

## HEALTH AND WELLBEING SCRUTINY COMMITTEE

19 September 2016

Present:-

Councillors R Westlake (Chairman), J Brook, C Chugg, C Clarence, P Colthorpe, P Diviani, R Gilbert, B Greenslade, G Gribble, E Morse, D Sellis (Vice-Chair), E Wragg and C Wright

Apologies:-

Councillor A Boyd

Members attending in accordance with Standing Order 25

Councillor S Barker

\* 12

**Minutes**

**RESOLVED** that the minutes of the meeting held on 20 June 2016 be signed as a correct record.

\* 13

**Items Requiring Urgent Attention**

There was no item raised as a matter of urgency.

\* 14

**Public Participation: Representations**

In accordance with the Council's Public Participation Rules, the Committee received and acknowledged oral representations made by Mr J Wardman, Ms R Funnell, Ms H Hancox and Mr P Wearne on a matter to be considered by the Committee that day, namely the Success Regime Report 'Your Future Care' and the Sustainable and Transformation Plan (Minute 17 below refers) commenting in particular on views of local community groups and concerns about the impact on local health and social care services.

The Chairman responded, thanking the speakers for their attendance and presentation which would be taken into account by the Committee during its subsequent deliberations.

\* 15

**Vascular Services at the Royal Devon and Exeter Hospital Trust**

Mr A Cowan, consultant at the Royal Devon and Exeter Health Care Trust attended and spoke to this item at the invitation of the Committee.

The Committee considered the report of the Royal Devon and Exeter Hospital Trust on the pathway for emergency vascular inpatients at Torbay and South Devon NHS Foundation Trust and the Royal Devon and Exeter Foundation Trust and transfer of services. As part of this the South Devon and Exeter Vascular Network would be informing patients and the wider public of the changes and developing a survey to enable on-line public/stakeholder engagement. Central to the changes, in line with national recommendations and NHS England specifications, was the requirement for arterial surgery to be delivered out of fewer, high volume specialist arterial surgical centres to improve clinical outcomes and with other benefits.

The Trust's representative responded to Members' questions relating to:

- the changes had the full support of all clinicians and that theatre and bed capacity at the RD&E which was sufficient in respect of the new proposed arrangements for this patient group with specialist care and comprehensive full-time cover;

- the unsustainability of the current arrangements in terms of skilled surgical support and the limited alternative to these changes - i.e arterial services being provided from further afield;
- the wide range of after-care and rehabilitation time required from 24 hours to some 3 weeks.

□

It was **MOVED** by Councillor Westlake, **SECONDED** by Councillor Sellis and

**RESOLVED** that the changes be noted and that progress and outcomes be reported to this Committee in 12 months' time.

\* **16**      **Public Health Annual Report 2015/16**

The Committee considered the report of the Director of Public Health on the Public Health Annual Report 2015 -16 approved for publication by the Cabinet on 13 July 2016 (Minute \*52 refers). The Annual Report drew on the importance of the health of the public and its links to fairness, equality and justice, its central themes. While the health of the public in Devon was generally good, both in terms of national comparisons and with similar geographic areas, as indicated by the Devon Joint Strategic Needs Assessment, there remained areas of concern.

The Director responded to Members' questions including:

- the possible reasons for the wide gap in average life expectancy between the worst and best in Devon, and the on-going work to address these differences, relating to, inter alia, social and economic inequalities, housing, and access to primary care services;
- the work being done in Ilfracombe with the lowest life expectancy in Devon;
- identified priorities relating to obesity in adults and children, levels of alcohol consumption, poor mental health and social isolation (and increasing suicide levels), violence and abuse with action required at local, national and international levels;
- the significant decrease in national funding for Public Health services and the detrimental local impacts on prevention and other services;
- evaluation of existing programmes and change of emphasis with better engagement and commissioning arrangements;
- work with schools and colleges, including the new 'Early Help for Mental Health' service.

It was **MOVED** by Councillor Westlake, **SECONDED** by Councillor Greenslade and

**RESOLVED** that a report on health inequalities in Ilfracombe be submitted to the 19 January 2017 meeting of this Committee with a view to a possible further detailed investigation by a Task Group.

\* **17**      **Wider Devon Sustainability and Transformation Plan and NEW Devon Success Regime**

Dame Ruth Carnall, Ms A Pedder and Dr J Andrews attended and spoke to this item at the invitation of the Committee.

The Committee considered the Report of the Success Regime on progress with developing the Wider Devon Sustainability & Transformation Plan (STP) and the paper set out the overall purpose, scope and process for consultation on a 'Your Future Care' model. This model recommended that people were best supported at home with local, place based support. The report outlined the pre-consultation events already held and the consultation period of 12 weeks commencing in October with decision making in early 2017.

