

## **Report of the Scrutiny for Policies, Adults and Health Committee**

Chair: Cllr Hazel Prior-Sankey

Division and Local Member: All

Lead Officer: Julia Jones – Governance Manager

Contact Details: 01823 359000 [JJones@somerset.gov.uk](mailto:JJones@somerset.gov.uk)

### **1. Summary**

- 1.1** The Scrutiny for Policies, Adults and Health Committee is required by the Constitution to make an annual report to the Council each year and to provide each other meeting of the Council with a summary progress report and outcomes of scrutiny. This report covers the meetings of 11 September, 2 October 2019, 06 November and 4 December.
- 1.2** The Committee agreed their work programme would comprise of items considered directly at meetings plus other items considered or 'commissioned', using flexible arrangements outside of the formal committee structure.
- 1.3** Members of the Council are reminded that:
- all Members have been invited to attend meetings of the three Scrutiny Committees and to contribute freely on any agenda item;
  - any Member could propose a topic for inclusion on the Scrutiny Work Programmes;
  - any Member can be asked by the Committee to contribute information and evidence and to participate in specific scrutiny reviews.
- 1.4** The Committee has 8 elected Members.

### **2. Background**

#### **2.1 Scrutiny Work Programme**

At each meeting, the Committee considers and updates its work programme, having regard to the Cabinet's forward plan of proposed key decisions. Members appreciate the attendance of representatives and stakeholders from partner agencies.

#### **2.2 11 September 2019**

We considered a report under the Fit for My Future strategy covering a review of the acute mental health inpatient beds for people of working age.

The report set out a vision for mental health services and the future model of care. It updated members of the committee on:

- the engagement undertaken so far to seek stakeholder views on potential options for the future configuration of acute mental health inpatient beds for adults of working age,
- engagement and input from the same stakeholder panel into the design of a public engagement / consultation strategy, and
- next steps in the overall governance process.

The purpose of the Fit for my Future review of this part of the mental health service is not to reduce funding but to arrive at the most effective and efficient model going forward, considering a range of factors including location and proximity to emergency departments. Acute inpatient mental health beds for people of working age are currently provided in four wards over three sites, two in Taunton, and one each in Yeovil and Wells.

The review will not involve a reduction of acute mental health inpatient beds, but the recommendations are that there is a reconfiguration of the location of the beds to take account of the recruitment difficulties and safety concern for the beds based in Wells and the distance from major Hospitals in the event of needing further intervention.

A consultation process has begun to establish the best configuration. As well as including the South West Clinical Senate and NHS England Improvement Quality Assurance there has been wider engagement. Service users have been represented by MIND, Community Council for Somerset, Somerset Village Agents and Talking Cafes. There was a workshop event in Victoria Park Community Centre in Bridgwater.

We considered the proposals and gave our support for the planned consultation.

## **CCG Integrated Quality and Performance Report**

We considered the Integrated Quality, Safety and Performance report from Somerset CCG (Clinical Commissioning Group). The report provided an update on the Somerset CCG Integrated Quality, Safety and Performance.

We heard there were six areas to celebrate:

- Eclipse alerts, antimicrobial stewardship, reducing antipsychotic use in Learning Disabilities (LD) and dementia patients, Rationalising inhaler use, ensuring correct monitoring of direct oral anticoagulant patients, reducing inappropriate opioid prescribing
- Somerset CCG is one of the best performing CCGs against the national low priority measures indicator
- Somerset has achieved all its antimicrobial prescribing performance measures
- Each GP practice has a Sepsis lead and Somerset CCG has raised the profile

of National Early Warning Score (NEWS2) in primary care

- Somerset CCG has also ensured that Somerset has a robust infection control system and root cause analysis follow ups of C. difficile and E.coli cases
- Somerset CCG benchmarks well for high cost drugs, Somerset has consistently achieved early implementation of biosimilars being the best in the country at Taunton and Somerset NHS Foundation Trust (T&S).

We heard there were four areas presenting a challenge:

- A&E and understanding increasing demand: some initial findings from the analysis work undertaken is a theme of increased children's attendances. Work is ongoing to understand the causal effects driving this activity.
- Ambulance handovers: over 30 and 60 minute delays. CCG to initiate a harm review process. In April 2019 T&S > 30mins = 135; > 60mins = 3 Yeovil District Hospital NHS Foundation Trust (YDH) > 30mins = 4
- 52 week waits: root cause and potential harm reviews. A review the effectiveness of the existing process to be completed by September 2019
- Urgent Care Clinical Assurance Committee to undertake Gap analysis for children's urgent care standards – workforce deployment and availability of qualified and trained staff.

