# Health Select Committee

### MINUTES OF THE HEALTH SELECT COMMITTEE MEETING HELD ON 14 JANUARY 2020 AT KENNET COMMITTEE ROOM, COUNTY HALL, TROWBRIDGE.

### Present:

Cllr Chuck Berry (Chairman), Cllr Gordon King (Vice-Chairman), Cllr Christine Crisp, Cllr Clare Cape, Cllr Mary Champion, Cllr Gavin Grant, Cllr Howard Greenman, Cllr Pip Ridout, Cllr Tom Rounds, Cllr Fred Westmoreland, Cllr Graham Wright, Irene Kohler and Denmark

#### Also Present:

Cllr Laura Mayes, Cllr David Halik, Cllr Alan Hill and Cllr Robert Yuill

#### 1 Apologies

Apologies for absence were received from Cllr Mollie Groom, Cllr Andy Phillips, Diane Gooch and Joanne Burrows.

### 2 Minutes of the Previous Meeting

#### **Resolved:**

To approve and sign the minutes of the previous meeting held on 5 November 2019.

### 3 **Declarations of Interest**

There were no declarations of interest made at the meeting.

### 4 Chairman's Announcements

The Chairman made the following announcements:-

To note any announcements through the Chairman.

### a) Wiltshire Council - CQC inspection - update on actions

On 14 June 2018 the CQC published its review of how local health and social care systems work together in Wiltshire.

When the Committee considered the information in the CQC report at its meeting on 11 July 2018, it was agreed to monitor progress for 8 areas of work highlighted in the CQC report.

Members received an update at the September 2018 meeting and a CQC's Action Plan was presented to the Health and Wellbeing Board on 7 February 2019.

On Thursday 9 January the Chairman and Vice-Chairman attended a briefing where they received information on actions taken, or plans made by the Council with regards to the 8 areas of work this Committee had agreed to focus on.

This was an overall positive update with many of the areas of work now integrated as part of "day to day business", a few of the workstreams were nearing completion and outcomes would be presented to the Health and Wellbeing Board which either the Chairman or Vice-Chairman would endeavour to attend and then report back to the committee if any issues or concerns were identified.

They were also offered reassurance that Wiltshire's interest would be prioritised by the Joint Commissioning Board.

• Developing a sustainable integrated workforce strategy – ongoing area of work for a working group including all providers and commissioners which produced a draft strategy. The draft strategy would be presented to the Wiltshire Integration Board on 23 January 2020 for finalisation and to the Health and Wellbeing Board on 30 January 2020 for approval.

• Strengthening joint commissioning across the whole system – 4 priorities sat underneath that work stream, one was to work towards a joint structure and approach to commissioning of health and social care in Wiltshire – this had to be put on hold as both the Council and CCG's commissioning teams were being re-structured. The 3 other projects have progressed well - joint commissioning strategy drafted and awaits final sign off by the JCB in February 2020, intermediate care review and whole-life pathway (mental health and LD).

• A single overarching health and social care strategy – completed. The Health and Wellbeing strategy (for Wiltshire) went through all governance and signed off by HWB in September 2019. http://moderngov.wiltshire.council/ieListDocuments.aspx?CId=1163&MId=1243 8&Ver=4

• Developing a single, integrated communications strategy – once work started on this, it was decided (as a team) that it would be more efficient for each workstream and project would decide its communication and engagement rather than have a single strategy.

• Implementing digital opportunities and information sharing – workstream agreed to be done for BSW rather than Wiltshire as there was already a workstream, relevant people and programme board (inc people from Council). Linked to BSW programme rather than initiate something separate.

• Unifying and developing whole system governance arrangements. This had been closed off as a workstream. As the new governance arrangements had now been in place for a year, it is planned for it to be reviewed by the Council and CCG. The outcome of the review would be reported to the Joint Commissioning Board and would also be presented to the Health and Wellbeing board for approval.

• New Wiltshire health and social care model – this was a bigger work stream with 5 projects. The main objective was to design the new model with providers. The new model had been signed off and was being delivered. All 5 projects are progressing and they report to the Wiltshire Integration Board

• Improving Wiltshire's Health and Wellbeing Board effectiveness – this had been closed off, as what had been agreed had been actioned.

