

# ITEM 04

Time commenced – 6.05 pm  
Time finished – 8.19pm

## ADULTS AND HEALTH SCRUTINY REVIEW BOARD

**24 September 2019**

Present: Councillor Cooper (Chair)  
Councillors A J Graves, J Khan, A Pegg, Testro

In Attendance: Sam Adler and Julie Miles, Clinical Commissioning Group  
David Gardner, Assistant Director Clinical Commissioning Group  
Kirsty McMillan, Director of Integration and Direct Services (Adults)  
Tim Slater, East Midlands Ambulance Service  
Vikki Taylor, Clinical Commissioning Group  
Cllr Roy Webb Cabinet Member Adults, Health & Housing

09/19 Apologies for Absence

There were none.

10/19 Late Items

There were no late items

11/19 Declarations of Interest

There were no declarations of interest

12/19 Minutes of the Previous Meeting

The Minutes from the meeting of 18 June 2019 were agreed as a correct record.

13/19 Update from East Midlands Ambulance Service

The Board received a report and a presentation from Tim Slater on the East Midlands Ambulance Service (EMAS).

It was reported that EMAS had embedded the NHS England Ambulance Response Programme and developed a new service to help meet patients needs.

It was also reported that the wellbeing of EMAS colleagues continued to be a top priority, and EMAS continued to use its Conversation Café to engage with colleagues.

Members noted that EMAS had engaged with staff and stakeholders to co-create a clear vision and strategy, aligned with the NHS Long Term Plan. It was noted that the vision was as follows:

Responding to patient needs in the right way, developing our organisation to become outstanding for patients and staff, and collaborating to improve wider healthcare.

Members considered the reduction in various response times in March 2019, compared to March 2018. It was reported that EMAS was making widespread improvements in its response times to patients by having a large increase in its workforce.

It was reported that demand was far exceeding what EMAS anticipated and it had seen a 5.2% increase in the number of emergency incidents between Q1 2018 and Q1 2019.

Members were updated on the Blue Light Collaboration project, which included joint ambulance and fire stations in Swadlincote and Sleaford.

Members considered EMAS finances

Members paid particular attention to the information relating to EMAS staff assaults. It was noted that in 2018/19, staff reported 1,023 assaults including physical, verbal, sexual and racial abuse and that this was an increase of 54 incidents on the previous year.

**Resolved to note the report and the presentation.**

## 14/19 Product of Review of STP 2019/2020

The Board received a report and a presentation from Vikki Taylor on the product review of STP 2019/20.

It was reported that every Sustainability and Transformation Partnership (STP) and Integrated Care System (ICS) were to develop five-year Long Term Plan implementation plans, covering the period to 2023/24 by Autumn 2019 and that this must form their response for implementing the commitments set out in the NHS Long Term Plan with 2019/20 as the transitional year.

In relation to this work, the following were reported:

- Partnership Board established with key role in working with Local Authorities at 'place' level.
- Commissioners would make shared decisions with providers on how to use resources, design services and improve population health.
- Streamlined strategic commissioning arrangements to enable a single set of commissioning decisions at system level, which supported providers to partner with local government and other community organisations on population health, service redesign and Long Term Plan implementation.

- A whole system approach to focus on the cost-effectiveness of the whole system was required.

Members noted that the mission was:

- to improve population health outcomes for the people and communities we serve.

Members noted that the vision was:

- for people to have the best start in life, to stay well, age well and die well.

Members noted the case for change, such as premature mortality being significantly worse than the England average and driven by respiratory illness, MSK, Mental Health, falls, cardiovascular disease, liver disease (diabetes) and Issues with diet, smoking, substance abuse and physical activity (diabetes).

Members considered the delivery model, which included integrated care teams in each of the Place Alliances, better cancer screening uptake and more people with dementia and delirium being supported in their own home or in a place they call home.

Members were updated on the financial challenges, the workforce landscape and engagement events.

Members were given information on the delivery areas, such as urgent care, planned care, mental health and learning disability and autism.

