#### **HEALTH AND ADULT CARE SCRUTINY COMMITTEE**

21 June 2022

#### Present:-

Councillors S Randall-Johnson (Chair), C Whitton (Vice-Chair), T Adams, J Bailey, D Cox, P Crabb, L Hellyer (remotely), P Maskell, R Peart, D Sellis, R Scott, M Wrigley, and J Yabsley

Member attending in accordance with Standing Order 25

Councillor J McInnes

# Apologies:-

Councillors R Chesterton and S Parker-Khan

#### \* 49 <u>Minutes</u>

**RESOLVED** that the Minutes of the meeting held on 17 March 2022 be signed as a correct record.

#### \* 50 Items Requiring Urgent Attention

No item was raised as a matter of urgency.

#### \* 51 Public Participation

In accordance with the Council's Public Participation Rules, the Committee received and acknowledged representations from Councillor Chris Clarance, Councillor Sylvia Russell, John Smith Geralyn Arthurs and Dr. David Halpin on a matter to be considered by the Committee namely 'Update on Modernising Health and Care Services in the Teignmouth and Dawlish Area' (Minute 52\* refers). They highlighted their concerns relating to the proposals (for a range of reasons) and need to retain services and in-patient beds at the Teignmouth Community Hospital and requested that a further referral be made to the Secretary of State for Health and Social Care in the best interest of health services in the area.

# \* 52 <u>Update on Modernising Health and Care Services in the Teignmouth and</u> Dawlish area

(Councillor M Wrigley declared a personal interest by virtue of his membership of the Teignbridge District Council's Executive)

The Committee considered a report from the Devon Clinical Commissioning Group (CCG) on an Update on Modernising Health and Care Services in the Teignmouth and Dawlish area. The CCG Report summarised the response from the Secretary of State for Health and Social Care to the referral from the Scrutiny Committee; reported on the progress on the Health and Wellbeing Centre project in Teignmouth; and outlined the CCG's response to the recommendations made by the IRP following the referral made by this Committee in March 2021.

The Independent Reconfiguration Panel, advising the Secretary of State had considered the referral on its merits and concluded that NHS Devon Clinical Commissioning Group had consulted adequately with Devon County Council's Health and Adult Care Scrutiny Committee on its proposal. The Panel had provided its view on the impact of the proposal on equality issues and also considered the effects of the COVID-19 pandemic. A series of recommendations, accepted by the Secretary of State, had been set out for consideration by this Committee and the Clinical Commissioning Group.

The Clinical Commissioning Group's Report detailed its response to the Panel's recommendations as detailed in the Panel's response.

Members' observations, comments and discussion with the Director of Commissioning Primary, Community and Mental Health Care; the Chief Medical Officer, NHS Devon; the Deputy Programme Director – Devon Long Term Plan, NHS Devon; and the System Director, Torbay and South Devon NHS Foundation Trust included:

- explanation by the officers of the background to date and the response by the Independent Reconfiguration Panel (IRP) in relation to the initial referral, and in particular the IRP acknowledging the Clinical Commissioning Group's CCG) evidence on reducing hospital admissions and that the integrated care model was able to care for around four times as many patients at home when compared to caring for patients on a ward at Teignmouth Community Hospital;
- the national and local 'direction of travel' with integrated care systems developing home care where appropriate to provide safe and optimum outcomes for patients;
- the community benefits of providing health, GP and care services under one roof with multi-disciplinary teams at the proposed Brunswick Road site and the commitment of the CCG (through a stakeholder group) to work with this Committee, other partners/stake holders and the community in the development of services and the future use of the hospital site;
- confirmation that the IRP recommendations had been made within the
  context of the pandemic, that the sale of the land for the Hub had been
  approved by the District Council, that planning permission was pending
  and that the anticipated building works were due to start in 2023; and that
  the development would also promote the economic and social benefits for
  the area (a new aim within 'New Devon' ICS objectives);

- confirmation that the development of the Hub was not dependent on the sale of the hospital site and funds were in place for the health hub;
- the local engagement proposals (through a local stakeholder group) in regard to the hospital site which could include a Committee member and noting proposals for designation of the hospital building as an 'asset of community value';
- confirmation that of the two GP practices in the Town only the larger one would be moving to the Hub and this did not negate its rationale;
- skilled work force sufficiency for care closer to home, the increasing acuity
  of home care patients and use of technology such as the development of
  the 'virtual ward' and improving patient record access;
- question on local highway signage which had been removed by Devon Highways which would be investigated by the CCG; and
- acknowledgment of the ongoing difficulties with local ambulance waiting times, delays in discharge from acute settings and access to accident and emergency and the objective of the new model of care (spearheaded in Devon) to help mitigate these issues.

