

## HEALTH AND CARE GENERAL UPDATE PAPER

Joint report from Devon County Council and NHS Devon

### 1. Purpose and recommendation

- 1.1. That the Health and Adult Care Scrutiny Committee receives this report that contains updates on key and standing items, and general information including on responding to specific actions, requests or discussions during the previous Health and Adult Care Scrutiny Committee meeting.

### 2. NHS Devon performance update for February 2023

- 2.1 Operationally in February the ICS remained under extreme pressure, although not at the level seen in late December and the first few days of January. Industrial action in nursing and ambulance services continued to compound delays in urgent care, ambulance conveyancing and waiting times.

#### Urgent and Emergency Care

- 2.2 The key metrics to monitor the provision of safe and effective urgent and emergency care, and our performance against those metrics, are outlined below:

<b>Metric</b>	<b>Performance (Feb 23)</b>	<b>Details</b>
111 call abandonment	23%	This is a decrease from January due to an increase in demand and workforce capacity challenges. The workforce capacity issue now has actions in place to improve.
999 call answering within 5 seconds	94%	Target of 95%. Mean call answering time = 6 seconds
Category 2 ambulance response times	37 minutes	This is an improvement since December 22 but below the 18 minute standard.
Average hours lost to ambulance handover delays per day	6,596	Down from the height of 13,743 seen in December 2022
Percentage of beds occupied by patients who are medically ready to go home or to other care settings, such as social care placements	11%	Target is 5%. There has been a continued significant downward trend since December 22 due to reduced demand, fewer community infection outbreaks which allowed more capacity to be open to support discharges and the use of additional discharge funding

		to block purchase beds, packages of care, wraparound support services and additional weekend discharge coordinators.
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### **Elective Care**

- 2.3 The total number of patients in the system waiting over 104 weeks from referral to treatment has fallen for the eleventh consecutive month to 272, which is an improvement on the December position of 340.
- 2.4 The system has seen an improvement in referral to treatment 18-week performance at 52.8% (compared to a target of 92%) and in diagnostic pathways at 64.8% (versus a target of 99%).

### **3. CQC assurance of adult social care duties update**

- 3.1 From the 1 April 2023, the [Health and Care Act 2022](#) empowered the [Care Quality Commission](#) (CQC) to assess how well local authorities are delivering on their adult social care duties defined in part one of the [Care Act 2014](#). Over the next two years the CQC plan to assess and publish ratings as to how all local authorities are delivering on those duties, followed by an ongoing cycle of review.
- 3.2 Members of the Health and Adult Care Scrutiny Committee have been provided with updates and information as the national approach has been developing.
- 3.3 Councils across the country are preparing for the new [CQC Assurance Framework](#), with many taking part in a [Local Government Association \(LGA\) Peer Challenge](#) to be 'inspection ready'. Peer Challenges are enormously helpful in providing experience of an inspection process by independent and experienced colleagues from elsewhere in the country and demonstrate an open and accountable culture.
- 3.4 From the 19 to the 21 of July 2023, an [LGA Peer Challenge](#) will be taking place at Devon County Council, to assess how well the Council, working with its partners and providers, delivers on its duties relating to adult social care.
- 3.5 A Health and Adult Care Scrutiny Committee hosted Masterclass on the Peer Challenge will be taking place on the 15 June where all Members of the Council have the opportunity to hear more detail on the Peer Challenge and the timetable.
- 3.6 A [Peer Challenge website](#) has been developed and where further information will be shared include material to brief colleagues who might be meeting peers or participating in a case audit.
- 3.7 We will also publish the report and our response to it when we receive it in September.

