

AT A MEETING of the Health and Adult Social Care Select Committee of
HAMPSHIRE COUNTY COUNCIL held at The Castle, Winchester on Tuesday,
5th July, 2022

Chairman:

* Councillor Bill Withers Lt Col (Retd)

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| * Councillor Ann Briggs | * Councillor Lesley Meenaghan |
| Councillor Jackie Branson | * Councillor Sarah Pankhurst |
| Councillor Pamela Bryant | * Councillor Kim Taylor |
| * Councillor Graham Burgess | * Councillor Andy Tree |
| * Councillor Rod Cooper | Councillor Michael Ford |
| Councillor Tonia Craig | * Councillor Lance Quantrill |
| Councillor Debbie Curnow-Ford | Councillor Tim Groves |
| Councillor Alan Dowden | * Councillor Dominic Hiscock |
| * Councillor David Harrison | |
| Councillor Adam Jackman | |
| Councillor Andrew Joy | |

Co-opted members

- * Councillor Cynthia Garton
- * Councillor Diane Andrews
- Councillor Julie Butler
- Councillor Karen Hamilton

*Present

73. APOLOGIES FOR ABSENCE

Apologies were received from Councillors Branson, Bryant, Butler, Curnow-Ford, Dowden and Hamilton.

Councillors Quantrill and Hiscock were in attendance as the substitute members for the Conservative group and Liberal Democrat group respectively.

74. DECLARATIONS OF INTEREST

Members were mindful that where they believed they had a Disclosable Pecuniary Interest in any matter considered at the meeting they must declare that interest at the time of the relevant debate and, having regard to the circumstances described in Part 3, Paragraph 1.5 of the County Council's Members' Code of Conduct, leave the meeting while the matter was discussed, save for exercising any right to speak in accordance with Paragraph 1.6 of the Code. Furthermore Members were mindful that where they believed they had a Personal interest in a matter being considered at the meeting they considered whether such interest should be declared, and having regard to Part 5, Paragraph 5 of the Code, considered whether it was appropriate to leave the meeting whilst the matter was discussed, save for exercising any right to speak in accordance with the Code.

Councillor Pankhurst declared an interest as an employee of NHS 111 and noted that she would leave the meeting whilst the NHS 111 item was discussed.

75. MINUTES OF PREVIOUS MEETING

The minutes of the previous meeting held on 24 May 2022 were agreed as a correct record and signed by the Chairman.

76. DEPUTATIONS

The Committee did not receive any deputations.

77. CHAIRMAN'S ANNOUNCEMENTS

The Chairman welcomed observers from the Care Quality Commission who were attending as part of their Assurance Test and Learn exercise within the Adults' Health and Care department.

The Chairman invited the Director of Public Health to update on the current Covid position. Members heard that there had been a rise in hospital cases although there was no local data to be reviewed due to testing no longer being conducted. The Council were encouraging vaccinations and boosters and promoting this in schools to younger age groups. Those with Covid symptoms were being encouraged to continue to self-isolate.

The Chairman noted that the System Resilience Report which had been on the June Cabinet agenda had been shared with HASC Members via email.

The Chairman also drew Members' attention to the King's Fund video link which had been sent via email. The video clip outlined the key organisations which make up the NHS and how these organisations collaborate with health and care partners to deliver joined-up care.

78. PROPOSALS TO VARY SERVICES

a) Hampshire Together update (Hampshire Hospitals Foundation Trust)

Alex Whitfield, Dr Lara Alloway, Ruth Colburn Jackson and Shirlene Oh from Hampshire Hospitals Foundation Trust attended to present the update.

The Committee received a presentation outlining the current position for the new hospital programme and ongoing activity. Members heard that patient and public engagement activities were continuing to inform the development of the business case. Members noted the timeline of upcoming dates including the Strategic Outline Case submission to the NHS in 2022, full business case submission targeted for March 2025, the start of construction in 2025 and 'doors opening' in 2030.

