

Health Select Committee

MINUTES OF THE HEALTH SELECT COMMITTEE MEETING HELD ON 11 JANUARY 2022 AT COUNCIL CHAMBER - COUNTY HALL, BYTHESEA ROAD, TROWBRIDGE, BA14 8JN.

Present:

Cllr Johnny Kidney (Chairman), Cllr Gordon King (Vice-Chairman), Cllr Clare Cape, Cllr Dr Monica Devendran, Cllr Gavin Grant, Cllr Howard Greenman, Cllr Antonio Piazza, Cllr Pip Ridout, Cllr Mike Sankey, Cllr David Vigar, Diane Gooch and Irene Kohler

Also Present:

Cllr Ian Blair-Pilling, Cllr Richard Clewer and Cllr Jane Davies

1 Apologies

Apologies for absence were received from:

Cllr Mary Champion

Cllr Jack Oatley

Cllr Caroline Corbin

Lindsey Burke, SWAN Advocacy

Sue Denmark, Wiltshire Centre for Independent Living

Cllr Nick Holder

Elizabeth Disney, BaNES, Swindon and Wiltshire (BSW) Clinical

Commissioning Group (CCG)

Tracy Cox, BSW CCG

Claire Thompson, Great Western Hospitals NHS Foundation Trust

2 Minutes of the Previous Meeting

Resolved

To confirm the minutes of the meeting held on 2 November 2021 as a true and correct record.

3 **Declarations of Interest**

There were no declarations of interests.

4 **Chairman's Announcements**

The Chairman announced that the meeting was being recorded and webcast online.

He reminded the committee that the new statutory date for the implementation of the Integrated Care System (ICS) had moved to 1 July 2022, allowing an additional three months to scrutinise the transition from the existing Clinical Commissioning Group (CCG) model.

The Chairman then invited committee members to an informal committee meeting on 21 January to consider the health and care aspects of the council's draft business plan.

Details of relevant recent meetings attended by the Chairman and Vice-Chairman since the previous meeting were also relayed to the committee, including with AWP and Wiltshire Health and Care. The Chairman reported that the Vice-Chairman and he had received a briefing on the new block contract for care homes and were happy with the approach being taken. They would attend a further meeting to consider the outcome of the procurement process.

5 **Public Participation**

Questions Q22-01 and Q22-02 were received from the following member of the public:

Mr Chris Caswill

The Chairman referred the committee to questions and written responses included in Agenda Supplement 1.

A supplementary question was received from Mr Caswill in relation to Q22-01. The member of the public asked whether the CCG would be invited to the March committee meeting to explain their analysis of the issues at Patford House GP Practice, to note the steps being taken to address the findings of the Care Quality Commission (CQC) inspection as well as to report the lessons learnt.

The Chairman thanked Mr Caswill for highlighting the issue. He noted that it was for the committee to maintain oversight to ensure that the CCG's plan was being put in place. To that end, the Vice-Chairman and he had arranged a meeting with the CCG's Director of Primary Care to discuss the CQC's report and the steps being taken by the CCG to address the issues raised. If, as an outcome of that meeting, it was deemed appropriate to bring the item to a future committee then that course of action would be taken.

A supplementary question was also received in relation to Q22-02. Mr Caswill clarified that his initial question related specifically to the future BSW Health and Care Model and specifically whether the committee endorsed, without comment, a policy proposal of digital by default consultation appointments. If this was not the case, he asked whether the committee would take the opportunity to question this during the 11 January meeting.

In response to Mr Caswill's question the Chairman reassured the public that the model would be discussed during item 10, so there would be the opportunity for members to debate the issue.

6 Impact of Winter Pressures on Acute Hospital Services in Wiltshire

The Chairman reported that in November the Vice-Chairman and he had attended a positive meeting with Stacey Hunter, Chief Executive Officer for the Salisbury NHS Foundation Trust, and that she had kindly agreed to provide an update on the pressures being felt by the acute hospitals supporting Wiltshire.

