

Minutes of the Meeting of the Health and Wellbeing Overview and Scrutiny Committee held on 7 March 2019 at 7.00 pm

Present: Councillors Victoria Holloway (Chair), John Allen (Vice-Chair), Cathy Kent and Joycelyn Redsell

Ian Evans, Thurrock Coalition
Kim James, Healthwatch Thurrock Representative

Apologies: Councillors Tom Kelly and Elizabeth Rigby

In attendance: Roger Harris, Corporate Director of Adults, Housing and Health
Ian Wake, Director of Public Health
Mandy Ansell, Accountable Officer, Clinical Commissioning Group
Jeanette Hucey, Director of Transformation, Clinical Commissioning Group
Mark Tebbs, Director of Commissioning, NHS Thurrock CCG
Jenny Shade, Senior Democratic Services Officer

Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website.

47. Minutes

The minutes of the Health and Wellbeing Overview and Scrutiny Committee held on the 24 January 2019 were approved as a correct record.

48. Urgent Items

No urgent items were raised.

49. Declarations of Interests

Ian Evans, Thurrock Coalition, declared a non-pecuniary interest in respect of agenda item 9, Adult Social Care Local Account 2018-2020, as Thurrock Coalition supported the workshops to look at the priorities for the Local Account going forward.

Councillor Redsell declared a non-pecuniary interest in respect of agenda item 6, Sexual Assault and Abuse Mental Health Pathway in Thurrock, as she was a member of the Police, Fire and Crime Panel.

50. Healthwatch

Kim James, Healthwatch, updated Members on the positive work undertaken by 43 community groups to establish the suitability of Dental Services provided in Thurrock. It had been identified there were 15 NHS dentists in Thurrock with each having vacancies. It had become apparent that residents were not registering at these dentists due to a number of reasons such as fear or finances. Healthwatch had identified gaps within the dental services provision in particular at Children's Centres, Residential Homes and those patients with Chronic Obstructive Pulmonary Disease (COPD) with recommendations being made for in-house training programmes to be undertaken.

Kim James stated that Healthwatch had been invited to present the report to the Essex Oral Health Committee.

The Chair thanked Kim James for the good report and the work undertaken by Healthwatch.

51. Sexual Assault and Abuse Mental Health Pathway in Thurrock

Mark Tebbs, Director of Commissioning NHS Thurrock Clinical Commissioning Group, presented the report that provided Members with an overview to the work to improve the sexual assault and abuse mental health pathway in Thurrock. That concerns had been raised at previous Health and Wellbeing committees and following several meetings and discussions with stakeholders it had been agreed to extend the grant to South Essex Rape and Incest Crisis Centre (SERICC) for a further six months to enable the completion of the Thurrock Joint Strategic Needs Assessment and for the development of an overarching Essex wide strategy. That strategy would be led by colleagues from the Police Fire and Crime Commissioner to fully review the evidence base, clarify commissioning responsibilities between agencies and to ensure that a robust understanding of local need. Mark Tebbs referred Members to the two appendices that looked at the evidence base and commissioning responsibilities.

Councillor Redsell referred to the number of acronyms in the report and requested a glossary sheet of these going forward. The Chair agreed that this would be useful alongside a breakdown and information of all structures.

Councillor Kent thanked Mark Tebbs for the report and questioned when the action plan would be presented back to Members. Mark Tebbs stated that a meeting with the Police Fire and Crime Commissioner Panel would take place next week to address the next steps on strategy and would feedback on the Joint Strategic Needs Assessments Action Plan in the next municipal year.

Kim James stated Healthwatch had been approached by Public Health colleagues to take part in the Joint Strategic Needs Assessment.

The Chair thanked all those stakeholders involved and said as worked developed on this and plans were made she hoped it would demonstrate an innovative way of working. Replicating many other excellent plans that had been presented to this committee so that this could also be used as an example of what Thurrock had done and could be used in other areas as a show case.

