

## Minutes of the Health and Care Overview and Scrutiny Committee Meeting held on 20 September 2021

Present: Jeremy Pert (Chairman)

### Attendance

Jak Abrahams	Phil Hewitt
Charlotte Atkins	Jill Hood
Philip Atkins, OBE	Barbara Hughes
Joyce Bolton	Thomas Jay
Rosemary Claymore	David Leytham
Richard Cox	Paul Northcott (Vice-Chairman (Overview))
Ann Edgeller (Vice-Chairman (Scrutiny))	Janice Silvester-Hall
Keith Flunder	

### In Attendance:

Marcus Warnes - Accountable Officer for 6 Staffordshire and Stoke on Trent CCGs and Senior Responsible Officer for Transformation Programme.

Simon Whitehouse - Chair Urgent and Emergency Care Board

Steve Fawcett - Clinical Lead, Urgent and Emergency Care Transformation Programme

Dr Lorna Clarson – Clinical Lead Difficult Decisions

Gina Gill – Manager Difficult Decisions

Lynn Millar – Director of Primary Care and Medical Optimisation of the 6 Staffordshire and Stoke on Trent CCGs and Vaccination Programme Manager

Dr Paddy Hannigan Chair of the 6 CCGs Staffordshire and Stoke on Trent

Claire McIver Assistant Director Public Health

Jenny Fullard – Communication and Engagement Service Partner CCGs

Simon Fogell – Chief Executive Healthwatch Staffordshire

**Apologies:** Martyn Buttery, Colin Wileman and Ian Wilkes

### PART ONE

#### 26. Declarations of Interest

Councillor Ann Edgeller declared an interest as Partner Governor of the Midlands Partnership Foundation Trust.

#### 27. Minutes of the last meetings held on 26 July 2021 and 9 August 2021

That the minutes of the meetings 26 July 2021 and 9 August 2021 be approved and signed by the Chairman as a correct record.

## 28. Difficult Decisions Update

The Accountable Officer 6 Staffordshire and Stoke on Trent CCGs, Clinical Lead and Manager Difficult Decisions outlined the report which highlighted initial engagement carried out early in 2020 and detail of the proposed engagement process regarding five areas of care: assisted conception, hearing aids for non-complex hearing loss (Mild hearing loss only), male and female sterilisation, breast augmentation and reconstruction and removal of excess skin following significant weight loss.

Concerns were raised relating to lack of hearing aid provision for people with mild hearing loss in North Staffordshire, the cost to people who may not be able to afford hearing aids and the potential impact on their mental wellbeing. Committee noted the following comments and responses to questions:

- The decision to restrict provision hearing aids for people with mild hearing loss in North Staffordshire CCG was based on guidance, criteria and scorecard evidence provided against local priorities. The way the scorecard was applied by Clinical Priorities Advisory Groups CPAG may result in a different decision in different areas, depending on how the CPAG was made up and local circumstances.
- North Staffordshire CCG was the only CCG in the County at this time to have looked at evidence relating to funding hearing aid provision and taken the difficult decision to restrict supply of hearing aids for mild hearing loss. Residents with moderate hearing loss were currently able to access hearing aids across all 6 Staffordshire and Stoke on Trent CCGs.
- All 6 CCGs would consider feedback, evidence, evaluate and prioritise as part of the difficult decision's process and outcomes of the process could not be pre-determined.

Members considered the process and involvement activities, work completed to date and proposed timelines and noted the following comments and responses to questions:

- The engagement process would feed into shaping the consultation process for all five of the difficult decisions. The consultation process would be completed in March 2022 and would inform business proposals.
- All proposals would be considered through evidence of what was effective and beneficial to ensure services were what people need and that they were not discriminated against, advantageously or disadvantageously. Essentially people who currently accessed any of the five areas of care being consulted on may no longer be able to do so, or conversely people who did not have access may be able to access them as a result of this process.
- In April 2022, subject to legislation, the Integrated Care System would start to commission provision of care, some CCG decisions would be made before that happened. The Integrated Care Board would continue to commission and provide care equitably across Staffordshire.

