# HEALTH AND ADULT CARE SCRUTINY COMMITTEE

12 March 2020

Present:-

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

Member attending in accordance with Standing Order 25 Councillor A Leadbetter

<u>Apologies:-</u> Councillors J Berry and N Way

### \* 177 <u>Minutes</u>

**RESOLVED** that the Minutes of the Budget and ordinary meetings held on 23 January 2020 be signed as correct records.

## \* 178 <u>Announcement</u>

The Chair welcomed Mrs R Saltmarsh who was attending the meeting in her capacity as a Co-opted Member of the Council's Standards Committee to observe and monitor compliance with the Council's ethical governance framework.

### \* 179 <u>Items Requiring Urgent Attention</u>

There was no item raised as a matter of urgency.

### \* 180 <u>Public Participation</u>

In accordance with the Council's Public Participation Rules, the Committee received and acknowledged oral representations made by Mrs M Phillips on a matter to be considered by the Committee, namely 'Carers Spotlight Review' (Minute \*185 refers).

The Chair responded, thanking the speaker for her attendance and presentation which would be taken into account by the Committee during its subsequent deliberations.

### \* 181 <u>Coronavirus (COVID-19): Update</u>

The Chief Executive (Devon County Council) with the Assistant Director/Consultant of Public Health and Accountable Officer (NHS Devon Clinical Commission Group) reported on the current measures being undertaken by the County Council in partnership with Devon NHS to safeguard the public and mitigate the wider impacts of the COVID-19 virus.

The Officers responded to Members' questions relating to

- current diagnosed levels in Devon and the possible future impact on the Council's workforce and services and ongoing planning including prioritisation of resources;
- contingency planning by the NHS and the County Council and the importance and possible impact on adult social care services;
- current NHS advice relating to testing;
- NHS contingency planning and availability of acute beds and primary care initiates including 'remote consultation' and additional resources for the 111 service;

- availability of any additional resources by Government for the County Council's adult social care services (at this stage no additional resources had been notified to the County Council); and
- Government science based advice which the Council and the NHS Devon was following and noting that this was likely to change according to developments and that the Chief Executive was in regular and close communication with other local authorities and the Department for Housing, Communities and Local Government.

It was **MOVED** by the Councillor C Wright, **MOVED** by Councillor S Randall Johnson and

**RESOLVED** that this Committee requests the Secretary of State for Health and Social Care to urgently and adequately support Local Government with additional resources for Adult Social Care services during this COVID-19 epidemic.

### \* 182 <u>Health and Care: General Update</u>

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 Clinical Commissioning Group (CCG)) (ACH/20/120) giving an update and general information on matters raised during the previous Health and Adult Care Scrutiny Committee meetings.

The Report covered supporting people with learning disabilities into employment, car parking at the RD&E Hospital, Devon Health and Care system communications update, proud to care, Health and Care parking permits, nursing associates, devon hospitals 4-hour Accident and Emergency wait performance, My Care, Northern Devon Healthcare NHS Trust and the Royal Devon and Exeter NHS Foundation Trust working together; and consultation to modernise local health and care services in the Teignmouth and Dawlish areas.

Members' discussion points/comments with the (Interim) Director of Commissioning (NHS Devon CCG) included:

- confirmation that the proposed consultation relating to services in Teignmouth and Dawlish had been deferred pending the COVID-19 emergency and the ongoing planning by the CCG in terms of bed capacity;
- carparking issues and bus services to the RD&E Hospital (and idling bus engines which should be turned off);
- the success of the parking permit scheme for Health and Care staff across Devon;
- the need for more information relating to how the proposed joining of the Northern Devon Healthcare and Royal Devon and Exeter Trusts would benefit the communities they served, and that the process would take time and that information on the Clinical Service review proposals would be included in a future report; and
- information on the County Council's Non-Emergency Patient Transport Service working with the NHS (which could be incorporated in a future Master Class or report to this Committee).

The Chair thanked the Officers for the update.

## \* 183 <u>Development of a Devon Long Term Plan</u>

(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 considered the Report of the Chief Executive on an update on the development of a Devon Long Term Plan. The development of a local Long Term Plan was a requirement of NHS England of all Sustainability and Transformation Partnerships. The Report outlined the challenges, the Plan's ambitions which involved Integrated Community Services (ICS) with health and care organisations working together.

