

NORTHUMBERLAND COUNTY COUNCIL

HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE

At a meeting of the **Health & Wellbeing Overview and Scrutiny Committee** on Tuesday, 2 April 2024 at 1.00 p.m. at County Hall, Morpeth.

PRESENT

Councillor R. Dodd
(Chair, in the Chair)

MEMBERS

Bowman, L.	Hunter, I.
Chicken, E.	Humphrey, C.
Hardy, C.	Nisbet, K.
Hill, G.	Richardson, M.

ALSO IN ATTENDANCE

Angus, C.	Scrutiny Officer
Blair, A.	Northumberland Healthcare NHS Foundation Trust (NHCT)
Cotton, M.	North East Ambulance Service (NEAS)
Carter, R.	Northumberland Healthcare NHS Foundation Trust (NHCT)
Jackson, C.	Healthwatch Northumberland
Jobling, C.	North East Ambulance Service (NEAS)
Todd, A.	Democratic Services Officer

1 member of the press was also in attendance.

46. APOLOGIES FOR ABSENCE

An apology for absence was received from Councillor C. Seymour.

47. MINUTES

RESOLVED that the minutes of the meeting of the Health & Wellbeing Overview & Scrutiny Committee held on 5 March 2023, as circulated, be confirmed as a true record and signed by the Chair.

48. NORTHUMBRIA HEALTHCARE NHS FOUNDATION TRUST QUALITY ACCOUNTS 2023/24

A. Blair, Medical Director and R. Carter, Director of Patient Safety gave a powerpoint presentation on Northumbria Healthcare NHS Foundation Trust Annual Plan and Quality Account (a copy of the slides have been filed with the signed minutes).

The presentation covered the following points:

- Big Signals for 2023-2028. Including supporting patients, recruitment and retention and developing the estate.
- Service Pressures:
 - There was a continued demand on non-elective services.
 - Additional bed capacity had opened which had helped keep surgical inpatient capacity ringfenced.
 - Impact of industrial action had resulted in minimal cancellation of activity but increased impact on resilience of teams.
 - There was an improvement in the 62 day cancer backlog number performance but there was still pressure in tumour sites to achieve 62 day access to treatment.
 - It was still a challenging position regarding reducing the number of patients waiting 18 and 52 weeks for treatment.
- Quality Account 2023/24 including:
 - Look back at safety, quality and improvement priorities for 2023/24 and the Trusts focus for 2024/25.
 - Key measures and phrases used within the account.
 - The Account included information on mortality, preventable deaths and areas of achievement.
 - Following the guidance issued in January 2021, which stated that foundation trusts do not need to instruct external audit firms to conduct assurance work on the Quality Account, no indicators were to be tested again this year.
 - The council of governors would therefore not be required to select an additional indicator to be audited.
- The 2023/24 safety, quality and improvement priorities were:
 1. Improving flow: reducing ambulance handover delays
 2. Reduce medication errors – timeliness of critical medications (Parkinson's Disease)
 3. Improving cancer pathway standards
 4. Deteriorating patient – Community News (C-NEWS)
 5. Improving delirium – assessment and management
 6. Patient Experience
 7. Staff Experience
- Performance was shown against the safety, quality and improvement priorities.
- The proposed 2024/25 safety, quality and improvement priorities were highlighted. For next year, seven possible quality improvements had been identified. Some of the priorities would build on previous improvement work and others were new priorities aligned to the wider Patient Safety Strategy.

Following the presentation, a number of points were made including:

- It was disappointing to see that this was a similar picture to last year with targets not being met, particularly those around cancer treatment.

- The targets around ambulance handover delays were not being achieved. Only 26.7% of the ambulance handovers within 15 mins had been met compared to the target of 65%. This issue remained a top priority for both the trust and NEAS.
- It was clarified that ambulances handovers were prioritised via clinical need and not a first come first served basis.
- There had been a real effort not to cancel surgeries through the industrial action.
- Winter pressures and industrial action had both added to the busy workload of staff.
- During the industrial action there had continued to be monthly staff surveys however there did not appear to have been a drop in performance because of the strikes.
- Ambulance handover delays were a national problem.
- There was an issue occurring when patients were receiving important information or test results on an evening or weekend via text message. This was resulting in unnecessary worry as patients then had to wait until they could contact their GP surgery to clarify or ask questions. This was often at an already stressful time for patients. It was asked if this could be examined as patients should have the opportunity to be guided through any difficult test results or technical correspondence.
- A personal account of being admitted to hospital during the strikes and comments on how professional and caring those staff were.
- Throughout the year there were peaks at certain times where hospitals were busier especially during the winter months.
- It was encouraging to see there was a deaf awareness programme.
- It was noted that the draft account would be ready by the end of April 2024.