**b)** Chief Executive Officer for People – Terence Herbert The Chairman welcomed Terence Herbert, the newly appointed Chief Executive Officer to the meeting and congratulated him on his appointment.

He also paid tribute to the outstanding work that had been undertaken by Dr Carlton Brand, previously Executive Director, Adult Social Care, Public Health & Digital DASS/ERO, especially with regard to adult social care and wished him every success in his future endeavours.

## 5 **Public Participation**

There were no members of the public present or councillors' questions.

### 6 Forward Work Programme

The Committee was invited to consider its forward work programme.

After some discussion,

### **Resolved:**

(1) To recommend that the following item be added to the Committee's Forward Work Programme:-

Homelessness – interconnection of services

(2) To note that the Forward Work Programme would be reviewed by the Chairman and Vice-Chairman and circulated to members of the Committee in due course.

### 7 <u>NHS long term plan</u>

The Committee noted that in February 2019 the Long Term Plan (LTP) for the NHS was published, which set out some expectations for organisational reform to ensure that the NHS could achieve the ambitious improvements for patients

and actions to overcome the challenges that the NHS faced such as staff shortages and growing demand for services.

The Committee received a presentation by Tracey Cox, CCG Chief Executive Officer, which provided an update on actions implemented in Wiltshire to deliver the LTP and meet its expectations for primary and community services.

During discussion, it was recognised that there needed to be a new relationship with service users and providers which would help staff to access what was important to clients. Various discussions were taking place to facilitate this. There was an increasing number of older people residing in Wiltshire quite a number of which would require some support, and also people who had no homes and slept on streets and elsewhere.

### **Resolved:**

- (1) To thank officers for the comprehensive presentation received at the meeting and the informative "making of" of the long-term plan presentation provided for the pre-meeting briefing.
- (2) To note the presentation received today and for the Committee to remain informed of progress on the areas of work for the delivery of the NHS long term plan, at appropriate key milestones through the year ahead.
- (3) To send the link to the public version of the Wiltshire long term plan so members can share this with their community.
- (4) To send the presentation to the Committee with the minutes of the meeting.

### 8 Local Area Co-ordinators - first stage evaluation

The Committee received a presentation by Sarah Hartley, Public Health Scientist, which reviewed the work undertaken by Wiltshire Local Area Coordinators since October 2018.

Members were reminded that local area co-ordination was a long-term evidence-based approach to support people in their local community. Local area co-ordinators supported people to obtain information, make practical and local connections and live the life they would like. By the start of 2020 all 9 co-ordinator positions had been filled and the occupants were in post. They were starting to collect robust data which would prove to be very useful in helping to plan for the future.

It was noted that there had been 158 accepted introductions to the Local Area Co-ordination (LAC) since October 2018 of which 125 were active clients and

24 were closed clients. 6 hrs 21 mins on average was spent with each client. It was pointed out that no cases were closed but rather they were marked as being inactive.

During discussion, Members enquired how this scheme was being publicised. The area co-ordinators were based within their own communities and spent time making themselves known to members of the public and generally publicising the scheme. Leaflets were made widely available in libraries, coffee shops and other establishments where members of the public gathered.

It was noted that there would be a team day on 29 January 2020 with the area co-ordinators when the standardisation of recording would be examined. It was noted that two videos showing the impact of the services were available and could be sent to members of this Committee.

### **Resolved:**

- (1) To thank officers for the presentation, commend them for the work to date and to receive an update on service delivery in a year's time, including comparison with available national statistics for local area co-ordinators.
- (2) To encourage working together with the CCG and its Social Prescribers / link workers programme, and maybe look into ways to co-ordinate data collecting for both LAC and Link Workers to enable analysis of said data which could be used by both the council and CCG to justify further funding and expansion to other local areas.
- (3) To receive information from the Social Prescribers programme to understand what the situation is in areas without local area coordinators.
- (4) To send links to video testimonies to members of the Committee and area board chairs.

