

**GREAT YARMOUTH AND WAVENEY JOINT HEALTH SCRUTINY COMMITTEE
MINUTES OF THE MEETING HELD ON 26 April 2019**

Present:

Stephen Burroughes	Suffolk County Council
Emma Flaxman-Taylor	Great Yarmouth Borough Council
Nigel Legg (Chairman)	South Norfolk District Council
Jane Murray	Waveney District Council
Richard Price	Norfolk County Council
Keith Robinson	Suffolk County Council

Also Present:

Cath Byford	Director of Commissioning and Deputy Chief Executive, Great Yarmouth and Waveney CCG
Peter Whitney	Commissioning Manager, Great Yarmouth and Waveney CCG
Peter Bailey	Professional Lead for Podiatry, East Coast Community Healthcare CIC (community interest company)
Sally Watson	Diabetes Nurse Specialist, East Coast Community Healthcare CIC (community interest company)
Nick Wright	Deputy Director of Adult Services, Business and Performance, East Coast Community Healthcare CIC (community interest company)
Barbara Robinson	Member of the public
Maureen Orr	Democratic Support and Scrutiny Team Manager, Norfolk County Council
Andrew Eley	Democratic Services, Suffolk County Council
Tim Shaw	Committee Officer, Norfolk County Council

1. Apologies for absence

- 1.1** There were no apologies for absence.

2 Minutes

- 2.1** The minutes of the previous meeting held on 1st February 2019 were confirmed as a correct record and signed by the Chairman.

3 Public Participation Session

- 3.1 With the permission of the Chairman, Barbara Robinson, a member of the public, spoke to the Joint Committee as a representative for over 600 ME & CFS group members / Patients and Carers in Norfolk and Suffolk about recent attempts to engage with the Joint Strategic Commissioning Committee (JSCC) for Norfolk and Waveney on ME and CFS and to share an awareness raising poster about the Millions Missing ME demonstration in Norwich on 11 May 2019.
- 3.2 Barbara Robinson drew the Joint Committee's attention to the following issues:
1. A complaint that she had made to the Joint Strategic Commissioning Committee (JSCC) about a failure to meet the needs of severely affected patients or to provide an equitable service across Norfolk and Suffolk and to express concern about a suggestion that CBT "treatments" be provided within the service specification.
 2. A further complaint that JSCC appeared to be subverting agreed process by denying the public voice at their April 2019 meeting.
 3. A request for the JSCC to provide reliable evidence that their agreed way forward reflects the findings and recommendations contained in the advice on the Change Audit survey provided by Dr Steven Wilkinson.
 4. A request for the JSCC to support their assertion that they were providing the best possible service, and if they were, why this was not being translated equitably across Norfolk and Suffolk.
 5. A request to be involved in any plans to educate GPs about ME/CFS issues.
 3. The Awareness Raising Poster sent to JSCC about the Missing Millions ME demonstration in Norwich on 11th May 2019.
- 3.3 The Joint Committee noted that the subject of ME/CFS was included within the Information Bulletin item for this meeting. This meant that while it would not be discussed at today's meeting it could be considered for a future agenda (for discussion or as an Information Bulletin update) when the Joint Committee considered its Forward Work Programme.

4A Chairman's Comments

- 4A.1 The Chairman thanked Jane Murray who was not standing for re-election at the District elections on 2 May 2019 for all her work on behalf of the Joint Committee. He also thanked Tim Shaw, Committee Officer at Norfolk County Council, who had supported the Joint Committee from its inception and was now moving on to support other Committees.

4B Declarations of Interest

- 4B.1 Jane Murray declared an "other interest" in item 5 because she was a trustee at Sentinel Leisure Trust.
- 4B.2 Keith Robinson declared an "other interest" in item 5 because he was a diabetic.
- 4B.3 Richard Price declared an "other interest" in item 5 because his wife suffered with ME.

- 4B.4 Emma Flaxman-Taylor declared an “other interest” because she was a member of the JPH Council of Governors.