- The clinical evidence considered by CPAG would be used to inform the proposals to be presented to this Committee.
- Other interested stakeholders to be consulted would include local groups involved in the specific areas of care.

The Chairman highlighted the need to ensure consistency across Staffordshire for residents, the need for service user engagement and to use all feedback from engagement, including evidence gathered earlier in the process, to develop proposals.

Resolved:

1. That the report and process was noted.
2. That the final proposals will be considered by the Committee at a future meeting.

## **29. Transforming Urgent and Emergency Care (UEC) update**

The Accountable Officer Staffordshire & Stoke on Trent 6 CCGs provided a report and presentation to outline the Transforming Urgent and Emergency Care programme (UEC) and the engagement plan. The Chair of UEC Board and Clinical Lead UEC Transformation Programme were in attendance to respond to members questions.

The objectives of the programme were to simplify access to urgent and emergency care, to ensure patients were directed and treated in the most appropriate care setting and to prioritise the development of pathways for people who use emergency services where alternative services may provide a better outcome and experience.

Members raised matters of concern relating to current pressures, UEC arrangements, ambulance waiting times at hospitals, patient experiences and joined up processes. Committee noted the following comments and response to Members questions:

- Urgent Treatment Centres (UTC) would be a major element of the consultation process to determine the most effective and productive location and to develop a different community offer.
- A fundamental part of process was to provide consistency of services across the County to be able to direct patients to be seen quickly and where possible direct them away from A&E. There was also opportunity for the 111 offer to direct people to the right part of the service and a trial 111 kiosk was currently in A&E.
- NHS and WMAS were working together to resolve handover issues and waiting times outside hospitals. The Community Rapid Intervention Service CRIS was working well and had reduced numbers of patients being transported to hospital.
- The engagement process was a pre-consultation process to be followed by a 3 month consultation process which would focus on pathways of care in

communities, an urgent care community offer and lessons learned through the pandemic.

- The consultation process would be extensive, journey times, travel times and other data would be taken into account, and temporary changes taken in the pandemic were not permanent, no decision would be made permanent until the consultation was complete.
- Face to face engagement was planned with a range of community groups and would link closely with Healthwatch as assurance partners. All feedback, demographics and pathways across various localities in Staffordshire would be evaluated and considered in the consultation process to develop a clear, accessible and efficient community offer and pathway of care, where residents and clinicians could understand what was available, where and how to access the system.
- The system had to be deliverable and within resources available taking all consultation feedback into account.

The Chairman summarised that the transformation engagement process was an opportunity to engage with the public and partners and to shape the shared vision for the future services in Urgent and Emergency Care to improve services and patient experience.

The Chairman encouraged District and Borough Councillors to share the consultation widely to ensure District, Borough and Parish residents voices were heard.

Resolved:

1. That the Committee noted the engagement process.
2. That the consultation feedback be considered by the Committee at a future meeting.

### **30. Phase 3 Covid Vaccination Update**

The Director of Primary Care and Medical Optimisation of the 6 Staffordshire and Stoke on Trent CCGs and Chair of the Programme Board were in attendance to provide an update on the current position relating to Phase 3 of the vaccination programme and take up of vaccinations.

The Programme Director presented information relating to the third primary dose for the immunosuppressed given 8 weeks after the second dose, the booster programme given 6 months after second dose and the children's programme - both clinically vulnerable and vaccination in schools. Members understood the complexities of the programme, that each cohort had different vaccines, dosage type, booking routes and storage requirements, and where vaccinations would be available in the delivery model, including 1 vaccination site, pharmacies, hospital hubs, mobile provision and school delivery service.

Members welcomed the progress made, especially with 12-15 vaccination, and thanked all involved for the fast response from decision to delivery whilst also delivering booster and care home vaccination programmes.

