

HEALTH SELECT COMMITTEE

DRAFT MINUTES OF THE HEALTH SELECT COMMITTEE MEETING HELD ON 11 JULY 2018 AT THE KENNET ROOM - COUNTY HALL, TROWBRIDGE BA14 8JN.

Present:

Cllr Christine Crisp, Cllr Gordon King, Cllr Chuck Berry, Cllr Mary Champion, Cllr Gavin Grant, Cllr Howard Greenman, Cllr Mollie Groom, Cllr Deborah Halik, Cllr Andy Phillips, Cllr Pip Ridout, Cllr Fred Westmoreland, Cllr Graham Wright, Diane Gooch, Irene Kohler and Cllr Trevor Carbin (Substitute)

Also Present:

Cllr Jerry Wickham

44 Election of Chairman 2018/19

Jessica Croman, Democratic Services Officer, called for nominations for the position of Chairman.

Councillor Christine Crisp proposed Chuck Berry be appointed Chairman of the Health Select Committee for the ensuing municipal year.

There being no other valid nominations, the Democratic Services Officer announced:

Councillor Chuck Berry was elected Chairman of Health Select for the ensuing municipal year 2018/19.

45 Election of Vice-Chairman 2018/19

Councillor Chuck Berry called for nominations for the position of Vice-Chairman.

It was proposed that Councillor Gordon King be appointed Vice-Chairman of the Health Select Committee for the ensuing municipal year.

There being no other nominations, it was announced that:

Councillor Gordon King was elected Vice-Chairman of Health Select Committee for the ensuing municipal year 2018/19.

Following, Cllrs Jerry Wickham, Cabinet Member for Adult Social Care, Public Health and Public Protection, read a statement clarifying his comments at the previous meeting, noting that Mears and Somerset Care were key partners and that the re-commissioning taking place was part of the contracted process and not based on performance.

46 **Apologies and Membership Changes**

Apologies were received from:

Councillor Claire Cape who was substituted by Councillor Trevor Carbin.

47 **Minutes of the Previous Meeting**

The minutes for the meeting held on the 24 April 2018 were presented.

Resolved:

To approve and sign the minutes of the previous meeting of this Select Committee held on 24 April 2018.

48 **Declarations of Interest**

There were no declarations of interest.

49 **Chairman's Announcements**

The Chairman made the following announcements:-

Green paper on care and support for older people

In June 2018, the Health and Social Care Secretary announced a delay to the publication of the Green Paper on social care to the autumn of 2018, following the announcement that a ten-year plan for the NHS would be developed. The Green Paper aimed to ensure that the care and support system would be sustainable in the long term and would include a variety of topics.

Adult Care Charging Policy update

It had been confirmed that all remaining reassessments under the new policy had been completed or are underway.

Local Area Coordinators

The Cabinet Member for Adult Social Care, Public Health and Public Protection gave a further update noting that all 3 coordinators had been recruited and

would start in September. The programme had been extended by another 6 areas and would be paid for by the better care fund for the next 3 years. The aim of the coordinators would be to primarily look at social deprivation, coordinate agencies and join up the working. The University of Southampton would be involved from the beginning helping implement and develop the programme.

50 **Public Participation**

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

51 **Cabinet Items**

The Committee was made aware of decisions made at Cabinet on items relevant to the committee and were outlined within the agenda.

It was noted that Cabinet had agreed changes to the structure of the council at the top tier and a decision was made not to appoint a fourth Corporate Director role, which was to be a joint post with Wiltshire CCG, due to the future publication of the Government Green Paper. The Green Paper was likely to focus on the continuation of collaborative working to integrate health and social care services. It was also anticipated that the green paper would provide clarity on the future direction for NHS commissioning; particularly commissioning by CCGs of health services. On this basis the council agreed with the CCG not to progress with the appointment to the joint Corporate Director role.

The Cabinet Member for Adult Social Care, Public Health and Public Protection agreed that an update would be provided once more information was available and for now one of the current Corporate Directors would oversee the responsibilities taking due regard to the advice of professional officers.

52 **Relocation of Head and Neck Cancer Rehabilitation Services from Oxford to Swindon**

The Chairman explained that the relevant officers were unable to attend the meeting and that officers would be in attendance at the September meeting to answer any questions.

A statement was read on behalf of Nick Crowson-Towers, a survivor of head and neck cancer and Patient Lead for "Care closer to Home project" and attached to the minutes.

