

## **Minutes of the Health and Care Overview and Scrutiny Committee Meeting held on 11 July 2022**

Present: Jeremy Pert (Chairman)

### **Attendance**

Charlotte Atkins	Lin Hingley
Philip Atkins, OBE	Jill Hood
Richard Cox (Vice-Chairman (Overview))	Barbara Hughes
Ann Edgeller (Vice-Chairman (Scrutiny))	Bernard Peters
Keith Flunder	Janice Silvester-Hall
Philippa Haden	Ian Wilkes

### **Also in attendance:**

Tracey Shewan, Director of Communications and Corporate Services for the Integrated Care Board (ICB)

Lynn Millar, Director of Primary Care and Medicines Staffordshire and Stoke on Trent, ICB

Heather Johnson, Chief Nursing and Therapies Officer, Staffordshire and Stoke on Trent, ICB

Alison Budd, Lead Midwife, Maternity Transformation, Staffordshire and Stoke on Trent, ICB

Baz Taseem, Staffordshire Healthwatch Manager

Keith Luscombe, Strategic Policy and Partnerships Manager, Staffordshire County Council (SCC)

Councillor Mark Sutton, Cabinet Member for Children and Young People, SCC

Kate Loader, County Solicitor, SCC

Natasha Moody, Assistant Director for Children's Wellbeing & Partnerships

Karen Coker, Senior Partnership & Commissioning Manager, Children & Families, Health & Wellbeing, SCC

**Apologies:** Rosemary Claymore, Phil Hewitt, Thomas Jay and Mike Wilcox

**Substitute:** Councillor Steve Norman representing Tamworth Borough Council

## **PART ONE**

### **1. Declarations of Interest**

Councillor Ann Edgeller declared an interest as Staffordshire County Councils appointed Partner Governor at the Midlands Partnership Foundation Trust (MPFT).

Councillor Bernard Peters declared an interest as Staffordshire County Councils Local Authority appointed Governor at University Hospital Derby and Burton (UHDB).

### **2. Minutes of the last meeting held on 30 May 2022**

Resolved that the minutes of the meeting held on 30 May 2022 be approved and signed as a correct record.

### **3. Integrated Care System (ICS) and Integrated Care Board (ICB) Update**

The Director of Communications and Corporate Services ICB provided an update on the establishment of the ICS which included: ICB Board appointments, Integrated Care Partnership (ICP) strategy development, delivery portfolios, Place working, provider collaboratives, clinical professional leadership and 'Working with People and Communities Strategy'.

The following comments and responses to questions were noted:

- ICB was working with NHS England, who commission the dentistry service, to develop a programme of work to transfer the dentistry to the ICB by April 2023.
- The link to the 'Working with People and Communities Strategy' would be circulated to members, and ICB would present the strategy to a future meeting.
- Clarification was provided that the NHS Integrated Care Board (ICB) membership was set in statute and the Board focus was on the provision of health services. The Integrated Care Partnership (ICP) was the local partnership board between NHS and Local Authorities which would set the strategy for how the health and care for people in Staffordshire would be delivered.
- ICS funding - the impact of social care on health was recognised and more information about financial arrangements to help better integration, such as pooled budgets (e.g. Better Care Funding) would be circulated.
- Communication – A road show approach was used to inform the public about the Integrated Care Board (ICB). There were links to

information through the ICB webpage. Members were encouraged to share links in their District and Borough areas.

- In terms of addressing inequalities, ICB was reaching out to the public using lessons learned and mechanisms developed during the pandemic. The roadshows varied times to ensure they were accessible to all. ICB was working with voluntary organisations to focus on the right messages and Healthwatch was commissioned by the ICB to reach out to specific communities. It was highlighted that people would want to know how things will change for them, not just about the ICS structures. A suggestion was made about joint commissioning of Healthwatch when engaging public in campaigns.
- The ICB has taken on board all of the Staffordshire and Stoke on Trent Clinical Commissioning Groups (CCGs) transformation programme. The seven portfolios of work would be circulated.
- The need for the ICB to work closer with District and Boroughs was recognised. It was acknowledged that CCGs had previously asked people to come to them during consultations and ICB would reach the public using ways learned during the pandemic in future engagement.
- ICB appointments to portfolios had been made in accordance with NHS England recruitment process.
- ICB would continue to run the vaccination programme, although slowed down through the summer, there had been a number of popup vaccination walk-in sessions. It was confirmed there would be one at Leek hospital.
- ICB confirmed that mental health information would be made available in doctors' surgeries.
- ICB confirmed that the issue of flow of patients through hospitals was continually looked at and reviewed, a more detailed response about the targets across the system would be provided by the ICS Chief Delivery Officer.
- Future scrutiny would be of the whole integrated care system, monitoring the development of the ICP Strategy and a focus on the links between the Integrated Care Partnership (ICP) Strategy and the Health and Wellbeing Board Strategy which sets the overall ambition for health and care in Staffordshire.