Councillor Redsell questioned whether SERICC counsellors were Cognitive Behavioural Therapy trained. Mark Tebbs clarified that SERICC employed qualified counsellors but that they were not necessarily trained in Cognitive Behavioural Therapy. As part of the pathway review we are seeking assurance that we had the right balance of services locally that provide both treatment and emotional/practical support.

RESOLVED

The Health and Wellbeing Overview and Scrutiny Committee noted the progress on the work to improve the Thurrock sexual assault and abuse pathway.

52. NHS Long Term Plan: An Overview and Critique for Thurrock

Ian Wake, Director of Public Health, presented the report that contained the NHS Long Term Plan commitments which were summarised around the following key themes and what these themes meant for Thurrock.

- Finances and Resources – Plan set out the increase to NHS budgets in England of £20.5 billion however the future funding for Adult Social Care was not included. That savings from administration costs of more than £700 million had been made with the CCG being told to reduce their running costs by 20% by 1 April 2020.
- Prevention and Health Inequalities – The plan recognised both individual and place based focus; one million contacts had been made between patients and clinicians every day; funding for more services strongly linked to equalities going forward; raised concern on the services for 0-19 young persons and the sexual health services.
- New Models of Integrated Care – The plan mirrored what had already been started in Thurrock who were now ahead of the game. The move to integrate primary and community health care around mixed skills workforce servicing populations of over 40 thousand which left further questions on the proposed Integrated Care Systems.
- Action to improve care quality and outcomes in different clinical specialities – Partnership arrangements for children and young people in Thurrock had to be strengthened; an ambition plan to increase the proportion of cancers diagnosed at stage 1 and 2 from the current 50% to 75% by 2028. The plan also had a huge range of ambitions to improve mental health treatments.
- Workforce – Plan recognised a shortage in workforce and had been one of the biggest challenges facing the health service. Workforce remained a major challenge in Thurrock and the plan had a lack of

detail on how this could be resolved. The new funding had been welcomed and the New Model Care was already mirroring Thurrock's journey.

Councillor Allen thanked Ian Wake for the report but raised his concern on waiting times for Thurrock MIND. Roger Harris agreed to pick this item up outside the committee with Councillor Allen.

Ian Evans, Thurrock Coalition, referred to the Health Inequalities and questioned which footprints would be agreed and when this would happen. Ian Wake stated at this stage it was not clear on which Health Inequalities footprints these would be compared against.

Councillor Kent thanked Ian Wake for the report and stated the focus should be on the Workforce and thanked the NHS workforce for the fantastic job that they did. Councillor Kent had concerns of the shortage of General Practitioners and had been disappointed that the report had not looked at the recruitment and retention of General Practitioners in Thurrock and how solutions had not been offered. Councillor Kent had welcomed the extra grant but stated there had to be a process to ensure the money was being spent in the right way and how would residents know how this money was being spent. Ian Wake agreed that the report made little reference to the lack of General Practitioners and that some commitment had been made to train doctors and medical replacements. That Thurrock plans would be to have a mixed clinical workforce with placed based practitioners undertaking many of the tasks that General Practitioners would normally carry out.

Mandy Ansell, Accountable Officer, Thurrock Clinical Commissioning Group, referred Members to the out of hours service at Hubs as an example that this was working where appointments to see a physiotherapist were fully booked but there had been available appointments for General Practitioners. That a new medical school had been built in Essex committed to those students to train and stay in Essex. The existing Thurrock Primary Care Networks were ahead of the curve and outcomes were being seen from this.

The Chair stated that the development of education and skills was vital and that it was essential that funding for colleges was available as this would be where future health specialists would come from.

Councillor Allen echoed Councillor Kent's comment on the lack of General Practitioners and that early intervention was vital.

Councillor Redsell referred to the development of digital services and reminded Officers that not all elderly residents would have access to IT and questioned how General Practitioners and pharmacists were joined up as many of the medical centres in Thurrock operated differently.

Ian Wake stated the digital agenda was strong with the plan that one third of appointments would be made digitally and that traditional channels of appointment booking would still be available. Ian Wake stated that it should

not be assumed that not all elderly residents did not have access to digital media.