## 9 <u>Wiltshire Gypsy, Roma, Traveller and Boater Strategy 2020-2025</u>

Consideration was given to a report by Dr Michael Allum, Public Health Specialty Registrar, which sought support for the Gypsy, Roma, Traveller and Boater Strategy ahead of its consideration by the Health & Wellbeing Board in April 2020.

It was noted that Travellers experienced significant inequalities throughout all stages of life. Gypsy, Roma and Traveller people experienced the worst health outcomes of any ethnic group and the average life expectancy was 10-12 years less than the general population. Higher rates of miscarriage, a greater proportion of individuals with long-term health conditions, and higher rates of

depression and suicide were just some of the inequalities experienced by these communities.

It was most important that all public organisations addressed these health inequalities so that all individuals had the same opportunities to live healthy lives no matter their background.

Members fully supported the Strategy and hoped that opportunities would be taken to ensure that health care needs of the Group were met. Irene Kohler expressed an interest in receiving details as to how consultations were carried out and stated that Healthwatch Wiltshire would be pleased to help. Dr Allum suggested that consultation was best carried out by community engagement. A questionnaire had been prepared and circulated widely but the response so far had not been great; it was hoped that the response rate would improve.

After further discussion, during which Members considered that the Strategy should be widely circulated.

### Resolved:

- (1) That the Health Select Committee supports the proposed Wiltshire Gypsy, Roma, Traveller and Boater Strategy 2020-2025, based on the July 2019 Health Needs Assessment for Gypsy, Traveller and Boater Populations Living in Wiltshire.
- (2) That when the Strategy is presented to the Health and Wellbeing Board, all councillors are notified (could be through a briefing note) and the Strategy is well promoted to all councillors.

### 10 Medvivo - update

The Committee received an update by way of a presentation from Carole Williams, Medvivo Director of Nursing, on the progress made or plans in place to deliver its five priorities for 2019020, namely –

1. Early detection and treatment of sepsis to save lives

2. Improve service user engagement and understanding of the patient journey throughout integrated urgent care

3. Develop and continually review Antimicrobial Stewardship and prescribing to improve patient outcomes

4. Improve patient safety through telephone triage and develop the multiprofessional team within the Clinical Assessment Service

5. Improve the health and wellbeing of staff and continue to develop them with the right skills for the right people in the right place at the right time.

It was noted that the presentation would be circulated to Members after the meeting.

After some discussion,

Resolved:

- (1) To note the presentation and thank the officer for attending the meeting.
- (2) To commend Medvivo for its commitment to its priorities for 2019-20, and in particular over the Christmas and New Year period.
- (3) To receive an update from Medvivo on actions taken if required after the review of the 2019 Quality Accounts.

## 11 CCG updates

The Committee received a presentation from Tracey Cox, Chief Executive Officer, CCG on recent, current and upcoming work.

It was noted that NHS England had agreed in principle to the proposed merger on 14 October 2019. This followed:

- Support from each CCG Board to merge
- Stakeholder engagement and communication
- Member practice vote
- Submission of an application to merge to NHSE

The reason for the merger was to:

- Improve quality and safety: variation could be reduced in care for people and standardise best practice.
- Potential greater buying power, eliminating duplication of administrative support functions and streamlining processes.
- Providing a single consistent vision and voice to achieve high quality outcomes across the system and deliver better value.

The CCG's ambition was to:

- Work more closely with partner organisations so people could experience services work in a more joined-up way, only have to tell their story once and receive care better tailored to their individual needs
- Develop a positive, inclusive, people-centred culture and make BSW CCG the best place to work
- Achieve value in everything that was done and more efficient ways of working so the growing demand for health and care services was affordable

After some discussion,

## **Resolved:**

To note the presentation and update on the CCG merger.

## 12 Wiltshire Safeguarding Adults Board - Annual Update

The Committee received the Wiltshire Safeguarding Adults Board Report 2018-19 which reviewed the work of the Board during the past year and set out the priorities for the current year.