The Chairman thanked the Director of Communications and Corporate Services for her contribution to the meeting. Committee focus was on the importance of communication, residents understand where the linkages are, also the need to focus on the outcomes for residents.

**Resolved:**

1. That the Health and Care Overview and Scrutiny Committee note the progress report.
2. That the following items be included on the Health and Care O&S Committee Work Programme:
  - a. Dentistry service (March 2023)
  - b. Presentation of the Working with People and Communities Strategy (To be confirmed).
3. That further information be circulated to members of the Health and Care Overview and Scrutiny Committee on the following matters:
  - a. Link to the Working with People and Communities Strategy.
  - b. Link to register to the ICS information roadshow.
  - c. Targets across the system on patient flow through hospitals from the ICS Chief Delivery Officer.

#### **4. Primary Care Access Update**

The Director of Primary Care and Medicines Staffordshire and Stoke on Trent ICB provided a report and presentation which provided context and key drivers to the current situation regarding general practice access in Staffordshire and Stoke-on-Trent.

Committee noted a summary of completed actions and achievements relating to public communications, digital, and quality variance and resilience, training, and development work. The Director outlined the seven-point action plan for July 2022 to consider matters relating to communications, access improvement programme (Accelerator Programme); record keeping; digital solution; quality, variation, and resilience; training and development and workload initiatives.

Committee noted the following comments and responses to questions:

- Concerns were raised about communication to the public about transformation and process change coming out of the pandemic. Members were assured that work was ongoing to address concerns and get messages out to people about new roles and ways to access services.
- There continued to be increased demand for appointments, with 65% of appointments face to face. There was a significant amount of telephone appointments, however this did not create additional capacity, it was a more convenient way for some people to access the GP, but not a way of seeing more patients.
- Different ways of using telephony with a move to cloud-based telephone systems to book appointments was being rolled out over 12 months. The cloud-based telephony system tripped in when lines were busy, callers were able to leave their number and would be phoned back, without losing their place in the queue.

- Digital solutions, including blood pressure monitoring from home, had been introduced in practices. Online information and support, including 'Know your Gp Staffordshire' live website and an access support package was also available.
- For practices not performing well targeted support and training was available, including workload initiatives, directing people to the right service, working with the wider primary care and NHS England. There were twelve domains of work, each with a metric. The data being collated would inform the wider KPI dashboard being developed by the Health and Care Overview and Scrutiny Committee.
- Additional support for staff was available and advice for those who had concerns about financial wellbeing.
- Patient Participation Groups (PPGs) enable patient engagement with practice staff, the Primary Care Network (PCN) were strengthening PPGs and agreed to provide a list of PPG vacancies to the District and Borough Councillors to get involved. PPGs were not currently part of the Primary Care Access Plan but as a result of the discussion today would be considered for inclusion.
- Members highlighted that some people rarely contacted a GP surgery and would need to be informed about what was available in their community and of new ways to access alternative solutions. The ICS was looking at different mechanisms to inform and educate the public, looking at lessons learned during the roll out of vaccines in the pandemic, targeting different age groups in different ways.
- Members highlighted the move to preventative agenda and that there was a need to look at the pathways to early advice and support. Assurance was given that this would be part of the strategy going forward.
- In relation to making GP appointments on the APPS there was not currently a consistent approach across Staffordshire practices, but this was being worked on.
- 'Did Not Attend' (DNA) appointments was not a metric currently being used. Members felt that visibility of DNA appointments online should be considered in the range of metrics collated.
- GP Access had been a challenge before the pandemic but in terms of the backlog arising from the pandemic the largest group had a long-term condition. To accelerate the backlog before the winter period they were frontloading the Quality Assessment framework.
- 167 practices had reduced to 144 to optimise the footprint for resilience, practices were working together and had developed the universal offer - fifteen services commissioned across 100% of the practice population offering equal access to services. There was a need for the ICB to refresh the strategy, practices need to establish their own strategy and a primary care collaborative has been established consisting of senior leaders across the area to shape the strategy.