We discussed the report and raised some questions. The areas of discussion covered the meaning of 'biosimilars' and the recorded success of Somerset being the best in the country. Biosimilars are medicines with the same molecular make-up but not necessarily high cost branded medicines. We were also interested in Eclipse Alerts. These alerts are sent weekly to GP surgeries and aim to highlight any potential conflicts in prescribing.

We were interested in plans to ensure that there would be adequate supplies should there be any disruption due to the supply of medicines as a result the exit from the European Union. We were assured that there had been South West wide planning. The key message from all this was to request people not to stockpile medicine as this created 'false shortages'. We were informed that the overriding principle was patient safety and cost was not driving the plans.

We were concerned that following an inspection of the Children's Mental Health Services service in Weston the grading changed from 'Outstanding' to 'Inadequate'. We wanted to know how a service could change so dramatically. We were informed that the CQC inspection was 'insightful' and the change in grading was due to the very high staff turnover. In most parts of the NHS a turnover is 12% is expected but in Weston is was 24%.

Another area of ongoing concern was year on year growth in demand for Emergency Admissions to both Yeovil and Taunton hospitals. Demand was up 4% in Taunton and 9% in Yeovil. We discussed ways to educate people to use appropriate primary care, urgent treatment centres, out of hours services and the 111 service. We discussed re-admission rates and asked for these to be examined and details

shared in the next report. These are sometimes increased due to a positive desire for people to be in their own home. In addition, we requested that the results of a deep dive into the Ambulance Service were shared with us when they were available.

### **Minor Injury Unit Service**

We considered a report a report setting out an overview of the pressures faced by the running of seven Minor Injuries Units across Somerset. The report highlighted the current pressures being experienced by the Somerset Minor Injury Unit (MIU) Service, the impact of pressures and the actions being taken to mitigate these. We were informed that the service is currently experiencing a significant rise in demand across the MIUs against a background of local, regional and national shortages of Emergency Nurse Practitioners (ENPs). The report highlighted which areas of the county are being impacted upon currently, and some of the work being undertaken within local communities to try to address the challenges of recruiting and retaining ENPs. There have been some overnight closures in Burnham on Sea and Minehead. This was done to protect Bridgwater MIU which has the greatest demand.

**02 October 2019**

### **Somerset Safeguarding Adults Board**

We considered a report from the Somerset Safeguarding Adults Board. We discussed the report and were interested in how messages about Safeguarding were shared in the wider community. It was recognised that the term 'Safeguarding' was not the most media friendly. We were informed that Somerset was in the top two counties for social media messaging. The Board also work with Trading Standards to get messages out in the community.

We discussed the way that monitoring was carried out on the training for staff and if the regular training promised was carried out. We were assured it was. We asked about the action taken to address the County Lines criminal activity and were assured that as this cuts across both Adults and Children's Safeguarding it has not been covered in the report for SSAB but nevertheless there is a co-ordinated approach and details will be included in the next report.

We asked about Deprivation of Liberty (DOL) as this has been highlighted as an area of concern. There is due to be further guidance as this is not a local problem but a national one. Later this year there will be a specific scrutiny audit of DOL, we asked that this be brought back for an update once the details are known.

### **Adult Social Care Performance Update**

We had requested a follow-up report following the presentation in June this year. The request was for a general update in addition to a specific update on the results of the Carers Survey. There was a total of 491 responses (167 from carers aged 18-64 and 324 from carers aged 65+). The responses to the various questions are then mapped to 5 Adult Social Care Outcomes Framework (ASCOF) measures which will can be benchmarked nationally and regionally when the figures are published by NHS Digital. The figures were set out in the report but overall the it was disappointing as on all measure the performance had deteriorated.

We discussed the report and the following points were raised. The members heard of a case where a family wanted to continue to support their mother in their own home but were disappointed that there was no financial assistance to do this. Also, that many people who provide care are isolated, feel unsupported and suffer financial hardship while they provide much needed support for family members. We were informed that personalised support was being promoted as this would give allow targeted provision with the appropriate expenditure.

We were concerned about the decline in the satisfaction survey results by Carers in Somerset. There was a 20% recorded drop in carers reporting that they have the social contact they would like. We were informed that this was an area that the County Council wanted to improve performance and proposed to have a Carers Charter within the next 4 – 6 months.

