# NORTHUMBERLAND COUNTY COUNCIL

# HEALTH AND WELLBEING OSC

At the meeting of the **Health and Wellbeing OSC** held at Conference Room 1 - County Hall on Tuesday, 2 May 2023 at 1 p.m.

## PRESENT

Councillor V. Jones (Chair, in the Chair)

#### MEMBERS

Bowman, L. Hardy, C. Hill, G. Hunter, I. Nisbet, K.

## ALSO IN ATTENDANCE

Angus, C.	Scrutiny Officer
Charters, H.	Associate Director of Nursing (NUTH)
Hall, L.	Deputy Director of Quality and Safety (NUTH)
	Deputy Chief Operating Officer (NUTH)
Kenny, N.	Group Director (CNTW)
Mann, C.	Northumberland Healthwatch
Nugent, D.	Cabinet Member for Adult Wellbeing
Pattison, W.	Quality and Assurance Lead (NUTH)
Smith, V.	Head of Quality Assurance & Clinical
Snelson, G.	Effectiveness (NUTH)
	Associate Director of Nursing (NUTH)
Teasdale, C.	Democratic Services Officer
Todd, A.	

1 member of the press was also in attendance. 76 **APOLOGIES FOR ABSENCE** 

Apologies for absence were received from Councillors E. Chicken, R. Dodd, C. Humphrey and R. Wilczek.

## 77 MINUTES

**RESOLVED** that the minutes of the meetings of the Health & Wellbeing Overview & Scrutiny Committee held on 4 April 2023, as circulated, be confirmed as a true record and signed by the Chair.

### 78 FORWARD PLAN

The Committee considered the Forward Plan of key decisions (a copy of the Forward Plan has been filed with the signed minutes).

**RESOLVED** that the report be noted.

# 79 HEALTH AND WELLBEING BOARD

**RESOLVED** that the minutes of the Health & Wellbeing Board held on 9 March 2023 be noted.

# 80 THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST (NUTH) - QUALITY ACCOUNTS

Representatives from NUTH gave a presentation to the Committee on the overview of priorities for 2023/2024 and the draft Quality Account for 2022/23 (a copy of the powerpoint slides and draft Quality Account have been filed with the signed minutes).

The presentation covered the following:

- An overview of priorities for 2022/23 and performance including highlighting what had been achieved within each priority:
- Priority 1 patient safety, reducing healthcare associated infections. In addition to COVID, flu and norovirus were two of the main infections being seen. There had been two MRSA bacteraemia and two C. difficile infections reported. The 10% reduction trajectory for MSSA bacteraemia had been met. The 'Gloves Off' campaign had been successful, and a refresh of the campaign was in progress. The Trust had also invested in a number of machines to help with this priority area. Currently the ward was at 85% capacity.
- Priority 2 patient safety, management of abnormal results. It was reported that a new mandatory field had been added to the order entry form used to request clinical investigations. This would ensure that reports would be sent to the correct lead clinician from now on.
- Priority 3 clinical effectiveness, enhancing capability in quality improvement. The Trust had recruited ten teams each focused on a piece of improvement work. Nine of the ten teams had completed all three workshops and were continuing with their improvement initiatives.
- Priority 4a clinical effectiveness, introduction of a formal triage process on the maternity assessment unit in order to improve the recognition of the deteriorating pregnant or recently pregnant woman. As part of the 'IHI Triage in Maternity project' there had been important on-going work to implement formal objective triage on the maternity assessment unit with success highlighted within the presentation.
- Priority 4b clinical effectiveness, modified early obstetrics warning score. A newly developed coded chart was hoped to be delivered by the end of this month which would help with identifying a pregnant or recently pregnant patient.
- Priority 5 clinical effectiveness, trust-wide day surgery initiative. This priority was providing an opportunity to increase and broaden day case surgery across the Trust to improve patient and staff experience and support the recovery of elective care whilst reducing patient days away

from home.

- Priority 6 patient experience, mental health in young people. The overarching purpose of this priority was to improve the quality of care provided to young people and young adults with mental health conditions. Work in partnership with CNTW continued and there was now a project lead to review and recommend appropriate pathways for Children and Young People's Service (CYPs).
- Priority 7 patient experience, reasonable adjustments for patients with suspected, or known learning disability. This priority was helping to improve the health and wellbeing and provide a positive and safe patient experience for patients and their families by investment, improving skills and training.
- An overview of proposed priorities for 2023/24. Some of the priorities from 2022/23 would continue along with some new priority areas including patient safety and incident response framework. There would also be a focus on the transition from children to adult services.

