
SCRUTINY FOR POLICIES, ADULTS AND HEALTH COMMITTEE

SUMMARY OF OUTCOMES

29 March 2017

(Published on 30 March 2017)

Minutes from the previous meeting - Agenda item 3	Action
The minutes of the meeting held on 01 March 2017 were accepted as being accurate and were signed by the Chairman.	
Public Question Time - Agenda item 4	Action
<p>There were two public questions.</p> <p>Debbie Russell, a registered nurse and member of Unison, asked the following question in relation to Item 5:</p> <p>The changes proposed by the Somerset Sustainability and Transformation Plan will affect the health and social care services locally. This is the biggest threat to the future of the NHS that I have seen in my career. I fully welcome the vision proposed but have grave doubts about how it will be funded. How is the Committee going to exercise its powers to ensure that these changes undergo appropriate scrutiny and are preceded by full and transparent consultation?</p> <p>Campbell Main asked the following question during Item 7:</p> <p>Campbell Main spoke on behalf of adults with autism but without a Learning Disability. This includes adults with a diagnosis of Asperger's Syndrome or high functioning autism. Mr Main stated that there had previously been a specialist service to help this specific group. The small, specialist service was set up in December 2004 by Somerset Partnership, prior to the Autism Act 2009. The service was supported by a part time social worker. Recently, the part time social worker has been transferred to SCC Mental Health teams and was now on sick leave.</p> <p>Mr Main expressed concern that the Somerset Autism Strategy covers a huge field and has lost its focus on the specific group of adults with Asperger's Syndrome. He asked for this to be reconsidered, along with suggestions made to the Health and Wellbeing Board with regard to the restoration of leadership and resources for both diagnosis and post diagnostic support.</p>	
Somerset Sustainability and Transformation Plan Update - Agenda item 5	Action

<p>The Committee received a report and presentation from the Sustainability and Transformation Plan (STP) Programme Director and the Strategic Lead – Communication and Engagement.</p> <p>The presentation set out the shared vision for reforming health and social care to address the challenges of the rising needs of our population, changing demographics and increasingly stretched resources. The presentation highlighted the strategic priorities identified by the Programme Executive Group and the proposals for engagement with stakeholders and the public. This included: the STP vision and case for change; the priorities for closing the Health & Wellbeing, Quality and Financial gaps; the ‘One Plan’ approach for integrating care and pathways; identifying ‘quick win’ projects; establishing Design Groups to develop and implement solutions; addressing issues of sustainability and improving efficiency; and the three phases of the engagement and communication process.</p> <p>The Committee discussed: the huge scale of the challenge; concerns about adequate funding; the perception that the STP is a cost-saving exercise; workforce challenges; the importance of prevention and Public Health; the need to communicate in plain English; the importance of working with other emergency services.</p> <p>The Committee agreed with the priorities identified and was content with the direction of travel for consultation and engagement. It noted the report and requested an update at the next Committee meeting.</p>	
<p>Winter Pressures Update - Agenda item 6</p>	<p>Action</p>
<p>The Committee received a report from the Head of Urgent Care Programme Manager and the Adult and Health Operations Director.</p> <p>There has been increased demand across the urgent care system within health and social care services during the winter period for 2016/17 and this remains a persistent challenge for all organisations concerned within the urgent care system. During the winter period the Somerset system has been predominantly in Operational Pressures Escalation Level (OPEL) 2 and 3. The system has not declared the highest level of alert which is OPEL 4. Health and Social Care services have worked more collaboratively together than in previous years and are comprehensively planning for winter together.</p> <p>A debrief event was held last month to consider the learning from this winter. Successes identified included: effective use of planning; working well together as a system and becoming more efficient at treating people as they present. It also highlighted the need to communicate more effectively and to increase performance with regard to discharge to access.</p> <p>Services are still not performing well when compared nationally so there is much more work to do but performance is improving on previous years. Planning for next winter is beginning now and will also incorporate</p>	

<p>planning for the Easter period which is another time of challenge.</p> <p>The Committee discussed: the extra government funding for adult social care; the culture of providers of reablement services; and the purchasing of additional beds.</p> <p>The Committee noted the report.</p>	
<p>Update on the Somerset Autism Strategy - Agenda item 7</p>	<p>Action</p>
<p>The Committee received a report from the Acting Head of Joint Commissioning (Mental Health & Learning Disabilities) which provided a progress update on the implementation of the Somerset Autism Strategy, launched in November 2015.</p> <p>The Strategy is aligned to the national strategy and the Autism Strategy Group brings together, Somerset CCG and SCC commissioners from adults, children's and public health teams, along with a range of agencies. The group meets on a quarterly basis to oversee the implementation of the Strategy and the action plan and has four priority areas of work: Living with Autism; Workforce Development; Identification and Diagnosis; and Children and Young people. The report highlighted the areas of progress and next steps for each priority area.</p> <p>The report concluded that while services have developed there is always more to do in assuring that outcomes are being met for individuals with autism and their families. Work will continue within each of the priority areas.</p> <p>The Committee discussed: the difference between autism and Asperger's Syndrome; and the significant delays in diagnosis.</p> <p>The committee noted the report but expressed concern over the delay in diagnosis. They would welcome actions to improve the delays.</p>	
<p>Improved Access to GP Services - Agenda item 8</p>	<p>Action</p>
<p>The Committee received a report from the Director of Clinical and Collaborative Commissioning which outlined the commissioning process of the improved access service for the population of Somerset.</p> <p>In October 2016 it was announced that Somerset CCG was identified as a transformation area for improved access to GP services. In January 2017 Somerset CCG Governing Body approved a proposed commissioning, financial and service framework for the delivery of Improved Access to the Somerset population.</p> <p>The foundation of the Somerset CCG improved access service is based on four primary objectives that are coherent with the Somerset Primary Care Plan and supported by key enablers;</p>	

