

## Health and Care Overview and Scrutiny Committee

Monday 7 June 2021

**10:00**

Council Chamber, County Buildings, Stafford

**NB.** The meeting will be webcast live which can be viewed here -

<https://staffordshire.public-i.tv/core/portal/home>

John Tradewell  
Director of Corporate Services  
28 May 2021

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### A G E N D A

#### PART ONE

1. **Apologies**
2. **Declarations of Interest**
3. **Minutes of the last meeting held on 16 March 2021** (Pages 1 - 8)
4. **Health Scrutiny Arrangements in Staffordshire**  
Presentation by the Scrutiny and Support Manager
5. **Work Programme Planning 2021/22** (Pages 9 - 32)  
Report of the Scrutiny and Support Officer and Presentation at the meeting
6. **Covid-19 Vaccine Programme Update** (Pages 33 - 36)  
Report of the Clinical Commissioning Group (CCG)
7. **District and Borough Health Scrutiny Activity** (Pages 37 - 40)  
Reports/or reports of District and Borough Representatives
8. **Exclusion of the Public**

The Chairman to move:-

That the public be excluded from the meeting for the following items of business which involve the likely disclosure of exempt information as defined in the paragraphs Part 1 of Schedule 12A Local Government Act 1972 (as amended) indicated below.

## **Membership**

Jak Abrahams	Jill Hood
Charlotte Atkins	Jill Hood
Philip Atkins, OBE	Barbara Hughes
Martyn Buttery	Thomas Jay
Adam Clarke	David Leytham
Rosemary Claymore	Paul Northcott (Vice-Chairman (Overview))
Richard Cox	Jeremy Pert (Chairman)
Ann Edgeller (Vice-Chairman (Scrutiny))	Janice Silvester-Hall
Keith Flunder	Ian Wilkes
Phil Hewitt	Ian Wilkes

### **Note for Members of the Press and Public**

#### **Filming of Meetings**

The Open (public) section of this meeting may be filmed for live or later broadcasting or other use, and, if you are at the meeting, you may be filmed, and are deemed to have agreed to being filmed and to the use of the recording for broadcast and/or other purposes.

#### **Recording by Press and Public**

Recording (including by the use of social media) by the Press and Public is permitted from the public seating area provided it does not, in the opinion of the chairman, disrupt the meeting.

**Scrutiny and Support Officer** : Deb Breedon Tel: (01785) 276061

## Minutes of Healthy Staffordshire Select Committee Meeting held on 16 March 2021

Present: Jeremy Pert (Chairman)

### Attendance

Charlotte Atkins (Vice-Chairman (Overview))	Jill Hood
Philip Atkins, OBE	Barbara Hughes
Joyce Bolton	Dave Jones
Tina Clements	David Leytham
Janet Eagland	Paul Northcott (Vice-Chairman)
Ann Edgeller	Kath Perry, MBE
Richard Ford	Bernard Peters
Maureen Freeman	Ross Ward

**Apologies:** Adam Clarke, Phil Hewitt and Ian Wilkes

### PART ONE

#### 53. Declarations of Interest

County and Borough Councillor Ann Edgeller declared interests in all matters included on the Agenda as they related to Midlands Partnership NHS Foundation Trust owing to her membership of the Trust's Council of Governors.

#### 54. Minutes of meeting held on 1 February 2021

**RESOLVED** – That, subject to the addition of “Marcus Warnes (Accountable Officer, Staffordshire and Stoke-on-Trent Clinical Commissioning Groups)” to the list of attendances in Minute No. 48, the minutes of the meeting held on 1 February 2021 be confirmed and signed by the Chairman.

#### 55. Covid-19 Vaccination Programme - Update

The Committee considered an oral report from Health updating them on implementation of the Covid-19 Vaccination Programme in the County (schedule 1 to the signed minutes).

The meeting was attended Dr. John Patrick Hannigan (Clinical Lead, Staffordshire Covid-19 Vaccination Programme), Marcus Warnes (Accountable Officer, Staffordshire Clinical Commissioning Groups) and Tracey Shewan (Director of Communications and Corporate Services, Staffordshire and Stoke-on-Trent Clinical Commissioning Groups).

Members were encouraged to learn that:- (i) according to data recently published by the Health Service Journal, Staffordshire Clinical Commissioning Groups had the highest

level of vaccination uptake in the over 65 year old age group in the Country; (ii) as of 16 March 2021 468,000 vaccine first doses and 38,000 second doses had been administered; (iii) all Care Homes residents in the County had been offered their first vaccine dose resulting in a 94% take-up rate; (iv) vaccinations were to be offered to homeless people in Staffordshire, as a priority, following recent initial roll-out in the Stoke-on-Trent City area; (v) Pop-up clinics aimed at maximising take-up in Black and Minority Ethnic (BAME) communities were also being implemented.

In response to a question from the Chairman, the Clinical Lead confirmed that supplies of vaccines in were currently sufficient to meet demand and capacity to administer doses was adequate. He also referred to a low refusal rate amongst residents although there had been some hesitancy in certain communities and groups, an issue which was being addressed though publicity campaigns and targeted initiatives. In response to another question from a Member regarding speed of roll-out to residents in the various priority groups, the Clinical Lead said that the Vaccination Programme in Staffordshire was being implemented in line with guidance from the National Joint Committee on Vaccinations and Immunisations (JCVI) and overall performance to date was comparable with other areas in the West Midlands region. However, he acknowledged various factors which might have either distorted weekly figures or suggested variability in vaccination roll-out across the County. Therefore, he undertook to investigate the feasibility of providing Members with regular bulletins on progress so that they could provide re-assurance to their constituents, as necessary.

The Accountable Officer also re-assured the Committee that Staffordshire were one of the best performing systems in the Country for implementation of the Vaccination Programme and that supplies and capacity to administer doses were currently satisfactory.

Another Member raised a local issue regarding the availability of vaccination centres in the Loggerheads/Market Drayton cross border area. In response the Clinical Lead highlighted that all GP Practices in the County had chosen to participate in the implementation of the Vaccination Programme. However, he was aware this had not been the case in all neighbouring areas. He therefore undertook to investigate whether any delays in Staffordshire residents receiving their vaccinations arising from their registration with out of County practices could be addressed so that no-one was left behind. The Accountable Officer added that the national booking system which enabled patients not served by participating practices to book vaccination appointments on-line, had recently been augmented. Therefore, this service was available to those residents highlighted by the Member, if required.

The Chairman highlighted future Covid-19 Vaccination Programmes and the lessons to be learned from 2020/21. He suggested that this topic be included as a potential item for scrutiny in their Annual Work Programme for the 2021/22 Municipal Year. He then thanked the representatives of Health present for an interesting and informative report and paid tribute to all involved in the Programme for the considerable progress which had been achieved to date.

**RESOLVED** – (a) That the oral report be received and noted.

(b) That Health investigate how elected Members could be better informed of progress (including relevant statistics) in the Covid-19 Vaccination Programme and implement any improvements in communication, as necessary.

(c) That Health investigate any issues which might exist with the implementation of the Covid-19 Vaccination Programme in cross boundary communities (including those which had been highlighted in the Loggerheads/Market Drayton area) and report back to the Committee regarding any remedial measures required, as necessary.

(d) That 'Future Covid-19 Vaccination Programmes and lessons learned from 2020/21' be included in the list of possible items for scrutiny in their 2021/22 Annual Work Programme.

## **56. The Journey towards an Integrated Care System - Stakeholder Engagement**

The Committee considered a joint report and presentation of Staffordshire Clinical Commissioning Groups' Accountable Officer regarding the development of an Integrated Care System (ICS) in Staffordshire (schedule 2 to the signed minutes).

The meeting was attended by Simon Whitehouse (Director, Together We're Better); Anna Collins (Head of Communication and Engagement Staffordshire and Stoke on Trent Clinical Commissioning Groups (CCGs)) and; Dr. Alison Bradley (Clinical Chair, North Staffordshire CCG).

The NHS Long Term Plan (LTP), published in January 2019, set out how the organisation intended to respond to future pressures (financial, staffing and demographic etc) in the decade ahead whilst building on the positive achievements of the past in order to ensure continued improvements in patient care and health outcomes for the general population. In response to this Plan, Together We're Better (The Staffordshire Sustainability and Transformation Partnership (STP)) had developed a five-year Delivery Plan (FYDP) setting out their priorities and commitments going forward. In addition, the STP's Designation and Development Plan (D&DP) outlined how the Staffordshire and Stoke-on-Trent health and care system would continue to collaborate and strengthen partnership working in order to tackle the various challenges identified in the LTP and FYDP whilst continuing to respond to the Covid-19 pandemic.

In February 2021 the Secretary of State for Health and Social Care published a White Paper entitled, "Integration and Innovation: Working together to Improve Health and Social Care For All". The proposals sought to establish a statutory ICS in Staffordshire (and other areas) made up of an ICS NHS body and separate ICS Health and Care Partnership to bring together Partners from the NHS, Local Government and other sectors.

Having regard to the above-mentioned developments, the STP considered it necessary for the development of the ICS to seek to merge the six existing Staffordshire and Stoke-on-Trent CCGs into one strategic body. Accordingly, following a vote by all 147 Staffordshire General Practices which indicated 84% were in favour, it was agreed that the CCGs should merge. A request was made to NHS England and Improvement (NHSEI) who approved the merger in principal on 16 February 2021. However, whilst formal consultation was not required under the Local Authority Health Scrutiny Guidance

2014 the STP had agreed a detailed Communications and Engagement Plan setting out how key stakeholders were to be consulted and giving them the opportunity to comment. Subsequently, the six existing CCGs published, "Our journey to becoming a single strategic commissioning organisation" (copy appended to the report), on 22 February 2021 which, whilst not seeking stakeholder agreement to the merger, enabled them to have their say through an on-line survey.

