

HEALTH AND ADULT CARE SCRUTINY COMMITTEE

23 January 2020

Present:-

Councillors S Randall-Johnson (Chair), H Ackland (Vice-Chair), M Asvachin, P Crabb, R Peart, S Russell, P Sanders, A Saywell, R Scott, J Trail, P Twiss, N Way, C Wright and J Yabsley

Apologies:-

Councillors J Berry and A Connett

Members attending in accordance with Standing Order 25

Councillor A Leadbetter

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Minutes

RESOLVED that the Minutes of the Meeting held on 11 November 2019 be signed as a correct record.

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Items Requiring Urgent Attention

There was no item raised as a matter of urgency.

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Public Participation

There were no oral representations from members of the public.

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Health and Care General Update

(Councillor A Leadbetter attended in accordance with Standing Order 25(1) and to spoke to this item at the invitation of the Committee).

The Committee received the Joint Report of the Associate Director of Commissioning (Care and Health) Devon County Council and NHS Devon CCG and the (interim) Director of Commissioning (NHS Devon CCG) (ACH/20/116) on an update and general information responding to matters raised during the previous Health and Adult Care Scrutiny Committee meeting. The Report covered mental health in universities, communications, the jointly prepared market position, the Devon strategy for general practice, Devon's Long Term Plan, and the winter campaign update,

Members' discussion points/comments with the Chief Officer for Adult Care and Health, Associate Director of Commissioning (Devon County Council and NHS Devon Clinical Commissioning Group), and Head of Care Operations and Health included:

- national recognition (Silver award) at the Social Worker of the Year Awards for the Devon's Prisons ASC Team (Creative & Innovative Social Work Practice) and Members extended their congratulations to the Team;
- introduction of a care and health worker parking permit scheme to allow care and health workers to park safely when carrying out their duties at the homes of their clients and this was welcomed by Members;
- a new GP Practice for Cranbrook which was being commissioned by the Devon Clinical Commissioning Group with the intention of creating minimum disruption for the residents;
- the developing Primary Care Network (PCN) strategy which would be reported to a future meeting of this Committee with representation from the PCNs;

- re-opening of the Tavistock Minor Injuries Unit in January 2020; and
- the developing Minor Injuries Unit (MIU) strategy to standardise the offer in Devon and reduce Accident and Emergency attendance would be reported to a future meeting of the Committee and progress on the rollout of the NHS Quicker 'app'.

* **171** **Draft Housing and Accommodation Strategy**

The Committee considered the Report of the Associate Director of Commissioning (Care and Health) (ACH/20/120) on work to increase the range of housing and accommodation for people who received or may receive health and care support to sustain and/or maximise their capacity for independent living.

A draft joint strategy had been jointly developed by the County Council and Devon's Clinical Commissioning Group, in consultation with a range of partners, including the District Councils, people and their families/carers. It set out to increase the range of housing and accommodation so that more people could live in their own homes and make informed and planned choices about where they lived.

The Strategy included all the types of homes that people might live in, temporarily or permanently during their lives, with mainstream housing at one end of a spectrum of intensity of support, housing with some levels of care and support in the middle and residential/nursing care at the highest end. The Strategy would be supported by detailed action plans setting out the work at locality level to achieve the strategic intent.

Members' discussion points/comments with the Associate Director of Commissioning (Care and Health) and the Senior Commissioning Manager included:

- this was an early draft of the Strategy (underpinned by detailed action plans) which would be subject to detailed discussions with health partners, District Councils (and District Council cluster groups such as the Greater Exeter Strategic Partnership and North Devon/Torridge Partnership), Public Health, Children's services (and the wider STP Partners), and families and carers prior to consideration by the Cabinet and the Health and Wellbeing Board;
- capital budget provision would be made as viable schemes emerged;
- the complex planning issues involved in the development of individual schemes involving local planning authorities, District Housing Partners, Health, developers and the third sector;
- the need to involve transport issues in the Plan; and
- the Strategy was driven by identified need as evidenced by the Joint Strategic Needs Assessment and Members commended the JSNA Headline Tool as a valuable resource (available at: <https://www.devonhealthandwellbeing.org.uk/jsna/jsna-headline-tool/>).

It was **MOVED** by Councillor Randall Johnson, **SECONDED** by Councillor Ackland and

RESOLVED that the development of a Strategy be supported and that the Cabinet be asked for the Service to develop a 'Memorandum of Understanding' with District Councils as appropriate to indicate a shared commitment and to engage with all Members to drive the Strategy forward.

* **172** **Promoting Independence in Devon - Annual Report**

The Committee considered the Report of the Associate Director of Commissioning (Care and Health) (ACH/20/121) on a summary of the Annual Report (or 'local account') of the adult social care functions of the County Council which included:

- A self-assessment;
- A range of evidence supporting the self-assessment; and
- Links to further sources of external information.

The full version of the Annual Report (attached with the Agenda) was designed to be read standalone and online as it contained internal and external links and published alongside the Council's Vision and Plan available at:

<https://new.devon.gov.uk/care-and-health/adults/policies-and-procedures/adult-care-and-health-vision-planning-and-report/>

Members' discussion points/comments with the Chief Officer for Adult Care and Health, the Associate Director of Commissioning; and the Head of Adult Care Operations and Health included:

- the headline figures and number of clients in Devon detailed in the Annual Report;
- the detailed figures in the Report relating to the Delayed Transfer of Care and the reasons for delays and actions to mitigate the pressures within acute hospital settings;
- the good relations with the Clinical Commissioning Group in regard to eligibility criteria relating to health and social care particular for the more complex cases and that there were dispute processes available but these were rarely used;
- any correlation between spending for the over 65s and carer satisfaction measures which the current Carers Task Group might identify;
- figures relating to unallocated care packages, and personal care sufficiency was the most significant social care market challenge locally and nationally and was reflected in the Risk Register;
- the impact of the growing number of adults of working age with complex and profound needs and the impact on resources; and
- the work by the County Council across all areas (including the community teams, transport, economy, Adult Care and Health and Public Health) to promote meaningful work opportunities for adults with additional needs, their transport opportunities and independent and supported home-living.