#### **4. Integrated Adult Social Care 2022-23 budget update as of March 2023**

- 4.1 Integrated Adult Social Care reported at month 10 an overspend of £4.055m or 1.2% of net budgets. This was the last monitoring position reported corporately, with the 2022/23 outturn position, still to be reported to cabinet. For adults there was an improved position, which can be confirmed and expanded upon in the next update.
- 4.2 The increased spend reported at Month 10 continued to be driven by a worsening position in Older People service budgets, particularly within increased unit costs for residential and nursing care and personal care.
- 4.3 At this point total savings plans of £15.508m were forecast as deliverable in year, against a budgeted target of £18.741m.
- 4.4 At month 10 we had delivered £14.809m of savings, with further savings to be achieved by year end. Final savings delivery totalled £15.315m, £0.193 less than anticipated at month 10.
- 4.5 NHS Devon has provided significant financial support to social care over 2022/23 including £8.000m to directly support the Integrated Adult Social Care 2022/23 budget.
- 4.6 Given the current financial challenges, and those ahead, work is taking place not only to identify and deliver one-off savings, but also looking at opportunities for recurrent savings where they exist.
- 4.7 The formal DCC year-end position will be presented and discussed at Cabinet 13 June.

#### **5. Devon Integrated Care Board financial position as of February 2023**

- 5.1 Overall, subject to the ICB receiving the expected allocations from NHSE for the discharge fund costs, NHS Devon are reporting an underspend of £0.1m.
- 5.2 The discharge fund cost reimbursement is the ICB's share of the nationally agreed £200m discharge fund for new discharge packages covering the period January 2023 up to 31st March 2023.

#### **6. Devon Integrated Care Board financial position as of February 2023**

- 6.1 As at month 11 the Integrated Care System is reporting a year to date £46.2m deficit against a planned deficit of £18.1m – £28.0m more than planned.
- 6.2 The forecast for the end of the financial year is a deficit of £49.2m, which is an £31.0m more than the planned deficit of £18.2m.

## **Looking forward**

- 6.3 As we move further into the financial year, momentum is gathering on the work we are doing to improve our performance and get our finances back under control.
- 6.4 NHS Devon needs to achieve significant improvements in reducing waiting times for care and hit our budget plans to make sure our system can get out of segment four of the [NHS Oversight Framework](#), which brings with it restrictions on our decision-making and spending.
- 6.5 The scale of the challenge we face is huge and will have a major impact on what we are able to do in the future. It means we are having to make some difficult decisions, including fundamentally restructuring and reducing the size of our organisation, which we are in the process of developing plans for.
- 6.6 Work is underway to collectively align the system on a recovery plan. Delivering the plan successfully will require new ways of working across Devon, bringing organisations together around a set of shared objectives and commitments. Detailed joint planning and risk management across the system and delivery of system-wide strategic schemes will be needed

## **7. Delays to implementation of the Liberty Protection Safeguards**

- 7.1 The government has recently announced that the implementation of the Liberty Protection Safeguards (LPS) is being delayed beyond this Parliament. The LPS scheme was introduced through the Mental Capacity (Amendment) Act in 2019 as the planned replacement system for the Deprivation of Liberty Safeguards (DoLS).
- 7.2 The LPS was intended to provide protection for people aged 16 and above who need to be deprived of their liberty in order to receive their care or treatment and who lack mental capacity to consent to their arrangements.
- 7.3 However, the 2019 act has not been commenced. The government had hoped to fully implement the LPS by April 2022. But, due mainly to the impact of the Covid-19 pandemic, its implementation was delayed.
- 7.4 One of the key reforms under the LPS would have been to give hospital trusts and integrated care boards (ICBs) new responsibility for authorising deprivations of liberty. The effect of the pause is that the DoLS will continue to provide the main legal framework for authorising deprivation of liberty under the Mental Capacity Act for the foreseeable future.
- 7.5 The LPS scheme had been designed to ensure that all cases could be processed in a timely manner, and therefore, remove the backlogs that have grown under DoLS. Despite the announcement of the delay in LPS implementation, we continue to work to address the significant DoLS backlog, but progress will be constrained by our financial challenge.