It was anticipated that a formal application to merge would be made by the STP to NHSEI by 26 March 2021 and that an in-year merger would take place on 1 October 2021. However, this date had yet to be confirmed and the default position was that merger would be achieved by 1 April 2022.

During the full and wide-ranging discussion which ensued, the Committee emphasised the need for the above-mentioned changes to achieve real improvements in healthcare provision for local residents and sought details of how this would happen. In response the representatives of health explained the importance of a holistic approach in achieving the best outcomes for patients through delivery of services at a local level. They also outlined the national funding arrangements to be adopted for ICSs contrasting them against the piecemeal approach which had previously existed. However, it was unclear at this stage whether any significant additional funding streams would be made available to the new ICSs.

Members stressed the importance of the accessibility of local facilities to patients and communities in Staffordshire without which the benefits of integrated working in health would be undermined. They also cited the negative effects of funding cuts. In response the representatives agreed that accessibility to services was key and that the development of the ICS would help maximise the effectiveness of every Pound spent. Discussion then turned to mental health and the STP vision which included, "Give mental health equal priority to physical health and wellbeing. They queried how this would be achieved through the new arrangements. In response the representatives cited the work of the Mental Health Programme Board which sought to develop services across the County. The single integrated commissioning body would promote further joined-up working through the removal of barriers and better co-ordination so that patient pathways could be improved.

In response to a question from a member Health explained that the proposed placed based Integrated Care Partnerships (ICPs) would cover the North Staffordshire (Newcastle-under-Lyme Borough, Staffordshire Moorlands District and Stoke-on-Trent City), South-East Staffordshire (Burton-on-Trent, Lichfield and Tamworth) and South-West Staffordshire (Stafford Borough, Cannock Chase District and South Staffordshire District) areas. However, the importance of cross boundary arrangements with Health Trusts outside Staffordshire were recognised and would be maintained through joint working with neighbouring systems. Guidance regarding senior managerial appointments to the ICS was expected in April 2021 and would include single Accountable Officer and Chief Executive posts.

The Committee also sought re-assurance regarding the processes in place for managing risk as referred to in, "Our journey to becoming a single strategic commissioning organisation". In response Health highlighted the CCGs Risk Assurance Framework and Risk Register which identified appropriate controls and mitigations.

However, whilst they acknowledged the many risks facing the NHS as a whole and the additional risks associated with the above-mentioned changes at this time, they were confident that merger would help management system-wide rather than promoting risk shunting between Partners. Management of financial risks and achieving efficiencies whilst improving patient outcomes was a top priority going forward.

In response to a question from the Chairman the representatives of Health explained that they hoped to retain some of the existing national funding formula for CCGs so that areas within the new ICS system were not disadvantaged by their merger with other areas currently in greater financial deficit than themselves. Continuing they said they were confident funding of the ICPs would reflect need and ensure each received their fair share of budgets available. However, they were fully aware of the underlying financial difficulties currently existing across the Staffordshire health economy.

The Chairman then thanked the representatives of Health present for an interesting and informative presentation and looked forward to further engagement with them during continued development of the Staffordshire ICS.

**RESOLVED** – (a) That the report be received and noted.

(b) That the decisions of the Staffordshire and Stoke-on-Trent Clinical Commissioning Groups' General Practices to support their merger into a single strategic commissioning body, be noted.

(c) That Health continue to engage with the Committee on the development of an Integrated Care System for Staffordshire, as necessary.

(d) That further scrutiny of health be undertaken at the appropriate time to ensure the adoption of an Integrated Care System for Staffordshire has led to tangible improvements in health care provision for residents across the County, as necessary.

## **57. Together We're Better - Digital Programme Update and Key Learnings from COVID-19 Pandemic**

The Committee considered a report of the Director, Together We're Better (Staffordshire and Stoke-on-Trent's Sustainability and Transformation Partnership) updating them on the roll-out of NHS's Digital Programme in Staffordshire and key learnings from the 2020/21 Covid-19 pandemic (schedule 3 to the signed minutes).

The meeting was attended by Stuart Lea (Chief Information Officer/Digital Programme Director, Together We're Better).

Members heard that the STP's Digital Strategy which focused on the priority areas of:- (i) Empower Patients; (ii) Digitised Care; (iii) Population Health Infrastructure and Service; (iv) Capability and Innovation and; (v) Invisible Boundaries had been given an 'interim' prioritisation following the outbreak of Covid-19 in May 2020. This was to enable the Digital Programme Board to focus on key priority areas including:- (i) Use of Virtual Consultations; (ii) Total Digital Triage; (iii) Infrastructure and End Use Devices; (iv) Reporting and Intelligence Tools to Support the Covid Response; (v) Implementation

of the Personal Record Application; (vi) Care Homes Digitisation and; (vii) Local Health and Care Record Connectivity.

However, to continue to support the Digital Strategy whilst supporting the response to the on-going health emergency, the Programme Board had recently agreed that their work programme for 2021/22 should focus on the following four priorities:- (i) Patient Facing Digital Services; (ii) Local Health and Care Records Connectivity and; (iii) Population Health Management and (iv) Integrated Care Planning. In addition, they agreed a further three areas in which partnerships should be developed and funding sought to support Digitally enabled transformation ie:- (i) Care Homes; (ii) Remote Monitoring and (iii) Digital Inclusion.

Members were updated on the progress made in the above-mentioned seven key priority areas and noted that the pandemic had accelerated the pace of change with regard to the use of digital technology by Health. They also noted the many valuable lessons which had been learned eg that stakeholders were more tolerant of change than had been thought although sustaining change long-term could be more challenging. However, owing to the extensiveness of the Board's focus for 2021/22, they decided that consideration of any further scrutiny required should be deferred until their Work Programme Planning Session for the 2021/22 Municipal Year.

The Chairman then thanked the representative of Health present for an interesting and informative presentation and looked forward to further engagement in respect of Digital during 2021/22, as required.

**RESOLVED** – (a) That the report be received and noted.

(b) That the NHS's Digital Programme in Staffordshire be included in the list of Suggested Items for scrutiny in their Work Programme for 2021/22 Municipal Year.

## **58. Care Homes for Older People: Implications of COVID for Council Strategy**

The Committee considered a report of the Cabinet Member for Health, Care and Wellbeing regarding the impact of Covid-19 on the County Council's strategy for provision of care homes for the elderly in Staffordshire (schedule 4 to the signed minutes).

The meeting was attended by Dr. Johnny McMahon (Cabinet Member for Health, Care and Wellbeing); Andrew Jepps (Assistant Director, Care Commissioning) and; Helen Trousdale (Lead Commissioner Older People & PDSI).

Prior to the pandemic the Authority had implemented various measures in order to support the development of the care home market, increase supply and ensure that the needs of older people could continue to be met at a cost-effective price. However, whilst the immediate impact of Covid-19 was now abating, long-term issues such as:- (i) the continued need for enhanced infection control measures; (ii) ongoing sporadic outbreaks of the virus; (iii) difficulties in recruitment and retention of care home staff and; (iv) lower bed occupancy rates, were expected to further increase costs and reduce the commercial viability of homes. Therefore, projections of future demand were to be



remodelled during Spring 2021 with a view to publishing a revised approach to influence the market later in the year.

In the discussion which ensued, Members sought clarification of various aspects of the Authority's existing commissioning arrangements including the effect of block booking on the market and Care Quality Commission's ratings for Staffordshire's Homes (35% of which were rated either 'Requires Improvement' or 'Inadequate'). They noted their intentions regarding the forthcoming review and undertook to give further scrutiny to the revised approach, at the appropriate time, with a view to ensuring necessary improvements in service provision were achieved.

The Chairman then thanked the Cabinet Member for his attendance at the meeting and looked forward to further engagement with him in respect of Care Homes for Older People and the County Council's strategy, following the above-mentioned review, at the appropriate time.

**RESOLVED** – (a) That the report be received and noted.

(b) That the County Council's future Strategy in respect of Care Homes for the Elderly be included in the list of Suggested Items for scrutiny in their Work Programme for 2021/22 Municipal Year.

#### **59. District/Borough Health Scrutiny Activity**

The Committee considered a report of the Scrutiny and Support Officer giving a summary of the health scrutiny activity which had been undertaken by Staffordshire District and Borough Council's under the standing joint working arrangements, since their previous meeting (schedule 5 to the signed minutes).

**RESOLVED** – That the report be received and noted.

#### **60. Work Programme 2020/21**

**RESOLVED** – (a) That their rolling Work Programme for 2020/21 (schedule 6 to the signed minutes) be received and noted.

(b) That the items not yet considered, as set out in the report, be included in their Work Programme for 2021/22 Municipal year under "Suggested Items" for scheduling at their next meeting, as appropriate.

