

NORTHUMBERLAND COUNTY COUNCIL

HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE

At a meeting of the **Health and Wellbeing Overview and Scrutiny Committee** held in the Council Chamber, County Hall, Morpeth on Wednesday, 30 April 2019 at 1.00pm

PRESENT

Councillor Watson, J.
(Chair, in the Chair)

COUNCILLORS

Armstrong, E.
Cessford, T.
Hutchison, I

Nisbet, K. (part)
Moore, R.
Simpson, E.

COUNCILLORS ALSO PRESENT

Hill, G.

Jones, V.

OFFICERS

M. Bird
C. McEvoy-Carr

Senior Democratic Services Officer
Executive Director of Adult Social Care
and Children's Services

ALSO IN ATTENDANCE

S. Brown

Dr B. Groen
D. Nugent
H. Ray
C. Riley
S. Young

NHS Northumberland Clinical
Commissioning Group
Health Education England
Healthwatch Northumberland
Northumbria NHS Foundation Trust
Northumbria NHS Foundation Trust
NHS Northumberland Clinical
Commissioning Group

Four members of the public and one member of the press were also in attendance.

79. APOLOGIES FOR ABSENCE

Apologies were received from Councillors Dungworth, Foster and Rickerby.

80. MINUTES

RESOLVED that the minutes of the Health and Wellbeing OSC held on 26 March 2019, as circulated, be approved as a correct record and signed by the Chair, subject to being amended to reflect clarifications received from Councillor Hill:

- that the minute does not include what Councillor Hill had specifically said that had been told that the new hospital site was to be on the current Berwick Infirmary site
- rather than referring to cladding on Berwick Infirmary, Councillor Hill said she did not consider that the Trust has been open about the financial position and how much they had to spend on cladding their buildings in light of Grenfell.

81. FORWARD PLAN OF KEY DECISIONS

Members received the latest Forward Plan of key decisions (enclosed with the official minutes as Appendix A). No items listed were due for pre-scrutiny by this committee.

RESOLVED that the information be noted.

82. HEALTH AND WELLBEING BOARD

The minutes of the Health and Wellbeing Board meetings held in February and March 2019 were presented for the scrutiny of any issues considered/agreed there (minutes filed with the signed minutes as Appendix B).

REPORTS FOR CONSIDERATION BY SCRUTINY

83. BREXIT AND THE EU WORKFORCE

Following the presentation of this item to the Northumberland, Tyne and Wear and North Durham Sustainability and Transformation Plan Joint Health Scrutiny Committee meeting in Gateshead on 21 January 2019, the Chair had asked for the presentation and further additional information to be provided for this committee.

The presentation was provided by Dr Bernard Groen of Health Education England North East and North Cumbria. Key details included a range of detailed statistics regarding:

- the profile of and impact of staff retirements on NHS services, for primary care generally and specifically for GPs
- the nursing profile in secondary care
- secondary care and Brexit: trending in the area of EU and non-EU recruitments and retention in the run-up to Brexit and projections for post-Brexit, plus the status of nursing in terms of staffing levels and the anticipated impact of the Brexit process.

(Copy of presentation attached to the filed official minutes of the meeting.)

Key details of questions from members and responses from Dr Groen were as follows:

- regarding what was considered the optimum number of GPs for Northumberland's population, members were advised that the county had a slighter higher number average of GPs per head, but this also reflected that health rates were not as high as some other areas. A report from the CCG in relation to primary care in Northumberland could be provided
- recruitment could be problematic but there had been a recent increase
- there was an increasing risk from staff potentially retiring, particularly in around five years' time. More flexible retirement arrangements now existed compared to three years ago; staff could now return to work more easily
- 97% of NHS staff were UK nationals. The numbers of staff from the EU and the rest of the world made up a similar share of the other 3%; this represented less of a risk than originally anticipated
- if EU nationals applied to work in the NHS in any area of regulated medicine, they needed to be accredited and meet national regulatory framework requirements. If people from the rest of the world applied, they would not have automatically met the European regulatory framework. For example, requirements for physiotherapists in Germany were similar to those in the UK
- regarding the differences between EU and non-EU applicants applying for jobs, it could depend on their regulatory accreditation, the length of the occupation list in question and the interviewer's consideration of who was the best candidate for the job
- the overall risk to NHS recruitment from any impact from Brexit on the 3% non-UK national share was complex; some service areas might be impacted more than others by a reduction in non-UK staff; for example there would be a disproportionate risk for areas like paediatric surgery
- there was no suggestion that current EU staff would necessarily leave, but such staff were highly mobile. Many roles required years of training; for example somebody starting in 2019 to train as a paediatric surgeon would qualify by 2038. Many EU staff who worked in the UK tended to be younger and wish to travel to practice abroad at a younger age.

The Chair thanked Dr Groen for his attendance and presentation, which had been fascinating; the facts and figures had been very useful to hear in light of speculation about the impact of Brexit upon the NHS. Following this it was:

RESOLVED that the information be noted.

84. WINTER SERVICES UPDATE

Following the winter services planning item presented to this committee on 8 January 2019, Helen Ray of Northumbria Healthcare NHS Foundation Trust and Siobhan Brown of the NHS Northumberland Clinical Commissioning Group provided a presentation updating on system-wide planning and service delivery during winter 2018/19.