The Chair asked how pharmacies fit into the Hub process. Mandy Ansell stated there were partnerships between General Practitioners and Pharmacies and these could be found in all parts of the health service.

The Chair thanked Ian Wake for the report and the break down on what the five themes meant for Thurrock.

The Chair referred members to recommendation 1.2 and stated that this recommendation had been added to highlight the complex piece of work and to ensure transparency of where the new NHS funding was being invested. The item would continually be reviewed and would be added to the work programme for 2019/20.

RESOLVED

- 1. That the Health and Wellbeing Overview and Scrutiny Committee consider and comment upon:**
 - **The report and the themes that it addresses.**
 - **How the NHS Long Term Plan may be implemented in the context of the needs of the population of Thurrock and our existing system transformation agenda.**
 - **The risks and opportunities associated with the wider proposed changes to the commissioning arrangements across Mid and South Essex STP.**
- 2. That the Health and Wellbeing Overview and Scrutiny Committee agreed to receive further information about how the new funding will be invested in Thurrock.**

53. Verbal STP Update

Roger Harris, Corporate Director of Adults, Housing and Health, updated Members that no further updates had been received with regard to the referral made to the Secretary of State in late January 2019. That contact was being made with the office to the Secretary of State on a weekly basis to try and identify the possible timescales of a reply. Roger Harris stated that once correspondence had been received from the Secretary of State this would be shared with Members.

Mandy Ansell, Accountable Officer, Clinical Commissioning Group, stated that the current Independent Chair appointed for the Sustainability Transformation Partnership, Anita Donley, would be stepping down following her three year term. With the Chairs Group currently seeking a replacement through advertisement and interview.

The Chair recommended that the Sustainability Transformation Partnership be added to the 2019/20 work programme.

54. Adult Social Care Local Account 2018-2020

Roger Harris, Corporate Director of Adults, Housing and Health presented the report that had been aimed at the local community and described how Adult Social Care had progressed against the 10 key priorities that had been set in the last Local Account. The key challenges and the process of co-production were used to identify the 10 priorities for the next two years. It had been decided that going forward the report would be produced bi-annually to enable more time for consultation. Roger Harris referred members to the budget on Adult Social Care Services in 2017/18 and in particular drew Members attention to key fact that 4929 calls and emails per month had been processed by Thurrock First in 2017/18.

Roger Harris publically thanked Thurrock Coalition for their involvement and contribution in undertaking the workshops and highlighted to Members the achievements and feedback of the priorities for 2017/18 that had been collated from those workshops.

Roger Harris stated that the Shared Lives initiative had not been as successful as hoped with only 5 placements with more work needed to be undertaken with the identification of appropriate care matchings being the biggest challenge.

Councillor Redsell questioned why the Shared Lives initiative had not worked well. Roger Harris stated that due to a number of reasons it had taken a long time to get off the ground with only 5 matches out of the target of 20. That a separate independent review had been commissioned and work would be undertaken further once the results were available at the end of April.

The Chair thanked Roger Harris for the very useful and helpful report.

RESOLVED

That the Health & Wellbeing Overview and Scrutiny Committee considered and noted the report.

55. Work Programme

The Chair asked Members if there were any items to be added to the work programme for the next municipal year.

Members agreed that the following reports should be added to the 2019/20 work programme:

- Developments on Primary Care
- NHS Long Term Plan
- Sexual Assault and Abuse Mental Health Pathway

- Sustainability Transformation Partnership

The Chair stated that those reports presented to Members in 2018/19 that requested further updates would also be added to the work programme.

Members agreed that a glossary of acronyms be provided.

The Chair thanked Members and Officers for their constructive contribution to the Health and Wellbeing Overview and Scrutiny Committee over this municipal year and stated how impressive the level and details of reports presented to Members had been.

The meeting finished at 7.58 pm

Approved as a true and correct record

CHAIR

DATE

**Any queries regarding these Minutes, please contact
Democratic Services at Direct.Democracy@thurrock.gov.uk**