

**NORFOLK HEALTH OVERVIEW AND SCRUTINY COMMITTEE
MINUTES OF THE MEETING HELD AT COUNTY HALL, NORWICH
on 5 April 2018**

Present:

Michael Chenery of Horsbrugh (Chairman)	Norfolk County Council
Mrs J Brociek-Coulton	Norwich City Council
Mrs A Claussen-Reynolds	North Norfolk District Council
Ms E Corlett	Norfolk County Council
Mr F Eagle	Norfolk County Council
Mrs S Fraser	King's Lynn and West Norfolk Borough Council
Mr D Harrison	Norfolk County Council
Mrs L Hemsall	Broadland District Council
Dr N Legg	South Norfolk District Council
Mr R Price	Norfolk County Council
Mr M Smith-Claire (substitute for Mrs B Jones)	Norfolk County Council
Mr P Wilkinson	Breckland District Council
Mrs S Young	Norfolk County Council

Also Present:

Julie Cave	Interim Chief Executive, Norfolk and Suffolk NHS Foundation Trust
Josie Spencer	Interim Chief Operating Officer and Deputy Chief Executive, Norfolk and Suffolk NHS Foundation Trust
Dr Kapil Bakshi	Deputy Medical Director, Norfolk and Suffolk NHS Foundation Trust
Helen Stratton	Deputy Chief Executive and Chief Finance Officer, South Norfolk CCG (lead CCG for mental health in Norfolk and Waveney)
Dr Tony Palframan	South Norfolk Clinical Commissioning Group and Chair of Norfolk and Waveney Mental Health Network
Brenda Jones	A Member of the Committee whom was substituted for this meeting
Sheila Preston	Member of the public
Maureen Orr	Democratic Support and Scrutiny Team Manager
Chris Walton	Head of Democratic Services
Tim Shaw	Committee Officer

1A Apologies for Absence

- 1A.1 Apologies for absence were received from Mrs M Fairhead, Great Yarmouth Borough Council, Mrs B Jones, Norfolk County Council (who was present in the meeting after having been substituted) and Mr G Middleton, Norfolk County Council.

1B North Norfolk District Council Representation

- 1B.1 The Committee was informed that North Norfolk District Council had recently appointed Mrs A Claussen –Reynolds as their main member and Mr M Knowles as their substitute member.
- 1B.2 The Chairman welcomed Mrs Claussen-Reynolds back to the Committee.

2. Minutes

- 2.1 The minutes of the previous meeting held on 22 February 2018 were confirmed by the Committee and signed by the Chairman.

3. Declarations of Interest

- 3.1 Mrs J Brociek-Coulton declared a personal interest as a member of UNISON and a member of the Labour Party which was affiliated to the Campaign to Save Mental Health Services in Norfolk and Suffolk.

Ms E Corlett declared a personal interest as a member of UNISON and a member of the Labour Party which was affiliated to the Campaign to Save Mental Health Services in Norfolk and Suffolk.

Mr M Smith-Claire declared a personal interest as a member of the Labour Party which was affiliated to the Campaign to Save Mental Health Services in Norfolk and Suffolk.

4. Urgent Business

- 4.1 There were no items of urgent business.

5. Chairman's Announcements

- 5.1 There were no Chairman announcements.

6 Norfolk and Suffolk NHS Foundation Trust – mental health services in Norfolk

- 6.1 The Committee received a suggested approach by Maureen Orr, Democratic Support and Scrutiny Team Manager, to the Clinical Commissioning Groups' and Norfolk and Suffolk NHS Foundation Trust's responses to recommendations on mental health services in Norfolk made by NHOSC in December 2017 and an update on progress with the Improvement Plan to address issues identified by the Care Quality Commission in July 2017.

6.2 The Committee received evidence from Julie Cave, Interim Chief Executive, Norfolk and Suffolk NHS Foundation Trust, Josie Spencer, Interim Chief Operating Officer and Deputy Chief Executive, Norfolk and Suffolk NHS Foundation Trust, Dr Kapil Bakshi, Deputy Medical Director, Norfolk and Suffolk NHS Foundation Trust, Helen Stratton, Deputy Chief Executive and Chief Finance Officer, South Norfolk CCG (lead CCG for mental health in Norfolk and Waveney) and Dr Tony Palframan, South Norfolk Clinical Commissioning Group and Chair of Norfolk and Waveney Mental Health Network. The Committee also heard from Mrs Sheila Preston, speaking as a member of the public.