<ul style="list-style-type: none"> • Commission a sustainable and effective model of care that enhances the availability of primary medical services across the county whilst maintaining high quality services, increasing patient satisfaction, managing demand and reducing duplication • To deliver joined up, collaborative and responsive out of hospital care for patients across 7 days, meeting population needs and reducing unnecessary demand through the use of patient education and awareness • Increase the capacity of primary medical services through the delivery of at scale services, sharing of resources and utilisation of IT innovations • Deliver an integrated and responsive primary medical service that is clinically led and supported by a multi-disciplinary team, providing care to population groups in collaboration with multiple provider organisations <p>It is the ambition of the CCG to deliver the national requirements from April 2017, with the model for delivery being developed over the course of the contractual period. The intention is to learn from potentially different delivery models across Somerset and allow for the collaboration and integration between providers to take place.</p> <p>A phased model has been developed to allow movement towards an integrated same day service across seven days, joining up service provision to deliver better care for patients and enhance the sustainability of services. Some federations were already considering or moving towards different ways of managing demand for primary care services. Having a phased approach prevents the CCG from unintentionally restricting any local innovations.</p> <p>The Committee discussed: the huge variation of access currently available and the need for parity; skill-mix models; and whether GP surgeries can opt out of the extended service.</p> <p>The Committee noted the report and requested an update early in the new quadrennium.</p>	
<p>Maternity Services Update - Agenda item 9</p>	<p>Action</p>
<p>The Committee received a report from the Deputy Director of Quality and Safety which provided an update on Somerset Maternity Services and the local Maternity Transformation programme.</p> <p>The report focused on how maternity services are responding to the Betters Births report published in Feb 2016 and the quality measures put in place to ensure monitoring of the key priorities. Somerset has been chosen as one of eight national early adopter sites for Better Births, to support this transformational change in maternity services. The core Somerset bid is for the implementation of IT and Post-natal support for</p>	

Somerset.

It is expected that the Local Maternity Services (LMS) will align with Sustainability and Transformation Plans (STP) footprints in Somerset. The challenge we have in Somerset is that the RUH, Weston and Dorset are outside our STP footprint and Local Maternity Systems will be expected to develop and implement a local vision for improved services.

- commissioners and providers are asked to work together across areas as local maternity systems (LMS)¹, with the aim of ensuring women, their babies and their families have equitable access to the services they choose and need, as close to home as possible. In particular, the role of the LMS is to:
- bring together all providers involved in the delivery of maternity and neonatal care, including, for example, the ambulance service and midwifery practices providing NHS care locally
- develop a local vision for improved maternity services based on the principles of Better Births
- co-design services with service users and local communities
- put in place the infrastructure needed to support services working together

In addition, the Committee received an update with regard to potential changes to maternity services at Dorchester Hospital which may impact on Yeovil District Hospital.

In September 2015, as part of its overall Clinical Service Review, Dorset CCG asked the Royal College of Paediatrics and Child Health (RCPCH) to conduct an Invited Review of the current service provision for maternity, neonatal and paediatric services. This review focussed on the services provided at Poole, Bournemouth, Dorchester and Yeovil Hospitals. The resulting report raised questions about the long-term sustainability of the current model of provision and proposed some high level future service options. The RCPCH report is publically available via the Dorset CCG website.

Following the publication of this report, the Boards of Yeovil District Hospital and Dorset County Hospital have agreed to work together to explore in more detail the options for the future model of maternity and paediatric services across the two sites. It was acknowledged that key to this work will be ensuring that the broader access implications for the populations of West Dorset and East Somerset are fully considered, recognising the responsibility of Yeovil District Hospital to work as part of the Somerset NHS. A data modelling exercise is underway to inform this.

The work is on-going and an options appraisal will be developed for consideration in the summer 2017. Any future service change will be subject to the NHS England requirements which would involve a full public consultation.

The Committee discussed: the high level of induced births in Somerset;

<p>and the impact on Yeovil Hospital if Dorchester maternity services are moved.</p> <p>The Committee noted the report and asked for an update when more information was known regarding Dorchester Hospital.</p>	
<p>Scrutiny for Policies, Adults and Health Committee Work Programme - Agenda item 10</p>	<p>Action</p>
<p>The Committee considered and noted the Council's Forward Plan of proposed key decisions.</p> <p>The Committee requested the following changes to the work programme:</p> <ul style="list-style-type: none"> • An update regarding the Sustainability & Transformation Plan (21 June) • An update regarding Improved Access to GP Services • An update regarding proposed changes to maternity services at Dorchester Hospital • An update regarding performance at Weston Hospital. 	<p>Committee Administrator/ Governance Manager</p>