The Committee also received a presentation on the details of the Plan relating to the partners involved, challenges in Devon, the make-up of the Plan, areas addressed, core deliverables, ambitions and priorities, the Integrated Care Model, Mental Health Transformation, population health management, children and young people, digital priorities, allocation of resources, the integrated care model, and how the partners would work together.

Members' discussion points/comments with the Chief Executive (Together for Devon) included:

- confirmation of the budget savings required of the LTP there was a projected deficit of £157m (for 2019/20) and the Plan aimed to deliver an outturn of a £153m deficit for 2020/21 (£85m of which would be delivered by the Trusts and the balance from the work programmes) (provisional figures, subject to approval by STP/ICS partners) against a background of increasing demand and costs to be achieved through efficiency and productivity savings across the workforce, admissions and outpatient arrangements, referrals, drug costs and procurement and digital initiatives for example;
- in terms of the Integrated Care Service (ICS) there was no national blueprint but all 42 areas in the Country were required to develop the partnerships;
- there were no proposals relating to current accountabilities/budget responsibilities or the roles of the Health and Wellbeing Board or Scrutiny as part of the democratic process; and
- new capital schemes to modernise acute hospitals in North and South Devon and Plymouth which would help deliver the proposed savings.

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

that the progress of the Long Term Plan, its blueprint for the future and implementation proposals with detailed budget information and forecasts together with the governance processes be reported to the September or November meeting of this Committee.

It was then **MOVED** by Councillor C Wright, **SECONDED** by Councillor M Shaw that the Motion before the Committee be amended by:

'that this Committee records its concerns on the LTP funding cuts and recommends that they are suspended until the COVID-19 virus crisis is ended in order that all efforts can be devoted to maximising the response and lessons from the crisis can be incorporated in the Plan'.

The amendment was put to the vote and declared LOST.

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

### <sup>1</sup> 184 Primary Care Networks Update and General Practice Strategy

The Committee considered the Report of the Director for Commissioning, Deputy Director for Primary Care of NHS Devon Clinical Commissioning Group and the Clinical Director (Woodbury, Exmouth, Budleigh (WEB) Primary Care Network) on the development of Primary Care Networks (PCNs) and the Strategy for General Practice in geographic Devon, including progression of the digital agenda.

In geographic Devon all 124 General Practices (from 1 April 2020 there would be 123 practices owing to a planned merger) had signed up to active participation within a PCN, of which there were 31 across geographic Devon, meaning there was full coverage of the population.

PCNs typically served communities of 30,000 to 50,000 people, (a full breakdown and coverage of PCNs was included as Appendix 2 of the Report).

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PCNs would enable:

- an extended range of services with access to specialist advice;
- a focus on population health management for both physical and mental health;
- the development of tailored care for people with multi-morbidity and frailty;
- peer review and clinical governance;
- investment in IT and other technologies;
- increased resilience, being better able to respond to fluctuations in demand and capacity;
- better representation of general practice as a provider in system-level design and implement conversations;
- career development and support for professional and other staff, including portfolio careers; and
- stronger engagement with local communities.

The funds made available within geographic Devon totalled £920,000 and allowed PCNs to make progress against their development objectives, which were linked to a nationally developed framework.

Members' discussion points/comments with the Director of Commissioning (Devon CCG), the Deputy Director for Primary Care, CCG and Dr B Coakley (GP) included:

- the five pillars for primary care provision: better access through innovative technology; agile work force with a focus on multi-disciplinary teams, population health management and reduce health inequalities, joined-up care close to home through developments of the PCNs; and modern estates and infrastructures;
- the positive GP perspective of the developing PCNs with practices (all providing core and robust services) supporting each other (as had happened in Torquay with a practise temporarily closing due to the COVID-19 crisis); and
- the ambition of any patient being able to attend any practice within the PCN to improve access.

The Chair thanked the presenters for their informative and positive report.

### \* 185 <u>Carers Spotlight Review</u>

The Chair of the Review, Councillor C Wright, presented the Report of the Spotlight Review which covered:

- an understanding of the carers' offer and evaluation against the experience of carers in the County; and
- an examination of the availability of replacement care across Devon.