The Committee noted that over 4000 contacts had been made since implementation of MASH and 30% had led to an inquiry.

Attention was drawn to the needs of rough sleepers and the need for a policy or procedure to ensure all partners could work together to ensure belongings were kept safe when an individual was being committed / sectioned. The Director, Access & Reablement, explained that this was being looked into in consultation with other partners

After some further discussion,

### **Resolved:**

- (1) To note the Wiltshire Safeguarding Adults Board annual update and to receive information on the safeguarding board's 3 year plan at a future meeting.
- (2) To further improve the working relationship between the Wiltshire Safeguarding Adults Board and the Health Select Committee, as it is not always possible for the Chairman of the Board to attend meetings of the Committee, yet the Committee would benefit from being informed more regularly about the work undertaken by the Board and its sub-groups.
- (3) To organise a meeting for the Chairman and Vice-Chairman of the Committee and the Chairman of the Board to consider options for closer working, whilst avoiding duplication of work (taking into account that the Board reports to the Wiltshire Health and Wellbeing Board).

## 13 Task Group and Programme Boards Representatives Updates

The Committee received an update from the following task group:-

• Child & Adolescent Mental Health (CAMHS) Task Group

## **Resolved:**

## To note the update on task group activity.

### 14 Urgent Items

The Chairman agreed to the following item being taken as urgent business as this was a matter which could not wait until the next meeting.

## Rapid Scrutiny Exercise: Maternity Service Redesign

The Committee received a report which presented the findings and recommendations of the rapid scrutiny exercise for endorsement.

It was noted that, based on the evidence it received, the rapid scrutiny exercise recommended that:-

- This report be presented to Lucy Baker, Acting Commissioning Director -Maternity, Children and Mental health, Wiltshire Clinical Commissioning Group, STP Programme Director Maternity to inform the CCG's decision-making process with regards to the Maternity Services Redesign, especially taking into account the conclusions reached;
- ii) The following areas of the proposal, and / or supporting documents, are amended, or expanded, when the proposal is presented to the public:
  - a. The feedback from the public consultation is presented in a way that separates the responses between actual (and recent, e.g. in the last year) service user and non-user, as well as including numbers in terms of "use" for the different birth options (home birth, FMU, AMU, Obstetric Unit);
  - b. To detail the services that would still be provided at the Trowbridge and Paulton FMU (to avoid any potential confusion over the FMUs being closed);
  - c. To better describe the Community Maternity hubs, for example including a description of what is on offer at the Salisbury hub and listing other "add-on" services that may be considered for the other hubs;
  - d. To include the Community Maternity hubs on the "recommended changes geographically" map;
  - e. To include a timeline for the development of the Community Maternity hubs;
  - f. Further explain the evidence considered and mitigations in place with regards to deprivation, including issues of transport;
- iii) The CCG governing body take the following into account when developing its implementation plan of the service redesign:
  - a. The next community maternity hub pilots to be in the Trowbridge and Paulton areas;
  - b. That the services currently accessed in the postnatal beds are available in the Community Maternity hubs (or elsewhere) are tested and financially secured before the postnatal beds are removed.
- iv) The relevant Overview and Scrutiny committees for Bath and North East Somerset, Swindon and Wiltshire councils be informed of the CCG's proposal and continue receiving regular updates at key points of the

implementation of the Maternity Service redesign, including funding of the Bath AMU and co-design of the services replacing postnatal beds.

# Resolved:

- (1) To approve the report from the rapid scrutiny exercise.
- (2) To inform the CCG that the Committee approves the report and would urge the CCG governing body to take the report into consideration when the CCG governing body makes its decision on the Maternity Service Redesign on Thursday 16 January 2020.
- 15 Date of Next Meeting

### Resolved:

To note that the next scheduled meeting of the Committee would be held on Tuesday 3 March 2020, starting at 10.30am at County Hall, Trowbridge.

(Duration of meeting: 10.30 am - 1.35 pm)

The Officer who has produced these minutes is Roger Bishton of Democratic Services, direct line (01225) 713035, e-mail <u>roger.bishton@wiltshire.gov.uk</u>

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