

## SCRUTINY FOR POLICIES, ADULTS AND HEALTH COMMITTEE

Minutes of a Meeting of the Scrutiny for Policies, Adults and Health Committee held in the Luttrell Room - County Hall, Taunton, on Wednesday 5<sup>th</sup> September 2018 at 9.30 am

**Present:** Cllr Cllr H Prior-Sankey (Chair), M Healey (Vice Chair), Cllr M Caswell, Cllr P Clayton, Cllr A Govier, Cllr B Revans, Cllr G Verdon, Cllr L Vijeh and Cllr J Thorne (substitute).

**Other Members present:** Cllr D Huxtable, Cllr C Lawrence, Cllr L Leyshon, and Cllr L Redman.

**Apologies for absence:** Cllr A Bown (who sent a substitute)

115 **Declarations of Interest** - Agenda Item 2

None declared.

116 **Minutes from the previous meeting held on Wednesday 4<sup>th</sup> July** - Agenda Item 3

The minutes of the meeting held on 4 July 2018 were agreed as a correct record.

117 **Public Question Time** - Agenda Item 4

The Chair invited public speakers to ask their questions under agenda item 10 as they all related to that issue.

118 **Somerset Sustainability and Transformation Partnership (STP) Update** - Agenda Item 5

The Committee received a report from the Somerset Sustainability and Transformation Partnership (STP), the forum for ensuring that the long-term development of health and social care in Somerset was planned as one integrated system.

Members were informed that schemes were in place to mitigate the capacity shortfall due to increased demand over the winter period. Actions have been taken to integrate Taunton & Somerset Foundation Trust with Somerset Partnership Foundation Trust, with a commitment to the further exploration of a range of alternative models and ways of working.

Further points raised included:

- The report was difficult for the public and non NHS staff to understand
- This was financial recovery programme aiming to get the Somerset system back to financial balance by 2020/21
- There was no reference to figures and what the projection is – this would be useful for future reports
- The reference to growth rates at point 2.1 being anticipated as significantly higher than both the South West and National rates was questioned as there was no explanation
- The progress of the Home First Initiative which had been very successful
- Concern that this Somerset STP was not making much progress and there was little detail about what was happening to inform the committee

- The key aims were to reduced use of hospital service and length of stay – wasting less time and enabling people who were able to be cared for in their own homes

It was hoped the next report could focus more on initiatives to help people to avoid using the hospital, the rising demand and what is being done to mitigate this.

The Committee agreed to note the report and requested a further update be brought to the November or December meeting.

## 119 **Somerset Health and Care Strategy Update** - Agenda Item 6

The Committee received a report about the development of the Somerset Health and Care Strategy jointly led by Somerset County Council (SCC) and Somerset Clinical Commissioning Group (SCCG).

Members were informed the work was underway to develop proposals which will address the challenges identified in the draft case for change and these were on urgent and emergency care, proactive care, long term conditions and frailty, mental health and learning disabilities, children's and maternity services, planned care and cancer.

Research was being undertaken to identify what the problems are and get a detailed understanding to help build the case for change.

A multi-agency group has also been established to work together in developing and delivering a communications and engagement strategy.

Further points highlighted included:

- A communications and engagement plan was in place with events running from September through to Christmas.
- Detailed consultation was being organised including roadshows and the plan was being considered by the Health and Wellbeing Board.
- Discussions were taking place with the voluntary sector to ensure its input into the strategy
- The aim of the strategy was to make services more accessible to people
- Treating and managing mental health services to greater meet the publics needs
- Extending opening hours in the GP sector
- Prevention and encouraging people to look after themselves better
- Whether there was the financial capacity in the system to bring about an orderly transformation
- Consultation needs to be honest and realistic with the public
- Members asked for an opportunity to look at this issue in more depth
- Further information on this could be found on the Somerset Clinical Commissioning Group website and future reports would contain hyperlinks to more information
- A new Fit for the Future website was being built which would include information on this strategy

The report was noted and it was agreed the item be brought back to the meeting in November or December alongside the STP item.

120 **Update on Current Pressures Facing Community Hospital Inpatient Services - Agenda Item 7**

The Committee received an update on the current pressures facing the inpatient services within the 13 Community Hospitals operated by Somerset Partnership NHS Foundation Trust.

Recruiting and retaining registered nurses still posed a significant challenge and in fact had worsened slightly since the last update in June. However due to a slight improvement in the recruitment of registered nurses in Shepton Mallet, the inpatient ward re-opened on 7 July 2018.

An intense recruitment campaign for nurses continued and this was mindful of the need not to destabilise care homes who were also struggling for staff. It was a fragile situation and unfortunately wards at Dene Barton and Chard had to remain closed for the time being. However, there was regular monitoring of the situation.

Members were also informed of the need to increase stroke beds in the county as there was a constant waiting list for them and this led to pressure on stroke beds in acute hospitals. They were a vital resource which made a huge difference to those who had experienced strokes and 16 of these dedicated beds out of 28 across the county were based at South Petherton.