The chief executive gave an overview of the pressures facing the NHS and compared them to the winter pressures normally faced outside of a pandemic. Focusing specifically on the last few weeks, she reported that Royal United Hospital (RUH) in Bath and Great Western Hospital (GWH) in Swindon had both recently declared major incidents and that the RUH still had a critical incident declared.

She explained that the need to separate Covid-19 infected and non-infected patients made the delivery of services more complex and meant that hospital infrastructure couldn't be used at 100 percent capacity. However, she was keen to stress that there were a number of incremental factors causing the pressures, such as staff shortages, increased demand and issues around hospital discharge.

The chief executive stressed the importance of working together and was keen to thank local partners for their support, explaining that positive things could be built upon the back of those relationships. She highlighted that it was important for the trust to understand how it could best use its expertise to contribute to the local community.

During the discussion points included:

- Members thanked the chief executive for the update and were pleased to hear about the collaborative working between primary care and community services.
- In response to a question about why the RUH had so many staff absences, 781 as of 5 January, when compared to Salisbury Foundation Trust, the chief executive stated that one possible reason was that many RUH staff lived in Bristol, an area with higher Covid-19 rates.
- Questions were also asked about the contribution of mental health issues to staff absence and it was noted that mental health issues were in the top three issues for absence, but this had been the case pre-pandemic.
- In response to a question about the relatively high level of Covid-19 admissions to GWH, it was noted that Swindon had a higher community infection rate than other areas such as Salisbury.
- The chief executive spoke about the importance of ensuring equal access to healthcare services in achieving consistent patient outcomes across communities.

- Cllr Richard Clewer, Leader of Wiltshire Council and Co-Chairman of the Health and Wellbeing Board explained that the council was looking into the factors contributing to inequality in order to holistically address systemic issues. He noted that the Health and Wellbeing Board would be focusing on health inequalities as part of this work.
- The chief executive stated that restrictions had reduced the numbers of hospital admissions. Of patients found to have Covid-19, approximately two thirds were admitted because of the condition and around a third were incidental findings, where Covid-19 was found after testing.
- When asked about potential changes to self-isolation rules, the chief executive noted that there could be benefits in staff being able to return to work earlier than under the current rules.

Resolved

- 1) To thank the Chief Executive, Salisbury NHS Foundation Trust, for the update.
- 2) To acknowledge the committee's appreciation of the work of health and care staff in their response to the pandemic.
- 3) To note the commitment within the system to address health inequalities.

7 Overview of Adult Social Care Winter Pressures

Emma Legg, Director for Adult Care, Living and Ageing Well, introduced the report noting that it had been written before Christmas, so the figures had changed. The director reported that there had been unprecedented demand for supported discharge over the past two years. To illustrate this point, she highlighted that in 2019/20 they had purchased 60 care home beds for people needing 24 hours support, once they had been in hospital, but that the current figure stood at 143. There had also been a marked increase in the number of referrals to the reablement service.

The director drew attention to the council's new in-house domiciliary care service Wiltshire Support at Home, stating that it was now delivering more hours of care than anticipated and was allowing them to better support patients as they were being discharged.

Concerns were raised about the recent increase in the number of care homes being closed due to Covid-19, 53 at the time of the meeting. However, the director noted that the majority of Covid-19 outbreaks were now community infections found in staff, rather than in the residents themselves. Staffing was an area of particular concern with over 700 provider staff having left their jobs in the last six months.

During the discussion points included:

• In response to a question about the number of patients being readmitted, 27 percent within four weeks of discharge, the director reported that the figures

related to the reablement service, where patients tended to have a high degree of need. It was reported that the situation was being monitored and the council was working closely with acute providers.