#### **61. Date of Next Meeting - Monday 7 June 2021 at 10.00 am, Virtual/on-line**

**RESOLVED** – That their next meeting be held on Monday 7 June 2021, 10.00 am at a venue to be confirmed.

**Chairman**



<b>Local Members Interest</b>
N/A

## **Health and Care Overview & Scrutiny Committee – 7 June 2021**

### **Work Programme Planning 2021/22**

#### **Recommendation**

- a) That the Health and Care Overview & Scrutiny Committee consider and agree an initial list of priorities to form the basis of the work programme for 2021/22.

#### **Report of the Scrutiny and Support Officer**

#### **Summary**

The report and presentation will provide information and guidance for members to assist in the discussion and prioritisation of potential topics for inclusion in the Health and Care Overview and Scrutiny Committee work programme for 2021-22.

1. The Health and Care Overview and Scrutiny Committee are responsible for:
  - a. Scrutiny of matters relating to the planning, provision and operation of health services in the Authority's area, including public health, in accordance with regulations made under the Health and Social Care Act 2001 and subsequent guidance including the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013. In accordance with these Regulations the County Council has agreed for these regulations to be discharged through the designated Overview and Scrutiny Committee.
  - b. Scrutiny of the Council's work to achieve the Staffordshire priorities to:
    - Inspire healthy, independent living
    - Support more families and children to look after themselves, stay safe and well
2. In fulfilling their remit, the Committee may hold accountable the NHS bodies serving the county and, primarily, the Cabinet Member for Health, Care and Wellbeing.
3. In developing a work programme the Committee are encouraged to identify issues that are a current priorities for local people and communities and/or are a priorities for the NHS, the Council and their partners. If a matter is a recurring issue for the people you collectively as Councillors represent then the likelihood is that it is something the Committee should spend time on. The more relevant the issue is to local communities then the greater the likelihood of engaging those communities in the scrutiny process and of producing outcomes that will be visible to those communities. Members are encouraged to raise and discuss issues that should form the basis of the work programme and review these periodically throughout the year to ensure they remain relevant and will add value to what the NHS, the

Council and their partners are doing.

4. The arrangements for scrutiny of matters relating to the planning, provision and operation of health services in the Authority's area continue to include the eight Staffordshire District and Borough Councils, with work programme planning being the mechanism for delegated scrutiny. Therefore, the Committee also have a role to advise on the choice of topics for health scrutiny across the County..
5. The Health and Care Overview and Scrutiny Committee are made up of elected County Councillors and one Councillor from each District or Borough Council. In turn, one County Councillor from the Committee sits on each District or Borough Council overview and scrutiny committee dealing with health scrutiny.
6. The Health and Care Overview and Scrutiny Committee concentrates on scrutinising health matters that concern the whole or large parts of the County. The District and Borough Council committees focus on scrutinising health matters of local concern within their area.

## Report

### Remit of the Health and Care Overview & Scrutiny Committee

At the meeting members will receive presentations on the health scrutiny arrangements operating in Staffordshire and the work programme planning process.

This report provides background information and detail of the remit and of the Health and Care Overview and Scrutiny Committee, working practices that you may wish to adopt when planning how to carry out the scrutiny. For your reference : Appendix 1 provides a draft work programme for 2021-22 which will be populated at the meeting. Appendix 2 to the report provides a summary of matters considered in 2020-21.

7. The NHS Constitution states that “the NHS belongs to the people. It is there to improve our health and wellbeing, supporting us to keep mentally and physically well, to get better when we are ill and, when we cannot fully recover, to stay as well as we can to the end of our lives. It works at the limits of science – bringing the highest levels of human knowledge and skill to save lives and improve health. It touches our lives at times of basic human need, when care and compassion are what matter most.” The Committee have a key role in providing a constructive challenge to the delivery of these outcomes for people in Staffordshire by the NHS - with the County Council and their partners.
8. The scrutiny structures have been designed to ensure effective accountability for the delivery against the Council’s key outcomes as set out in Staffordshire County Council’s Strategic Plan 2018-22. The Health and Care Overview and Scrutiny Committee are responsible for holding to account the Cabinet Member for Health and Care. The Health and Care Overview and Scrutiny Committee have the power to make reports and recommendations to NHS bodies conferred by the Health and Social Care Act 2001. The Committee may, within the scope of its allocated roles and responsibilities, respond independently to health related consultations from Government and external agencies.

9. The Committee will take the lead in scrutinising the work of the Health and Wellbeing Board and will develop a working relationship to enable this to be undertaken effectively.
10. In recognition that many District/Borough Council functions have an impact on health and wellbeing, the County Council have operated health scrutiny arrangements that include the District/Borough Councils in the county. Set out in the Code of Joint Working, the arrangements provide additional capacity (subject to effective work programme planning, co-ordination and delivery) to carry out work that leads to recommendations for improving access to and the quality of services to reduce inequalities in health and wellbeing for people and communities in Staffordshire.
11. Whilst scrutiny cannot investigate individual complaints, it is there to challenge the NHS, the Council and their partners about increasing patient/service user and public involvement in the assessment and improvement of the quality of services. Scrutiny can contribute by investigating trends in community concerns, whether these are drawn from complaints data, councillor casework or identified local priorities.
12. In discharging their functions, the Committee have the power to make reports and recommendations to NHS bodies and the Council. They may respond independently to health related consultations.

### **Developing the Work Programme**

13. This meeting is an opportunity for the Committee to begin to identify and prioritise what they wish to scrutinise during the current municipal year and beyond. The Cabinet Member for Health and Care, the Director of Health and Care and Health partners will be in attendance to provide a summary of service priorities and challenges for Health and Care in Staffordshire.
14. Whilst Members are encouraged not to be overly scientific in choosing topics for scrutiny, the Code of Joint Working includes criteria to help you choose topics for the work programme where you are most likely to make a difference. In preparing for the meeting, Members are encouraged to reflect on trends in issues that fall within the remit of the Committee. Scrutiny is one opportunity to investigate issues of local concern that cut across the County. If there is a growing concern for local communities then it is more likely that any scrutiny will be able to engage those communities and result in outcomes that will be visible to them.
15. When agreeing matters for your work programme you are encouraged to ask the following questions:
  - a) Is the matter of particular concern to local people? You may wish to reflect on topics raised with you when canvassing.
  - b) Is the issue an identified priority for the County Council or their partners?
  - c) Does the issue relate to an area of service with a trend in weak performance? For example, has this issue been identified by external auditors or inspectors?
  - d) What difference could scrutiny make?
  - e) What would happen if you did not look at this issue?

16. District and Borough Council committees dealing with health scrutiny will also have their own views on what they wish to scrutinise. The co-ordination of scrutiny activity is important in regard to assuring the quality of scrutiny activity and making the best use of resources.
17. Once this Committee have their initial list of priorities, there will need to be liaison with the District and Borough Committees, in particular to agree how to deal with any matters of common interest.

### **Matters from Last Year's Work Programme**

18. There may be matters arising in 2020-21 municipal year that the Committee might wish to consider including in their 2021-22 Work Programme. A record of matters considered last year are attached at Appendix 2 for your information.
- 19 Detailed below are issues which have been highlighted as potential items of work for the Committee to consider on the draft work programme, both continuing items which have been commenced and new items which have been supported but not commenced.
  1. The Role of Community Hospitals within the Wider Health Economy (CCGs, MPFT, D&BUHFT)
  2. Information sharing between CCGs and Education (CCGs and SCC)
  3. 'Long' Covid-19 - Reponse by Health (CCGs and Accute Hospital Trusts)
  4. Health Dashboard (CCGs and Accute Hospital Trusts)
  5. Workforce Planning (Accute Hospital Trusts)
  6. Difficult Decisions (excluding Hearing Aids following CCG's decision to extend service) (CCGs)
  7. SCC Mental Health Strategy (SCC)
  8. George Bryan Centre, Lichfield (MPFT)
  9. Post Pandemic System Restoration and Recovery (CCGs)
  10. ICS and Urgent Care configuration engagement (CCGs/ICS)
  11. Wider Determinants of Health – Inquiry Day (CCGs and SCC).
  12. Staffordshire Healthwatch Annual Report and Contract (Healthwatch and SCC)
  13. Covid-19 Annual Vaccination Programme (CCGs)
  14. Going Digital in Health (CCGs)
  15. Care Homes – Future Strategy and Key Issues including Future Demand (SCC)

### **Matters arising on Forward Plan of Key Decisions**

20. Key decisions to be taken by Cabinet are published monthly and follow this link : [Browse plans - Cabinet, 2021 - Staffordshire County Council](#) . Carrying our pre-decision scrutiny of a matter enables scrutiny to challenge and comment on decisions. The Forward Plan is available for Committee to view when considering its work programme.

## **Recurring Work Programme Items**

21. Certain matters are regularly considered by the Committee in order to maintain overview of longer term issues, including updates from District and Borough Councils.

## **Training and development**

22. Member and Democratic Services has delivered induction sessions on an Introduction to Overview and Scrutiny on 25 and 27 May 2021. Further training and development sessions will be run for Members as required. Members are invited to make any suggestions for development to the Chair or the Scrutiny and Support Manager.