Following on from the presentation a number of comments were made by Members, including:

- The Trust's performance against key national priorities was discussed. The data provided within the Quality Account showed that all but one of the targets were significantly less than the national target which was a concern to Members. Cancer performance targets were especially worrying. The 62 days wait for first treatment target showed that nearly half of all patients were waiting longer than the national target. The Trust confirmed there had been significant challenges over the last few years. Extra capacity had been identified to tackle the backlog to bring numbers back to prepandemic figures. It was confirmed this area was a priority for the Trust and was part of the COVID recovery plan.
- Frustration that the presentation had not covered the failed targets.
- It was hoped that by next year the annual performance of the Trust would have improved.
- It was queried whether the Trust produced quarterly performance reports which could then by scrutinised by the committee to ensure things were improving. It was confirmed the Trust's performance reports were published and regularly scrutinised through the ICB.
- Pre-op assessments were available via the telephone, and it was hoped that this would be an option for all patients especially those who did not have easy access to transport or lived in the more rural parts of the county.
- The need to promote and support schools with pupils needing mental health services which would help identify issues at an early stage.
- A query on where the patient experience matrix was and how did the Trust know its priorities had made a difference. In response it was reported that an example of patience experience was that the Trust had worked with one family on their journey and learnt lessons along the way. The Trust did carry out surveys and held various consultations and engagement activities across the year.
- It looked like there was no localised data about Northumberland patients, the services they accessed and what their views on services were within the papers produced. In response it was confirmed that there were different challenges faced by Northumberland patients accessing services.

There was a Patient Safety Strategy and Patient Experience Team with the aim of improving experience and involvement in services. The wider geographical experience of service users was part of the Patient Safety Strategy and could be fed back to councillors.

The Chair thanked officers from NUTH for their presentation.

# RESOLVED that:

(a) the presentation and comments made be noted, and

(b) the Committee agree to submit a formal response to the Quality Accounts before the deadline.

# 81 CUMBRIA, NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST (CNTW) - QUALITY ACCOUNTS

C. Mann, Group Director gave a presentation on the launch of the Quality Account 2023 consultation. (A copy of the presentation has been filed with the signed minutes).

The presentation covered the following points:

- Northumberland waiting lists as of 31 March 2023 including adult ASD, adult ADHD, children and young people and all other services.
- The number of people accessing services was significantly increasing year on year particularly in ADHD and ASD diagnosis.
- A look back at the quality priorities for improvement during 2022/23 highlighting which were met, or not met.
- The Trust wanted to not only promote the good work achieved over the last year but also provide a very honest look at performance.
- The country was experiencing an unprecedented number of mental health issues affecting a huge range of individuals both locally and nationally.
- The need to continue to recruit and retain appropriability skilled staff.
- A look ahead at the quality priorities for improvement for 2023/24. The priorities had been shaped by carrying out consultation with service users, carers, staff and stakeholders. It was hoped the quality priorities reflected the greatest pressures that the organisation was currently facing as well as what service users and carers had conveyed to CNTW through feedback in the previous year.
- The introduction and implementation of the Patient Safety Incident Response Framework (PSIRF). It was noted that CNTW were required to transition to the new framework by Autumn 2023, and in response CNTW were in the process of preparing for its implementation. The framework would ensure compassionate engagement with those affected by incidents and supports the key principles of a patient safety culture.
- To continue to learn from patient surveys, feedback and experiences.
- For 2023/24 there were five key focus areas including bringing down waiting times, reducing incidents, and challenging closed cultures.
- The draft Quality Accounts was to be circulated to members following the meeting as the document had just been forwarded to the Scrutiny Officer this afternoon.

The following comments were made:

• It was confirmed that any questions on the draft Quality Accounts could be

sent to the Scrutiny Officer in the first instance.

- Northumberland had very robust services however CNTW was seeing an increase in referrals across all areas.
- A thank you for the work that CNTW did in often difficult and complex circumstances.

The Chair thanked C. Mann for her presentation.

### **RESOLVED** that:

(a) the presentation and comments made be noted, and

(b) the Committee agree to submit a formal response to the Quality Accounts before the deadline.

## 82 **REPORT OF THE SCRUTINY OFFICER**

### Health and Wellbeing OSC Work Programme

It was noted that the Committee's work programme for the 2022/23 council year had now come to an end. The draft work programme for 2023/24 would be shared with members after the annual meeting of County Council.

Councillor Hill reported that following an FOI Request to the North East Ambulance Service (NEAS) she had received localised data regarding response times for her electoral division. This confirmed that NEAS did collate this information and therefore should be able to produce the data for councillors. The Scrutiny Officer advised that he would contact NEAS again to request the information be provided at a future meeting of the Health and Wellbeing OSC.

**RESOLVED** that the comments made be noted.

CHAIR.....

DATE.....