HEALTH AND ADULT CARE SCRUTINY COMMITTEE

24 January 2024

Present:-

Councillors S Randall Johnson (Chair), M Wrigley (Vice-Chair), J Bailey, R Chesterton, D Cox, P Crabb, I Hall, P Maskell, R Peart, D Sellis, R Scott, C Whitton, Hodson and J Yabsley

Apologies:-

Councillors Y Atkinson and L Hellyer

Members attending in accordance with Standing Order 25

Councillors J McInnes, M Hartnell and C Leaver

* 147 Announcements

The Chair welcomed the members of the public in attendance at the meeting.

* 148 Minutes

RESOLVED that the minutes of the meeting held on 9 November 2023 be signed as a correct record.

* 149 Items Requiring Urgent Attention

There was no item raised as a matter of urgency.

* 150 Public Participation

In accordance with the Council's Public Participation Rules, the Committee received and acknowledged oral representations from: (i) Councillor Chris Clarance, (ii) Carmen Jaye and (iii) Geralyn Arthurs regarding the Teignmouth Community Hospital (Minute *151 refers) on the case for its retention and referral to the Secretary of State for Health and Social Care; and

(iv) Professor Martin Shaw and (v) Jack Rowland regarding Seaton Community Hospital (Minute *152 refers) in opposition to proposals made to demolish a wing of the building.

The Chair thanked the speakers for their contribution.

* 151 <u>Teignmouth Community Hospital Task Group (NHS Devon Response to Recommendations)</u>

Councillor Martin Wrigley declared a personal interest by virtue of being the leader of Teignbridge District Council, which owned the land upon which the proposed Health and Wellbeing Centre was planned to be built.

The Committee considered the Report of NHS Devon which provided responses by NHS Devon to the recommendations made by the Committee at its previous meeting (Minute *134 refers). The recommendations were made based on the report of the Teignmouth Community Hospital Task Group. Appendices to the report were also made available online which consisted of a report by the NHS Devon Clinical Commissioning Group (CCG) on Modernising Health and Care Services in the Teignmouth and Dawlish Area, and a related consultation report by Healthwatch in Devon, Plymouth and Torbay.

Councillor Martin Wrigley, Chair of the Task Group, acknowledged the arguments of NHS Devon regarding the need to modernise healthcare services in the area and to provide updated facilities for GPs. However, questions were raised as to whether this need was being conflated with the closure of Teignmouth Community Hospital, and therefore whether the modernisation of healthcare services in the area was contingent on the closure of the Hospital.

Both in the report and at the committee meeting, representatives from NHS Devon outlined the rationale behind the proposals for a new Health and Wellbeing Centre in Teignmouth, stating that a core driver was to secure the integration of multiple services into a purpose-built centre, and that moving only some services into this centre would not represent a financially sustainable model. Also key was to protect the future healthcare provision in the area. They also contended that consultations undertaken on the issue demonstrated a majority of local residents (61%) were in favour of the proposals. They also stated that the proposals had the approval of the South West Clinical Senate which, upon reviewing said proposals, concluded that they were in the best interests of the area. The Independent Reconfiguration Panel also reached similar conclusions in response to the issue's previous referral to the Secretary of State for Health and Social Care.

The Committee also heard from staff from the Channel View Medical Group which served to benefit from the building of the proposed Health and Wellbeing Centre by moving into that premises upon completion. The representatives from the Medical Group outlined the poor quality of their current accommodation, with the Group spread across multiple old buildings which were inadequate for their intended purposes. The representatives brought attention to narrow corridors and limited disabled access, and the implications of the poor accommodation on the Group's ability to adequately staff its service – both in terms of being an attractive prospect for recruitment,

and also having the physical space available to accommodate more staff (with many staff having to work virtually, to the detriment of the service provided to patients). There was also concern around the current lease of the Group's buildings – namely, that it was to expire in approximately fourteen months, and that any referral to the Secretary of State would create uncertainty around the future of where the Group was based. It was argued that not referring would allow clarity as progress could be made on the construction of the Health and Wellbeing Centre, which would provide a basis to negotiate (if necessary) an extension of the current lease.

The representatives from the NHS felt that any further referral to the Secretary of State could pose the risk that the proposals to modernise healthcare services in Teignmouth would become financially unviable.