5 Diabetes care within primary care services in Great Yarmouth and Waveney

- 5.1 The Joint Committee received a suggested approach from Maureen Orr, Democratic Support and Scrutiny Team Manager at Norfolk County Council, to an update report on the progress of the diabetes service in Great Yarmouth and Waveney and the outcomes for patients.

- 5.2 The Committee received evidence from Cath Byford, Director of Commissioning and Deputy Chief Executive, Great Yarmouth and Waveney CCG, Peter Whitney, Commissioning Manager, Great Yarmouth and Waveney CCG (GY&W CCG), Peter Bailey, Professional Lead for Podiatry, East Coast Community Healthcare CIC, Sally Watson, Diabetes Nurse Specialist, East Coast Community Healthcare CIC and Nick Wright, Deputy Director of Adult Services, Business and Performance, East Coast Community Healthcare CIC.

- 5.3 The Joint Committee received a PowerPoint presentation from Peter Whitney, Commissioning Manager, Great Yarmouth and Waveney CCG (GY&W CCG) which can be found on the Norfolk County Council and Suffolk County Council Committee pages website. The PowerPoint presentation included the recommendations from a JPUH Peer Review.

- 5.4 In the course of discussion the following key points were noted:

- The Committee noted that the GY&W CCG was part of the Sustainability and Transformation Plan (STP) for the Norfolk and Waveney Right Care Programme for Diabetes, led by West Norfolk CCG.
- The contract to provide a community-based diabetes service was awarded to East Coast Community Healthcare (ECCH). The contract included working more closely with GP practices and primary care and the provision of a Multi-Disciplinary Foot Team (MDFT), something which the GY&W CCG had previously lacked. The first MDFT was expected to be in place at the JPUH on 9 May 2019.
- The Joint Committee noted that in January 2019 the James Paget University Hospital (JPUH) had undergone a Peer Review from NHS England that had resulted in a total of 13 recommendations for JPUH, ECCH and GY&W CCG. The recommendations from the Peer Review would be implemented throughout 2019/20. They could be found listed at the end of the PowerPoint presentation.
- The speakers said that in October 2018 GY&W CCG and West Norfolk CCG had both joined the National Diabetes Prevention Programme (NDPP), a national programme that identified patients at risk of developing diabetes and put in place a package of preventative support. The GY&W CCG had referred over 140 patients to the NDPP and 80 of these patients had received an initial assessment. The speakers said that while this compared favourably with West Norfolk CCG, collectively the STP referrals were well-below expected numbers.
- In reply to questions, it was pointed out that the lack of patient take up of the NDPP was a national issue that the GY&W CCG had raised with NHS England. The GY&W CCG would address this issue as part of the local

STP.

- The Joint Committee was informed that Structured Education was an education and support programme for diabetes-diagnosed patients. The aim was to support patients by educating them about their illness, and providing them with support on how to better manage it. The Structured Education service in the Great Yarmouth and Waveney area was aimed at providing face to face learning sessions as well as information about diet, how diabetes worked and the impact it had on patients health. There had been a large increase in patients making use of Structured Education in 2018/19. Transformation funding would be used to increase the numbers and types of courses available.
- In reply to questions, the speakers said that most people with diabetes did not require a level of support for their condition that meant they needed to see a consultant.
- The speakers said that the intermediate diabetes team (which was transferred from the JPUH to ECCH) provided the right level of support for most patients with a lesser complexity of needs. The intermediate diabetes team were experts in their field who had achieved good results from a revised management structure and the placement of clinics within GP practices. The intermediate diabetes team were able to support GPs in making the best use of their resources so that multiple diabetes tests could be undertaken at the same time and patients progress tracked. The team were also able to view vacant spaces and book patients to fill them.
- The speakers said that funding had been secured for staff to take up training at the University of Essex aimed at upskilling the existing workforce. The University of Essex had been asked to run a course that met the particular requirements of staff working in the Great Yarmouth and Waveney area.
- The speakers pointed out that the eight Care Processes (which were mentioned in the PowerPoint presentation) had shown an 8% improvement in performance in February 2019 when compared with February 2018. However, the three Treatment Targets had shown a 4% decrease in performance (that mirrored the national picture). The Great Yarmouth & Waveney CCG area was amongst the lowest performers in the region for meeting the Treatment Targets. The speakers said that it was not entirely clear why the decrease in performance had occurred. The ECCH was focused on meeting Treatment Targets for 2019/20.
- The Joint Committee was informed that a Care Homes and Housebound Patients Outreach Service that met the three Treatment Targets would be put in place.
- In reply to questions the speakers said that a consistent approach was now being taken across the region to the provision of flash glucose monitors on prescription for every patient who qualified for them (i.e. around 20 – 25% of patients with Type 1 diabetes). It was envisaged that Type 1 patients meeting the criteria would be offered at their next review a trial of the technology for a period of up to 6 months.
- It was pointed out that in February 2019 the GY&W CCG had started a two-year pilot, funded by NHS England until February 2021, to trial the use of InSight 3D Cameras at all five podiatry clinics across the Great Yarmouth and Waveney area. The cameras provided accurate 3D mapping of foot ulcers for diabetic patients and allowed for the impact of any medication to be measured. The pictures could be immediately