The Success Regime representatives also gave a presentation covering: definitions of the Success Regime and the Sustainability and Transformation Plan (STP); the Case for Change

(previously presented to this Committee), the preferred model of care and key general principles, the method for individual comprehensive assessments and access including rapid response arrangements (Care at Home) and the consultation arrangements for the 'Your Future Care' model.

The representatives responded to Members' questions and comments confirming that:

- individual proposals for change would be subject to full public engagement and consultation and all staff were being kept informed;
- they were not aware of any proposals relating to transferring paediatric services from the North Devon District Hospital;
- the national increase allocation for the NHS of £8bn had already been factored into the STP processes nationally and locally;
- their regret that the Devon STP draft document had been leaked, and that the process for approval and consultation of these plans was within a national framework determined by NHS England;
- an additional allocation of £50m for health services in Devon had already been achieved by the Success Regime;
- more information and clarification concerning acuity rates and bed occupancy would be forwarded to members of the Committee;
- the national allocation for NHS funding was beyond the Success Regime ambit and all areas were able to examine the national formula and implications locally but that the national allocation remained within current NHS planning – the Success Regime's objective was to identify options by which services could be delivered that were of a consistent high quality and clinically and financially sustainable in the longer term;
- a detailed statement of the consultation arrangements would be circulated to Committee Members relating to (a) community services 'Your Future Care' (subject to NEW Board approval) for the NEW CCG Devon area to commence in October 2016; and (b) for acute and specialist services as part of the wider STP (relating to both CCGs in Devon, subject to NHS England approval) process, and it was envisaged these would be looked at for consultation next year, if appropriate.

It was **MOVED** by Councillor Westlake, **SECONDED** by Councillor Wright and

#### **RESOLVED**

(a) that representations be sent to the Secretary of State for Health relaying this Committee's concerns about the Sustainability and Transformation Plan process and its funding;

(b) that a Task Group be formed to examine the current NHS formula funding for Devon and that Dr Sarah Wollaston MP, Chair of the House of Commons Select Committee (Health), be requested that the Select Committee also examine the funding formula and that she be invited to contribute to the Task Group;

(c) that the Success Regime be asked to submit a paper on all the consultation arrangements relating to the 'Your Future Care' model and in respect of the Sustainable and Transformation Plan (STP) processes and detailed proposals; and that progress be reported to the next meeting of this Committee on 8 November 2016 or to a special meeting as appropriate;

(d) that the joint Spotlight Review of the Model of Care for Torbay, Plymouth and Devon be arranged.

(N.B. In accordance with Standing Orders Councillor Colthorpe requested that her abstention from voting in this matter be recorded)

\* **18**      **Torrington Hospital: Referral to Secretary of State**

The Committee noted the receipt of a letter from the Secretary of State for Health confirming that he had asked the Independent Reconfiguration Panel (IRP) to undertake an assessment of this Committee's referral concerning reconfiguration of inpatient beds at the Torrington Community Hospital. Members would be informed of the outcome when notified.

\* **19**      **South Devon and Torbay: Community Reconfiguration**

Mr S Tapley (Director of Commissioning and Transformation), Dr D Greatorex (Clinical Chair) and Ms J Turner (Locality Manager), South Devon and Torbay Clinical Commissioning Group attended and spoke to this item at the invitation of the Committee.

The Committee considered the report of the South Devon and Torbay Clinical Commission Group (PH/16/27) outlining current position and the main strands of the consultation proposals which had been subject to a NHS England assurance process and as a result formal consultation had started on 1 September running until Wednesday 23 November. It was anticipated that the CCG Governing Body would consider the outcome of the consultation as well as any alternative proposals at a meeting in public in January/February 2017.

If approved, (a) the consultation proposals would see a transfer of expenditure from bed based to community based care with the number of community hospital beds being reduced and more investment being made in the local services which most people use; and (b) minor injuries units would be concentrated in three locations, operating consistent hours and with x-ray diagnostics so that they would provide a viable alternative to A&E.

The representatives responded to Members' questions confirming that ownership of buildings by the Trust and proceeds from surplus property would be used by the Trust for health care services across its operating area; and that anticipated revenue savings from the process would be re-invested in community services.

It was **MOVED** by Councillor Westlake, **SECONDED** by Councillor Sellis and

**RESOLVED** that this Report be noted and that the consultation outcomes and plans be reported to the 19 January 2017 meeting of this Committee.

\* **20**      **NHS Property Services**

Mr R Goodier (National Head of Service Improvement) and Mr Hugh Groves (Chief Finance Officer, NEW Devon CCG) attended and spoke to this item at the invitation of the Committee.