Within the strategy, workforce was an issue to address with a 7% reduction in GPs in the area, a workforce plan would be part of the strategy.

The Chairman thanked the Director for the presentation and for the work they were doing.

Resolved:

- 1) That Health and Care Overview and Scrutiny Committee note the progress report and include a further update in the Work Programme to review the Primary Care Access Plan in 3-4 months' time.

## **5. Maternity Services Update**

The Chief Nursing and Therapies Officer and Lead Midwife for Maternity Transformation, at Staffordshire and Stoke on Trent, ICB provided an update on maternity services transformation, the temporary closure of free-standing midwife-led birthing services and an update on progress against recommendations of the Donna Ockenden report about failings at Shropshire and Telford Hospital.

Committee noted the following comments and responses to questions:

- The vision was to implement the Maternity Clinical Model agreed before the pandemic, the Continuity of Care Model would provide the framework to deliver the clinical model.
- The free-standing birth units for low-risk births at County and Samuel Johnson Hospitals were open for anti-natal and postnatal care however remained suspended for births. The Samuel Johnson Unit (FMBU) planned to re-open in December, but County hospital had workforce issues. Assurance was given that a strong communication plan was in place to re-iterate that the service was not closing, and any changes would be communicated to members.
- Both UHNM and UHDB Trusts had a shortage of midwives pre-pandemic, since the pandemic the Ockenden review had made reference to staffing issues in midwifery and made recommendations for higher numbers, which had in effect widened the gap.
- Ockenden recommendations:
  - The Maternity Board meet monthly, assurance was given that Ockenden was a priority and actions against the original seven recommendations from the Ockenden report were almost complete.
  - Members noted that a working group from the National Maternity Transformation Programme was working to benchmark against the additional fifteen recommendations from the Ockenden review and that a further report from East Kent would be published in September 2022.

- Members requested birth rate data and were advised that there had been 252 births last year at Samuel Johnson and 93 at County hospitals. There had not been an increase in births during the pandemic.
- Due to the shortage of midwives long working hours and additional shifts were adding to pressure on the remaining midwives and some were leaving the service. Recruitment and retention figures and comparison data would be calculated and circulated to members. The Chairman highlighted the need for joined up career development opportunities to help retain staff in maternity services. Members indicated the need to make midwifery an attractive option.
- The Chief Nursing Officer advised that an ICS Workforce Group was looking into workforce issues, employee numbers etc. and could report back to the Committee on workforce matters. The Chairman advised that there would be a system workforce discussion at the 17 October 2022 committee meeting.

The Chairman thanked the Partners for the presentation and their commitment to the services and re-opening of FMBUs. He welcomed the plans for communication, recruiting and retention of midwives.

Resolved:

1. That Health and Care Overview and Scrutiny Committee receive the update report and request that ICS midwife staffing data be circulated to Health and Care O&S Committee Members for information.

## **6. Staffordshire Healthwatch Update**

The Chairman welcomed the Support Staffordshire to its new role from 1 April 2022, he advised that this committees' role was both to scrutinise the work of the Healthwatch contract and as a partner in terms of communication and collaboration.

The Healthwatch Manager provided a report and presentation on the structure and progress of the Staffordshire Healthwatch (SHW) service (under Support Staffordshire as the new provider). He also highlighted Healthwatch Staffordshire's 2022-23 outline focus and approach.

Committee noted the following comments and responses to questions:

- Women's services will be considered as part of the work priorities 2022-23 and mental health in maternity may be a focus coming from this work stream.
- Concern was raised that a member of the public had been unable to contact Healthwatch. Members were advised that there had been a short period during transition where systems were not operating. The

enquiry email form on the website along with telephone contact number and social media links, were now operational, but there had been some problems which were currently being tested. The Chairman suggested that a contact point be made for all councillors at County, District and Boroughs to contact Healthwatch so that the opportunity to hear residents' voices was not lost.