## **Method of Scrutiny**

23. Once Members have identified the matters they wish to scrutinise, consideration needs to be given to the most appropriate timing and method of scrutiny for that issue (proposals for some items may be provided). Members may wish to:
  - a) consider an item at a single meeting
  - b) consider an item over a series of meetings
  - c) allocate the work to a small group of Members to look at over a period of 2-3 months and feed back to the Committee
  - d) undertake an inquiry day.
24. The choice of method will depend in part on the scope of the matter, capacity and the opportunity for locality working and community engagement in the review.
25. Members may consider that focus on a single issue in a meeting or small task group enables a deeper look at what and why there is a problem, this often provides clearer and deliverable recommendations to inform decision makers, shape policy and improve services for residents.
26. A scoping report will be produced for new items Members wish to consider. This will contain links to background research, the issues and reason for scrutiny questions and aims of the scrutiny work and it will assist Members in decide how to take the proposal to scrutinise forward.
27. Members can request more information on a subject to assist them in deciding whether or not additional scrutiny is required. A Briefing Note is requested and circulated to Members in advance of the meeting and then Members are asked if they consider additional scrutiny is required.

## **Reviewing the Work Programme**

28. There will be an opportunity to review the Work Programme at every Committee meeting. Members are encouraged to raise issues at any point during the year and this can be done by:
  - a) talking to the Chairman/Vice Chairmen and Scrutiny and Support Team
  - b) raising items under the 'Work Programme' item on the meeting Agenda

29. In developing a Work Programme Members should agree potential work items for the municipal year. It is important to plan items in more detail for the next two to three meetings. Time needs to be allowed for officers to prepare reports and for the Cabinet Member(s), officers and witnesses to diary their attendance at meetings. It is possible that new issues may arise that need to be given priority and therefore it is advisable to review the work programme quarterly. This way the Committee will be better able to respond to community concerns as and when they arise.

### **Link to Strategic Plan**

30. The remits of the Council's Overview and Scrutiny Committees link to the strategic priorities set out in the County Council Strategic Plan 2018-22. Work Programmes should link to community priorities or strategic outcomes if they are to deliver noticeable outcomes for local communities and the organisation.

### **Link to Other Overview and Scrutiny Activity**

31. Overview and Scrutiny Committees are encouraged to identify whether any of the issues for their Work Programmes are 'cross cutting' and would benefit from joint working.

### **Equalities and Legal Implications**

32. The County Council have a responsibility to undertake adequate Equality Impact Assessments to ensure services do not have a negative impact on any one section of the community and the scrutiny committees have a role in ensuring that this responsibility is fulfilled, particularly in regard to health impact. Scrutiny as a function must also comply with the relevant legislation. When considering Work Programme items, especially when undertaking reviews of policy, committees must always consider whether their recommendations may impact differently on various individuals / sections of the community.
33. Overview and Scrutiny Committees will be updated as necessary on any matters affecting their operation that relate to legislation, regulations, and the County Council's Constitution.

### **Resource and Value for Money Implications**

34. Work Programmes which are effectively prioritised will ensure that scrutiny activity is focused where it can be of greatest benefit.

### **Risk Implications**

35. The key aspects of risk management in regard to scrutiny Work Programmes are:
- a) ensuring that there are clear outcomes from the scrutiny process that impact positively upon the people and communities of Staffordshire and link to corporate priorities; and
  - b) that there is adequate capacity for the Overview and Scrutiny Committees to complete the work that has been agreed.



## **Climate Change Implications**

36. The Committee will need to consider the implications for climate change of any recommendations it makes in relation to those issues included on the work programme. The Committee should also consider the implications of the scrutiny methods it decides to utilise – for example, travelling for best practice visits.

### **Contact Officer**

**Name:** Deb Breedon, Scrutiny and Support Officer

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### **Appendices/Background papers**

Appendix 1 – Draft Work Programme

Appendix 2 - 2020/2021 Healthy Staffordshire Select Committee Work Programme



## Health and Care Overview and Scrutiny Committee

Committee Meetings, Reviews and Consultations			
Date	Topic	Background/Outcomes	
		Background	Outcomes from Meeting
Monday 7 June 2021 at 10.00 am			
Monday 5 July 2021 at 10.00 am			
Monday 9 August 2021 at 10.00 am			
Monday 13 September 2021 at 10.00 am			
Monday 25 October 2021 at 10.00 am			
Monday 29 November 2021 at 10.00 am			
Monday 31 January 2022 at 10.00 am			
Tuesday 15 March 2022 at 10.00 am			
Tuesday 19 April 2022 at 10.00 am			

Suggested Items	Background	Possible Option
The Role of Community Hospitals within the Wider Health Economy (CCGs, MPFT, D&BUHFT)		
Information sharing between CCGs and Education (CCGs and SCC)	Referral from Education Scrutiny Committee 'Closing the Gap Scrutiny Review'.	
'Long' Covid-19 - Reponse by Health (CCGs and Accute Hospital Trusts)	Agreed at Committee meeting on 14 September 2020	
Health Dashboard (CCGs and Accute Hospital Trusts)	Requested by Chairman at Committee meeting on 14 September 2020	July 2021 (indicative)
Workforce Planning (Accute Hospital Trusts)	Requested by Chairman at Committee meeting on 26 October 2020	

**Health and Care Overview and Scrutiny Committee**

Difficult Decisions (excluding Hearing Aids following CCG's decision to extend service) (CCGs)	Requested at Committee meeting on 14 September 2020.	
SCC Mental Health Strategy (SCC)	Requested by Richard Deacon 21 October 2020	June 2021 (indicative)
George Bryan Centre, Lichfield (MPFT)	Requested by Chairman at local meeting on 9 March 2021	
Post Pandemic System Restoration and Recovery (CCGs)	Requested by Chairman at informal meeting with Health on 4 March 2021	July 2021 (indicative)
ICS and Urgent Care configuration engagement (CCGs/ICS)	Requested by Chairman in correspondence with CCGs Accountable Officer 5 March 2021	June 2021 (indicative)
Wider Determinants of Health – Inquiry Day (CCGs and SCC).	Requested at pre-Agenda preview on 28 August 2020	
Staffordshire Healthwatch Annual Report and Contract (Healthwatch and SCC)	Requested at meeting on 16 March 2021	
Covid-19 Annual Vaccination Programme (CCGs)	Requested at meeting on 16 March 2021	
Going Digital in Health (CCGs)	Requested at meeting on 16 March 2021	
Care Homes – Future Strategy and Key Issues including Future Demand (SCC)	Requested at meeting on 16 March 2021	

<b>Chairman's Activity</b>	<b>Date</b>	<b>Issues for Committee</b>
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## Health and Care Overview and Scrutiny Committee

## Membership

Jeremy Pert                    Chairman)  
 Paul Northcott            (Vice-Chairman - Overview)  
 Ann Edgeller                (Vice-Chairman – Scrutiny)

Jak Abrahams  
 Charlotte Atkins  
 Philip Atkins  
 Richard Cox  
 Keith Flunder  
 Thomas Jay  
 Phil Hewitt  
 Jill Hood  
 Janice Silvester-Hall  
 Ian Wilkes

## Borough/District Councillors

Jill Hood                    (Stafford)  
 Martyn Buttery            (Cannock)  
 Richard Ford              (Tamworth)  
 Barbara Hughes          (Staffordshire Moorlands)  
 Adam Clarke              (East Staffordshire) (TBC 28.06.2021)  
 Joyce Bolton              (South Staffordshire)  
 David Leytham            (Lichfield)  
 Ian Wilkes                 (Newcastle-under-Lyme)

## Calendar of Committee Meetings

at County Buildings, Martin Street, Stafford. ST16 2LH  
 (at 10.00 am unless otherwise stated)

Monday 7 June 2021 at 10.00 am;  
 Monday 5 July 2021 at 10.00 am;  
 Monday 9 August 2021 at 10.00 am;  
 Monday 13 September 2021 at 10.00 am;  
 Monday 25 October 2021 at 10.00 am;  
 Monday 29 November 2021 at 10.00 am;  
 Monday 31 January 2022 at 10.00 am;  
 Tuesday 15 March 2022 at 10.00 am;  
 Tuesday 19 April 2022 at 10.00 am.



Healthy Staffordshire Select Committee

Date	Topic	Background/Outcomes	
<b>Committee Meetings, Reviews and Consultations</b>			
		Background	Outcomes from Meeting
<b>15 April 2020 (additional meeting)</b>	Modernising Adult Social Care Programme. An update, containing an evaluation of the introduction of the service (SCC)		<b>Meeting cancelled</b>
<b>May/June 2020 TBC (Informal Meeting)</b>	Staffordshire Health and Care Green Paper - Informal Workshop		
<b>Scrutiny Review (Public session July 2020 TBA)</b>	Urgent Care and Delayed Transfers of Car.	Item raised at Triangulation meeting.	<b>Currently on-hold</b>
<b>8 June 2020</b>	Community First Responders – Reconfiguration by West Midlands Ambulance Service University NHS Foundation Trust		<p><b>RESOLVED</b> – (a) That the report/presentation be received and noted.</p> <p>(b) That the impact of the above-mentioned changes on the Trusts' performance metrics be monitored closely and that further scrutiny of the Trusts' operations be undertaken at the appropriate time, as necessary.</p> <p><i>Members scrutinised and held West Midlands Ambulance Service University NHS Foundation Trust to account over their recent decision to make changes to (i) the vehicles used by Community First Responders (CFRs); (ii) range of drugs routinely carried by CFRs and; (iii) the training received, and qualifications attained by CRFs. In addition, they learned of the Trust's expectations for the future of the CFR initiative having regard to these changes and the impact on service delivery to the residents of Staffordshire.</i></p> <p><i>Whilst the Trust were unable to re-visit their decisions, they acknowledged the Committee's criticisms regarding the limited consultation and communication with local communities undertaken prior to implementation of the new arrangements. They therefore undertook to ensure that such measures on future service reconfigurations were robust, meaningful and took account of local concerns. In addition, the</i></p>