The Committee considered the report of NHS Property Services on general information about NHS Property Services and the transfer of 12 community hospitals to NHS Property Services as part of NHS Northern, Eastern and Western Devon Clinical Commissioning Group's plans to award its contract for community services to the Royal Devon and Exeter NHS Foundation Trust (RDEFT) for the Eastern locality of Devon.

The representatives responded to Members' comments and/or questions including:

- the calculation methodology of 'market rents' in accordance with RICS professional guidelines used by public sector organisations;
- associated services provided by NHS Property Services as part of their ownership and management of assets;
- ownership of the NHS property Services by the Secretary of State with proceeds reinvested in the NHS;
- an undertaking to provide more information in respect of the Sidmouth GP practice following a meeting held earlier that day;

- disposal of assets at the best market values, with any subsequent development being subject to Community Infrastructure Levy (or S106) contributions for health services;
- use of charitable voluntary donations such as League of Friends contributions.

It was **MOVED** by Councillor Westlake, **SECONDED** by Councillor Wright and

**RESOLVED** that the report be noted and that the CCG and NHS Property Services be requested to provide a briefing note on the terms for the transfer of the 12 Community Hospitals in Eastern Devon, confirmation of ownership of the Bideford Community Hospital and an update on the Sidmouth GP Surgery.

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### **Appointment of Commissioning Liaison Member**

The Commissioning Council' Task Group had considered how the externalisation of services was impacting the role of scrutiny, and in particular how scrutiny committees could engage with the commissioning process and hold providers to account. The Task Group had identified a number of good practices, where scrutiny had been involved with commissioning processes and where providers had been willing to engage with scrutiny, but found that there were inconsistencies across service areas. The Cabinet, having accepted the Task Group's recommendation to 'strengthen communication and collaboration between Cabinet Members and Heads of Service and Scrutiny Committees, in relation to commissioned Services', outlined a proposed protocol involving each Scrutiny Committee appointing a 'Commissioning Liaison Member', to:

- (a) develop a fuller understanding of the Council's commissioning processes and priorities;
- (b) build good working relationships with relevant Officers and Cabinet Members responsible for Commissioning, within the Scrutiny Committee's remit;
- (c) act as an intermediary / link between Cabinet and their Scrutiny Committee and bring to the attention of the Scrutiny Chairman and Committee, any issues which could benefit from Scrutiny.

It was **MOVED** by Councillor Westlake, **SECONDED** by Councillor Sellis, and

**RESOLVED** that Councillor Westlake be appointed as the Commissioning Liaison Member for this Committee.

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### **Dentistry and Appointment System**

Mr A Harris, (NHS England, Contract Manager) attended and spoke to this item at the invitation of the Committee.

The Committee received and noted the report of NHS England on the present position regarding access to NHS dental services in Devon, detailing numbers on waiting lists, and outlining access to urgent dental care.

The representative responded to Members' comments and/or questions including:

- possible reasons for longer waiting lists relating to residential development (particularly in Exeter) and improved help-line information and awareness of good oral health;
- work by NHS England to reduce waiting lists including developing capacity and improving practice efficiency;
- National Institute for Health and Care Excellence (NICE) recommendations for frequency of checks for children and adults;
- overall access was improving but there remained pockets of concern with some 30% of children not regularly seeing a dentist.

\* **23**      **Work Programme**

The Committee noted that the Work Programme had been or would be amended to include

- (a) joint spotlight review on the Model of Care for Plymouth, Torbay and Devon;
- (b) Success Regime, STP and Community Services: Consultation arrangements and proposals;
- (c) Spotlight review of quality indicators used by commissioners and providers;
- (d) out of hours - 111 GP service changes;
- (e) Public Health report on health inequalities;
- (f) Vascular Services: Royal Devon and Exeter and Torbay Hospitals: Progress
- (g) Task Group on NHS Formula funding for Devon.

In addition, Master Class briefing sessions would be held on Integrated Care in Exeter (ICE programme); and Success Regime developments, as appropriate.

[NB: The Scrutiny Work Programme is available on the Council's website at [http://www.devon.gov.uk/scrutiny\\_programme.htm](http://www.devon.gov.uk/scrutiny_programme.htm) and the Council/Cabinet Forward Plan is available at [http://www.devon.gov.uk/forward\\_plan](http://www.devon.gov.uk/forward_plan)]

\* **24**      **Information Previously Circulated**

The Committee noted a summary of documents/publications previously circulated for members, since the last meeting, relating to Health and Wellbeing developments and including matters which were currently being considered by this Scrutiny Committee.

**\*DENOTES DELEGATED MATTER WITH POWER TO ACT**