6.3 The following key points were noted:

- The speakers explained the action taken by the NSFT to address the list of 'must dos' and 'should dos' contained in the CQC inspection report.
- NSFT had written to the CQC explaining the action taken and was expecting a written response.
- A full re-inspection of NSFT's services was expected in autumn 2018.
- The Care Quality Commission (CQC) and NHS Improvement (NHS I) were monitoring the NSFT's progress.
- The speakers said that the Trust had established a Recruitment and Retention Group to focus attention on staffing shortages throughout the NSFT, one of the most significant issues of concern.
- There were many ongoing initiatives around filling vacancies, skill mixing and general recruitment and retention. However, Norfolk remained a difficult area in which to recruit and retain clinical staff and there were overall shortages of qualified staff with specialist skills.
- In recent months, inadequate staffing levels and the need for environmental improvements had resulted in the closure of 36 inpatient beds at various locations across the NSFT area, 28 of which were temporary. There were a number of reasons for the closures, including the need to increase staffing levels and to invest significant amounts of money on improving the environment and safety for patients, such as by providing single sex accommodation and removing ligature risks.
- Mrs Sheila Preston, speaking as a member of the public, asked the speakers what steps the NSFT would take to keep people safe and boost care whilst the 36 beds were temporarily closed.
- In reply, the speakers said that the NSFT remained committed to finding in-patient beds for all who needed them. The review of all seclusion facilities across the Trust was complete and all environments were physically compliant and safe. The NSFT planned to create additional seclusion facilities in Great Yarmouth and Waveney and in West Norfolk by late spring 2018.
- The majority of bed closures were in Suffolk and included the temporary closure of a psychiatric intensive care unit (PICU) based at Ipswich Hospital.
- In the Great Yarmouth and Waveney locality, St Catherine's Way ward at Gorleston (a short-term, rehabilitation service for patients preparing for discharge) had temporarily closed because of concerns about staffing levels and the building not being fit for purpose as an inpatient unit. Following the closure of the ward in autumn 2017, day facilities were provided from this location as part of a pilot project. A long-term decision on the future of the use of the site, and whether it should continue to be used as a community base, would be taken in the next six months.
- Good progress had been made in upgrading facilities in community areas throughout the NSFT. This work would be completed by late spring 2018.

- Since the publication of the agenda papers, the Department of Health had agreed to provide funding for a Community Wellbeing Hub in Norwich to serve people with mental health needs.
- The establishment of the hub (which was previously referred to as a Crisis Café or a Crisis Hub and had been reported to Members by email on 3 April 2018) was part of the action to enable NSFT to manage within existing bed numbers, following a bed review at the Trust in early 2017.
- Members hoped that plans for similar hub arrangements could be put in place in the west and in the east of the county (with public transport made available to the hubs).
- Members were informed that the NSFT bid to the Department of Health for emergency capital funding of £5.2m for safety improvements was not accepted in 2017/18. The speakers said that the NSFT was working to progress a resubmission as early as possible in 2018/19. This was now one of the main subjects of discussion that the NSFT was having about mental health service funding for the financial year 2018/19 with South Norfolk CCG (the lead commissioners for mental health services in Norfolk).
- The funding discussions between the NSFT and South Norfolk CCG had centered on the cost differentials between in-Trust placements and out-of-Trust placements which had implications for the number of sustainable beds that the NSFT could provide.
- The speakers updated the Committee on the number of placements of patients in out-of-Trust care. They said that there were currently 11 out-of-Trust care placements in the Norfolk and Suffolk area, 22 out-of-area placements for non-clinical reasons and an additional 26 specialist placements. The monthly out-of-Trust placement figures for the past six months were set out in Appendix C to the report.
- The Committee suggested that the local NHS should reimburse travel costs to families of service users who were placed in out-of-area beds due to the unavailability of local beds (i.e. to the families of those placed out-of-area for non-clinical reasons).
- The speakers said that the STP mental health work stream allowed for the provision of rehabilitation beds as an alternative to hospital admission.
- Rehabilitation beds were provided in the Norwich area by Evolve, which was an accredited supplier of supported lodgings with Norfolk County Council. The service provided short stay accommodation and support for NSFT adult patients who were deemed 'medically fit' for discharge from the Trust's inpatient units or out of area placements. The service provided for adults who had temporary problems with accommodation. Access to the service was managed by NSFT and NCC staff operating from Hellesdon Hospital.
- The speakers agreed to let Members know the length of time adults could stay in the rehabilitation beds provided by Evolve in the Norwich area.
- It was noted that Members of the Committee had recently visited mental health services at Hellesdon Hospital and Julian Hospital, Norwich and at the Fermoy Unit, King's Lynn to learn more about the range of services that the NSFT provided.
- The Committee was informed that the 16 bed inpatient service at Chatterton House, Kings Lynn was scheduled for completion during the first quarter of 2019 and that the NSFT had made significant improvements in community facilities for families to make use of the Fermoy Centre prior to its closure. Following the closure of the Fermoy Centre the building would be available for other NHS purposes.
- The speakers said that a new Patient Journey Tool (mentioned in the report) supported clinicians and their managers in monitoring caseloads and in

improving compliance on a number of measures, including risk assessments. The NSFT was working towards an optimum caseload of 35 cases.