Healthy Staffordshire Select Committee

			Trust gave the Committee assurances regarding the future of the CFR service in general and the contribution they foresaw it would make to the continued provision of an Outstanding service to the residents of the County.
6 July 2020	(i) <del>Staffordshire Healthwatch Contract Update (SCC)</del>		
	(ii) <del>CCG – Financial Exception Report (CCGs)</del>	Requested at Committee meeting on 16 September 2019 .	
	(i) Mental Health Burden and 2020 Covid-19 Pandemic in Staffordshire (Mental Health Trusts)	Requested following Committee meeting on 8 June 2020.	<p><b>RESOLVED</b> - (a) That the reports/presentations be received and noted.</p> <p>(b) That the contact details of Midlands Partnership NHS Foundation and North Staffordshire Combined Health Care NHS Trusts' 24/7 emergency mental health helpline (to be supplied) be circulated to (i) Members of the Committee; (ii) all Staffordshire County Councillors and (iii) Leaders of all Staffordshire District/Borough Council's for dissemination, as appropriate.</p> <p>(c) That the Chairman highlights the importance of improving links between NHS mental health service providers and schools having regard to the 2020 Covid-19 Pandemic, with Staffordshire County Council's Cabinet Members for Learning and Employability and; Children and Young People, as necessary</p> <p>(d) That the mental health burden arising from the 2020 Covid-19 Pandemic in Staffordshire be monitored closely and that further scrutiny of mental health service providers be undertaken at the appropriate time, as necessary.</p> <p>They received a joint presentation/report from (i) the Director of Health and Care; (ii) Chief Executive of Midlands Partnership NHS Foundation Trust and; (iii) Chief Executive Officer North Staffordshire Combined Healthcare NHS Trust regarding the mental health burden arising from the 2020 Covid-19 Pandemic in Staffordshire.</p> <p>Members scrutinised and held the Trusts to account over the various measures they had implemented to deal with the effects of the Pandemic including:- (i) service changes to comply with social distancing guidelines; (ii) forward planning for a potential increase in demand; (iii) ensuring access to services by existing patients were maintained and; (iii) their efforts to reach residents in high risk groups who were not already known to providers. With regard to the County Council's Public Health responsibilities, they heard that whilst the longer-term effects of the pandemic were not yet known, actions to improve mental health in the wider population would require a sustained system-wide, multi-agency approach lasting many years.</p> <p>In response to the above, the Committee identified certain immediate actions aimed at improving access to services in the County.</p> <p><b>RESOLVED</b> - (a) That the presentation/report be received and noted.</p> <p>(b) That the impact of the 2020 Covid-19 Pandemic on Care Homes in Staffordshire be monitored closely and that further scrutiny of relevant commissioners be undertaken at the appropriate time, as necessary.</p> <p>They received a presentation/report from the Deputy Leader and Cabinet Member for Health, Care and Wellbeing regarding Residential Care Provision and the 2020 Covid-19 Pandemic in Staffordshire.</p>
(ii) Residential Care Provision and 2020 Covid-19 Pandemic in Staffordshire (SCC)			



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			<p>Members learned that whilst approximately 50 % of Care Homes in the County had recorded at least one case of the virus (amongst residents and staff), all Homes had been affected to a degree (i) operationally; (ii) clinically and/or; (iii) financially. However, in line with Central Government requirements, the County Council had implemented a Care Homes Support Plan to provide (i) Advice and guidance; (ii) training in infection control; (iii) supplies of Personal Protective Equipment; (iv) surveillance and response to cases and outbreaks; (v) Clinical support; (vi) testing; (vii) intensive support with staffing where required; (viii) arrangements to reduce the movement of staff and; (ix) additional funding. They were pleased to note that the plan had helped to alleviate the position in respect of the above-mentioned areas but agreed to keep Staffordshire's response to the Pandemic under review as the situation both nationally and locally developed.</p>
<p>10 August 2020</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 23</p>	<p>Backlog of hospital appointments as a result of Covid-19 (Acute Trusts, CCGs).</p>	<p>Requested at pre-Agenda preview on 26 June 2020.</p>	<p><b>RESOLVED</b> – (a) That the presentation/report be received and noted.</p> <p>(b) That the impact of the 2020 Covid-19 Pandemic on the backlog of hospital appointments be monitored closely and that further scrutiny of health Partners be undertaken at the appropriate time, as necessary.</p> <p>The Committee received a joint presentation/report from (i) Staffordshire Clinical Commissioning Groups (CCG); (ii) University Hospitals of North Midlands NHS Trust; (iii) School Aged Immunisation Service (SAIS); (iv) University Hospitals of Derby and Burton NHS Foundation Trust and; (v) Royal Wolverhampton NHS Trust regarding the backlog of hospital appointments arising from the Covid-19 pandemic.</p> <p>Members were provided with detailed statistical and graphical information relating to:- (i) Capacity; (ii) performance against the NHS Two Week Cancer Wait Target; (iii) progress in reducing the 62 and 104 Days Cancer Pathways backlogs; (iv) Cancer Endoscopy Waits; (v) progress with regard to the implementation of various Cancer Screening Programmes; (vi) Follow-up Appointments; (vii) Routine Surgery Referral to Treatment Pathway Waiting Lists; (viii) Accident and Emergency Unplanned Pathways and; (ix) Inpatient and Outpatient Activity etc.</p> <p>Members scrutinised and held the CCGs, Trusts and SAIS to account over their performance asking questions and seeking clarification where necessary. They learned that whilst the Pandemic initially had a significant impact on the NHS, many of those services which had been halted, were now in the process of being restored. Other services such as routine GP appointments had adapted/been managed remotely during the crisis in order to comply with social distancing guidelines. In addition, they were pleased to note that Staffordshire NHS Trusts/CCGs had robust plans in place for the recovery period until March 2021 and had refreshed their long-term Plans to take account of the significant change in circumstances which had occurred including identification of future risks and challenges and appropriate measures to mitigate their impact. Also, the joint working which had taken place in Health was noted and welcomed.</p> <p>The Committee went on to make various suggestions as to how the recovery phase could be improved for the benefit of residents in the County and undertook to keep the developing situation with regard to Covid-19 under close scrutiny, as necessary.</p>
<p>14 September 2020</p>	<p>(i) Winter Plans (Acute Trusts, CCGs, SCC).</p>	<p>Requested at pre-Agenda preview on 26 June 2020.</p>	<p><b>RESOLVED</b> – (a) That the report/presentation be noted.</p> <p>(b) That the impact of the 2020 Covid-19 Pandemic on the implementation of NHS Winter Plans be closely monitored and any further scrutiny be undertaken at the appropriate time, as necessary.</p> <p>The Committee received a joint presentation/report from (i) Staffordshire Clinical Commissioning Groups (CCGs); (ii) University Hospitals of North Midlands NHS Trust; (iii) University Hospitals of Derby and Burton NHS Foundation Trust and; (iv) Royal Wolverhampton NHS Trust and (v) County Council regarding the impact of the 2020 Covid-19 Pandemic and their Winter Plans for the 2020/21 season.</p>

