

## **Health and Adult Social Care Overview and Scrutiny Committee**

**Wednesday 9 March 2022**

### **PRESENT:**

Councillor Mrs Aspinall, in the Chair.

Councillor Dr Mahony, Vice Chair.

Councillors Mrs Aspinall, Corvid, Harrison, McDonald, Murphy, Salmon and Tuffin.

Also in attendance: Councillor Patrick Nicholson (Cabinet Member), Craig McArdle (Strategic Director for People), Ruth Harrell (Director of Public Health), Anna Coles (Service Director for Integrated Commissioning), Robert Sowden (Senior Performance Advisor), Rob Dyer (Torbay and South Devon NHS Trust), David McAuley (Livewell Southwest), Simon Tapley (NHS Devon CCG) & Jamie Sheldon (Senior Governance Advisor).

The meeting started at 10.00 am and finished at 12.37 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.*

### **33. Declarations of Interest**

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

### **34. Minutes**

Agreed the minutes of the meeting held on 24 November 2021.

### **35. Chair's Urgent Business**

There were no items of Chair's urgent business.

### **36. Health and Adult Social Care Policy Brief**

Sarah Gooding (Policy and Intelligence Officer) was present for this item and referred to the report within the agenda pack.

Questions from Members related to:

Whether Plymouth City Council would be responding to the 10 year Cancer Plan. Members of the Committee would be given a response following the conclusion of the meeting.

Members noted the update.

37. **Covid Update and Flu Vaccination Update** (Verbal Report)

Dr Ruth Harrell, Director of Public Health gave a presentation referred to in the supplement pack to the Committee prior to members discussing:

Testing and offering free PCR tests to people experiencing symptoms had been expensive during the pandemic response, this however had to be balanced with the cost in how resource intensive people may have been suffering with the virus;

Staffing costs at testing sites would be scaled back or would cease following the changes in policy;

People had been self-reporting symptoms of long COVID and previous statistics determine 2.4% of the entire population had reported COVID symptoms for more than four weeks. Work had continued to understand the causes of long COVID and how this would be reported and treated in the future;

The Vaccination programme continued and Plymouth City Council had encouraged residents to come forward. The younger age groups had been the lowest demographic to receive the vaccine, this has partly been due to school vaccination programmes just being opened up. People who had contracted COVID had to wait for a period of time before they were able to receive the vaccine. The programme had intended to continue with using outreach to reach those that had been unable to get to Derriford or Home Park. Sage had put forward three scenario's with the most optimistic treating the virus as a seasonal vaccination for more vulnerable groups;

The Clinical Commissioning Group continued to lead the vaccination programme and would continue to use Home Park and Outreach vaccination centres to deliver this. The programme could go to peoples homes where necessary to deliver the vaccine;

38. **HEALTH AND ADULT SOCIAL CARE SYSTEM PERFORMANCE**

Rob Sowden (Senior Performance Advisor) presented this item to the Committee and highlighted the following key points:

21 care settings had outbreaks of which the overall number had reduced. 15 of the current outbreaks had been in older person care homes, 5 in homes supporting under 65's and one outbreak involved in a supported living provider;

Long term admission to care homes remained relatively static between 1 April 2021 and 31 January 2022 and with lower admissions in September would see the trajectory on course for lower number compared to 2020/21;

The number of younger people going in care remained low in Plymouth;

Daily numbers showed the number of people in receipt of domiciliary care since the start of the year had been increasing which had a positive effect on the number of people waiting for care;

On 23 February the waiting list had been 115 which showed a decrease from November 2021 which had been recorded at 177. The current waiting list had further reduced in March 2022 to 98;

Safeguarding continued to deliver good outcomes for those people subject to safeguarding enquiries with 337 people or 98% meeting safeguarding personal outcomes fully or partially achieved;

The number of people with a stay in Derriford Hospital of over 14 or 21 days had been an increasing trend since early 2021. From February 2022 this trend reversed slightly with the number of delays having been reduced;

Members discussed:

PPE made available to Care homes would remain free for the next 12 months which had been supported by national government;

24 patients had spent 6 weeks in an intermediate care space before moving on or returning home. 24 people had been waiting for domiciliary provision;

Care workers in the country had a requirement to be fully vaccinated, this legislation would cease after 15 March 2022;

The committee noted the report.

39. **Long-Term Plan**

Simon Tapley (Deputy accountable officer), Liz Davenport (Chief Executive) and Rob Dyer (Medical Director) presented the Long-Term Plan.

Members agreed:-

1. That the Overview and Scrutiny Committee receives this report;
2. That Members support the use of masterclasses as the opportunity to influence the development of the Long-Term Plan for Devon, Plymouth and Torbay.
3. That Members support the development of a Joint Committee with Devon and Torbay so that LTP work that crosses Local Authority boundaries can be considered and scrutinised collectively each of the Scrutiny Committees in the county.
4. That Plymouth City Council's Children's Social Care and Education Overview and Scrutiny Committee consider workforce development for the Health care sector.
5. For all Councillors to have access to information in relation to masterclasses

40. **Local Care Partnership Update (To Follow)**

(Councillor Patrick Nicholson (Deputy leader), Craig McArdle (Strategic Director for People) and Anna Coles (Service Director for Integrated Commissioning) presented the report to the Committee and Members discussed:

Work had been underway to develop links and to prioritise veterans and their access to mental health services. It was noted that this could be brought forward in the planned mental health select committee;

A presentation delivered by Matt Garrett, Service Director for Community Connections would be circulated for the Committee in relation to what the partnership had been doing to rectify issues of homelessness and the use of Bed and Breakfasts. The presentation had been delivered to the last Health and Wellbeing Board;

Committee agreed:-

1. For the Scrutiny Committee to receive the report for information and consideration.
2. The committee are invited to note the content of the report, acknowledging progress and successes.
3. To acknowledge the considerable system wide challenges and pressures that exist within Plymouth, noting strategies to address these in the short, medium and longer term.
4. To acknowledge and note system wide, enabling work relating to Estates and Workforce that will address some of the wider challenges.

41. **Tracking Resolutions (To Follow)**

The committee noted the report

42. **Work Programme (To Follow)**

Members agreed to add the following to the work programme:

1. GP Service within Plymouth
2. For new members of the Committee to be given a briefing prior to the first meeting of the municipal year on the NHS and its functions as well as the functions of this scrutiny committee
3. South west Ambulance Service