Member discussion points included:

- Concern on the potential impact of another referral to the Secretary of State for Health and Social Care on the future of healthcare services in the area, with many councillors not wishing to detriment the provision of these services by a potential decision to refer. Members expressed appreciation of the testimony of frontline staff as to what represented the best option for healthcare in Teignmouth;
- Whether the need to modernise healthcare services in the area was dependent on the transfer of some services currently undertaken in Teignmouth Community Hospital to the proposed Health and Wellbeing Centre, or if there was a possibility of constructing the Health and Wellbeing Centre for some services to coexist within the Hospital. Representatives from NHS Devon reiterated that this would not represent a financially sustainable model; and
- Whether there was adequate evidence to justify another referral to the Secretary of State for Health and Social Care, taking into consideration the Independent Reconfiguration Panel's previous support of the proposals.

It was **MOVED** by Councillor Cox and **SECONDED** by Councillor Wrigley that the Committee continue with the process of referring the closure of Teignmouth Community Hospital to the Secretary of State for Health and Social Care.

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

* 152 Seaton Community Hospital

(Councillor M Hartnell attended in accordance with Standing Order 25 (2) and spoke to this item with the consent of the Committee).

Councillor Ian Hall declared a personal interest by virtue of being the Co-Chair of the One Eastern Devon Partnership Forum; a member of the Eastern Locality Mental Health Partnership; and the Devon County Council representative of the Council of Governors of the Royal Devon University Healthcare NHS Foundation Trust.

The Committee considered the Report of NHS Devon and NHS Property Services (NHSPS) on the proposals on the surrender of the vacant ward at Seaton Community Hospital. The Report was provided in response to recommendations made by the Committee at its previous meeting (Minute *135 refers).

The Report outlined the rationale behind the work in relation to Seaton Community Hospital – namely, that the ward in question had been vacant since 2017 and represented an unnecessary yearly cost of approximately £280,000 being paid by the NHS in property costs. NHS Devon and NHSPS were seeking to address this cost in the wider context of the financial challenges facing the NHS at large.

Councillor Marcus Hartnell, local member representing Seaton & Colyton, addressed the committee regarding the Hospital. He expressed that the report outlines the process undertaken by the NHS to meet with local partners to discuss the vacant space, but that there was a lack of detail provided by NHS Devon and NHSPS on the rationale for why said partners rejected the opportunity to utilise this space, and that further exploration of alternatives to demolition was needed. Councillor Hartnell requested that the Committee asked for a further update at its next meeting.

Member discussion points with officers included:

- The need to ensure best value for the NHS, with the costs associated with the ongoing maintenance of a ward that had been vacant since 2017 clearly not representing best value;
- The impact of the COVID-19 pandemic delaying such work regarding vacant properties, as the pandemic significantly shaped the NHS' priorities;
- That the parameters regarding NHS Devon paying for the vacant ward space at Seaton Community Hospital, and also for other properties, are set nationally, limiting what could be done on a local level to avoid the financial implications. In response to a member comment that said regulations could be seen as illogical by the public, Officers accepted that greater transparency would help explain the situation, even if it did not alleviate concerns; and
- The need for a proactive approach regarding property issues such as this as regards other vacant properties, as mentioned at the previous

meeting of the Committee. Members were advised that their previous comments were noted by officers and that there was work ongoing to bring further information to the Committee regarding other vacant Devon properties, and that officers would be forthcoming with it when a substantial update was available.

The Chair thanked officers for their speed of engagement with the Committee.

* 153 End-of-Life Care

The Committee considered the Report of One Devon which provided an overview of end-of-life care provision and the duties of local commissioners.

The Report outlined the reforms to end-of-life care introduced as part of the Health and Care Act 2022 and the implications for integrated care boards (ICBs). The Report also outlined relevant national guidance; provided statistical information regarding Palliative End-of-Life Care in Devon; as well as information around the approach to end-of-life care in Devon, including what services were commissioned, the importance of integration across multiple organisations, and an all-ages approach. The Report provided recommendations to the committee on key areas which it could potentially influence.

Members heard from officers that a large focus of the ICB had been urgent care, ensuring that the provision was resilient in the face of winter pressures.

Key discussion points between members and officers included:

- The importance of a proactive approach to bereavement support;
- That ensuring terminally ill patients are as comfortable as possible at the end-of-life, recognising that bereavement is difficult for those involved in any circumstance, but that, for instance, a patient passing away in a hospital environment can be more alien and stressful than doing so in their own home, provided adequate support and equipment is available to assist their family and professionals in caring for them;
- The mechanism for hospice funding and the level to which hospices are funded in Devon. Officers highlighted that hospice funding would depend at least partially on what services were being provided by an individual hospice, and so looking at the amount of money an individual hospice was in receipt of would not necessarily paint a full picture, but that it was nonetheless important to ensure hospices are funded adequately for the services they provide; and
- What data was collected regarding a patient's family's experience of the care provided to ensure best service, with an acknowledgement that such data must be collected sensitively.