It was **MOVED** by Councillor C Wright, **SECONDED** by Councillor J Trail and

RESOLVED

(a) that the Annual Report be commended for wider promotion;

(b) that the Committee records its concerns relating to the high levels of delayed transfer of care, particularly at the Royal Devon and Exeter Hospital and factors causing those pressures including a requirement for a significant level of extra care workers; and

(c) that the continuing challenges relating to providing full care packages at the Hospital be noted.

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Planned Care Performance: 52 Week Wait Performance – Devon STP

The Committee considered the Report of the Associate Director of Commissioning (Devon Clinical Commissioning Group) on the number of patients waiting for over 52 weeks for routine surgery. The Report described the current position, the reasons for relatively low performance and how this was being addressed within local Trusts. The Report also outlined the Devon System-wide response which had been developed to address this challenge this year and into 2020/2021.

A long-waiting patient was defined as someone who had been waiting 52 weeks or longer from their referral to the start of routine treatment in a hospital against the NHS performance target of 18 weeks. Patients referred for emergency treatments were not covered in this Report.

Nationally, Devon was an outlier in the number of people waiting for more than 52 weeks and the recovery of this position had been prioritised by all Devon health organisations. A Devon

STP System approach had been initiated to address this issue and ensure that the longer waiting patients were prioritised according to their clinical need and length of wait.

At the end of November, nationally there were 1,378 patients' waiting over 52-weeks with Devon CCG having 282 of these breaches.

The organisations involved in this work were the NHS Devon Clinical Commissioning Group, Royal Devon & Exeter NHS Foundation Trust (RDE), Northern Devon Healthcare NHS Trust (NDHT), Torbay & South Devon NHS Foundation Trust (TSD) and University of Plymouth Hospital NHS Trust (UHP).

There had been several contributing factors which had led to the increase in patients waiting these factors being different across the local acute Trusts. The Report described these issues in more detail and how they were being addressed.

Discussion points with Members and the Director included:

- reasons for delays at Torbay Hospital relating to specific theatre maintenance issues; and
- reasons for the relatively good waiting times at the North Devon District Hospital with more complex cases going to the Royal Devon and Exeter Hospital.

Members commended the Report as a clear explanation of the issues and how they were being addressed.

It was **MOVED** by Councillor S Randall Johnson, **SECONDED** by Councillor H Ackland and

RESOLVED that the progress made to date to improve the performance and plans to consistently meet the performance standard in 2020/2021 be noted and that progress be reported to a future meeting of this Committee.

* **174** **Accident and Emergency Waiting Times**

(In accordance with Standing Order 23(2) Councillor C Wright had requested that the Committee consider this matter)

Councillor Wright referred to Accident and Emergency figures and a proposal (reported in the national press) for scrapping the 4 hour target.

The Associate Director of Commissioning (Care and Health) (Devon County Council and NHS Devon Clinical Commissioning Group) outlined the current position noting that there had been significant pressures relating to acuity and complexity. The Council and the Clinical Commissioning Group had allocated additional resources to improve flows and the transfer of care into residential or nursing care in the community.

The latest Adult Care figures showed that 84.9 per cent were seen within four hours in North Devon, 80.9 per cent at the Exeter RDE and 77.9 per cent in Torbay.

* **175** **Work Programme**

The Committee noted the current Work Programme subject to inclusion of the following topics (arising from this meeting) for future consideration:

- Task Group/Spotlight Review on recruitment and retention (Health and Care);
- development of the Primary Care Networks (Minute *170);
- Planned Care Performance (Minute *173);
- car parking issues at the RDE Hospital and implications of new proposals (composite report);
- waiting times – Accident and Emergency (composite report); and

- amalgamation of the Boards of Northern Devon Healthcare NHS Trust and the Royal Devon and Exeter NHS Foundation Trust (composite report).

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

<https://www.devon.gov.uk/democracy/committee-meetings/scrutiny-committees/scrutiny-workprogramme/>

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Information Previously Circulated

Information which had been previously circulated for Members relating to topical developments included:

(a) Boards of Northern Devon Healthcare NHS Trust and the Royal Devon and Exeter NHS Foundation Trust: Media Briefing covering exploration talks about joining together on a more formal basis.

(b) Urgent and Emergency Care Survey 2018 - Care Quality Commission (CQC) publication on the Urgent and Emergency Care Survey 2018 on responses from patients who attended either a major consultant-led A&E department (Type 1) or an urgent care centre or minor injury unit (Type 3) run directly by an acute hospital trust during September 2018.

(c) CQC published a report of its recent Devon Partnership NHS Trust inspection which had been rated as Good following an inspection in June and July 2019.

(d) Torbay and South Devon NHS Foundation Trust's (TSDFT) communication to inform that contingency plans had been implemented on 23 September 2019 in response to an IT failure at Torbay Hospital and all systems had returned to normal.

(e) NHS Information on GP Services in Devon reminding people that there were new and innovative ways to access GP services this winter.

(f) Care Quality Commission inspection of University Hospitals Plymouth NHS Trust. Reports published on CQC's website at: <https://www.cqc.org.uk/provider/RK9>.

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

The Meeting started at 2.15 pm and finished at 4.25 pm