- Members were assured that lay members and volunteers would be offered training to on scrutiny, enter and view, and how to ask relevant questions.
- The Chairman indicated that Healthwatch had an open invite to attend this Committee as a non-voting member and encouraged the Manager to attend and bring the public voice to meetings as understanding developed through SHW work.
- A member indicated that the Stone area had lacked contact with SHW, the Manager SHW advised that HW reach was being extended across Staffordshire through work with voluntary organisations and local communities to engage wider to get feedback.
- SHW had two locality officers that extend reach across Staffordshire Moorlands and rural areas.
- The Commissioning Manager advised that the performance metrics were being finalised and data would be shared with Staffordshire County Council. The Chairman asked that the performance metrics and structure for performance management approach be circulated to members to enable the committee to monitor progress across key areas.

The Chairman welcomed the Healthwatch Manager and thanked him for the presentation and responses to questions.

Resolved:

1. That the Health and Care Overview and Scrutiny Committee note the update report.
2. That Staffordshire Healthwatch be requested to share the performance metrics and structure for performance management approach when finalised.

## **7. District and Borough Activity Update**

The Chairman advised Members that the Joint Code of working between County and District Council Health Scrutiny Committees was currently being refreshed to better reflect the ways of working in Staffordshire health scrutiny. He emphasised the importance for members to be clear on roles of the County and Districts scrutiny committees to ensure that no matters were duplicated or omitted, and to seek advice from the Scrutiny and Support Officer if necessary.



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

- Cannock Chase DC Chairman Councillor Philippa Haden reported that at the first meeting of 2022-23:
  - An introduction was provided from Head of Service to explain the scrutiny role at the District Council.
  - Committee established a task and finish group which would focus on housing.
  - Committee would also carry out scrutiny of the 'Cannock Chase Can Project' which has a focus on obesity. Members will consider the success of the project and if people were using the APP.
- Lichfield DC: Substitute Councillor Steve Norman reported that:
  - Members had received a briefing paper on food safety which would be raised at the next committee.
  - Clarification was sought on two issues:
    - a. The representative from the County on the District Committee; and
    - b. Whether Burntwood Health Centre, would be a matter for County or District Scrutiny Committee.

The Chairman agreed to provide a response to Councillor Norman after the meeting.

**Resolved:**

1. That the District and Borough Updates be noted.

**8. Work Programme 2022-23**

Members considered the work programme and suggested the following additions:

- Add an item on dentistry to the March 2023 meeting
- Request a review of critical incident at UHMN (in terms of the lessons learnt) to 1 August meeting.
- Request an item relating to the Winter Flu Campaign to meeting on 1 August 2022

Councillor Janice Sylvester-Hall, Chairman of the Women's Health Working Group provided advised that the working group met on 13 June 2022 to consider a report from the Department for Health and Social Care (DHSC) call for evidence. The report informed the first-ever government-led Women's Health Strategy for England and focused on feedback from the survey component of the consultation. The Working Group had identified a list of topics that impact on women centric issues and

determined to meet again to consider the topics listed in more detail in relation to what happens across Staffordshire.

The group would then identify witnesses, prepare questions based on the information gathered and add an item to the work programme for committee to scrutinise Women's Health Matters.

The Vice-Chair Scrutiny Councillor Ann Edgeller provided an update on the Healthier Communities Workshop on 21 June 2022, the workshop focus was on the wider determinants of health. Members of the County, District and Borough Councils across Staffordshire, partners from NHS and Support Staffordshire, and officers from Public Health attended the workshop. The Vice-Chair advised the workshop had been very positive and a lot of information came from the discussion groups. A report capturing feedback, key messages and recommendations would be presented to committee in September 2022.

### **Resolved**

1. That the work programme and work group updates be noted.

### **9. Exclusion of the Public**

#### **Resolved**

1. 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).

### **10. The Families Health & Wellbeing (0-19) service ( Pre-decision)**

(Exemption Paragraph 3)

The Cabinet Member for Children and Young People provided a report and presentation relating to the Families' Health & Wellbeing (0-19) Service from 1st April 2024.

**Chairman**