* 154 <u>Carers Scrutiny Spotlight Review Update</u>

The Committee considered the Report of the Director of Integrated Adult Social Care (IASC/24/02) which provided an update on progress against recommendations made by the Committee in March 2023 (Minute *101 refers) which were subsequently approved (with amendments) by Devon County Council Cabinet. These recommendations were a follow up to a March 2020 Spotlight Review undertaken by members of the Committee.

Key discussion points included:

- That the contract with Devon Carers was entering its last year, necessitating consideration of the future of commissioning for carers support services;
- That Members of the Children's Scrutiny Committee met with Devon Young Carers in 2023 as part of their visits to staff and service users and were due to meet with them again in April 2024. A report to the next Children's Scrutiny Committee will report back on progress made against the recommendations and feedback from their visits in 2023, which the Committee could be updated on; and
- How feedback from carers shaped the priorities of Integrated Adult Social Care. Some of the key issues raised by carers were: the lack of adequate replacement or respite care; the impact of loneliness; and the implications on employment of being a working-age carer.

* 155 Torbay and Devon Safeguarding Adult Partnership Annual Report

The Committee considered the annual report of the Torbay and Devon Safeguarding Adults Partnership (2022/23) which provided information on the Partnership's performance over the previous year, and outlined its plans looking ahead – namely, to continue to deliver the aims of TDSAP's 2021-2024 strategic plan.

Members and officers expressed that a masterclass in 6 months' time would be prudent for the Committee to measure the degree to which the ambitions reflected in the annual report and strategic plan are implemented.

* 156 <u>Health and Adult Care General Update</u>

The Committee considered the joint report from the Director of Integrated Adult Social Care at DCC, the Director of Public Health, Communities & Prosperity at DCC, and the Chief Medical Officer of NHS Devon (IASC/24/03), which contained updates on key and standing items and provided general information on specific actions, requests or discussions during the previous meeting of the Committee.

Member discussion with officers included:

- The potential implications of changes to international worker visas;
- The proposed new 10 bed unit at Langdon Hospital in Dawlish, and potential workforce challenges, with officers explaining that mental health services would be recruiting from largely a different staffing pool than other local services such as Minor Injury Units, or from that of care homes given the different specialist staffing skillsets required;
- The success of a Care Coordination Hub trial (launched on 20th December 2023) aiming to provide urgent emergency care to patients who do not need to visit a hospital, with feedback being positive; and
- Local Care Partnerships, with an update on progress at a future meeting of the Committee being seen as useful.

* 157 Election of Domestic Sexual Violence and Abuse (DSVA) Champion

RESOLVED that Councillor L Hellyer be elected as Domestic Abuse and Sexual Violence Member Champion for the ensuing year.

* 158 <u>Scrutiny Committee Work Programme</u>

The Committee agreed the current Work Programme subject to inclusion of topics which arose from the meeting, namely:

- Further information from NHS Devon / NHS Property Services on Seaton Community Hospital, and on other vacant NHS Devon properties;
- Carers, including end-of-life care;
- A masterclass on the performance of Torbay and Devon Safeguarding Adult Partnership;
- An update on Local Care Partnerships.

* 159 <u>Information Previously Circulated</u>

The Committee noted information previously circulated for Members, since the last meeting, relating to topical developments which have been or were currently being considered by this Scrutiny Committee:

 NHS 111 Masterclass, Health & Adult Care Scrutiny – Recording and Presentation (1 November 2023)

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- Annual Public Health Report 2022/23 Masterclass Recording and Presentation (27 November 2023)
- Healthwatch England: The public's perspective on the state of health & social care (<u>Full report available here</u>) (30 November 2023)
- Emergency Departments in Devon: Feedback Report (Healthwatch in Devon, Plymouth, and Torbay) (<u>Full report available here</u>) (5 December 2024)
- Torbay and Devon Safeguarding Adult Partnership Annual Report and Masterclass – Recording and Presentation (6 December 2023)
- Funding boost to improve care for individuals with a learning disability and autistic people in the South West (12 December 2023)
- Centre for Governance & Scrutiny (CfGS) Seminar on New Health Scrutiny Arrangements(16 January 2024)
- Quality Accounts Session with Healthcare Providers Health and Adult Care Scrutiny Standing Overview Group (to be held February 2024)

*DENOTES DELEGATED MATTER WITH POWER TO ACT

The Meeting started at 2.15 pm and finished at 5.25 pm