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<p>Page 24</p>	<p>(ii) Hearing Aids (CCGs)</p>	<p>Members were provided with a PowerPoint presentation, in advance of the meeting, setting out detailed information on Health and Care’s Winter Plans including:- (i) Phase Three National Restoration and Recovery Priorities; (ii) Restoration and Recovery: Waiting Lists Update; (iii) Assumptions this Winter informed by data relating to Accident and Emergency Attendances, Primary Care Appointments, NHS 111 Analysis; (iv) Areas of Focus; (v) Mental Health; (vi) Planning for Covid-19 Surges; (vii) Communications and Engagement; (viii) Risks and Mitigations; (viii) National Discharge Service: Policy and operating Model; (ix) Discharge Pathways – System Success; (x) additional submitted Trust specific information.</p> <p>Following a brief oral instruction from Staffordshire CCGs Accountable Officer, Members scrutinised and held the Trusts/organisations to account over the scope, timeliness and details of their Plans, asking questions and seeking clarification where necessary. They were encouraged by the extent of the preparations which had been made notwithstanding existing system pressures during the year and continued uncertainty surrounding the course of the Pandemic. They learned that Health and Care’s focus would be to restore services previously stood down or curtailed whilst ensuring patients/service users remained safe. In addition, measures were being implemented to maintain capacity in primary and secondary care whilst endeavouring to manage demand by keeping people well through eg implementation of the extended national flu vaccination programme and preparing for a Covid-19 vaccine to become available. However, the Committee noted the various challenges which were likely to continue over the winter period, including recruitment of Doctors to General Practice, waiting times for certain elective procedures and the adverse effects of the outbreak on mental health in the general population. In response to requests for assistance, the Committee stated their willingness to work jointly with system Partners, particularly in area of communication and engagement, as necessary, for the benefit of residents in the County.</p> <p><b>RESOLVED</b> – (a) That the report be received and noted.</p> <p>(b) That details of cost savings/cost effectiveness of North Staffordshire Clinical Commissioning Group’s 2015 policy change relating to NHS hearing aid provision be shared with the Committee, as soon as possible.</p> <p>(c) That the results of the Staffordshire and Stoke-on-Trent Clinical Commissioning Group’s informal ‘Difficult Decisions’ consultation conducted in January to March 2020 be shared by with the Committee, as soon as possible.</p> <p>(d) That the Committee keep this matter under review and any further scrutiny of Staffordshire and Stoke-on-Trent Clinical Commissioning Groups’ policies in respect of NHS hearing aid provision be undertaken at the appropriate time, as necessary.</p> <p>The Committee received an update report from Staffordshire Clinical Commissioning Group’s (CCGs) Accountable Officer regarding NHS hearing aid provision in Staffordshire. This followed reconfiguration of the existing service for people with mild age-related hearing loss by North Staffordshire CCG and subsequent County-wide review by all CCGs following publication of the findings of a Cochran review in 2017 and change in guidance from The National Institute for Health and Care Excellence. Initial consultation and engagement with stakeholders regarding future hearing aid provision had taken place between January and March 2020 as part of the Difficult Decisions programme’s Listening Exercise. However, formal consultation had been postponed owing to the Covid-19 Pandemic and the need to support frontline services and adhere to social distancing requirements. Whilst the CCGs could not give an indication, at this stage, when the work would resume, they undertook to recommence it as soon as it was safe to do so.</p>
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			<p><i>In response to a request, the CCGs Accountable Officer undertook to share the information received during the above-mentioned listening exercise, together with details of cost savings achieved from the revised policy, with the Committee, in the interim.</i></p> <p><b>NB: Stakeholder Briefing received from Marcus Warnes 29 January 2021 stating that North Staffordshire CCG to extend hearing aid provision to include those with mild to moderate hearing loss thus removing previous decision from their forthcoming 'Difficult Decisions' consultation.</b></p>
13 October 2020	Invitation to attend meeting of Safe and Strong Select Committee for pre-decision scrutiny of Children's Transformation Plan		
26 October 2020	<p>(i) Learning Disability Services (Day and Respite Care) (SCC)</p> <p>(ii) Covid -19 Changes to Service Delivery (CCG)</p>	<p>Requested at pre-Agenda preview on 28 August 2020.</p> <p>Offered by CCG at meeting with Scrutiny</p>	<p><b>RESOLVED</b> – (a) That the report be received and noted.</p> <p>(b) That clarification of the increase in capital costs (as set out in the report) associated with developing the Scotch Orchard, Lichfield and Wilmot Drive, Newcastle under Lyme sites by the County Council into directly provided residential care facilities be provided to the Committee.</p> <p>(c) That an indication of the timescales envisaged by the County Council for developing the above-mentioned sites be provided to the Committee.</p> <p>(d) That confirmation of the Care Quality Commission's approval to the registration of new residential care facilities at the above-mentioned sites be provided to the Committee.</p> <p>The Committee considered a report of the Cabinet Member for Health, Care and Wellbeing (Staffordshire County Council) giving details of his forthcoming recommendations to Cabinet at their meeting on 18 November 2020 to review their decisions made in 2019 in respect of (i) transition of Greenfield House, Leek and Horinglow Bungalows, Burton-upon-Trent to the independent supported living market; (ii) capital investment for the relocation of directly provided residential care services currently situated at Hawthorne House, Lichfield to the Scotch Orchard site; (iii) capital investment for the relocation of the respite services currently provided at Douglas Road, Newcastle-under-Lyme to Wilmot Drive and; (iv) commissioning of residential replacement care services in Cannock Chase District and East Staffordshire Borough from the independent sector. This was to ensure that they remained appropriate in light of the 2020 Covid-19 pandemic.</p> <p>In addition, he informed them that following the suspension of a review of Specialist Day Care Opportunities in March 2020 owing to the above-mentioned outbreak, it was his intention to recommend Cabinet that the review be restarted, to include:- (i) the current building-based provision; (ii) alternative methods of supporting people in their own homes (eg Outreach and Virtual) which had been developed following the outbreak and need to comply with social distancing guidelines; (iii) staffing and; (iv) the exploration of a business case for development of a Single Integrated Service.</p> <p>In response to a request by the Cabinet Member for their views on the above-mentioned developments/proposals the Committee scrutinised the report, asking questions and seeking clarification where necessary. They expressed support for the changes to Learning Disability Services Directly Provided by the Authority. However, they expressed concern regarding increased costs of developing the Scotch Orchard and Wilmot Drive sites and requested the Cabinet Member provide them with additional information to also include an indication of timescales and confirmation that the Care Quality Commission had given their support to their dual use for Residential Replacement Care and Specialist Day Opportunities.</p> <p><b>RESOLVED</b> – (a) That the report/presentation be received and noted.</p> <p>(b) That the restoration and recovery of services by Health following the 2020 Covid-19 Pandemic be kept under review by the Committee and further scrutiny be undertaken at the appropriate time.</p>

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<p>Page 26</p>		<p>and Support Manager on 8 October 2020</p>	<p>(c) That Members notify the Scrutiny and Support Manager of problems relating to the availability of flu vaccinations in their areas by no later than Tuesday 27 October 2020, for forwarding to Clinical Commissioning Groups, as necessary.</p> <p>The Committee also considered a report and PowerPoint Presentation from Staffordshire Clinical Commissioning Groups' (CCGs) Accountable Officer updating them on the restoration and recovery of services following the 2020 Covid-19 Pandemic including:- (i) The Impact of the Virus; (ii) Staffordshire and Stoke-on-Trent Restoration and Recovery and Financial Plans; (iii) Key Risks and Challenges; (iv) Temporary Service Changes implemented following the outbreak; (v) Locally Driven Changes; (vi) Communications and Engagement; (vii) Next Steps and; (viii) Updates by specific service areas. Members then scrutinised and held the CCGs to account. In the full and wide-ranging discussion which ensued the Committee emphasised Health's statutory duty to consult on substantial variations in service provision, notwithstanding the implications of the pandemic. They were particularly concerned about the implementation of the extended Flu vaccination programme and any shortages of vaccine with might arise. However, they received assurances that current stocks of vaccine were adequate to meet the needs of Phases 1 (over 65-year olds) and 2 (over 50-year olds) in Staffordshire. However, they undertook to notify the CCGs of any difficulties which arose in this respect, in individual localities going forward. In addition, they encouraged Health to build on the lessons learned so far during the pandemic with regard to mental health services, virtual appointments and engagement with local communities and their representatives. They undertook to encourage local residents to present at GP surgeries in their divisions, as necessary and asked for benchmarking data relating to face to face and virtual appointments by practice so that areas of concern could be scrutinised further. They were re-assured that critical services such as cancer care had successfully been restored and went onto seek clarification of the status of various other local health facilities in the County which had been temporarily closed since the outbreak, highlighting the health inequalities which would have arisen as a result.</p>
<p><b>30 November 2020</b></p>	<p>(i) Community First Responders – Update from WMAS on progress following 8 June 2020 attendance and representatives from Association of Staffordshire Community First Responders</p>	<p>Requested at pre-Agenda preview on 28 August 2020</p>	<p><b>RESOLVED</b> – (a) That the reports/presentations be received and noted.</p> <p>(b) That further details of West Midlands Ambulance Service University NHS Foundation Trust's performance in respect of response times by area be provided to Members on request.</p> <p>(b) That the Trust consider:- (i) including Community First Responders (CFRs) in future Staff Satisfaction surveys and; (ii) reviewing the existing four mile radius from incident for deployment of CFRs following consultation with volunteers.</p> <p>(c) That the Staffordshire CFRs be thanked on behalf of the Committee for their valuable contribution to the work of the Trust in delivering essential health services to the residents of Staffordshire.</p> <p>(d) That further informal consultation and engagement meetings between Staffordshire CFRs and WMAS be brokered by the Committee, as required, in order to promote dialogue, co-operation and more effective working relationships between the parties.</p> <p>The Committee received a presentation/report from representatives of West Midlands Ambulance Service University NHS Foundation Trust updating them on the operation of the Community First Responders (CFR) Service in the County. This followed scrutiny of decisions taken by the Trust in April 2020 to make</p>