Key details included:

- work undertaken for the winter plan 2018/19

- priority areas of focus
- winter performance 2018/19, including accident and emergency comparative performance with Newcastle and England in every year since 2011/12; comparative performance during each month of 2018/19 compared to 2017/18; and the increase in activity year on year since 2011/12
- factors behind winter 2018/19 being easier than winter 2017/18: levels of influenza A had been similar to the previous year but influenza B had been significantly lower, and although severe weather plans had been in place, there had been no 'Beast from the East' during 2018/19
- risks identified and the mitigating actions undertaken.

(Copy of presentation attached to the filed official minutes of the meeting.)

Key details of questions from members and responses from Ms Brown and Ms Ray were as follows:

- the flu vaccination take up by staff had increased by 30% compared to the previous year. Details could be provided following the meeting about the latest take up rate by the public. Vulnerable people were targeted to encourage them to be vaccinated, including older and more frail people, pregnant women and people with learning disabilities
- in relation to any improvements required, the Trust wished to improve ambulance flows and work with the North East Ambulance Service to avoid ambulances queueing at hospitals. Consideration would also be given to better managing the walk in service and also improving matching transport to patient discharges
- 20,000 more people were using emergency department services in Northumberland, but the Trust continued to perform above 95% in meeting the four hour target
- the new ambulatory care unit would be opening in June 2019. It was agreed that a visit be arranged for members of the committee
- regarding whether the number of people visiting emergency departments could reduce if awareness of other means of receiving treatment increased, for example at pharmacies, further work to address this would be organised over the next year. For example, were enough people who called 111 informed of the alternatives including pharmacies?

Ms Ray and Ms Brown were thanked for their attendance and it was:

RESOLVED that

- (1) the information be noted; and
- (2) a visit to the ambulatory care unit be organised in due course.

85. HEALTHWATCH NORTHUMBERLAND - SIX MONTH UPDATE

Derry Nugent, Healthwatch Northumberland provided an update on the latest trends arising from patient, service user and carer feedback. Key details included:

- annual survey response 2019, by each Local Area Council area
- key headlines for Northumberland: responses were up by 35%; all areas were covered; the trend over three years was steady; 64% said their

experiences of health and social care were good or excellent over the last 12 months; the level of feedback considering services 'poor' remained basically the same

- GPs received many favourable comments - appointments still showed strongly but there were fewer comments about 'process; communication within and between services caused concern in all services; fewer concerns had been reported about patient transport; GP and mental health remained a priority; access in the broadest sense was clear in the comments
- priorities for Healthwatch Northumberland in 2019/20: GP services, access to services, mental health services, dementia services and home care
- ongoing work for Healthwatch included GP services in Wylam, Harbottle and Felton and hospital services in Rothbury, Morpeth and Berwick; forthcoming reports were due about the Northumbria Specialist Emergency Care Hospital, GP appointments and home care in Coquetdale
- other future actions included the NHS Long Term Plan, new staff, volunteers, a national study due and Healthwatch's annual general meeting in October.

(Copy of Healthwatch Northumberland's quarterly report for October - December 2018 and the presentation given attached to the filed official minutes of the meetings as Appendix C.)

Key details of questions from members and responses from Ms Nugent were as follows:

- it was noted that over 60% of responses were from the Tynedale and north Northumberland areas; this included a lot of engagement about Berwick Hospital. The annual survey had asked people's satisfaction levels with services. Qualitative data had been welcomed, especially regarding people's access to and use of services
- in response to a query, members were advised that Healthwatch did not use statistical samples when collecting feedback data; they just collected responses from residents who wanted to have their say. It was important that channels were improved where possible to get details of the full range of people's experiences and contact Healthwatch as easily as possible
- regarding a query about how any best practice was identified and then made available to help other areas, an example was provided from the previous year when Healthwatch identified that the triage system did not seem to hear all concerns expressed by patients. New ways of working adopted had since addressed this
- in response to a member's concerns about incidents of patients being unable to get through to appointments by phone, not being comfortable talking about their medical condition nor wishing to complain, it was acknowledged that people's different preferences should be respected and supported
- it was noted that Healthwatch's annual general meeting would take place in October, and their next scheduled update to this committee in October would include their annual report.

Ms Nugent was thanked for her presentation and it was:

RESOLVED that the information be noted.

86. REPORT OF THE SENIOR DEMOCRATIC SERVICES OFFICER

Health and Wellbeing OSC Work Programme

Members considered the latest version of the committee's work programme. (Work programme for 2018/19 enclosed with the official minutes as Appendix D and work programme for 2019/20 enclosed with the official minutes as Appendix E.)

Members were advised that the work programme for 2018/19 was almost complete and the monitoring report included detailed the committee's decisions over the past year. Some issues would continue to be scrutinised into 2019/20 including Rothbury Hospital, Berwick Hospital, the Whalton Unit and dentistry in Coquetdale.

A number of regular annual reports and other requested updates had been scheduled for meetings during 2019/20. Two additional updates needed to be added to the work programme; at the 5 March 2019 meeting, members had asked Northumbria NHS Trust for updates on cancer and sepsis treatment; these would be presented to the committee's meeting in September 2019.

Members were also reminded that if they wanted to suggest any additional agenda items/issues for scrutiny, they should raise them with the Chair or the Senior Democratic Services Officer.

RESOLVED that the updated work programme be noted.

87. INFORMATION REPORTS

Policy Digest

The report gave details of the latest policy briefings, government announcements and ministerial speeches which might be of interest to members. It was available on the service finder element of County Council's website at www.northumberland.gov.uk.

RESOLVED that the information be noted.

CHAIR _____

DATE _____