

## **Health Select Committee**

# MINUTES OF THE HEALTH SELECT COMMITTEE MEETING HELD ON 3 MARCH 2020 AT KENNET COMMITTEE ROOM, COUNTY HALL, TROWBRIDGE.

### Present:

Cllr Chuck Berry (Chairman), Cllr Christine Crisp, Cllr Clare Cape, Cllr Mary Champion, Cllr Gavin Grant, Cllr Howard Greenman, Cllr Mollie Groom, Cllr Andy Phillips, Cllr Pip Ridout, Cllr Tom Rounds, Cllr Fred Westmoreland, Cllr Graham Wright and Denmark

# Also Present:

Terence Herbert and Cllr Laura Mayes

# 16 **Update**

Terence Herbert, Chief Executive Officer, gave an update on the Coronavirus outbreak noting that currently no cases had been reported within Wiltshire and a number of strategy and planning meetings with partners had taken place. Public Health England were providing frequent updates and service areas were updating their contingency plans. The immediate issue was to reassure and communicate with the public.

In response to a question asked about local media headlines causing panic and how the Council was responding to the panic, it was noted that the Council had written to all schools, updated information on social media and with local media sources, briefed all staff members and spoken to local press.

## 17 Apologies

Apologies were received from:

Joanne Burrows, SWAN, who was substituted by Lindsey Burke.

# 18 Minutes of the Previous Meeting

#### Resolved

To approve and sign the minutes of the previous meeting held on 1 January 2020.

## 19 **Declarations of Interest**

There were no declarations of interest.

# 20 Chairman's Announcements

The Chairman made the following announcements:

## Dorothy House patient takes on incredible 125-mile canoe challenge

A Wiltshire resident and patient of Dorothy House, Kevin Dobson, was training to take part in the 125-mile Devizes-Westminster (DW) canoe race to raise funds for the Hospice. The race would take place on the river Thames in April 2020 and Kevin hoped he would be well enough to compete along with his son Edd Dobson. Kevin was currently being treated for terminal cancer and the race in April was outside his expected survival period.

## Seminar and Networking Event on Financial Abuse Issues

The Democratic Service Officer had forwarded the seminar information onto the members which was due to take place on Tuesday 31st March and supported by Irene Kohler in her role as Salisbury's Older People Champion. The seminar was now fully booked although if enough people were on the waiting list an additional session could be held.

#### "the state of children's mental health services"

Anne Longfield, the Children's Commissioner for England, recently published her report on 'The state of children's mental health services'. The report drew attention to the provision of services for children who need help, support and treatment. The briefing also looked ahead to assess whether current Government plans go far enough to meet demand.

This briefing showed that while the NHS had made progress in the provision of mental health services for children, the current system was still far away from adequately meeting the needs of all the children in England with mental health problems or the children who fell just below the threshold for clinical diagnosis.

#### Cabinet items

No HSC related items went to the February Cabinet meeting.

The Cabinet FWP was briefly discussed noting that Cabinet would be making a decision on the Virgin Health care contract to be extended, and to also agree the length of the contract extension. The Virgin Healthcare contract was commissioned jointly by the Wiltshire CCG and Wiltshire Council.

A briefing had been requested, following this it would be determined if a rapid scrutiny exercise was required.

# 21 **Public Participation**

There were no members of the public present.

## 22 **Forward Work Programme**

The Committee was invited to consider its forward work programme.

After some discussion it was,

#### Resolved:

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

A pre-meeting briefing to find out more about the work undertaken by Dorothy House.

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.

# 23 <u>Wiltshire Safeguarding Adult Board - three-year strategy</u>

Mr Richard Crompton, Wiltshire Safeguarding Adult Board Chairman, introduced the Boards three year strategy noting that they had reached the end of the first year and key points included:

- Safeguarding Adults Reviews (SAR) had taken which identified issues with self-harm, self-neglect, county lines, criminal and sexual exploitation. Although these represented a small percentage they were high risk.
- A potential issue for Wiltshire was military rebasing to bring safeguarding issues.
- Care homes had a duty to report any safeguarding concerns and incidents which showed a health culture of reporting.
- There were three areas of strategic focus: quality assurance, voice and influence, and prevention.
- Quality Assurance: The WSAB had supported the development of the Multi-Agency Safeguarding Hub for adults which had helped compile and interpret statistical results. The hub was beginning to meet their ambitions and reducing their volume of calls. A peer assessment audit had also taken place which noted improvements year on year. The results had been shared in the south west and other local authorities were interested.
- Voice and influence: Meetings had taken place with service users and carers through reference groups to learn from their experience. The feedback was positive. Representatives also sat on the main

- Safeguarding Board and was working to embed and make improvements in the next year.
- Prevention: Lessons learnt from case reviews and the development of relevant policies and procedures took place.
- An alcohol learning event was held last year which had been well attended by agencies.
- Outcomes of the SARs and the full report could be accessed via <u>www.wiltshiresab.org.uk</u> and thematic learning from case reviews via <u>www.wiltshiresab.org.uk/wp-content/uploads/2019/06/SAR-Learning-Briefing-1.pdf</u>
- The review of adult E found that information had not been passed on to the hospital and domiciliary needs on discharge to the care agency. The Hospital Passport which should accompany a patient with learning difficulties had not been used.

In response to questions asked it was noted that:

- The patient passport would not be incorporated in new ways of handling electronic data.
- The spread and reach of the user groups was not as extensive as would like although they were well attended, they were looking at how to better utilise the people that did attend to ensure better representation and disseminate information.
- Geographically the groups were well represented, although there were transport issues and better ways to communicate were being explored.
- There was a family approach to safeguarding although the statutory nature of the WASB was that vulnerable adults were safeguarded.

#### **RESOLVED**

To note the outcome of the Safeguarding Adults Review relating to Adult

That the next annual update from the Wiltshire Safeguarding Adult Board include confirmation that the board ensured the recommendations of the Safeguarding Adult Review for adult E and thematic learning from case reviews were shared and effected change across local organisations.

To support the work the board is doing and encourage working with Local Area Coordinators, Social Prescribers and others to ensure a cohesive overview of services.

To acknowledge the aims of the board's Strategic Plan 2019 – 2021 and continues to support the work of the Board to safeguard vulnerable adults in Wiltshire

To arrange a meeting for the Chair and Vice-Chair of the Committee and the Independent Chair of the WSAB to review engagement between the two and to ensure enhanced partnership working

# 24 <u>Intermediate Care Bed Service - update</u>

James Corrigan, Better Care Fund Lead in Joint Commissioning, updated the committee on progress for the procurement of intermediate care beds, the key points were:

- A procurement tendering exercise had been complete and was now in a stage of standstill which was a two week period to consider legal issues if challenges were made regarding the process.
- Intermediate care beds (ICB) operated in three areas in Wiltshire –
  North, West and South with most ICB located in the south due to not
  having community hospitals in the south.
- There were currently 65 beds 55 step down and 10 step up beds which could be used flexibly.
- The procurement exercise was being carried out to change how the beds were used as the beds were often not used for their purpose.
- The new contract aimed to create a new category of system flow beds for those who needed to be looked after but did not need an ICB.

In response to questions asked it was noted that:

- The aim was not to buy more beds but to use the ICB's more flexibly. The most suitable model would be identified during the first 2 quarters.
- Cost would be monitored throughout and both fixed and variable costs would be looked at.

#### **RESOLVED**

To note the update provided in the report.

To receive further information on the review of Intermediate Care Services at a pre-meeting briefing once the service review is nearing completion and on the definition of system flow beds.

# 25 Salisbury NHS Foundation Trust - quality priorities 2019/20 update

Lorna Wilkinson, Director of Nursing, and Claire Gorzanski, Head of Clinical Effectiveness for the Salisbury NHS Foundation Trust gave a presentation on Salisbury NHS Foundation Trust - quality priorities 2019/20. The key points of the presentation were:

 Work with partners to prevent avoidable ill health and reduce health inequalities had improved. A Treat Me Well campaign was launched in