- When asked about the long-term viability of domiciliary care providers working with the council, the director noted that providers had their own sustainability plans, but they were encouraged to notify the council of issues as early as possible. It was reported that the council's commissioning and brokerage teams worked closely with providers and through Wiltshire Care Partnership. Mitigation measures were in place and nationally there had been changes to funding packages for discharged patients.
- Given the staffing pressures in the industry, care was taken not to recruit from other providers wherever possible. The director spoke about the importance of promoting care as a career and of using the apprenticeship levy. The reasons for West Wiltshire losing a larger proportion of its workforce than other areas of the county were unclear, but she noted that there were more retail opportunities located in that area.
- It was reported that the Wiltshire Support at Home Service was still new but focused on expanding capacity. Modelling was ongoing to access the impact of the service.
- Members asked about the use of the Shared Lives Programme in supporting hospital discharge. The director noted that this was being used by some local authorities (LAs) and explained that Wiltshire was keen to liaise with other LAs to learn about their experiences. Work was also being done to review the use of technology, although there was not a one size fits all approach.
- In response to a question about the use of prophylactic natural supplements in supporting immunity, Dr Peter Collins, Chief Medical Officer at Salisbury Foundation Trust, noted that a number of Covid-19 medicines were in development and it was hoped that this would reduce pressure on hospitals over time. Prophylactic treatments would likely be used in subsequent iterations of Covid-19 as the population learned to live with the disease, but the current focus was primarily on measures such as mask wearing and social distancing.
- Chief Executive Officer for the Salisbury NHS Foundation Trust, Stacey Hunter, explained that the care system should be a health model, rather than an ill health model, so lots of work was being done to focus on reducing admissions by aging and living well.
- In response to a question about how help from the voluntary sector was being organised, the chief executive stated that they had rethought their workforce strategy to see to make the most of the resources offered by the voluntary sector.
- Cllr Jane Davies, Cabinet Member for Adult Social Care, SEND, Transition and Inclusion, spoke about the importance of co-working. She explained that the council's new Prevention and Wellbeing Team would work alongside Community Engagement Managers (CEMs) to assist the community sector.
- Lucy Townsend, Corporate Director of People, reported that a Home from Hospital Service contract was due for tender and they were encouraging bids from the voluntary sector. A further contract for day care opportunities would also be open to voluntary sector bids.

Resolved

- 1) To note the contents of the report.
- 2) To recognise the work of the council in its support of the provider market.
- 3) To acknowledge and express the committee's appreciation to care staff and the voluntary sector in their response to the pandemic.
- 4) To invite a further update within six months, updating on the challenges facing adult social care and its ongoing response.

8 **BSW Diagnostics Programme Update**

Dr Peter Collins, Chief Medical Officer at Salisbury Foundation Trust, referred the committee to the report starting on page 33 of the agenda pack updating the committee about the national diagnostics programme and how it would impact local residents. The doctor noted that the need to provide urgent care during the pandemic had impacted routine testing. He reassured the committee that diagnostics would be a key part of the integrated care system and then invited them to provide comment on the report.

During the conversation key point included:

- Members thanked the doctor for the report. The chief medical officer noted that it was not yet a fully formed plan as he wanted to give the committee and the public a chance to input into the proposals.
- In response to a question about how transport had been considered in the development of the programme, the chief medical officer reassured the committee that this had been an important consideration due to the rural nature of the area. The aim was to deliver care as close to the population as possible. He explained that it was difficult to move around CT scanners, but the aim was to separate elective and emergency work.
- The doctor stressed that staffing was an important consideration when deciding where to locate sites, as experts were required to interpret the results and it was vital to employ the staff as efficiently as possible.
- When asked about whether the aim was to create a one-stop-shop, he stated that it could be a way forward, but some compromises might be required. The chief medical officer explained that a one-size fits all approach would not be suitable for all patients and services had to be delivered based on the resources available.
- Members asked questions about the financing of the programme and it was stressed that it was anticipated that there would be a number of funding bids to the national programme.
- Mark Harris, Director of Commissioning at BSW CCG, confirmed that the revenue cost, money over and above the standard funding provided, of the MRI scanner on the Sulis Estate in Bath was approximately £800,000 per year. The revenue cost of providing additional transport, to reduce the time needed to wait for phlebotomy results, was around £400,000 annually. Additional FeNO testing had revenue costs of roughly £200,000 per year. He also confirmed that funding was in place for five years, with around £20 million revenue funding per year. Further demand modelling, and a productivity review of existing services, would influence the business case as the programme developed.

