HEALTH AND ADULT CARE SCRUTINY COMMITTEE

7 June 2018

Present: -

Councillors S Randall-Johnson (Chair), J Berry, P Crabb, B Greenslade, R Peart, S Russell, A Saywell, R Scott, J Trail, N Way (Vice-Chair), C Whitton, C Wright and J Yabsley

Apologies: -

Councillors M Asvachin, P Sanders and P Twiss

Members attending in accordance with Standing Order 25 (2) Councillors Ackland and Shaw

* 60 Minutes

RESOLVED that the Minutes of the meeting held on 22 March 2018 be signed as a correct record.

* 61 <u>Public Participation</u>

There were no oral representations from members of the public.

* 62 Public Health Annual Report 2017/18

(An item taken under Section 100B (4) of the Local Government Act 1972)

(Councillors M Shaw attended in accordance with Standing Order 25 (2) and spoke to this item)

The Committee considered the Report of the Chief Officer for Communities, Public Health, Environment and Prosperity, presenting the Public Health Annual Report for 2017/18 (as the Director of Public Health in accordance with statutory duty), which was available at http://www.devonhealthandwellbeing.org.uk/aphr/ previously considered by the Cabinet at its meeting on 16 May 2018. The Cabinet had welcomed and approved the Report for publication.

The Annual Public Health Report was the eleventh in a series of annual reports which began in 2007-08 on the health of the population of Devon. Over that period, there had been improvements in the health of the population of Devon. The pattern of disease had changed over the years – while life expectancy had increased, as modern medicine developed new techniques and treatments, so had the prevalence of long-term health conditions, such as diabetes, heart and lung disease, arthritis and dementia. The health of the population of Devon generally compared favourably with other parts of England and Wales except for some aspects of mental health, and deaths from skin cancer, strokes and falls.

The 2017/18 Report focussed on the long-term impact of poverty and disadvantage on the health and wellbeing of children, and to wider society, which was one that had a financial as well as a human cost.

The recommendations within the Report covered a range of matters which would involve close inter agency working across statutory and non-statutory bodies adopting a "child health in all policies" approach and to improve the collection and analysis of data to better inform decisions on how to improve the health and wellbeing of children and young people.

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Discussions points with the Chief Officer (Director of Public Health) included:

- despite positive health outcomes with effective partnership working, the historic low funding for Public Health in Devon at currently £37/head of population against the highest of £199/head, the 6th lowest of all upper tier authorities;
- despite the limited funding, service requirements were being met but there was little scope for further innovation and development of preventive strategies; and as a result Devon was being being penalised for its generally positive health outcomes;
- strategies in Devon to mitigate the gap in life expectancy rates in Ilfracombe, for example (the Director undertook to provide further information for the local Member);
- epidemiological and clinical reasons for not extending the HPV vaccine to boys (the Director undertook to provide more information for members); and
- ongoing research and evidence relating to the effects of social media on young people's mental health and wellbeing.

It was MOVED by Councillor Randall-Johnson, SECONDED by Councillor Way, and

RESOLVED that the Cabinet be called upon to continue to lobby Government (Department of Health and Social Care; and the Treasury) for a fair Public Health Grant for Devon and that all Devon MP's be briefed accordingly.

* 63 Winter Pressures 2017/18

(Councillor Shaw attended in accordance with Standing Order 25 and spoke to this item relation to nursing care provision, cancer data, patient experiences, operation of the new model of care and bed occupancy rates).

The Committee received and noted the Joint Report of the Head of Adult Commissioning (Devon County Council) and Director of Strategy (South Devon and Torbay CCG and NEW Devon CCG) (ACH/18/87) on a review of activity and performance over winter, bringing in additional and updated information to cover the whole winter period from October 2017 to March 2018 and provided a comparison to the previous year, where available.

The Report also provided a summary of the winter review held by the multi-agency Devon Accident and Emergency (A&E) Delivery Board in March. This summarised what had gone well and what could be improved which informed the priorities for winter planning in 2018-19.