It was **MOVED** by Councillor D Cox, and **SECONDED** by Councillor M Wrigley that this Committee refer to Rt Hon Sajid Javid MP, Secretary of State for Health and Social Care, that closure of Teignmouth Hospital is not in the interest of Health Service in the area in light of the: (a) covid emergency, (b) ambulance service response times; and (c) Integrated Care Organisation.

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

It was then **MOVED** by Councillor S Randall Johnson, and **SECONDED** by Councillor J Yabsley and

**RESOLVED** that the progress and outcomes (as detailed in the Clinical Commissioning Group report) be noted and that the CCG (to become NHS Devon from 1 July 2022) and this Committee welcome the advice of the IRP in Recommendation 6 and continue to build on the recent progress in working more closely together.

(N.B. In accordance with Standing Order 32(4) Councillors J Bailey, D Cox and M Wrigley requested that their vote in favour of the first motion and against the decision taken be recorded)

#### \* 53 South Western Ambulance Service Trust: Spotlight Review

The Committee considered the Spotlight Review Report on the Service and with reference to delays in transfers, response times, impact on patients and personnel, role of NHS 111; and work with key partners within the Devon Integrated Care System. The terms of reference for the review had been:

 To evaluate the current situation in Devon in terms of SWAST performance and impact on patient outcomes.

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- To consider the factors impacting on ambulance wait times.
- To review measures to alleviate delays in ambulance wait times.
- To report back to the Health and Adult Care Scrutiny Committee with recommendations from the findings of the spotlight review.

It was **MOVED** by Councillor S Randall Johnson and **SECONDED** by Councillor J Yabsley

- (a) that the Spotlight Review be commended (subject to the change in Recommendation 1 below) and that the Cabinet and the NHS in Devon endorse the report and recommendations with a response on progress back to Committee in January 2023;
- (b) that Recommendation 1 be amended to the following:

That the Committee calls for a system wide commitment to substantially improve average ambulance response times urgently.

Councillor J Bailey then **MOVED** an Amendment, **SECONDED** by Councillor M Wrigley that urgent consideration be given to Devon Community Hospital beds which have been closed as the closures are a contributing factor in the delays in admissions to acute settings.

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

The Motion (as detailed above MOVED by Councillor Randall Johnson, SECONDED by Councillor Yabsley) was then put to the vote and declared **CARRIED**.

#### \* 54 Development of the Integrated Care System for Devon - One Devon

The Committee considered a Report from the Deputy Chief Executive, NHS Devon Clinical Commissioning Group on the development of the Integrated Care System for Devon (which would be known as 'One Devon' from 1 July 2022). It set out the progress made to develop the Integrated Care System for Devon against Government requirements, building on a series of previous papers to this Committee as the ICS was developing. The Report also set out how One Devon was responding to financial and performance challenges.

Members' observations and discussion points with the Chief Executive (designate) ICS One Devon, and Deputy Chief Executive of the Integrated Care System for Devon (ICSD) (both attending remotely) included:

- the national and local context, governance arrangement, a One Devon fincial overview, performance and the NHS System Oversight Framework and its progress;
- reset of a 'fair share' distribution of national funding over the next three years from 2022/23 and for Devon this showed that the Integrated Care

Board was currently 7% above its fair share target and therefore there would be greater than average impact from convergence, further squeezing the allocation for the next three period;

- the welcome appointment of Councillor J McInnes as the co-Chair of the One Devon Partnership ICS Board;
- the challenges in adequate pharmacy cover particularly in North Devon commissioned by NHS England and which the Deputy Chief Executive undertook to discuss further with local members outside of this meeting;
- updated patient record keeping with the amalgamations of the Northern Health Trust with the Exeter RD&E Trust;
- the relative balance of clinical and non-clinical support staff and the overall work force planning across the ICS; and
- the benefits of more collaboration and opportunity to learn for example within Community Diagnostics and Day Case Surgery;

The Chair thanked the NHS officers for their attendance and Report and indicated the Committee's support for the continued development of the Integrated Care System in Devon.

# \* 55 Developments, Challenges and Opportunities in Mental Health in Devon

The Committee considered a Report from the Chief Executive, Devon Partnership Trust/ System Chief Executive for Mental Health, Learning Disabilities and Neurodiversity on Developments, on an update on key developments, challenges and opportunities faced in addressing the mental health needs of Devon's population. It aimed to:

- Help Members understand the mental health services provided by the NHS in the footprint;
- Raise awareness of the challenges in the system, along with developments and opportunities;
- Encourage support and commitment for mental health services in the county To support this, it includes information relating to: The needs of the local population; and
- Current service provision and challenges Key developments and opportunities in mental health in the health and care system.