• In response to a question about the distribution of the hubs, the chief medical officer noted that it was anticipated that there would be one diagnostic centre in each of the three places of the ICS (BaNES, Swindon and Wiltshire) but the final distribution would depend on local need.

Resolved

- 1) To thank officers for the update.
- 2) To welcome the aspirations documented in the report.
- 3) To invite a further update to the committee as plans become more refined.

9 Better Care Plan

Melanie Nicolau, Head of Resources and Commissioning at Wiltshire Council, invited the committee to consider the Better Care Fund plan after its consideration by the Health and Wellbeing Board on 2 December 2021. She reported that the Better Care Fund was a pooled budget shared between Wiltshire Council and BSW CCG. She then explained that the plan offered opportunities to support the integration of health and care, had to be evidenced based and meet a series of central government conditions.

During the discussion the following points were made:

- Members thanked the officer for the report.
- In response to a question about the number of patients being discharged from hospital whilst receiving end of life care, the officer stated that an audit had been carried out and stressed importance of providing wrap around support in different settings, such as in the home or in hospice care, rather than relying on a bed-based strategy.
- Emma Legg, Director for Adult Care, Living and Ageing Well, stressed that lots of work was being conducted within the Integrated Care Alliance to ensure that a collaborative management structure was in place between Wiltshire Council and other local partners.
- When asked about the progress made towards achieving the aspirations identified in the report, the Head of Resources and Commissioning explained that a large amount of work had already taken place and gave the establishment of the Rapid Response Service within seven months as an example of how health and social care teams had effectively worked together. She stated that further work could be done with the voluntary sector enhance the prevention agenda as we transition out of the pandemic.
- It was noted that the Better Care Fund could work with other funding areas to provide additional support to areas such as mental health provision.
- Members asked questions about what was included in the plan to address workforce issues and in particular to attract older workers and those currently in education. Lucy Townsend, Director of People, stressed that the plan focussed on Wiltshire, but work was being done jointly with partners across the whole of the BSW area to address workforce issues.
- Emma Legg, Director for Adult Care, Living and Ageing Well, explained that work was being done to promote a career in care to people across the whole

age range to ensure that talented individuals were not being excluded from applying.

Cllr Greenman left the meeting at 16:50pm.

Resolved

- 1) To thank officers for the update on the Better Care Plan 2021-22.
- 2) To note the importance of a system approach in ensuring its successful delivery.
- 3) To invite a future update on the workforce strategy currently being developed.

10 Shaping a Healthier Future - Health and Care Model

Geoff Underwood and Simon Cook, programme directors at Shaping a Healthier Future updated the committee on the results of their six-week public engagement that had taken place between 2 November and 14 December 2021. The directors reported that they held 51 engagement events over the six-week period, cumulatively attended by over 1,400 people, when allowing for double counting of those attending more than one event. They had also reached out to harder to reach groups, such as those representing asylum seekers, and received a total of 915 responses to their online survey.

The proposals had generally received a positive response, although respondents were keen to have more detail, particularly about specific localities or conditions. Results showed that the public were also appreciative that the consultation had taken place and welcomed further opportunities to input into the plan as it developed. The directors stated that further detail would be forthcoming as the health and care model progressed and discussions would be ongoing with the integrated alliances across BSW. By the time that the ICS becomes statutory in July 2022 they anticipated that there would be a high level of alignment in order to deliver the care model. The final report about the findings of the consultation would be published on 17 January.

The directors stressed that the business case for capital expenditure at Bath RUH was contingent on the model taking place. The business case could not be put forward until the committee, and equivalent bodies in BaNES, were satisfied that formal public consultation on the new model of care was not required. The directors explained were keen to attend the March committee meeting to understand what further engagement that the committee felt was necessary and stressed that public engagement would be ongoing as the model developed.