## **8. The Hewitt Review**

- 8.1 The April the [Hewitt Report](#) was published. The report was a review of Integrated Care Systems and a number of recommendations were set out including a greater focus on prevention and population health with Integrated Care Systems, a helpful reminder and recognition of the role children's social care has in Integrated Care Systems, and recommendation that Government develops a social care workforce strategy to complement the workforce plan being developed for the NHS.
- 8.2 There was also a recommendation to recognise Health Overview and Scrutiny Committees (and, where agreed, Joint HOSCs) as having an explicit role as System Overview and Scrutiny Committees, and that Department of Health and Social Care should work with local government, through the Local Government Association, the Office for Local Government and the Centre for Governance and Scrutiny, to develop a renewed support offer to HOSCs and to provide support to ICSs where needed.
- 8.3 The Government has yet to formally respond to the Hewitt Report.

## **9. CQC report published on services at the Royal Devon**

- 9.1 The Care Quality Commission has [published a report following](#) its short-notice inspection of the Royal Devon University Healthcare NHS Foundation Trust's diagnostic imaging, medical and surgical care services at both acute hospitals at the end of 2022. This was in response to the Trust reporting 16 never events between March 2021 and November 2022.
- 9.2 Diagnostic imaging services have been rated as good, while the ratings for the inspection in medicine and surgery show a decrease in some areas and the services have been rated as requires improvement.
- 9.3 The report describes the challenges caused by the rollout of the Trust's electronic patient record, and there are also positive reflections in the report, with inspectors seeing patients being treated with compassion and kindness, and examples of positive-team working, staff feeling empowered to raise concerns and treating patients according to their individual needs.
- 9.4 This inspection was one of a number of CQC visits which will form the Royal Devon's overall Trust rating. The Trust had a separate well-led inspection earlier in May which looked at the leadership and governance of the organisation. A further report and an overall Trust rating is expected shortly.

## **10. Update on the Digital Strategy**

- 10.1 The ICS Devon Digital Strategy was developed during 2022. System partners and clinicians contributed to its development to ensure that content also reflected the future technology requirements of the Devon health and care system. Technology is a rapidly evolving environment and therefore it is recognised that the strategy will continue to develop.

10.2 The ICS Devon Digital Strategy is focused on supporting the following ICS priorities:

- Urgent and emergency care
- Planned care
- Diagnostics
- Children and young people
- Digital

10.3 To support the ICS priorities listed above and provide a flexible technology environment that can be adapted and respond to the needs of delivering health and care services, the ICS Devon Digital Strategy has five priorities:

- Digital Citizen
- Shared EPR and Operational Systems
- Devon and Cornwall Care Record
- Business Intelligence and Population Health Management
- Unified and Standardised Infrastructure

10.4 A paper with more details on the digital strategy will be brought to a future committee meeting.

## **11. Lead research nurse scoops global nursing award**

11.1 A leading Exeter diabetes nurse has scooped the international \$250,000 (£200,000) Aster Guardians Global Nursing Award.

11.2 Professor Maggie Shepherd of the Royal Devon University Healthcare NHS Foundation Trust and University of Exeter has been honoured with the prestigious award for her ground-breaking work in transforming diabetes care. She scooped the award ahead of more than 50,000 other applicants.

11.3 As a leading research nurse for monogenic (single gene) diabetes, Maggie's contribution to the field has had a positive effect on the lives of countless people in the UK. Her expertise and dedication have led to improved understanding and treatment of this condition while her work as a founding member of the Exeter Monogenic Diabetes Team has been instrumental in translating genetic findings into practical clinical care through sharing information and training diabetes teams across the UK.

### **Tandra Forster**

Director of Integrated Adult Social Care  
Devon County Council

### **Dr Nigel Acheson**

Chief Medical Officer  
NHS Devon

**Electoral Divisions:** All

Cabinet Member for Integrated Adult Social Care and Health Services:  
Councillor James McInnes

Director of Integrated Adult Social Care: Tandra Forster

LOCAL GOVERNMENT ACT 1972: LIST OF BACKGROUND PAPERS

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