53 **Integrated urgent care mobilisation programme - update**

Jo Cullen, Director of Primary and Urgent Care, Group Director West Wiltshire, Wiltshire CCG, gave an update on the Integrated Urgent Care Mobilisation programme with the key points focusing on:

The programme went live on 1 May 2018, Medvivo was the lead service provider and the NHS 111 service had been subcontracted to Vocare. Over 40,000 calls had been received since the service went live which was more than expected and work was being done to investigate why. Having only been in operation for 2 months more tweaks would occur to smooth out the operations, the winter period would also need to be carefully managed and monitored as well as the different segments such as the under 5s.

The Chairman praised their work noting that a visit to the centre would be a beneficial experience and invited Ms Cullen back in 6 months' time for a further update.

Resolved

- a. That the committee supports the proposed work**
- b. An update would be brought back to committee in 6 months**
- c. A visit to the call handlers and clinicians site in Chippenham would be arranged**

54 **Maternity Transformation Plan**

The Chairman introduced the item noting that the previous chair and vice-chair had been contacted by CCG officers who asked to bring an update on the maternity transformation plan and the proposals reached after the investigative work is undertaken. They would be seeking the committee's endorsement of their proposal, which meant a formal meeting would be required. Unfortunately, the information would not be available until after the next scheduled Committee meeting although an option would be to hold a rapid scrutiny meeting.

The Chair handed over to Sarah Merritt and Emma Mooney, who gave an update on the maternity transformation plan.

The transformation plan was a national ambition across maternity units to improve customer experience and to make the units more efficient. The offer would include; continuity of care; improved personalised care and choice with parity of access; creation of clinical hubs to provide care closer to home and to deliver seamless pathways across organisation and geographical boundaries.

It had been identified that births at freestanding units had dropped over time and more work was needed on the allocation of staff.

Currently assurance was being sought by NHS England and it was hopeful that assurance would be given. The next stage would be a formal public consultation which would start on the 27 September and finish on the 19 December 2018.

The Chair suggested holding a rapid scrutiny meeting jointly with Bath and Swindon and any other CCG areas, which was welcomed.

Resolved

To hold a Rapid Scrutiny on 27 / 28 September (or close to date). Joint with Bath and Swindon and any other CCG areas.

Volunteers: Gordon King and Chuck Berry

55 AWP Transformation Programme - update

The Chairman introduced the item which had been requested at the previous meeting.

Nicola Hazle, Clinical Director for BANES, Swindon and Wiltshire, Avon and Wiltshire Mental Health Partnership NHS Trust, gave an update on the implementation of the transformation programme and the next steps involved with the programme.

Points made included:

- Progress in the following areas was noted; Acute Community Unit, Primary Care Liaison Service, Place of safety, Standard Care and Discharge Packages and Bed Management.
- An update of the next steps of the transformation programme.
- The importance of integrating and sharing information.

In response to questions asked it was noted that: the telephone triage had been working well and enabled a quicker response; The Acute Community Units were voluntary with an offer of support was provided between 4-6 weeks with an expectation that the service use would reduce towards the end of the 4-6 weeks. An out of hours team was also in operation to support the service users and that some detailed work was being carried out on home treatment, crisis care and response.

Resolved

1. Feedback from service users on the place of safety + include profiles of which service users were contacted, to be provided to committee.

2. To receive an update in a year (December 2019).

56 Local Government and Social Care Ombudsman report (Ref 16 015 946)

The Chairman introduced the item noting that the report had been considered at Cabinet on the 3 July 2018.

The Cabinet Member for Adult Social Care, Public Health and Public Protection went on to note the response from Cabinet outlining and action plan on how to mitigate the issues going forward. It was explained that complaints within the council should be handled via a 2 stage process and external complaints follow a 1 stage process.

Resolved

To note the report, the findings from the LGO, the response provided by Cabinet and the proposed action plan and to welcome an update in 6 months on outstanding actions.

57 CQC review

The Cabinet Member for Adult Social Care, Public Health and Public Protection introduced the item and explained the outcomes of the review and the issues around not having enough carers in the community and the lack of joined up working.

Between receiving the draft report and the final report a lot of work, a long side partners, had taken place. An action plan had been produced, which was included with the agenda and work would start in July 2018.

Resolved:

To ask the Scrutiny Officer to include update on the actions from the action plan as per their due date on the committee's forward work programme.

To ask the committee to consider if there are any areas within the report that they feel require further OS involvement – suggestions to be emailed to the chair / scrutiny officer.