During the discussion the following points were raised:

• Members thanked the directors for the update and commended the breadth of the consultation, commenting that many of the points raised echoed the feedback given to councillors. They were also pleased to see the recognition of the demographic changes facing Wiltshire reflected in the plans.

- Cllr Jane Davies, Cabinet Member for Adult Social Care, SEND, Transition and Inclusion, stated that Wiltshire Council was excited about working collaboratively and that it was important to ensure that the voices of partners, such as Wiltshire Council, were adequately reflected in the plans.
- The cabinet member expressed disappointment about the level of engagement with the council's public health team that had taken place and asked for a commitment to meet with the Corporate Director for People to discuss alignment with adult social care. In response the directors explained that they had held meetings with some of the local authorities within BSW, including the public health team in BaNES and would be happy to meet with officers. The also pledged to produce a narrative document to provide greater detail about the development of the plans.
- The directors noted that respondents had expressed reservations about the language relating to digital by default appointments, so this would be reviewed to reassure the public that it was not the intention to hold all appointments remotely. The directors were keen to stress that digital appointments would not be appropriate in many cases.
- Given that the consultation was primarily carried out online, concerns were raised that the views of those without internet access would not have been reflected in the results. The directors noted that an in-person meeting had been held with a group representing mothers and paper copies of the survey had been made available in GP surgeries. However, they did accept that the opinions of those without internet access could have been underrepresented and pledged to consider how they could be better reflected in future.
- In response to a question about the role of the voluntary sector in the consultation the directors reported that they had involved the Wiltshire Voluntary Sector Leadership Alliance. They also took onboard a comment by a stakeholder of the committee that it would be useful to work with CEMs given their contacts with voluntary organisations in Wiltshire.
- Members stated that they would welcome a report about the development of the Health and Care Model in relation to the wider developments within BSW to gain a clearer understanding of the roles and responsibilities of different actors within the ICS. The directors stated that they would pass that feedback onto colleagues to see who would be best placed to provide further information to the committee.
- When asked about the emphasis that would be placed on signposting patients to the relevant services, the directors explained that those details would be developed locally, as a uniform approach would not necessarily be the most effective.
- The directors committed to circulating the final report of the findings of the survey well in advance of the March committee meeting.

Irene Kohler and Diane Gooch left the meeting at 17:28pm.

Resolved

- 1. To thank officers for the update.
- 2. To welcome a further update on the developments on the engagement plan.

- 3. To request further detail on the proposed model being developed by the project team.
- 4. To invite a future update defining roles and responsibilities within the Integrated Care System.
- 5. To request that officers meet with the Corporate Director for People in advance of 16 March to discuss alignment with adult social care.

11 Forward Work Programme

The Chairman announced that, in addition to the items on the Forward Work Plan, he had also asked the Chief Executive of Wiltshire Health and Care to brief the committee in March on some of the transformational work they are currently undertaking.

During the discussion members asked whether the Chief Executive of BSW could also be invited to the meeting. The Vice-Chairman also reassured the committee that they would be meeting the Director of Primary Care at the CCG and would discuss the steps being taken to address the issues at Patford House GP practice.

Resolved

- 1. To note the Forward Work Programme.
- 2. Invite the new Chief Executive Officer of BSW to a future meeting of the Health Select Committee.

12 Urgent Items

There were no urgent items.

13 **Date of Next Meeting**

The date of the next ordinary meeting was confirmed as Wednesday 16 March 2022, at 10.30am.

(Duration of meeting: 2.30 - 5.45 pm)

The Officer who has produced these minutes is Matt Hitch matthew.hitch@wiltshire.gov.uk of Democratic Services, direct line, e-mail matthew.hitch@wiltshire.gov.uk

Press enquiries to Communications, direct line ((01225) 713114 or email communications@wiltshire.gov.uk