Member comments and discussion points with the Chief Executive, Devon Partnership Trust; and the Interim Joint Medical Director for Devon Partnership (both attending remotely) included:

- the range and scope of mental health Services in the County;
- the continued need for parity of esteem and investment which had progressed but more was required (12% of NHS resources with a requirement of 23% for mental health care; and £360m for mental health

care in Devon, compared to £1.3bn for acute health care physical services):

- work to improve the transition of children's services (including CAHMS) into adult mental care services with the County Council, particularly in relation to young care leavers for example;
- the lack of 'place of safety' provision and agreement for central specialised provision in Exeter (Wonford site) following discussion with senior police officers:
- work with the local authority in relation to intermediate mental health care and the development of a Devon wellbeing hub for staff; and
- Members interest in undertaking a DPT site visit(s).

It was **MOVED** by Councillor S Randall Johnson and **SECONDED** by Councillor C Whitton and

#### **RESOLVED**

- (a) that the current challenges and opportunities in mental health support and services for the local population be noted;
- (b) that Members work with partners and stay informed in future developments to address the needs of the local population within the context that we are all working in;
- (c) that Members take the opportunity to meet and spend time with local place-based multi-agency developments and teams in community mental health through a programme of visits; and
- (d) that the work to encourage parity of esteem principle in health and care developments be supported.

#### \* 56 Adult Social Care Reforms

The Committee considered the Report of the Interim Director of Integrated Adult Social Care (ACH/22/150) on Government proposals for the reform of adult social care and recent consultation which had closed, and the Government's response was pending as was the publication of the final guidance and regulations. In May 2022 Members through a masterclass had been given further details of the proposed new rules had the key risks and concerns across the three pillars of the reforms: Charging, Fair Cost of Care, and Regulation.

A new public website had been developed to raise awareness of the reforms.

Of the three pillars of reform, Officers' local assessment was that the County Council was well placed to respond to the developing approach and guidance from Government, although this represented a significant piece of work.

It was the Charging element of the reforms that was of most concern as it would require significant change to the Council's workforce and processes.

The biggest cost areas were the numbers of people the Council served, the cost of care, and workforce. All three of these were expected to increase significantly as a result of the proposed reforms.

The Chair and Vice Chair would discuss with Officers proposals (to be shared with members) for a mechanism to provide Scrutiny challenge, assurance for the approach to the local implementation of the reforms.

# \* 57 <u>Health and Care General Update</u>

(Councillor J McInnes attended in accordance with Standing Order 25 and spoke to this item with the consent of the Committee and referred to communications through a Newsletter in regard to link services in Northern Devon for stakeholders including service users and members; and his appointment as the interim co-Chair of the New Devon ICS)

The Committee considered the Joint Report from Devon County Council and NHS Devon Clinical Commissioning Group (ACH/22/149) on updates on the latest news from the Devon Health and Care system and developments since the last meeting.

Member comments and discussion points with the Head of Integrated Adult Social Care Operations (Interim); and the Head of Integrated Adult Social Care Commissioning (Interim) included:

- in regard to the Link Service, the opening of services in Barnstaple, Bideford and Ilfracombe, with positive feedback;
- a group had been set up for each town to develop the drop-in service and establish how the buildings could be used by the wider community; and the positive feedback from a local Member in Barnstaple; and
- delivery of the Holsworthy Youth and Community Hub which would be a mental health and wellbeing drop-in service.

Updates and general information including responding to specific actions, requests or discussions at the Scrutiny Committee meetings would be provided for each meeting.

# \* 58 <u>Election of Commissioning Member</u>

The Scrutiny Officer would canvass Members outside the Committee In regard to the appointment of a Commissioning Liaison Member, whose role would be to work closely with the relevant Cabinet Members and Directors /Heads of Service, developing a fuller understanding of commissioning processes, and provide a link between Cabinet and Scrutiny on commissioning and commissioned services.

# \* 59 Scrutiny Committee Work Programme

The Committee noted the current Work Programme subject to inclusion of topics arising from this meeting.

[**NB**: The Scrutiny Work Programme was available on the Council's website at: Scrutiny Work Programme - Democracy in Devon]

# \* 60 Information Previously Circulated

The Committee noted the list of 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.

- (a) Invite to 19 May 2022 Priority for Carers Event at Westbank, Exminster.
- (b) Healthwatch report into Patient Experience of Pharmacy Service in the period 1 April 2021 to 31 March 2022.
- (c) Latest NHS Devon CCG briefing concerning the ongoing vaccination programme (April 2022).
- (d) Notification of the Northern Devon Healthcare NHS Trust (NDHT) and the Royal Devon and Exeter NHS Foundation Trust (RD&E) merger on 1 April 2022.
- (e) General Practice Strategy Survey: 5 year strategy update.

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

The Meeting started at 10.30 am and finished at 1.40 pm