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<p>Page 27</p>	<p>(ii) Digital Exclusion (SCC)</p>	<p>Requested at pre-Agenda preview on 28 August 2020</p>	<p><i>changes to the:- (i) vehicles used by CFRs; (ii) range of drugs routinely carried by CFRs in their voluntary capacity and; (iii) training received, and qualifications attained by CRFs, at their meeting in June 2020.</i></p> <p><i>The meeting was also attended by representatives of Staffordshire CRFs who outlined the impact of the changes from their perspective.</i></p> <p><i>Members heard that whilst 37 CFRs had resigned since implementation of the above-mentioned changes, further applications had been received from prospective participants, 97 of which had been shortlisted. The Trust re-affirmed their commitment to the scheme which they said would continue to be an integral part of their service to Staffordshire residents. In addition, they highlighted their performance against national key indicators which had been maintained notwithstanding the changes and additional pressures arising from the 2020 Covid-19 Pandemic. However, they sought assistance from Members in providing evidence where service standards had been compromised as a result of the changes.</i></p> <p><i>The representatives of the Trust went on to re-assure the Committee of their willingness to improve dialogue with all stakeholders (including CFRs) and that the operation of the Scheme would be kept under review so that any further changes found to be necessary would be made in the interests of improving patient care.</i></p> <p><b>RESOLVED</b> – (a) <i>That the report/presentation be noted.</i></p> <p><i>(b) That further engagement with Members of the Committee be undertaken during the development of the County Council’s Digital Exclusion Action Plan having regard to their knowledge of issues in the health arena.</i></p> <p><i>The Committee gave scrutiny to the work of the Cabinet Member for Finance and Resources in tackling digital exclusion and promoting digital inclusion to health services by residents in Staffordshire. The County Council had compiled a digital Exclusion Action Plan containing practical measures to promote greater connectivity, accessibility, skills and communication for delivery during 2020/21 and 2021/22.</i></p> <p><i>Members highlighted the need for closer scrutiny of the various initiatives included in the draft Digital Exclusion Action Plan 2020/21 to ensure that they were fully aligned with the County Council’s aims and objectives. They also drew attention to changes announced in the Government’s Spending Review which might impact on the roll out of Broadband connectivity to those communities not currently served. The Committee recognised that connection speed and Broadband width were key to ensuring digital inclusion in the health and care. However, whilst both factors were not always within the County Council’s control, wider digital infrastructure requirements had been included in the Plan for co-ordination with Partners, as necessary. Members also expressed concern about the level of intergenerational support available for residents who were not currently IT savvy, during the 2020 Covid-19 pandemic. They recognised the valuable contribution that the younger generation could make in sharing skills and knowledge and looked forward to a time when schools could re-engage for the benefit of the wider community. These issues were acknowledged by the Cabinet Member for Finance and Resources who reassured them of his commitment to the on-going development of the Action Plan. In addition, an all Member virtual seminar would be held during the early part of 2021 in which they could contribute further having regard to their health remit. The Cabinet Member also spoke of the County Council’s participation in ‘NHS X’ which involved the trialling of mobile portals in residential care settings in order to support the digital transformation of care and reduction of social isolation.</i></p>
<p><b>1 February 2021</b></p>	<p>(i) Staffordshire Integrated Care System (CCG).</p>	<p>At the request of the Chairman on 9 January 2021</p>	<p><b>RESOLVED</b> – (a) <i>That the report be received and noted.</i></p> <p><i>(b) That the proposals for development of an Integrated Care System in Staffordshire be supported on the basis of ensuring better healthcare service provision in the County.</i></p>

Healthy Staffordshire Select Committee

<p>Page 28</p>	<p>(ii) Covid-19 Vaccinations Roll-out (CCG).</p>	<p>Ditto</p>	<p>(b) That further scrutiny of the development of an Integrated Care System be undertaken at the appropriate time, as necessary.</p> <p>(c) That the Chairman liaise with representatives of Health regarding a suitable provisional timeframe for further scrutiny.</p> <p>The Healthy Staffordshire Select Committee gave preliminary scrutiny to the development of an Integrated Care System (ICS) for Staffordshire. This followed publication of Together We're Better's (The Staffordshire Sustainability and Transformation Partnership) Staffordshire and Stoke-on-Trent ICS Designation and Development Plan in December 2020 which outlined how the health and care system was to collaborate and strengthen partnership working in order to tackle the various challenges set out in the NHS's Long Term Plan and their own Five Year Delivery Plan. Members learned of proposals to:- (i) reconfigure the County's current clinical commissioning arrangements into a single strategic unit and; (ii) develop Integrated Care Partnerships and sustainable Primary Care Networks. They agreed to give further scrutiny to the ICS as the measures contained in the Plan were developed and undertook to participate in the governance arrangements to support effective system working, as necessary.</p> <p><b>RESOLVED</b> – (a) That the report be received and noted.</p> <p>(b) That progress in the roll-out of the Covid-19 vaccination programme in Staffordshire be kept under close review.</p> <p>(c) That the Committee give any assistance to Health in achieving full implementation of the programme where possible and as appropriate.</p> <p>The Committee received an update on the implementation of the Covid-19 Vaccination Programme in the County. They were encouraged to learn that as of 28 January 2021:- (i) 143,301 vaccine doses had been administered; (ii) 86% of over-80s had received their first vaccine dose and; (iii) 99.9% of care homes have been visited by vaccination teams. They noted guidance issued by the national Joint Committee on Vaccination and Immunisations which stated that those most at risk were to be prioritised for medication and the expectation that the four cohorts identified within this group in Staffordshire were to have received their first doses by Mid-February 2021. However, they agreed to keep progress made in the roll out of the Programme under close review and give assistance to Health in achieving its full implementation, as necessary.</p>
<p>16 March 2021</p>	<p>(i) Care Homes - (a) Future Demand and; (b) Critical Issues.</p> <p>(ii) Digital Exclusion/Inclusion (CCG).</p> <p>(iii) Covid-19 Vaccination Roll-out – Update (CCG).</p> <p>(iv) CCG Reconfiguration – Public Consultation</p>	<p>At the request of the Chairman on 9 January 2021</p> <p>Requested at pre-Agenda preview on 28 August 2020</p> <p>Requested at meeting on 1 February 2021</p>	

**Healthy Staffordshire Select Committee**

		Agreed at Chairman's meeting with Health on 9 February 2021	
<b>2021 (date to be confirmed)</b>	Wider Determinants of Health – Inquiry Day (CCGs and SCC).	Requested at pre-Agenda preview on 28 August 2020	

<b>Suggested Items</b>	<b>Background</b>	<b>Possible Option</b>
Role of Community Hospitals	The Committee wish to explore the role of the Community Hospitals within the wider Health Economy	North of the County – Part of the consultation with the Joint Committee with Stoke on Trent South of the County – Part of the STP consultation
Consideration of the range of approaches to sharing information between PCTs (Now CCGs) and education.	Referral from the Education Scrutiny Committee Closing the Gap Scrutiny Review. Scrutiny and Support Manager to undertake further work and report to the Committee	
'Long' Covid-19 - Reponse by Health	Agreed at Committee meeting on 14 September 2020 to be scheduled into programme following discussion between Chairman and Vice-Chairmen	
Health Dashboard	Requested by Chairman at Committee meeting on 14 September 2020	March 2021 proposed.
Workforce Planning	Requested by Chairman at Committee meeting on 26 October 2020	
Difficult Decisions (excluding Hearing Aids following CCG's decision to extend service) (CCGs)	Requested at Committee meeting on 14 September 2020.	
SCC Mental Health Strategy (SCC)	Requested by Richard Deacon 21 October 2020	June 2021 (indicative)
George Bryan Centre, Lichfield (MPFT)	Requested by Chairman at local meeting on 9 March 2021	
Post Pandemic System Restoration and Recovery (CCGs)	Requested by Chairman at informal meeting with Health on 4 March 2021	July 2021 (indicative)
ICS and Urgent Care configuration engagement (CCGs/ICS)	Requested by Chairman in correspondence with CCGs Accountable Officer 5 March 2021	June 2021 (indicative)
ICS and Urgent Care configuration (CCGs/ICS)	Requested by Chairman in correspondence with CCG Accountable Officer 5 March 2021	

<b>Chairman's Activity</b>	<b>Date</b>	<b>Issues for Committee</b>
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**Healthy Staffordshire Select Committee**

Attendance at Outbreak Control Board Meetings	Various	
Meeting with Healthwatch Staffordshire	19 October 2020	
Covid-19 Update - Weekly meeting with Health	Various	
Meeting with LDC Member re Scrutiny of local issues	9 February 2021	
Attendance at SMDC Health Overview and Scrutiny Committee	3 March 2021	

**Membership**

Jeremy Pert                      Chairman)  
 Paul Northcott                (Vice-Chairman)  
 Charlotte Atkins                (Shadow Vice-Chairman)

Philip Atkins  
 Tina Clements  
 Janet Eagland  
 Ann Edgeller  
 Phil Hewitt  
 Dave Jones  
 Keith Perry  
 Jeremy Pert  
 Bernard Peters  
 Ross Ward

**Borough/District Councillors**

Ann Edgeller                      (Stafford)  
 Maureen Freeman              (Cannock)  
 Richard Ford                    (Tamworth)  
 Barbara Hughes                (Staffordshire Moorlands)  
 Adam Clarke                    (East Staffordshire)  
 Joyce Bolton                    (South Staffordshire)  
 David Leytham                  (Lichfield)  
 Ian Wilkes                        (Newcastle-under-Lyme)

**Calendar of Committee Meetings**

at County Buildings, Martin Street, Stafford. ST16 2LH  
 (at 10.00 am unless otherwise stated)

15 April 2020 (additional meeting) – Meeting Cancelled  
 8 June 2020  
 6 July 2020  
 10 August 2020  
 14 September 2020  
 26 October 2020  
 30 November 2020  
 1 February 2021  
 16 March 2021



**Healthy Staffordshire Select Committee**

**NB:** In considering their work programme for the year, Members are advised to have regard to the likelihood of referrals from Corporate Review Committee arising from the Covid-19 epidemic.



Local Members' Interest
N/A

## **Health and Care Overview and Scrutiny Committee June 7<sup>th</sup> 2021**

### **COVID-19 Vaccination Programme**

#### **1. Recommendation/s**

1.1 To consider the information provided and comment on the planned COVID-19 Vaccination Programme.

1.2 To consider the information and seek assurance on the delivery of the first vaccination to be offered to all eligible adults over 18 by the end of July 2021.

### **Report of Staffordshire and Stoke-on-Trent Sustainable Transformation Partnership (STP) Together We're Better System COVID-19 Vaccination Programme**

#### **Summary**

#### **2. What is the Scrutiny Committee being asked to do and why?**

2.1 To consider the information provided and comment on the COVID-19 Vaccination Programme.

2.2 To consider the information provided and comment on the next steps in delivery.

#### **Report**

#### **3. Background**

3.1 This is the biggest vaccination programme the NHS has ever undertaken. We want to start by thanking partners for the incredible response across the system to enable the rapid roll out of the COVID-19 vaccination programme. Whether this is security support, estates, logistics or volunteers the energy and enthusiasm has been phenomenal.