- 2019 and more work was being done to embed learning disability standards.
- Exceeded c-diff infection targets 18 infections were picked up, 8 within the hospital and 10 outside of the hospital. The hospital had the lowest gram negative blood stream infections in the region.
- Sepsis screening and escalation to doctors had improved. Sepsis treatment - administering antibiotics within one hour had decreased which would be monitored.
- Patients over 65 now received three fall prevention measures: mobility and medication assessments and lying / standing blood pressure checks.
- Achieved 79% of hip fracture best practice (target was 80%), there was sometimes a struggle with carrying out operations within 36 hours and work was being done to look at lessons learnt.
- Work with partners to improve patient flow through the hospital was being worked on. The target of 90% of consultant review within 14 hrs of admission was being met, although only 18% of patients were being discharged before midday where the target was 33%.
- The OPAL had increased to a 7 day service.
- Readmissions had increased. There was no clear reason for the increase and it was being looked into.
- Targets for delayed discharge had all been missed, this was due to how
  the hospital worked with partners and internal patient flow. The Local
  Delivery Board held a workshop looking at figures and priorities. Also an
  internal expert panel was held each week which was multi agency to look
  at patients stays over 7 days and specifically look at complex discharges
  to identify lessons to learn.

Issues such as not having medicines ready and transport were areas being explored.

If a patient was being discharged after noon, the patients circumstances were taken into account on whether they would be kept for another day or discharged.

 Attend Anywhere was a new technology "digital" appointment via phone, tablet, etc. The system had been trialled with speech and language therapist at school which enabled the child to stay in school and not miss class time and the therapist was able to demonstrate techniques for the teachers. Feedback so far had been positive.

Consultant Connect was currently being used at Bath hospital, which enabled consultants to receive specialist advice very quickly and reduced the amount of further appointments required. The next stage was to get clinicians on board with the programme and conversations were taking place.

Work was ongoing to Improve the health and wellbeing of staff.

## **RESOLVED**

To thank officers attending and for the quality of their presentation.

To note the Salisbury NHS Foundation Trust quality priorities for 2019/20.

To welcome a similar update from the Salisbury NHS Foundation Trust on its quality priorities for 2020/21, with segmenting figures by age where possible.

Cllr Howard Greenman left the meeting at 12.07.

## 26 **CCG updates**

Maternity Service Redesign

Lucy Baker, Director of Service Delivery for Banes, Swindon and Wiltshire CCG, gave an update on the maternity redesign rapid scrutiny (RS) exercise. The RS looked at the process followed and found that the CCG's decision-making process was based on information that was available to them. The report was then taken to a CCG meeting in January, where the feedback of the RS was valuable to ensure the correct information was presented in an improved format. The recommendations were supported and the project was now moving into the implementation stage.

The RS suggested that clear information should be provided to mothers, in response to that, visits to communities had taken place to provide workshops to listen and provide information on what was happening next.

The first community hub was live in Salisbury which had received good feedback especially response to the breast feeding group. The next community pilot hub would be running in Trowbridge by the end of April 2020.

10 community of care pilots would be up and running to support mothers through pregnancy. The first pilot running in Salisbury had been working to support and make a difference to mums who had experienced trauma during a pregnancy and had received very good feedback.

In response to questions asked it was noted that:

The funding for the Salisbury unit had been secured and due to open in December. Bath RUH had a £6M funding gap and a fundraising campaign would be launched. The next grant funding tranche was in April / May. The RUH unit was not expected to open until 2022/23 and the capacity would not be needed until then. Capital funding had been secured and a plan B was in place for fundraising if required.

#### Mental Health

The mental health project is about doing things differently. The project has involved talking to service users, families, carers and partners to understand what wasn't working, what was working and what could be better. The feedback from those conversations was used to develop a draft strategy which was now being updated. Thrive MH Programme Board were responsible for the governance and provided oversight for all of the mental health transformation programmes. There were six strategic work streams and each was delivering a key priority.

A key priority action and risk within the service was having a strong workforce and work was being done to design the workforce of tomorrow today. The committee were also informed about the Daisy unit in Devizes which supported people with learning disabilities and had some positive results. Work was also being done to commission a personality disorder service. Mental Health AWP had reviewed 111 calls as part of an investigation looking at how early intervention and prevention could be used to reduce emergency calls. Mental health professionals would also be available on the 111 service with band 7 nurses supporting band 5 nurses in crisis management. A single point of contact service would open on 20th March to provide a place of calm in Salisbury and an event was taking place at the Apex Hotel in Bath on the 24th March to co-design the pathway and the committee members were invited to attend.

