Wellbeing Overview and Scrutiny Committee

Wednesday 9 August 2017

Present:

Councillor Mrs Aspinall, in the Chair. Councillor James, Vice Chair. Councillors Mrs Bridgeman, Dann, Dr Mahony, Sparling, Tuffin and Tuohy.

Apologies for absence: Councillors Cook, Deacon and Loveridge.

Also in attendance: Craig McArdle (Director for Integrated Commissioning – NEW Devon CCG and Plymouth City Council), Kevin Baber (Plymouth Hospitals NHS Trust), Jan Fowler (Nursing Director & Director of Commissioning Health and Justice - NHS England - South) and Hong Tan (National Lead for SARCs and Partnership Working - NHS England), Ross Jago (Lead officer) and Helen Rickman (Democratic Advisor).

The meeting started at 3.00 pm and finished at 5.10 pm.

Note: At a future meeting, the Panel will consider the accuracy of these draft minutes, so they may be subject to change. Please check the minutes of that meeting to confirm whether these minutes have been amended.

19. To Note the Appointment of the Chair and Vice Chair

Councillor Mrs Aspinall was appointed as Chair and Councillor James was appointed as Vice Chair for the forthcoming municipal year 2017/18.

20. Declarations of Interest

There were no declarations of interest in accordance with the code of conduct.

21. Chairs Urgent Business

There were no items of Chair's Urgent Business.

22. Minutes

The Committee agreed the minutes of the meeting held on 26 April 2017.

23. Acute Services Review

Kevin Baber (Plymouth Hospitals NHS Trust) provided Members with a presentation on the recommendations from the first phase of the Delivery of Acute Hospital Services Review. The presentation was published with the agenda pack. The key areas of questioning related to:

- (a) concerns regarding staff shortages, staff skills, recruitment and staff retention within the NHS, specifically the four hospitals linked to the review, and how this would be managed effectively;
- (b) the impact upon adult social care resources and future budgets linked to stroke rehabilitation and the clinical discharge of patients from hospital to care provided at home or within the community;
- (c) the importance of GP retention in Plymouth and efforts made to encourage increased trainee numbers;
- (d) the feasibility of recruiting from a hospital consortium to help alleviate workforce issues and aid in career progression.

<u>Agreed</u> that the Committee notes the initial recommendations from the Acute Services Review and agrees that further information on the consultation and final proposals should be provided to the Committee when appropriate.

24. Accountable Care Delivery System

Craig McArdle (Director for Integrated Commissioning – NEW Devon CCG and Plymouth City Council) provided Members with an update on the Accountable Care Delivery System. The presentation was published with the agenda paperwork.

Key areas of questioning related to -

- (a) the delivery model of Accountable Care Organisations and how smaller organisations would contribute and be managed within this model;
- (b) the importance of accountability, collaboration, responsibility and governance linked to the Accountable Care Delivery System; what was the democratic process linked to the new system and what financial arrangements were in place?
- (c) the current crisis with primary care and General Practices in Plymouth as well as workforce retention within the NHS and how the Accountable Care Delivery System would have an impact upon these issues.

<u>Agreed –</u>

- I. to note the update on the Accountable Care Delivery System;
- 2. that the business case would be provided to the Wellbeing Overview and Scrutiny Committee to scrutinise once properly developed.

Under this item the Chair advised Members that herself and Councillor James, as Chair and Vice Chair of the Wellbeing Overview and Scrutiny Committee, had received an invitation from the Health and Wellbeing Board to form part of the membership for a sub group to fully understand the impact of the Accountable Care Delivery System. Progress updates would be reported back to Members throughout the course of the sub group.

25. Re-procurement of Sexual Assault Referral Centre (SARC)

Jan Fowler (Nursing Director & Director of Commissioning Health and Justice -NHS England - South) and Hong Tan (National Lead for SARCs and Partnership Working - NHS England) provided Members with an update on the Re-procurement of the Sexual Assault Referral Centre (SARC). The presentation was published with the agenda paperwork.

Key areas of questioning related to -

- (a) proposals for the Paediatric SARC to be based in Exeter; there were concerns that this location was not accessible and should instead be based in Plymouth as it was the largest city southwest of Bristol;
- (b) proposals for Plymouth to have an Acute Response SARC only; there were concerns that Plymouth was in need of a fully operational SARC as the figures suggested that rape and sexual assault incidents recorded were increasing;
- (c) clarification if other agencies had been involved with the commissioning of the service, if a needs assessment had been undertaken and if the proposals indicated had been tried and tested in other areas with a similar demographic to the South West/ Plymouth;
- (d) how was the consultation process surrounding these proposals undertaken?
- (e) as a result of speaking to victims of sexual assault it was highlighted to Members that the was preference was to only have to recount their experiences once – Members questioned how this would be achieved with so many organisations involved;
- (f) concerns that if the current proposals were implemented there would be a reduction in service provided in Plymouth;
- (g) Members raised concerns that despite the numbers of sexual assault and rape increasing, attendance at the SARC were low in comparison.

The committee has agreed -

- 1. that it is minded to view these proposals as a substantial variation of service provision. This is based on -
 - the proposed service delivery model not having been tried and tested across a similar geography;
 - reduction in local accessibility, particularly as the proposals indicate adverse travel implications for the public;

- the proposal has a seemingly counter intuitive case for change (reduction in local accessibility for potential service users);
- 2. that the Committee, under powers conferred by the NHS Act 2006 (as amended) recommends to NHS England that the consultation methodology and results, final service model, and service specification are subject to a Joint Health Scrutiny Committee by Local Authorities in the area to enable this the service specification is not put out for tender in September;
- 3. to direct the lead officer to work with colleagues across the peninsula to convene a Joint Health Scrutiny Committee to consider the detailed plans for the variation of service provision.

(Members voted unanimously in favour of the recommendation to further scrutinise proposals to change SARC provision.)

26. Integrated Commissioning Score Card

Members noted the Integrated Commissioning Score Card.

27. Integrated Finance Monitoring Report

Members noted the Integrated Finance Monitoring Report.

28. Tracking Resolutions

Ross Jago (Lead officer) advised Members that requests for information contained within the tracking resolutions document had been submitted to relevant officers however there was still several recommendations that had not been completed as information had not been provided. Information received had been emailed to Members for their information.

<u>Agreed</u> that a sub committee is established, with membership to include the Chair and Vice Chair and four other Members of the Wellbeing Overview and Scrutiny Committee, to scrutinise children services.

29. Work Programme

Ross Jago (Lead officer) advised Members that the format of the work programme had been revised in order to help prioritise items still to be considered.

Members discussed the work programme -

- adult mental health needed to be added to the work programme to be scrutinised
- the primary care select review was a priority however due to procurement exercises affected three surgeries it was necessary to wait until after 21 August 2017 until this review could be considered – the planning document

also needed to be completed;

- Torbay children services was listed on the work programme and would be arranged shortly;
- select review request forms for End of Life Care and Dementia Friendly City had been submitted and it was hoped that these reviews would be scheduled before December 2017.