

Minutes of the Healthy Staffordshire Select Committee Meeting held on 1 February 2021

Present: Jeremy Pert (Chairman)

Attendance

Charlotte Atkins	Dave Jones
Philip Atkins, OBE	David Leytham
Tina Clements	Paul Northcott (Vice-Chairman)
Janet Eagland	Kath Perry, MBE
Ann Edgeller	Bernard Peters
Phil Hewitt	Ross Ward
Jill Hood	

Apologies: Adam Clarke, Richard Ford, Maureen Freeman, Barbara Hughes and Ian Wilkes

PART ONE

46. Declarations of Interest

County Councillor Janet Eagland declared an interest 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.

47. Minutes of meeting held on 30 November 2020

RESOLVED – That the minutes of the meeting held on 30 November 2020 be confirmed and signed by the Chairman.

48. Integrated Care System Delivery Plan

The Committee considered a joint report and presentation of Staffordshire Clinical Commissioning Groups' Accountable Officer and Independent Chair, Together We're Better regarding the development of an Integrated Care System in Staffordshire (Schedule 1 to the signed minutes).

The meeting was attended Prem Singh (Independent Chair, Together We're Better); Simon Whitehouse (Director, Together We're Better) and; Peter Axon (Chief Executive, North Staffordshire Combined Healthcare NHS Trust).

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.

During their presentation, Health representatives outlined:- (i) steps in the evolution of an ICS; (ii) their long term priorities; (iii) measures to support place development; (iv) a timeline for development of the ICS; (v) intended changes to strategic commissioning and; (vi) future decision making at a local level.

In the full and wide-ranging discussion which ensued the Committee expressed initial concern over news of a further major re-organisation of NHS in the County, particularly set against a background of financial deficits, cuts in services and the Covid-19 pandemic. They stressed the need for improvements to be made in local services rather than a focus on further administrative change which might not directly benefit the local population. However, the representatives explained that whilst the development of an ICS involved more than a merger of the existing Clinical Commissioning Groups, this change alone would enable better co-ordination and partnership working at a local level so that the serious challenges facing the service could be better addressed. However, they agreed with the Committee in that unnecessary change was not required at this time but referred to measures such as the Integrated Care Partnerships which would increase community involvement, transparency and help create a collective ambition across their areas.

In response to Members' concerns regarding cross boarder relationships having regard to the services accessed by Staffordshire residents from NHS Trusts in other areas eg University Hospitals of Derby and Burton NHS Foundation Trust and Royal Wolverhampton NHS Trust, the representatives assured the Committee that the STP, FYDP and D&DP took account of these wider geographical considerations. Cross Boarder Trusts had been fully involved in the development of the ICS to date and were included in the membership of the Shadow Board. Continuing, they went on to emphasise the opportunities available to make service improvements in localities through more effective cross boundary working made possible by the implementation of the strategy. However, they recognised the importance of avoiding a 'one size fits all' approach and the need for local differences to be addressed sensitively.

A Member highlighted the potential for enhancing the roles of existing Patient Participation Groups and Pharmacies in the implementation of the ICS.

In response to requests for clarification of the measures to be undertaken by the STP to ensure public understanding of the changes and practical differences residents would experience in accessing healthcare services in the future, the representatives explained that the initiative was aimed primarily at improving outcomes rather than wholesale change of existing services. All media channels would be used to disseminate essential information to the public so that residents were supported in their local communities. In addition, meetings of the ICS Board and Staffordshire Health and Wellbeing Board (who led improvement of health and well-being and oversaw transformation of health and

care services in the County) would continue to be held in public in the interests of transparency. The representatives also highlighted an important role for elected Members in promoting a greater understanding of health service provision in their areas and stressed that collaboration and collective leadership which was required.

The Committee were keen to know how consideration of mental health services had been made by the ICS and whether any measures would be implemented to address the disparity between those relating to physical health. In reply the representatives acknowledged the historical differences between mental and physical health provision in terms of funding, profile and patient outcomes. However, they reassured Members that mental health was recognised nationally as a priority concern not least owing to the effects of the 2020 Covid-19 pandemic. Future ringfenced funding was identified in the LTP and commissioning was to be audited with a strong mechanism for performance management and service development. In addition, partnership working with key stakeholders including those in the voluntary sector would help to avoid the silo culture between various Trusts/NHS bodies which had emerged in the past.