In response to Members' questions it was noted that:

- Decisions were being made regularly regarding necessary building upgrades to the aging existing estate and that the new facilities at the hospital would be much welcomed.
- Travel links to the new hospital in Basingstoke were an important factor being taken into consideration for both patients and visitors.
- It was anticipated that the most acute services would be centralised at the new hospital with planned procedures and longer term care being provided at other sites more local to the individual patient. This was similar to the current arrangement.
- The Trust recognised that there was a minimal risk of the funding not being awarded but the presenters assured the Committee that the new hospital was a flagship project, part of a key programme and that they had received strong assurances from Government that the project would go ahead fully funded.
- The Trust currently had very low nursing vacancy numbers and that this had been as a result of an international recruitment drive. The new hospital would incorporate facilities and restrooms for staff to use during break times which would promote staff wellbeing and was hoped to help with staff retention.

RESOLVED:

- i) That the Committee note the update on the Hampshire Together programme.
- b) Enhanced Access to GP Services

Dr Zaid Hirmiz, Kirsten Lawrence and Tom Sheppard from the Hampshire and Isle of Wight Integrated Care System (ICS) attended to present the item.

Members noted that the objectives of the initiative when it was first established had been to provide additional primary care capacity outside of core hours (namely 6.30-8pm Monday to Friday and 9-5pm on Saturdays) from a range of health services including GP's.

The Committee heard that a combined approach, incorporating two initiatives that had been operating in parallel, was being planned and would be implemented in October 2022. It was noted that the Primary Care Networks were working with the ICS's to create a draft plan for the combined service ahead of the changes coming into place in October.

In response to Members' questions it was confirmed that:

- The ICS was cognisant of workforce pressures and the shortage of GP's and that this made it difficult to access primary care services. It was also noted that retention of existing staff, making the role attractive, was important as much as recruiting new GP's.

- GP and feedback on working extended hours had been mixed and that some preferred to work evenings and Saturdays due to personal commitments.
- A comprehensive public engagement approach would be adopted to seek feedback on the PCN combined approach proposals.

RESOLVED:

- i) That the Committee request a written summary of the presentation given at the meeting to be emailed to Members.
- ii) That the Committee request an update for the November 2022 meeting confirming how all Hampshire Primary Care Networks are delivering the requirements for Extended Access to GP services.

79. **ISSUES RELATING TO THE PLANNING, PROVISION AND/OR OPERATION OF HEALTH SERVICES**

- a) Care Quality Commission (CQC) Inspection Report regarding Safeguarding – South Central Ambulance Service (SCAS)

Professor Helen Young, Executive Director of Patient Care at SCAS, attended to present the item. Members noted the three external reviews of the service and safeguarding arrangements (including the CQC review) and that an integrated improvement action plan incorporating all of the feedback had been produced by SCAS.

The Committee heard that, in response to the CQC findings and the rating of 'requires improvement' being attributed to SCAS's safeguarding arrangements, the Trust had already recruited a largely new safeguarding team, been rigorous in their training and governance, reviewed and introduced new reporting apps and dashboards as part of an IT system refresh. SCAS had developed an action plan comprising 21 targets for completion to improve the service.

In response to Members' questions it was noted that:

- The severity of the feedback from the CQC was concerning and that SCAS recognised that significant improvements needed to be made. The Committee noted the CQC's observations on frontline ambulance services and that these had been rated as safe. The issues requiring improvement related not to frontline services but to overarching governance processes.
- The Adults' Health and Care department would welcome a longer term interface with SCAS – recent conversations regarding safeguarding and linking with the Multi Agency Safeguarding Hub and Hampshire Safeguarding Adults Board had proven very useful. It was noted that maintaining this close working going forward would be of wider benefit.

RESOLVED:

- i) That the Committee request an update from SCAS at the November meeting detailing how the 21 actions are being progressed. The Committee requested that this be set out in table format to enable a straightforward review of the information.

80. **NHS 111 UPDATE**

Councillor Pankhurst noted that she was an employee of NHS 111 and left the meeting whilst this item was discussed.