In response to questions, it was noted that the banding, roles and responsibilities were being looked at to ensure the correct banding. An issues faced was that not enough people were building careers within mental health.

# Social Prescribing

The committee welcomed Helen Scott, Transformation Project Manager, Primary Care, WCCG, PCN Manager, Devizes and Business Manager, Market Lavington Surgery and Neal Goodwin, Associate Director Community & Integrated Commissioning, NHS Wiltshire Clinical Commissioning Group.

They explained that social prescribing was a personal, strength and asset based approach in communities. The CCG aimed to map all of the services within Wiltshire which was difficult due to the amount of un-commissioned services being offered. The CCG was tasked with implementing social prescribing in two areas; for high intensity users of emergency departments (ED) and recruiting social prescribing link workers in Primary care Networks (PCNs).

The first task involved Identifying high intensity ED users, those who used the ED more than 10 times a year, and for social prescribers to make contact with those users as a way of reducing their use of ED for non-emergency needs.

Wiltshire CIL in the voluntary sector, was commissioned to recruit community connectors to offer social prescribing within communities on a flexible basis and was later offered to create a package, using the existing funding, to also recruit social prescribers on behalf of the PCN's, creating a collaborative environment. Currently 6 PCN's had signed up to the offer. KPIs were being used to measure the outcomes and impacts of the social prescribing although it could be a long time before results would be available.

The CCG set themselves a task of scaling up social prescribing and came up with an initiative to connect 500 people in 500 days within Wiltshire as part of a social movement to encourage people to have simple conversations and connect with each other, this became known as the Wiltshire Swarm/ Wiltshire Bees.

### Citizens Panel

Tamsin May, Deputy Director for Communications and Engagement, explained that the Citizens Panel was an engagement tool to gather actionable insights to inform decision making. It was an online community which conducted four surveys annually, the surveys could also be carried out on paper or via telephone if online is a barrier. There was an aim to gain 1,000 people, who were representative of the population in Bath and NE Somerset, Swindon and Wiltshire which was representative of the population according to Census data and JSNAs. Funding had been received and Jungle Green, Market Research Agency, had been appointed through a tendering exercise to set up and run the citizens panel. So far 13 events had been held and 390 members recruited, once 500 had been recruited, the 500 would be analysed to identify any gaps in groups representation and the carry out targeted recruitment.

# **RESOLVED - Maternity Service Redesign**

To note the update provided on Maternity Service Redesign and response to the Rapid Scrutiny's report.

To thank CCG officers for their work and continuous information provided to this committee.

#### **RESOLVED - Mental Health**

To note the update provided on Mental Health transformation.

To note that there is on-going work with the Children's Select Committee to explore additional overview and scrutiny involvement with regards to the Mental Health transformation and Whole-Life Pathway.

To circulate details of the 24 March event to co-design the pathway to committee members.

## **RESOLVED - Social Prescribing**

To receive an update (preceded by a pre-meeting briefing) to report on:

- performance;
- recruitment, appointment and retention of social prescribers
- models of social prescribers in Wiltshire (subcontracted as Community Connectors and other options);
- partnership working between Health, the council and voluntary sector with regards to social prescribers (ensuring no gaps);
- outcomes of the Wiltshire bees and swarms (and ongoing activities).

To circulate details and information to refer "bees".

### **RESOLVED - Citizens Panel**

To circulate email address, web address and social media link to committee

Cllrs Champion and Groom left the meeting at 1pm.

# 27 <u>Task Group and Programme Boards Representatives Updates</u>

The Chair noted that the Child and Adolescent Mental Health (CAMHS) Task Group was due to present its final report at the committee's meeting on 23 June 2020.

There were no further updates.

## 28 Urgent Items

There were no urgent items.

# 29 Date of Next Meeting

The date of the next meeting was Tuesday 23 June 2020 starting at 10.30am at County Hall, Trowbridge.

(Duration of meeting: 10.30 am - 1.42 pm)

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