Continuing on the theme of funding, the representatives highlighted difficult decisions which would be needed in the future having regard to the Government's financial response to the Covid-19 pandemic and policy decisions aimed at economic recovery. Changes in the ways of working with Local Authorities would be essential in order to manage demand on NHS services. This would be achieved through promotion of the prevention, health/wellbeing and personal responsibility agenda, where possible. However, they recognised that the needs of specific groups eg the elderly and those with underlying health issues etc, would continue to be met through existing channels.

In conclusion, the representatives re-iterated their intended timeline for future development of the integrated care including confirmation by Central Government and proposed merger of Clinical Commissioning Groups. They emphasised the 'ground-up' approach to be adopted towards the transformation of services and looked forward to making a positive difference to the health of all residents in the County.

The Chairman then thanked the representatives for an interesting and informative presentation.

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

(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.

(b) That further scrutiny of the development of an Integrated Care System be undertaken at the appropriate time, as necessary.

(c) That the Chairman liaise with representatives of Health regarding a suitable provisional timeframe for further scrutiny.

49. Covid-19 Vaccination Programme

The Committee considered a joint report/presentation from Health updating them on implementation of the Covid-19 Vaccination Programme in the County (schedule 2 to the signed minutes).

The meeting was attended by Neil Carr (Chief Executive, Midlands Partnership NHS Trust); Dr. John Patrick Hannigan (Clinical Lead Staffordshire Covid-19 Vaccination Programme); Lynne Millar (Director of Primary Care, Staffordshire and Stoke-on-Trent 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 as of 28 January 2021:- (i) 143,301 vaccine doses (Oxford AstraZenica, Pfizer Biontech and Moderna) had been administered; (ii) 86% of over-80s had received their first vaccine dose; (iii) 99.9% of care homes have been visited by vaccination teams and; (iii) capacity was available in the system to expand roll out of the programme in the event a greater supply of vaccines became available. They noted guidance issued by the national Joint Committee on Vaccination and Immunisations (JCVI) 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. They also noted the JCVI's advice regarding the administration of second doses. 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, where possible.

The Chairman then thanked the representatives of Health for an interesting and informative presentation and paid tribute to all involved in the programme for the considerable progress which had been achieved, in a relatively short timescale, to date.

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

(b) That progress in the roll-out of the Covid-19 vaccination programme in Staffordshire be kept under close review.

(c) That the Committee give any assistance to Health in achieving full implementation of the programme where possible and as appropriate.

50. District/Borough Health Scrutiny Activity

The Committee considered a report of the Scrutiny and Support Manager 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 3 to the signed minutes).

During the discussion which ensued Members expressed their agreement with the Chairman with regard to scrutiny of:- (i) Midlands Partnership NHS Foundation Trust in respect of the George Bryan Centre, Lichfield and; (ii) Burntwood Health and Wellbeing

Centre in respect of their temporary accommodation (as referred to in paragraph 8 of the report) by Lichfield District Council's Community Housing and Health (Overview and Scrutiny Committee) under the agreed Code of Joint Working – Local Authorities. However, scrutiny of South East Staffordshire and Seisdon Peninsular Clinical Commissioning Group (also referred to in paragraph 8) was allocated to the County Council under the code.

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

(b) That the Chairman contact South East Staffordshire and Seisdon Peninsula's Accountable Officer in respect of their poor performance (as highlighted by Lichfield District Council) with a view to seeking clarification of any need for further scrutiny and report back to the Committee, as necessary.

(c) That the Chairman meets with the Member representative of Lichfield District Council in respect of their Community Housing and Health (Overview and Scrutiny) Committee's scrutiny of:- (i) Midlands Partnership NHS Foundation Trust's George Bryan Centre, Lichfield and; (ii) Burntwood Health and Well-being Centre's accommodation arrangements with a view to offering assistance/advice, as appropriate.

51. Work Programme 2020/21

The Committee considered a rolling Work Programme for 2020/21 (Schedule 4 to the signed minutes).

During the discussion which ensued a representative of Health highlighted the recent decision by North Staffordshire Clinical Commissioning Group (CCG) to extend hearing aid provision to people with mild to moderate hearing loss, in line with other CCGs in the County. Therefore, this element would be removed from their future 'Difficult Decisions' consultation included in the Committee's Work Programme.

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

(b) That, subject to the above, the updated Work Programme 2020/21 be approved.

52. Date of Next Meeting - Tuesday 16 March 2021 at 10.00 am, Virtual/on-line

RESOLVED – That that the date, time and venue of the next meeting be noted.

Chairman