Other points of discussion included:

- It was felt the best way forward was to convert more community hospital beds to dedicated stroke beds to help deal with the backlog.
- The reasons for less people entering nursing – could be due to society's culture with care profession undervalued as well as lack of university in Somerset
- Difficulty of using public transport to access community hospitals
- Salaries for nursing staff – NHS providers were unable to pay above the national salary set
- Work being undertaken at Wellington community hospital to fix leaking pipes which was due to be completed by the end of September
- Recruitment was more successful when approaching the local community to that hospital
- Early discharge service involved lots of therapists working intensively and often the family in rehabilitation at home
- The importance of acting fast in stroke cases – waiting for treatment could have a big impact on the outcome
- Recognition that even with the smallest of hospitals at least two registered nurses were required overnight
- The need to transform the way services are delivered – using more highly trained support staff

The Chair informed the Committee that the letter which was sent to the five Somerset MPs on behalf of the Committee regarding its concerns about staffing in community hospitals in April had only received one response from David Warburton.

It was agreed that should Wellington hospital not reopen there would be further consultation with local members.

The Committee noted the report and supported the need for more stroke beds at the expense of general community hospital beds.

121 **Proposed Changes to Urology Surgery Services - Agenda item 8**

The Committee received a report on proposals to enhance the quality and safety of urology services in Somerset. The key issue faced by the urology service in Somerset is that it is unable to recruit sufficient consultants to sustain two sites providing emergency surgery.

The clinical teams from the two hospitals have proposed that the best route to delivering a high quality service is to create a single integrated urology service covering both sites at Yeovil and Musgrove, focus emergency surgery care at a single site (Musgrove Park), maintain the vast majority of care on both sites (all elective and outpatient care), develop the potential at Musgrove Park to repatriate more specialist work from Bristol.

Further discussion included:

- The majority of patients accessing the service would have local care
- This would be a positive step for Somerset to improve professionalism and seemed to be a sensible move
- There was a national shortage of urology consultants. It was hoped this move would attract consultants to Somerset
- The number of patients who would need to transfer from Yeovil to Musgrove would be quite small.
- This would be more cost effective than the current model but the main aim was to enhance the service

The Committee supported the proposals and noted the report.

122 **Somerset Safeguarding Adults Board Annual Report 2017/18 - Agenda Item 9**

The Committee received the Somerset Safeguarding Adults Board's 2017/18 Annual Report. Key achievements in 2017/18 included a new multi-agency subgroup to enhance local understanding and application of the Mental Capacity Act, a shared Think Family Strategy for Somerset, publishing the Mendip House Safeguarding Adults Review, producing practice guidance on 'Carrying out effective reviews and visits with providers', development of a new sub-regional Joint Safeguarding Adults Multi-Agency Policy.

Priorities for 2018/19 continue to centre on prevention, making safeguarding personal, adopting a Think Family approach, and enhancing the Board's effectiveness.

Discussion points raised included:

- Inability to have assurance of external commissioners as there was no requirement for them to communicate with the host authority
- The difference between legislation in Adult Social Care and Children's Social Care
- The importance of partnership working which was good and attendance at board meetings by partner organisations

The Chair thanked the Chair of the Safeguarding Adults Board and the Service Manager for the Board for attending and giving their report.

The Committee noted the report and an update on the Board's work was agreed to come back at the February or March meeting.

**123 Scrutiny for Policies, Adults and Health Committee Work Programme - Agenda Item 11**

The Chair agreed to bring this item forward as it had been agreed item 10 would not be presented until noon.

The Committee agreed to update the work programme with the following:

- STP and Health Care Strategy items for the 5 December meeting
- Community Hospitals and stroke beds update to the same meeting.

**124 Discovery Performance Update - Agenda Item 10**

The Committee received an update on the performance of Discovery, including the overall measure of the contract performance. Members also heard from public speakers who asked questions or gave statement on various issues including reasons for outsourcing, reducing labour costs, concerns about staffing and continuity of care, social work reviews, quality of service, user satisfaction surveys, use of agency staff, staffing terms and conditions of employment, staff shortages, the progress and performance of the contract, communication between Discovery and its staff, staff morale.

Members also listened to comments from the Stakeholder Group who expressed concerns about the process Discovery had adopted, the way data had been presented to councillors, the timetable for reviews. There was a lengthy discussion about these issues.

Further discussion included:

- There was independent monitoring of quality of social work reviews
- The quality and use of agency care workers
- The Council carried out contract monitoring
- Recognition that transformation of the service would lead to staff turnover
- The service needed to be high quality and sustainable
- Gratitude to the Stakeholder Group for the work they had done
- Problems with recruiting care staff
- Concerns about the reports from the Care Quality Council

The Committee noted the report asked for a position report about the social work reviews to be given at the next meeting.

It was also agreed that a briefing session would be held with members of the committee with the Stakeholder group invited to discuss this issue further.

**125 Any other urgent items of business - Agenda Item 10**

There were no other items of business.

**(The meeting ended at 1.38pm)**

**CHAIR**