The Chief Officer for Adult Care and Health; the Head of Adult Care Operations and Health; the Deputy Chief Operating Officer (South Devon and Torbay CCG); the Chair, Eastern Locality (NEW Devon CCG), and the Deputy Chief Executive (South Devon and Torbay NHS Foundation Trust) responded to Members' questions and/or commented on:

- the excellent response by the health and social care personnel during the extreme
 weather events in March 2018 working with other agencies and volunteers; and the
 ongoing planning for future winters through the local A&E Board (and at Locality level
 within the CCGs) using the lessons learned from recent events, noting also the possible
 impacts of any prolonged severe weather conditions;
- the working partnerships through the local A&E Delivery Board, for example;
- local work force pressures and national and local joint initiatives for the recruitment and retention of health and social care staff:
- continuous monitoring of mortality rates using local and national benchmarks;
- data on community care bed occupancy rates for intermediate care (the NHS Officers undertook to provide more information for members);
- monitoring by the acute hospitals of extended 'trolley waits' and assurances in relation to patient welfare during the waits:
- definition of the 'Winter Hospital' on which further information would be provided;
- progress towards 7 day working in hospital settings;

- the positive feedback from Members' site visits to community health and care hubs in Holsworthy, and Exeter (Whipton); and
- the relatively high turnover rates for adult social care staff and vacancy rates.

The Chair thanked the Officers for their detailed responses.

* 64 STP Financial Position

(Councillor Shaw attended in accordance with Standing Order 25 (2) and spoke to this item in relation to the need for additional funding to mitigate the saving requirements).

The Committee received a presentation by the NHS Devon STP Lead Director of Finance covering (i) how the STP had helped transform services in Devon; (ii) the original STP financial forecast challenge; (iii) the Devon Health Economy – where we were now; (iv) 2017/18 Outturn, (v) savings to deliver financial improvement and how it was facilitated, and (vi) priorities going forward for continued financial improvement.

Members noted the useful overview of the financial position and reduction against the planned deficit from £61.9 m to £22.7 m in 2017/18.

Members requested further information and financial detail expanding on the information provided in the Report section headed 'How has this been facilitated'.

* 65 Access to General Practice

The Committee considered the Report of Director of Primary Care (NHS Devon and Torbay and NEW Devon CCGs) about accessibility of GP appointments in Devon, including a snapshot audit from the Newton Abbot area following concerns raised at the last meeting.

The Report outlined future planned improvements to GP access and to other services in the community and via online services. The report also referred to self-care initiatives including social prescribing and work with the voluntary and third sectors.

In response to Members' questions and comments the Clinical Chair, East Devon Locality commented on:

- the difficulties in assimilating data and benchmarking across the many GP Practices in Devon and the CCG was endeavouring to improve this area of monitoring;
- good information however was provided through the annual patient survey data and generally Devon had returned positive results;
- there was good information in relation to GP and practice nurse recruitment and retention and future workforce issues were recognised; and nurse practitioners were taking on a more extensive role alleviating pressures for GPs; and
- GP practices were subject to CQC inspections and most in Devon were rated as 'good' or above.

Members referred to the assistance Devon HealthWatch could provide in this area with further survey work. The Head of Scrutiny would progress this matter further.

* 66 Better Care Fund: Task Group

(Councillor H Ackland attended in accordance with Standing Order 25 (2) and spoke to this item and presented the Report as the Task Group Chair)

The Committee considered the Report of the Better Care Fund Task Group.

Its Terms of Reference were to:

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- (a) appreciate the historical aims and applications of the Better Care Fund;
- (b) understand the purpose and accountability of partners in integration;
- (c) contribute to the future direction and monitoring of success of the outcomes of the Better Care Fund; and
- (d) report back to the Health and Adult Care Scrutiny Committee on the findings of the Task Group.

The Chair of the Task Group indicated that progress and development of the Fund would be monitored through the Health and Wellbeing Board.

The Members welcomed the Report as a thorough examination of the Fund and its ongoing contribution to effective integration of Health and Adult Care services.