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.

49. NORTH EAST AMBULANCE SERVICE (NEAS) REVIEW OF PERFORMANCE IN NORTHUMBERLAND AND QUALITY ACCOUNT 2023/24

M. Cotton, Assistant Director of Communications and C. Jobling, Head of Operations (North) presented a powerpoint presentation on the North East Ambulance Service (NEAS) Quality Account and review of performance in Northumberland (a copy of the powerpoint slides and performance indicators have been filed with the signed minutes).

The presentation covered the following issues:

- 111 Call Performance over the last twelve months.
- Overall call data over the last three years and the spike in calls during winter 2022/23.
- 111 Call Outcomes.
- 999 Incident Volumes.
- The additional investment in recruitment of call handlers.

- There were now dual call handlers who would answer both 999 and 111 calls.
- Category 1 Response Performance.
- NEAS benchmark performance for Category (Cat) 1. NEAS was one of only a handful of ambulance services across the country to meet the 15 min response target.
- Category 2 Response Performance. No ambulance services were currently meeting the target.
- NEAS benchmark performance for Category 2. No ambulance services were meeting the target. NEAS would continue to collate data at the 18 mins target as there was clinical evidence to continue to aim for this.
- Average daily number of incidents.
- Vehicle hours showing an increased capacity.
- There were eight additional vehicles now on the road and a 24 hour staff rota.
- Increased workforce due to successful recruitment drives and partnership with local universities to carry out degree courses.
- Cat 2 Mean which showed that significant progress was being made but still more to be improved upon.
- A new system had been introduced to now flag phone calls for those Cat 2 incidents.
- Patients were now seeing ambulances much quicker than in previous years.
- Cat 3 and Cat 4 Response Performance.
- Benchmark Performance for Cat 3 and Cat 4 incidents.
- Hospital handover performance. There was greater awareness now and all agencies/trusts were working together to improve this area.
- Overview of quality report requirements.
- 2023/24 performance from 1 April to 31 December 2023. This showed that the number of patients had more than doubled.
- Patient Experience and feedback. The number of complaints were falling, and they had received the highest number of appreciations during the past year.
- Updated 2023/24 quality priorities:
 - To continue working with system partners to reduce handover delays.
 - Respond to patient safety incidents in a way that leads to service improvements and safer care for all patients.
 - Implementation of clinical supervision.
 - To increase service user and colleagues' involvement in patient safety and patient satisfaction activities.

A number of comments were made following the presentation, including:

- A personal perspective of the outstanding service received from NEAS.
- The localised performance data provided showed that the picture was more positive than originally thought.
- The performance data of category 1 response rates in the north compared to those in the southeast were very different. It was stated that in an emergency, minutes did matter, and any delay could have a detrimental effect on a person's life.

- In Northumberland, ambulance call outs on longer journeys were less likely to be diverted away to deal with a Cat 1 incident than those more urban areas.
- Overall, the number of people accessing primary care, needing an ambulance, and presenting at hospitals was increasing. This increase in demand was also being seen across other authority areas.
- The county had a large number of visitors to the area during the summer months which also increased capacity.
- If an ambulance took longer than expected to arrive to a Cat 1 incident, then this would be automatically recorded or if a death occurred.
- Although response times were very important it was about getting the right resource and appropriate care to the patient as quickly as possible.
- Clarification that the clock only stopped once the appropriate medical care was at the scene of an accident.
- There were still stories of people having to wait too long for an ambulance.
- Confirmation that call handlers would advise patients if there was to be a wait for an ambulance and direct them to other alternatives if appropriate.
- NEAS was committed to continue to improve.
- The local data provided was welcomed as it showed response times across the county broken down by Local Area Committee.
- The final Quality Report would be shared with the Scrutiny Officer once complete for circulation to Members.

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.

50. REPORTS OF THE SCRUTINY OFFICER

(a) 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.

(b) Health and Wellbeing OSC Work Programme

The Committee reviewed its work programme for the 2023/24 council year (a copy of the work programme has been filed with the signed minutes).

RESOLVED that the Work Programme and comments made be noted.

51. DATE OF NEXT MEETING

RESOLVED that the date of the next meeting be scheduled for Tuesday, 7 May 2024 at 1.00 p.m.

CHAIR _____

DATE _____