Sam Chapman, Urgent and Emergency Care Associate Programme Director at Hampshire and Isle of Wight (HIOW) ICS, attended to present the item regarding NHS 111 performance.

Members heard how HIOW ICS had invested in Integrated Urgent Care services including 111 and that this had resulted in one of the highest performing systems nationally. It was also noted, however, that the whole system continued to be under significant pressure. The Committee reviewed recent data regarding call volumes, response times and transfers of 111 calls through to 999. The number of 111 callers referred to primary care services or to Emergency Departments was also reviewed.

In response to Members' questions, it was confirmed that:

- A number of workforce pilots were ongoing regarding flexible working/working patterns and working from home but that call handlers generally preferred to be in a team environment with clinicians available nearby and this was not possible when working from home.
- Frequent callers making an unusually high volume of calls were monitored by the service.

RESOLVED:

- i) That the Committee note the update and welcome the investment into Integrated Urgent Care Services.
- ii) That the Committee request a further update in six months' time to continue to monitor the evolution of the service.

81. **DEVELOPMENT OF INTEGRATED CARE SYSTEMS UPDATE**

Ros Hartley, Director of Partnerships at HIOW ICS, and Sam Burrows, Programme Director at Frimley ICS, attended to present the item.

The Committee noted that, as of 1 July 2022, the ICSs were formally launched and had replaced the previous Clinical Commissioning Groups (CCGs). HIOW

ICS and Frimley ICS covered the Hampshire population and would be responsible for health care commissioning in their respective areas.

The structure of the ICSs was set out, including the role of the Integrated Care Partnership (ICP) and Integrated Care Board (ICB). Members noted that ICP/ICB appointments had been made, including Local Authority (LA) representative from across Hampshire. Some members were concerned that only one or two LA appointments would not be sufficient to represent the views of the whole Hampshire population. The Committee were reassured that there was membership from across all upper tier LA's (Hampshire County Council (HCC), Southampton City Council (SCC), Portsmouth City Council (PCC)); members had also been appointed based upon relevant skills and background and from across the geography of the county. It was noted that District and Borough Authorities had also put forward a nomination.

In response to Members' questions, it was confirmed that:

- The HIOW IBC Local Authority appointments were Graham Allen (HCC), Debbie Chase (Director of Public Health at SCC), David Williams (Chief Executive at PCC) and Sarah Daly (Children's Services at PCC).
- The ICSs were sighted on Hampshire County Deal discussions.
- Dentistry commissioning was transferring from NHS England to individual ICSs. The ICSs were confident that local ownership could help improve existing challenges in accessing dentistry services – retention of workforce could be managed locally, planning services could be achieved alongside ICS partners. It was noted that the transfer was not yet complete and that a transition year was in place.
- Full membership lists would be provided for the Committee setting out representatives on the HIOW and Frimley ICBs. This would also include key contacts for optometry and dentistry.

RESOLVED:

- i) That the Committee note the update.
- ii) That the Committee request that the Commissioners provide a further update in late 2022 or early 2023 for the HASC to comment on the ICP Interim Integrated Care Strategy and the ICBs first 5 Year Forward Plan for health and wellbeing for the Hampshire population.

82. **HEALTH AND WELLBEING BOARD ANNUAL REPORT**

The Committee received the annual report of the Hampshire Health and Wellbeing Board.

RESOLVED:

That the Committee:

- i) Note the update, progress, and upcoming priorities of the Health and Wellbeing Board's work.
- ii) Note the annual report that has been signed off by the Chairman and agreed by partners of the Health and Wellbeing Board.
- iii) Submit any queries or comments in writing for responses.

83. WORK PROGRAMME

The Director of Transformation and Governance presented the Committee's work programme.

Members noted that an item would be added regarding mental health to incorporate updates from a number of partner organisations for a future meeting.

Councillor Taylor requested that a further update on the Hampshire Together programme be added. It was noted that a Joint Committee had been established to monitor the programme and that any updates would also be made available to HASC members.

RESOLVED:

That the Committee's work programme be approved, subject to any amendments agreed at this meeting.