We challenged the Contact Centre target of 60% resolution. It was explained that this target, which had been achieved for the past 8 months meant the more than 60% of callers to the Contact Centre were able to resolve their query at his early stage. Only 40% of people were handed off for more appropriate support. This represented a great service and as such has been awarded Contact Centre of the year. Such is the resilience of the team that following a flood this week the entire unit was relocated and offering the service to callers within two hours.

We asked about recruitment and retention of staff. Like most places it was a challenge to attract people to work in the care sector however, Somerset was in fact bucking the trend and a degree of stability had returned and the greater autonomy and flexibility had started to deliver dividends. We asked that a briefing note be shared with members setting out the recruitment and retentions figures -if they were available - for care workers.

## **Discovery Report**

We had a report which provided scrutiny with an update on the performance of the Discovery contract. It included overall measures of the contract and provided wider information on the delivery of the contract. The summary view is that 'Discovery' have met the formidable challenges over the initial two years of the contract, with the associated challenges and are now implementing the positive changes that are expected as part of the transformation of the service, including changing the offer

of day services to a more modern, community based offer, the offer of supported accommodation as an alternative to residential care across the county.

We had a very detailed discussion which included questions from members of the public. The areas we discussed covered: -

- CQC Inspections
- Employment Services
- Recruitment and retention
- Transformation
- Day Time Support
- A Financial Update

We discussed the report and the public questions that had been raised. We were interested in the methods used to promote the service and to make people aware of the transformation opportunities offered. By contacting Somerset Direct it is possible to access a whole range of services and that an advocacy service is also available for those not able to present their own case.

During the discussion it was confirmed that of the people previously helped by the Six Acres facilities one third had moved to other providers, one third were no longer supported and one third had moved their support to the facility at Albermarle Centre.

We were interested in staff retention and turnover and were informed that they were well within national expectations despite being in competition with other employers offering a similar rate of pay for a much less demanding role.

There were several questions in relation to the Capital Flexibilities and other detailed financial questions. As these were highly technical it was agreed that the answers would be given in the form of a Members Briefing note.

There was also some discussion regarding the recent Employment Tribunal decision and as the final answers in terms of who would be paying and from which budget it was agreed that the information would be made available to all members as soon as it was finalised.

## **06 November 2019**

### **Mental Health Social Care Scrutiny Update**

We were informed that the Adult Social Care (ASC) services that supported people with Mental Health needs was continuing to develop in line with the Somerset County Council Promoting Independence strategy. The service continued to focus on the transformation to ensure that services were well aligned with other ASC services and that opportunities were maximised to promote the independence and mental well-being of the people of Somerset.

All ASC services had a vision which was promoting independence at every opportunity. Within Mental Health, this vision was often translated into the Recovery Model. The recovery model was a person-centered approach to mental health care. At its core are two premises:-

- It is possible to recover from a mental health condition,
- The most effective recovery is person centred.

Mental Health transformation is monitored through the Transformation Board.

### **Value for Money: Tracker and Social Care Experts Review 2018/19**

We heard that the review identified a few areas for further action in strengthening the council's financial resilience for adults and children's social care and management actions had been incorporated into the VFM tracker that was presented to the Audit Committee on 19 September 2019. Progress would be reported to each Audit Committee during 2019/20. A copy of the tracker was attached for consideration. There were two VFM actions being VFMY20011 and VFMY20012 that had specific actions relating to Adults Services which we agreed to consider how we can best review progress against them during the year.

We endorsed and recommended to Full Council that the Council implements a programme of cultural transformation and improvements to its scrutiny arrangements by March 2021, including the provision of additional resources in

We endorsed and recommended to Full Council that the County Council implements a programme of cultural transformation and improvements to its scrutiny arrangements by March 2021, including the provision of additional resources in the Democratic Services Team and members training budgets to deliver the enhanced scrutiny arrangements;

We endorsed 10 of the 11 recommendations within the Centre for Public Scrutiny's 'Supporting governance, scrutiny and member support in Somerset County Council' report as detailed on pages 9 and 10 of Appendix A; The Committee agreed to an alteration to Recommendation 6 within the CfPS report and limit the number of agenda items to an absolute maximum of 4, rather than two as currently recommended, as this more accurately reflected the current position of the Authority and the size of the workload.

We considered and made further recommendations it considered appropriate to include as part of the Scrutiny Review with reference to the Government's new statutory guidance, best practice from other councils and the members workshop held in September 2019;

We supported all recommendations relating to the Scrutiny Review being recommended by Full Council at its next meeting and for the improvements to be taken forward from January 2020 to March 2021;

We agreed there should be a quarterly progress report on the improvements and review of scrutiny arrangements.

