facility to operate from Almondvale Stadium could be progressed. He also indicated that the Council would be willing to assist with any of the issues relating to parking, where it was reasonably practicable to do so.

Decision -

To note the position.

(c) Short Stay Elective Surgery Centre – Communications Plan

Councillor Glass questioned when information about the Short Stay Elective Surgery Centre Communications Plan would be forthcoming.

The Chair advised that, as he understood it, information regarding the Communications Plan would be made available to the Group in the near future.

Decision -

To note the position.