uploaded, saving patients on average three or four working days in waiting time before the start of treatment. The pictures allowed for junior members of staff to get advice immediately from senior members of staff and helped to achieve a reduction in the need for amputations.

- The Joint Committee was informed that the GY&W CCG and ECCH had plans for 2019/20 to provide a One Stop Shop service in the community for the podiatry, phlebotomy and health Intelligence services that were linked in with Diabetic Retinopathy services.
- Members suggested that the GY&W CCG and ECCH might like to consider including within their plans the provision of “pop-up” community-based diabetes surgery services in venues such as supermarkets or leisure centres to encourage people to receive the recommended treatments and care processes for their diabetes.
- It was pointed out that Sentinel Leisure Trust already provided a community based service aimed at identifying patients at risk of developing diabetes and at putting in place a package of preventative support. The trust’s experiences would be invaluable in putting in place diabetes services elsewhere.

5.5 The Joint Committee suggested that the GY&W CCG and East Coast Community Healthcare should consider providing “pop-up” community-based diabetes surgery services in venues such as supermarkets or leisure centres to encourage people to receive the recommended treatments and care processes for their diabetes.

5.6 The Joint Committee noted the plans for the development of diabetes services and requested a progress update from the CCG and ECCH in a year’s time.

6 Information Only Items

6.1 The Joint Committee noted information on the following subjects:

- 1. Online access to GP practices**
- 2. IC24 Integrated Urgent Care service**
- 3. Sizewell C and NHS emergency planning**
- 4. ME/CFS**
- 5. Norfolk and Waveney Sustainability Transformation Plan (STP)**

6.2 The GY&W CCG was **reminded** that that they had been asked to provide Keith Robinson with an answer about a specific issue he had previously raised regarding the phlebotomy service in Lowestoft (minute 7.4 of the meeting held on 28 October 2018 refers).

7 Forward Work Programme

7.1 The Joint Committee **agreed** the forward work programme as set out in the report subject to the following additions:

- 25 October 2019 – Primary care in Great Yarmouth and Waveney – to examine developments in the organisation and provision of primary care across the CCG area, also including minor injury and x-ray services which

have previously been locally available.

- 17 April 2020 – Diabetes care within primary care in Great Yarmouth and Waveney – to examine progress.

7.2 The Joint Committee also **agreed** that the Information Bulletin for 12 July 2019 should provide further information about ME/CFS regarding the following:

- The new service in Aylsham
 - Opening hours
 - Staffing details
 - Communication with patients about the opening of the new base
- Details of the research currently ongoing at the Quadram Institute in Norwich and the opportunities for collaboration with that research.

8 Urgent Business

8.1 There were no items of urgent business.

9 Date of next scheduled meeting

It was noted that the next meeting of the Committee would be held on Friday, 12 July 2019 in the Claud Castleton Room at Riverside Campus, Lowestoft.

The meeting concluded at 1.05 pm.

CHAIRMAN



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