**Resolved to note the report and the presentation.**

## **15/19      Access to GP Surgeries and Urgent Primary Care Update and Review**

The Board received a report and presentation from David Garner on Access to GP Surgeries and Urgent Primary Care Update and Review.

It was reported that the General Practice Forward View (GPFV) published in April 2016 set out plans to enable clinical commissioning groups (CCGs) to commission and fund additional capacity across England to ensure that, by 2020 everyone had improved access to GP services including sufficient routine appointments at evenings and weekends to meet locally determined demand, alongside effective access to out of hours and urgent care services. It was also reported that in Derby, this was provided by City North, City South and Primary Care Plus (PCP).

Members considered the number of appointments available for patients to book in the extended access period and the number of appointments actually booked, in the period March – July 2019.

Members also considered the utilisation of appointments across the 3 hubs in Derby and noted that City North was low in utilisation whilst PCP and City South were above the Derbyshire average and achieving the national target of 75%, in the period March – July 2019.

It was reported that work was on-going to continue to develop extended access and look at how it supported the wider System demand & capacity monitoring. It was also reported that utilisation of appointments was increasing on week days but that there was still an element of underutilisation on weekends, particularly Sundays and Bank Holidays. Members noted that with the introduction of NHS111, being able to access these appointments should help increase their utilisation.

Members considered the work to improve the utilisation of extended access and work to improve access overall. It was noted that access to some practices was still poor, and that some of those were in Derby. However, it was also noted that access to some practices in Derby was the best in the county/country.

Members discussed the problems caused by patients not turning up for appointments and noted the mitigations, such as text message reminders being sent.

Members discussed the difficulties that can be experienced when trying to book an appointment by telephone. Members agreed that demand should be monitored and it was reported that some pilots were taking place.

Members were updated on GPFV funding 2019/20 and this was broken down into the following programme areas:

- Practice Resilience
- GP Retention
- Reception, clerical and practice management training
- Practice nursing
- Online consultation

Members considered information relating to Joined Up Care Derbyshire STP practices workforce and noted that as at March 2019, the actual position was above the planned position by way of full time equivalent (FTE) staff. Members were updated on the work being done to recruit GPs, however, it was noted that more work was required to increase the Nursing workforce.

Members were updated on staff training and development.

**Resolved to note the contents of the report and presentation.**

## 16/19 Winter Pressures 2019 – Plan/Preparation

The Board received a report and presentation from Sam Alder and Julie Miles on Winter Pressures 2019 – Plan/Preparation.

Members were updated on Derby City Council and partners seasonal operational planning.

It was reported that there was now a 12 month operational plan, which was reviewed quarterly. It was also reported that this was led by the Derbyshire Operational Resilience Group (health and social care operational managers) reporting to the Derbyshire A&E Delivery Board. Members noted that the plan included capacity modelling, flu planning and escalation processes.

Members were informed about the importance of staff getting themselves vaccinated and the different way of promoting this.

It was reported that in relation to communications to the public, a message was playing to patients when they called the NHS 111 service, encouraging patients to have their flu vaccination. It was also reported that system partners would be promoting the NHS 'Stay Well This Winter' campaign.

Members were informed of actions taken under the General Practice Forward View to improve access to General Practices.

Members considered measures for avoiding admissions for Derby patients, such as a focus on self-care and preventing ill health and NHS 111 being promoted at the access point for urgent care.

In relation to responding to system pressures, it was reported that the Operational Resilience Group met fortnightly to pro-actively manage system pressures and identify areas of improvement and that in times of significant system pressure, the Operational Resilience Group co-ordinated escalation actions and conference calls.

**Resolved to note the contents of the report and the presentation.**

## **17/18 Work Programme and Topic Review**

The Board considered a report of the Strategic Director of Corporate Resources presenting the proposed work programme of the Board for the remainder of the 2019/20 municipal year.

**Resolved to note the contents of the report.**

## **18/19 Items Referred from the Executive Scrutiny**

There were no items referred

**MINUTES END**