3.2 The NHS in Staffordshire and Stoke-on-Trent made an excellent start to rolling out COVID-19 vaccines, and continues to do so with 93 % of cohorts 1-9 vaccinated already.

3.3 This is a rolling programme and the first two phases, which covers all adults over 18 who are eligible, to have received their first vaccination by the end of July 2021. The NHS prioritised those most at risk first, based on the national guidance from the Joint Committee of Vaccination and Immunisations (JCVI).

- 3.4 We are currently at the stage where we are vaccinating the over 38 year olds and expect to be offering the vaccination to all over 30 year olds by the middle of May 2021.
- 3.5 After these cohorts the NHS will continue to prioritise cohorts, based on the JCVI guidance, until all adults aged over 18 have been vaccinated.
- 3.6 There has been targeted work to ensure no sections of our communities have been left behind and the detail of how, the programme has responded to the diversity of our communities will be presented to the committee in June.

#### **4. Communication and engagement**

- 4.1 The NHS recognises the hope this vaccine brings for people, especially the most vulnerable. A communications task and finish group has been set up, working across health and social care to support consistent messages and to reach seldom heard groups.
- 4.2 As the NHS is in a level three major incident, communications are led by the national team. At a local level, the teams are working hard to disseminate key messages and reassure residents that no one will be missed.
- 4.3 A range of resources have been developed, including Easy Read and translated materials to encourage as many people as possible to have their vaccination.
- 4.4 An engagement programme commenced, connecting with faith, community and voluntary sector networks to understand any barriers in accessing the vaccination and to identify any additional channels and resources.
- 4.5 Staffordshire Fire & Rescue Service (SFRS) have partnered with the vaccination team to create an approach whereby groups within the community that have low levels of uptake are targeted. The approach will involve a fire service vehicle and personnel working alongside health colleagues within targeted locations throughout the County on an outreach basis.
- 4.6 The ability for the SFRS to operate this provision outside of tradition daytime hours is also a benefit to the vaccination programme this was seen during Ramadan as there was hesitancy within the Muslim community regarding taking the vaccine during day light hours.
- 4.7 Utilising the Fire service brand is also an approach that health colleagues are keen to capitalise on as the trusted nature of the brand can break down barriers and support the uptake of the vaccine.

#### **5. Summary**

- 5.1 The latest position on the COVID-19 Vaccination Programme will be presented at the committee.

## 6. How local people can support the programme

6.1 The public have an important part to play in supporting the vaccine roll out:

- Please don't contact the NHS to seek a vaccine, they will contact you
- When the NHS does contact you, please attend your booked appointments
- Please continue to follow all the guidance to control the virus and save lives.

6.2 The vaccine cannot give you COVID-19 infection, and a full course will reduce your chance of becoming seriously ill. It is not known yet whether it will stop you from catching and passing on the virus, but it is expected to reduce this risk. It is important people follow the guidance in their local area to protect those around them:

- Practice social distancing
- Wear a face mask
- Wash your hands carefully and frequently
- Fresh air
- Follow the [current guidance](#).

## 7. Scrutiny

7.1 The committee will be kept informed of roll out of the COVID-19 Vaccination Programme.

## 8. Link to Trust's or Shared Strategic Objectives –

8.1 The NHS is in a level 3 Major Incident.

## 9. Link to Other Overview and Scrutiny Activity

9.1 The February committee received a presentation on the COVID-19 Vaccination Programme

## 10. Community Impact

10.1 This is a response to a public health emergency.

## 11. Contact Officer

Name and Job Title: Tracey Shewan, Director for Communications and Corporate Services

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Address/e-mail: [tracey.shewan@staffsstokeccgs.nhs.uk](mailto:tracey.shewan@staffsstokeccgs.nhs.uk)

## 12. Appendices/Background papers

Presentation to follow.



Local Members' Interest
N/A

## Health and Care Overview and Scrutiny Committee – 7 June 2021

### District and Borough Health Scrutiny Activity

#### Recommendation

1. That the report be received, and consideration be given to any matters arising from the Health Scrutiny activity being undertaken by the Staffordshire District and Borough Councils, as necessary.

#### Report of the Scrutiny and Support Manager

#### Background

2. The Health and Social Care Act 2001 confers on local authorities with social services functions powers to undertake scrutiny of health matters. The County Council currently have responsibility for social services functions but, to manage health scrutiny more effectively, they have agreed with the eight District/Borough Councils in the County to operate joint working arrangements.
3. Each District/Borough Council has a committee dealing with health scrutiny matters that have a specifically local theme. The Healthy Staffordshire Select Committee will continue to deal with matters that impact on the whole or large parts of the County.
4. The following is a summary of the health scrutiny activity which has been undertaken at the District/Borough Council level since the previous meeting of the Healthy Staffordshire Select Committee on 16 March 2021.

#### Cannock Chase District Council

5. Cannock Chase District Council's Wellbeing Scrutiny Committee met on 30 March 2021 and an update on the matters considered is anticipated to be made at the meeting of Health and Care Overview and Scrutiny Committee.
6. The next meeting will be held on 15 June 2021.

#### East Staffordshire Borough Council

7. East Staffordshire Borough Council's Scrutiny Community Regeneration, Environment and Health and Well Being Committee met on 25 March 2021 and an update on the matters considered is anticipated to be made at the meeting. The new Chairman appointment will not be confirmed until the next East Staffordshire Council meeting to be held on 28<sup>th</sup> June 2021.

#### Lichfield District Council

8. Lichfield District Council's Community Housing and Health (Overview and Scrutiny) Committee's meeting has not met since the last meeting.

## **Newcastle-under-Lyme Borough Council**

9. Newcastle-under-Lyme Borough Council's Health, Wellbeing & Partnerships Scrutiny Committee last met on 1 March 2021 and gave an update at the Healthy Staffordshire Select Committee on 16 March 2021.
10. The Committee will meet next on 7 June 2021 at which they will consider:-
  - Anti-social behaviour
  - Parks Review
  - CCG update meeting

## **South Staffordshire District Council**

11. South Staffordshire District Council's Wellbeing Select Committee met on 6 April 2021 at which they considered (i) an update from Dudley CCG following the transfer of Moss Grove GP Surgery Kinver from Staffordshire CCG. Neill Bucktin (NB), from Dudley CCG, gave a verbal presentation on the transfer of Moss Grove GP practice from Staffordshire CCG to Dudley CCG which took place on 1 April 2020. Dudley CCG had itself transferred to be part of the Black Country and West Birmingham CCG from 1 January 2021.

The Committee was reminded that CCGs were responsible for commissioning hospital and community services and had delegated responsibility (from NHS England) for primary medical services (general practices). There were three elements:

1. Planned Care – outpatients, inpatients, day services and maternity care
2. Unplanned care – emergency/ambulance/ GP. Mental health and learning disability
3. Community services.

Other services were commissioned by Staffordshire County Council based on residential population rather than GP registers – eg social care and public health.

Members felt reassured following the presentation that the surgery in Kinver will remain open and that the bulk of local services are being provided as before the transfer. However there was still some concerns regarding communication between MPFT and local hospitals and a lack of community follow up after hospital discharge.

12. The next meeting will be held on 6 July 2021 and Agenda items will include:-
  - Update from Staffordshire County Council on Youth Provision
  - Breast Screening
  - Update on cancer treatment for South Staffordshire residents during the pandemic.

## **Stafford Borough Council**

13. At their meeting on 2 March 2021 the Borough Council's Community Wellbeing Scrutiny Committee considered:-
  - a report back from meetings of the Healthy Staffordshire Select Committee held on 30 November 2020 and 1 February 2021;
  - (ii) a Covid Recovery Update - A report back on the work that had been undertaken in quarter three as part of the Community Recovery Workstream;



- (iii) a Quarter 3 Performance Report detailing performance and financial management for the services under the Committee's remit for the period ending 31 December 2020 and;
- their work programme for future meetings up to March 2022.

14. The next meeting will be held on 22 July 2021.

### **Staffordshire Moorlands District Council**

15. Staffordshire Moorland District Council's Health Overview and Scrutiny Panel will meet on 23 June 2021 at which the following items will be considered: -

- Leek MIU Update
- Leek Integrated Care Hub
- North Staffordshire Combined Healthcare NHS Trust – Annual Update

### **Tamworth Borough Council**

16. Tamworth Borough Council's Health & Wellbeing Scrutiny Committee met in March and April 2021. An update on the matters considered is anticipated to be made at the meeting of Health and Care Overview and Scrutiny Committee

17. The next meeting will be held on 22 June 2021 at 6pm.

### **Appendices/Background papers**

Emails from (i) Newcastle-under-Lyme Borough Council (Denise French) dated 26 May 2021; (ii) South Staffordshire District Council (Mark Jenkinson) dated 24 May 2021; (iii) Stafford Borough Council (Andrew Bailey) dated 12 May 2021; (iv) Staffordshire Moorlands District Council (Sally Hampton) dated 20 May 2021 and; (v) Tamworth Borough Council (Jo Hutchinson) dated 26 May 2021 to Deb Breedon, Member and Democratic Services.

### **Contact Officers**

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