The focus of the Review was unpaid adult carers of adults, and therefore largely did not reference young carers which would necessitate a separate piece of work to cover it adequately.

Members noted that the Carers Steering Group should also be kept informed of progress of the recommendations and developments (subject to consideration of the Report by the Cabinet).

Members thanked the Chair of the Review and the other Members for this excellent piece of work.

It was **MOVED** by Councillor C Wright, **SECONDED** by Councillor Ackland and

**RESOLVED** that the recommendations of the Spotlight Review, as detailed in the Report, be commended to the Cabinet.

## \* 186 Internal Audit Plan 2020/21

The Committee considered the Report of the County Treasurer (CT/20/38) on the 2020/21 Internal Audit Plan. The objectives of Internal Audit were:

- to provide assurance to the County Treasurer (as the Section 151 "responsible officer"), Audit Committee and to other Directors and Members, on the adequacy and security of those systems on which the County Council relied for its internal control (the "control environment"); and
- to provide advice and assurance to managers and staff within the client directorates.

The planning process had taken place with service management towards the end of each financial year, resulting in an updated risk-based annual plan for the coming year. The risk-based audit work planned for 2020/21 was linked through the corporate and service risk registers to risks related to the achievement of the Council's strategic objectives.

Delivery of the Internal Audit Service would be by the Devon Audit Partnership, a shared services arrangement between Devon County Council, Plymouth City, Torbay Council, Mid Devon District Council, Torridge District Council, and South Hams and West Devon Councils.

Members' discussion points with the Officers included:

- the Plan was flexible according to changing circumstances and priorities;
- as the Plan largely related to Adult Social Care, Officers with Members should develop proposals (with Audit South West who provided Internal Audit Services for the NHS/CCG), to align audit coverage with the NHS Audit plans, as part of the Integrated Care Service and the Long Term Plan of which the County Council was a key partner with shared risks and priorities; and
- the need for engagement with Members prior to submission of the draft Plan to the Audit and Partnership Committees.

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

**RESOLVED** that the Audit Plan in respect of areas relevant to Health and Adult Care be noted and that Officers develop proposals to align the Plan with the NHS Devon audit arrangements.

### \* 187 <u>Health and Adult Care Standing Overview Group</u>

The Committee received the Report of the Standing Overview Group (SOG) (CSO/20/11) of their examination of the Devon NHS Long term Plan. The Group discussions had centred on the Integrated Care System in Devon and the challenges faced. Members of the SOG had identified a number of important issues detailed in the Report and Officers' responses and comments were also outlined.

### \* 188 Holsworthy Medical centre: Model of Care Site Visit

The Committee received the Report of the Members (CSO/20/10) on a site visit by them on 25 February 2020 to the Ruby Country Medical Group which brought together Holsworthy and Hatherleigh Medical and Stratton Medical Centres. The site visit had agreed that the site visit provided invaluable insight into how the model of care was working from a GP surgery perspective.

## \* 189 <u>Work Programme</u>

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

• the developing Long Term Plan (Minute \*183 refers); and

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- Carers Spotlight Review progress of recommendations (Minute \*185 refers); and
- development of the Primary Care Networks (PCNs) and the Strategy for General Practice.

[NB: The Scrutiny Work Programme was available on the Council's website at https://www.devon.gov.uk/democracy/committee-meetings/scrutiny-committees/scrutinyworkprogramme/

### 190 Information Previously Circulated

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

(a) Cranbrook Medical Practice / A&E 4 Hour Wait Performance: Information from the Associate Director of Commissioning (Care and Health) (Devon County Council and NHS Devon CCG).

(b) My Care Open Day at the RD&E – on 22 February 2020 on a preview of the future of electronic patient care records.

(c) Engagement exercise on community health and care services in Somerset.

(d) Letter from the Chief Executive SWASFT advising of a 999 call handling trial to provide average ambulance response times for lower acuity patients.

(e) NDHT press release on views on maternity services at Northern Devon Healthcare NHS Trust (NDHT) in the latest national Care Quality Commission maternity survey.

# \*DENOTES DELEGATED MATTER WITH POWER TO ACT

The Meeting started at 2.15 pm and finished at 5.20 pm