Committee noted the following comments and responses to questions:

- The flu vaccine could be given at the same time as Covid vaccine, co-administration was possible but may be difficult to deliver depending on timing of delivery for Flu and Covid programmes.
- Children could express a wish to be vaccinated, in the absence of parental consent a conversation would be arranged for parent and child to talk through the process.
- Take up of vaccination across Staffordshire and Stoke on Trent cohorts 1-12 was good: 86% first dose and almost 80% fully dosed. For young people, 16 and 17 year olds, 56% had received first dose and 12.5% clinically vulnerable had received a second dose.
- SCC care home staff had to be fully dosed by 18 November there was good update rate and no problems were anticipated. Front facing NHS and health and care staff were being encouraged to get vaccinated although this was not mandated.
- There was an increase in Covid case rates across Staffordshire and concerns were raised about the level of push back in communities from people who had not had the vaccine. Assurance was given that anyone could come forward and be vaccinated for the first time. Communications and themed campaigns were ongoing around maternity, pregnancy, fertility, and care homes.
- There was a steady flow of people coming forward for first dose from all cohorts and take up rates were going up, the most resistance was the 30-39 age group. Members were assured that work would continue to carry out targeted campaigns and take the vaccinations to the community.
- Members were encouraged to report pockets in communities and concerns about groups in their area not being vaccinated to the Local Outbreak Control LOC Group.
- An all member Covid-19 Update seminar would be held 29 September 2021. It was suggested that members should circulate the links wider and that a slide about the flu roll out programme be added at the webinar.

The Chairman highlighted that the Vaccination Programme been running since November 2020 and he welcomed the success of the programme, speed of mobilisation and impact on Staffordshire residents.

Resolved:

1. That the Covid-19 update was noted.

### **31. Covid-19 Update**

The Interim Assistant Director Public Health and Prevention provided an update which detailed the current position in relation to management of Covid-19, case rates, hospitalisations, death rate and infection rates.

Committee noted the following comments and responses to questions:

- Increased case rates reported were more prevalent in younger people but tended to be more asymptomatic. The increased rate in younger people was linked to higher testing rates in Staffordshire revealing more positive cases.
- There was a need to consider all of the data available relating to Covid, not just case rate data. It was considered important to use information in a positive way to encourage more uptake of vaccination.
- Hospitalised Covid cases were stable and much reduced on same time last year.
- Excess death rates were lower, members noted it was important to consider how deaths were recorded, deaths from flu, pneumonia and causes other than from Covid and it was understood that a person could die with Covid but not necessarily of Covid.
- Concerns were highlighted about the early emergence of winter pressures and non-Covid infections, such as bugs and flu and other challenges that impact on the system.
- Members understood the need to vaccinate across all age bands to protect older people, immunosuppressed and those residents whose vaccinations may not be as effective.

The Chairman encouraged Members to attend a Local Outbreak Control LOC Board in their District and Borough areas, to engage with the Zoe Covid Study and app and to circulate the link for people to get involved in the study, also to continue to promote the vaccination programme in their District and Borough Council areas.

The Chairman thanked Partners and Public Health and Social Care teams for their all their work on Covid-19 and for supporting close partnership working arrangements.

Resolved:

1. That the update report be noted.

### **32. District and Borough Health Scrutiny Updates**

District and Borough representatives presented update reports and highlighted the following matters being considered at District and Borough meetings.

- Re-opening the MIU Cannock Chase
- Walley's Quarry
- Climate emergency
- Access to GPs
- Children's Mental Health and Wellbeing
- Breast Screening Service
- Mental Health

- Aftercare discharge from hospital
- Midlands Partnership Foundation Trust Annual report
- West Midlands Ambulance Service and Community Ambulance Hubs
- Healthy Eating

Resolved:

1. That additional items be added to the Health and Care Overview and Scrutiny Work Programme 2021-22:

- Update report on GP Access in Staffordshire.
- An invitation to West Midlands Ambulance Service to attend Health and Care O&S Committee.

### **33. Work Programme 2021-22**

Committee received the work programme and noted the following:

- An Introduction to Mental Health workshop would take place on Thursday 21 October 2021 at 2.00pm.
- All members were requested to share the link to the Staffordshire Mental Health Strategy survey with District, Borough and Parish Council members to share with groups in their area.
- The date of the next meeting was 25 October 2021 at 10am.
- A meeting be arranged in early December 2021 to consider GP Access and WMAS performance.

**Chairman**