**12 December 2019**

### **CCG Quality, Safety and Performance Report**

We discussed a report that provided an update on the Somerset Clinical Commissioning Group (CCG) Integrated Quality, Safety and Performance. The CCG has established performance monitoring meeting with all providers of healthcare services, this paper gave a summary of the escalation issues for quality, safety and performance against the constitutional and other standards for the period April to September 2019. The report gave detailed information on six key area: -

1. Infection Prevention and Control,
2. Continuing Healthcare (CHC),
3. Somerset Treatment Escalation Plan,
4. Maternity and Neonatal Safety – Supporting the Long-Term Plan,
5. Integrated Urgent Care Service and
6. Ambulance Service Performance

We discussed the report and examined some of the detail. They were interested to know why so many of the local NHS Trusts were reported as being 'Requires Improvement' in the 'Safe' category. We were informed that this was around staffing levels in A&E for specialist staff such as Children's Nurses. We challenged the statement that only 4% of people discuss the type of care they would like in the event of an emergency and it was confirmed that it was 4% of the whole population not 4% of those in a care home.

We were interested to know if the opening of the full service at the Bridgwater Minor Injuries Unit (MIU) had resulted in a reduction in footfall at Musgrove Park Hospital (MPH). We were informed that the number of simple cases had indeed reduced but the result of this was MPH was now dealing with all the more complex cases and as a result the 4-hour target was more challenging without the volume of simple patients helping to keep the average time under this target. This target is being reviewed nationally as it was set some time ago and the data supporting it



does not lead to better treatment. Part of this review will be to understand the relationship between demand on GP appointment, the use of the 111 service and Minor Injuries Units.

### **Adult Social Care Performance Report**

We discussed a report on the performance of Adult Social Care. The report followed on from previous reports provided to Scrutiny Committee and highlighted key performance activity and indicators relating to Adult Social Care. The report was supported by an accompanying appendix which provided further detail in relation to some of those indicators being monitored closely by the service and helps to evidence the improvements and areas for further development identified within the covering report. The update included initial analysis of the 2018/19 Adult Social Care Outcomes Framework (ASCOF) figures, published by NHS Digital on 22 October 2019.

We discussed the report and both the achievements and challenges. We were interested to know what was planned to address the areas where performance was not meeting the targets – such as South Somerset.

We noted that the percentage of people with learning difficulties who are supported into employment was below the national average. We also discussed the indicators from Carers indicating that they did not feel fully supported. It was hoped that the workshop prior to the meeting was a starting point to address this and some positive progress would be made.

### **Annual Report of the Public Health Director**

We had a presentation setting out the annual report for from the Director of Public Health. The focus of the report this year was prevention. The report takes a broad overview of 'prevention'.

Prevention is about Improving Lives, it's about getting on the front foot and preventing or delaying negative circumstances from happening. The report argues that prevention at the 'high' (and expensive) end of need, is the most effective way to improve the lives of those that experience the worst outcomes and free up resources, enabling investment in prevention at lower levels of need. The report gives many case studies of good practice in the county. Above all, it shows that prevention is 'everybody's business'.

The report is to be released in the form of an e-book. Doing it this way will mean it can contain video recordings of case studies and recordings be leaders in Somerset health and care.

We were given a presentation on the benefits of the prevention agenda; shifting the costs from those whose health has deteriorated significantly with preventable complications towards benefitting a larger percentage of the population and supporting them to maintain or improve their health. Initiatives such as working with Natural England to promote the use of Areas of Outstanding Natural Beauty (AONB) in Somerset to encourage groups to access the outdoors to support wellbeing.

We agreed that Public Health should not be seen in isolation and supported the positive approach to improving lives.

### **3. Consultations Undertaken**

In December we held a workshop which was open to all Somerset Carers; we heard first-hand accounts from carers, invited suggestions as to how to deliver a more joined up service and started a conversation to address the isolation felt by many carers in Somerset. The Workshop highlighted some very useful areas where further work and collaboration would deliver a much more joined-up service for Carers in Somerset. We plan to have a report to Committee and will run further Workshops in the future.

The Committee invites all County councillors to attend and contribute to its meetings.

### **4. Implications**

The Committee considers carefully and often asks for further information about the implications as outlined in the reports considered at its meetings.

For further details of the reports considered by the Committee, please contact the author of this report.

### **5. Background Papers**

Further information about the Committee including dates of meetings and agendas and reports from previous meetings, are available via the Council's website:

[www.somerset.gov.uk/agendasandpapers](http://www.somerset.gov.uk/agendasandpapers)

**Note:** For sight of individual background papers please contact the report author.