Cllrs Groom and Greenman left at 13:00

Diane Gooch left at 13:10

58 Rapid scrutiny report - NHS Health Checks

Members thanked and congratulated officers and members involved with the rapid scrutiny task for their hard work.

Resolved

To note the report and support the recommendations to the committee and to the Cabinet Member

59 Non-elected representation on Committee

Members discussed the non-elected representatives on the committee and it was;

Resolved

1. to agree the following appointments:

WSUN

SWAN

Healthwatch

Wiltshire Centre for Independent Living (WCIL)

With each organisation to nominate its representative.

2. to review the appointment of non-elected representatives on Health Select Committee on a yearly basis, at the meeting where the election of chairman and vice-chairman takes place, to ensure that the organisations remain representative of service users and / or Wiltshire residents.

60 Task Group and Programme Boards Representatives Updates

There were no further updates given as all of the information was outlined within the report.

61 Forward Work Programme

The committee considered the forward work plan and ways in which they would scrutinise the sustainability and transformation plan / partnership (STPs) for Wiltshire and the Health & Wellbeing Board.

Resolved

1. Invite STP to attend a meeting

2. To include the following on the forward work plan:

- **New Wiltshire health and social care model**
- **A single overarching health and social care strategy, improving outcomes with a focus on prevention and early intervention**
- **Strengthening joint commissioning across the whole system**

- **Improving Wiltshire's Health and Wellbeing Board effectiveness**
- **Unifying and developing whole system governance arrangements**
- **Developing a sustainable integrated workforce strategy**
- **Implementing digital opportunities and information sharing across the system**
- **Developing a single, integrated communications strategy**

62 Urgent Items

There were no urgent items.

63 Date of Next Meeting

The next meeting would take place on 11 September at 10:30am.

(Duration of meeting: 10.30 am - 1.20 pm)

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

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The Case for ‘Care Closer to Home’ Swindon and Wiltshire patients – the Patient View

To learn of one’s Head & Neck Cancer is a major shock!

The Medical Panel ‘Interview’ with the **Oxford Cancer Treatment Team** is the start of a long treatment journey through surgery, recovery and rehabilitation. Nothing can prepare you for the gruelling road ahead.

Head & Neck Cancer (HNC) treatment is *so* complex – involving many vital body areas – the face, throat, oesophagus, tongue, saliva glands, voice, jawbone or teeth for example - demanding numerous medical skills.

The nature of **HNC** can be devastating. Physical changes can affect how we look, can we or how we speak, what we eat or drink, and how well we swallow, if at all.

The psychological impact of all this and how we feel in ourselves commonly results in lack of confidence in returning to a reasonable life-style - anxiety regarding family or social excursions, even going out for a meal!

The surgery, radiotherapy, chemo-therapy and follow-on appointment journey spans 5 years, and requires numerous attendances typically at **Oxford HNC Blenheim Wing in the Churchill Hospital**.

A large number of follow up appointments may be needed per year with various members of the Oxford treatment team – on average around 25 per patient over the 5 years, and this is following the several journeys needed for chemo or radiotherapy.

One patient from Swindon needed 81 follow up appointments in one year.

The distance and time to travel between Swindon and Oxford can be so demanding:-

- The difficulty of travel when feeling ill or tired during treatment – up to 90 minute journeys each way if driving, then needing to add more time for Oxford traffic and parking,
- Use of public or hospital transport which overall can take a whole day for an appointment,
- Preparing suitable food/drink for a long day travelling,
- The need to be *dependent* on relatives or a carer can impact on family and working life, especially for the increasing number of younger **HNC** patients through Human Papilloma Virus!
- The impact on jobs, the family and babysitters - even if employers are supportive.
- **The cost/time of travel is a *major* issue.**

Fear/Uncertainty

Subsequently the *longer-term* after-effects of **HNC** treatments can be serious, alarming and unpredictable.

There always exists the fear of something going wrong, and knowing that help from someone with the HNC knowledge who *really* understands you is a *long way away!*

The uncertainty of treatment or advice, its availability and location-or NOT, can result in panic calls to The Oxford Blenheim Team, or worse still a visit to A & E at GWH in Swindon.

Head & Neck Cancer Rehabilitation: Care Closer to Home Project

How reassuring it will be to know that advice and rehabilitation will be available and performed by a specialist team closer to home.

Nick Crowson-Towers

HNC Survivor: Surgery – Oxford May 2004

Patient Lead 'Care Closer to Home Project'

Voluntary Supporter of Patient/Carer Groups, NHS TVCA, Macmillan