- The speakers said that a second round of staff training sessions on the use of the Lorenzo electronic records system had begun. The use of the system remained a key risk in the NSFT risk register and was carefully monitored. The existing contract for the use of the system was due for renewal in the next 3 years by which time changes were expected to be made to meet the particular requirements of mental health trusts such as the NSFT.
- The Committee was informed about moves to develop collaborative partnerships with GPs on issues of mental health. It was pointed out that GP practices were working with South Norfolk CCG (the lead CCG for mental health in Norfolk and Waveney) to identify how nurses, pharmacists and other allied professionals working in GP surgeries could better signpost patients to the Wellbeing Service.
- The Chairman asked the speakers if they considered the NSFT to be too large an organisation. In reply, the speakers acknowledged that the NSFT covered a large geographical area and that the size of the Trust was an issue that was being considered.
- The speakers said that service user and carer forums were in place and were open to everyone who wished to participate. The Trust was taking stock of what public participation had worked best in the recent round of public consultation and how to address any shortcomings to make the next sessions as co-produced as possible and allow for the greatest possible public involvement.

6.4 The Committee agreed to ask the NSFT to provide information on:-

- **The cost differential between in-Trust placement and out-of-Trust placement.**
- **How long service users were able to stay in Evolve's rehabilitation beds in Norwich.**

6.5 The Committee agreed to write a letter in support of the resubmission of a bid by the NSFT to the Department of Health for emergency capital funding of £5.2m in 2018-19, with copies sent to the Norfolk MPs, the bid having been unsuccessful in 2017/18.

6.6 The Committee recommended to the CCGs and NSFT that the local NHS should reimburse travel costs for families of service users who were placed in out-of-area beds due to unavailability of local beds (i.e. placed out-of-area for non-clinical reasons).

6.7 The Committee agreed to receive the CQCs feedback on NSFT's progress with 'must do' actions in the NHOSC Briefing and to decide when to schedule 'NSFT – mental health services in Norfolk' in NHOSC's forward work programme after the feedback was received.

7 The Health and Wellbeing Board and Health Overview and Scrutiny

7.1 The Committee received a briefing report by Maureen Orr, Democratic Support and Scrutiny Team Manager, about the complementary roles of the Health and Wellbeing Board and Health Overview and Scrutiny.

7.2 No suggestions were made for changes in the relationship between the Health and Wellbeing Board and the Health Overview and Scrutiny Committee.

- 7.3 The Committee agreed to note the briefing document that could be found at Appendix A to the report.**
- 8 Norfolk Health Overview and Scrutiny Committee appointments**
- 8.1 The Committee received a report from Maureen Orr, Democratic Support and Scrutiny Team Manager, that sought appointments of link members with local Trusts and commissioning bodies.**
- 8.2 The Committee agreed to make the following appointments:-**
- 1. Norfolk and Waveney Joint Strategic Commissioning Committee link member:-**
 - a. For meetings held in the west of the county – Michael Chenery of Horsburgh.**
 - b. For meetings held in the east of the county – Dr Nigel Legg.**
 - 2. James Paget University Hospitals NHS Trust:-**
 - a. Link member – Marlene Fairhead.**
 - b. Substitute link member – Mike Smith-Clare.**

The Committee also agreed to defer the appointment of a substitute link member with Great Yarmouth and Waveney CCG until after May 2018.

9 Forward Work Programme

- 9.1 The Committee received a report from Maureen Orr, Democratic Support and Scrutiny Team Manager, that set out the current forward work programme.**
- 9.2 The Committee agreed the forward work programme subject to the following:-**
- 1. District Direct pilot.**
The May 2018 NHOSC Briefing should include an update on the funding situation as well as an evaluation of the pilot.
 - 2. Children's speech and language services.**
A process was required for taking the names and contact details of those who were turned away from over-subscribed drop-in sessions. This process would be suggested to the service providers and commissioners before the Committee meeting on 12 July 2018.
 - 3. Implementation of the suicide prevention action plan.**
On the understanding that both the Communities Committee and the Health and Wellbeing Board had suicide prevention on their agenda (and due to NHOSC's wider scrutiny of the NSFT) it was agreed that NHOSC would raise specific issues with the Communities Committee and Health and Wellbeing Board rather than schedule this subject in the NHOSC forward work programme.
Members were asked to raise any issues that arose from information contained in the April NHOSC Briefing with Maureen Orr.
 - 4. Older People's Emergency Department (OPED), Norfolk and Norwich hospital.**

It was agreed to take up the hospital's invitation for Members to re-visit the OPED when renovation work was complete.

Chairman

The meeting concluded at 1 pm



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