It was MOVED by Councillor Randall Johnson, SECONDED by Councillor Whitton and

RESOLVED

- (a) that the Cabinet, Northern, Eastern and Western (NEW) Devon CCG and South Devon and Torbay CCG be requested to endorse the Report and adopt the recommendations detailed; and
- (b) that the Cabinet and the Clinical Commissioning Groups be asked to provide a unified response and report back on progress to the November meeting of this Committee.

* 67 Adult Social Care Survey and Focus Groups

The Committee considered of the Report Head of Adult Commissioning and Health (ACH/18/66) on the focus group findings and action being taken in response to them. Councillor Wright had been asked to take a lead on behalf of the Committee with the appropriate senior officers in the preparation of the Report.

The results of both the Service User and Carers surveys had been presented to the Scrutiny Committee as part of the 'Supporting Evidence' of the Adult Social Care Annual Report 2017. The report had been published on the Devon County Council web site.

The Report detailed the emerging themes from the surveys and the focus groups' actions points on how these would be addressed.

The Committee discussed the need for Member visits to carers and/or their representatives and/or a Masterclass on this subject prior to any Spotlight Review.

The Scrutiny Officer referred to a past Member Task Group report on Carers' Governance which would be circulated for Members' information.

It was MOVED by Councillor Wright, SECONDED by Councillor Greenslade and

RESOLVED that members site visits be arranged to Westbank Community Care Services for report to the next meeting of this Committee.

* 68 Future of Community Hospitals

In accordance with Standing Order 23 (2) Councillor Wright had requested that the Committee consider the future of community hospitals.

(Councillor Shaw attended in accordance with Standing Order 25 and spoke to this item in relation to a forthcoming NHS Property Services Estates Strategy and implications for the Seaton and Honiton Community Hospitals).

The Committee noted that the Estates Strategy was due for publication in July 2018 and it was expected that any substantive proposals would be subject to consultation. The Chair reported that a Media Statement on 15 May 2018 from the NEW Devon Clinical Commissioning Group had stated that there were no plans to close Honiton and Seaton Hospitals. The statement also stated that 'both hospitals are still open, thriving buildings providing more than 50 day services and clinics combined".

It was MOVED by Councillor Wright, SECONDED by Councillor Greenslade:

'that this Committee strongly supports the retention of all Devon Community hospital buildings for use of health and social care services, furthermore this Committee strongly opposes any potential plans to make those buildings surplus to requirements'.

The **MOTION** was put to the vote and declared **LOST**.

* 69 Appointment of Commissioning Liaison Member

The Chair thanked Councillor Ackland for her work as the outgoing Liaison Member whose role was to work closely with the relevant Cabinet Member and Chief Officer/Heads of Service, developing a fuller understanding of commissioning processes and providing a link between Cabinet and Scrutiny and commissioned services.

It was MOVED by Councillor Randall Johnson, SECONDED by Councillor Way and

RESOLVED that Councillor Twiss be appointed Commissioning Liaison Member.

* 70 Work Programme

RESOLVED that the current outline Work Programme be noted subject to inclusion of the following topics (arising from this meeting) for future consideration:

- (a) Northern Devon Healthcare NHS Trust Action Plan (Minute *53) including information on the integration/collaboration with the Royal Devon and Exeter NHS Foundation Trust;
- (b) recruitment and retention across health/social care and other key roles;
- (c) information on the Memorandum of Understanding between the County Council and partners within the STP.

[NB: The Scrutiny Work Programme was available on the Council's website at

https://new.devon.gov.uk/democracy/committee-meetings/scrutiny-committees/scrutinyworkprogramme/

and the Council/Cabinet Forward Plan is available at

http://democracy.devon.gov.uk/mgListPlans.aspx?RPId=133&RD=0&bcr=1]

* 71 Standing Overview Group and Quality Accounts

The Committee received the responses made on behalf of the Committee in respect of the annual Quality Accounts from the five provider Trusts in the County Council area.

* 72 Information Previously Circulated

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The Committee noted the list of information previously circulated for Members, since the last ordinary meeting, relating to topical developments including ones which had been or were currently being considered by this Scrutiny Committee.

*DENOTES DELEGATED MATTER WITH POWER TO ACT

The Meeting started at 2.15 pm and finished at 6.10 pm