Norfolk County Council

NORFOLK HEALTH OVERVIEW AND SCRUTINY COMMITTEE
Minutes of the meeting held at County Hall
on 8th September 2022

Members Present:

Cllr Alison Thomas (Chair)	Norfolk County Council
Cllr Julie Brociek-Coulton	Norwich City Council
Cllr Daniel Candon (Vice Chair)	Great Yarmouth Borough Council
Cllr Penny Carpenter	Norfolk County Council
Cllr Barry Duffin	Norfolk County Council
Cllr Alexandra Kemp	Borough Council of King's Lynn and West Norfolk
Cllr Julian Kirk	Norfolk County Council
Cllr Robert Kybird	Breckland District Council
Cllr Nigel Legg	South Norfolk District Council
Cllr Richard Price	Norfolk County Council
Cllr Sue Prutton	Broadland District Council
Cllr Robert Savage	Norfolk County Council
Cllr Lucy Shires	Norfolk County Council
Co-opted Member (non voting):	
Cllr Edward Back	Suffolk Health Scrutiny Committee
Cllr Keith Robinson	Suffolk Health Scrutiny Committee

Substitute Members Present
Cllr Emma Corlett substituting for Cllr Brenda Jones
Cllr Victoria Holliday substituting for Cllr Emma Spagnola

Also Present:

Kathryn Ellis (item 7)	Director of Strategy & Partnership – Norfolk & Suffolk NHS Foundation Trust
Diane Hull (item 7)	Chief nurse – Norfolk & Suffolk NHS Foundation Trust
Cath Byford (item 7)	Deputy Chief Executive Officer and Chief People Officer – Norfolk & Suffolk NHS Foundation Trust
Tricia D'Orsi (all items)	Director of Nursing – Norfolk & Waveney Integrated Care Board
Rebecca Hulme (all items)	Associate Director for Children, Young People and Maternity Services - Norfolk & Waveney Integrated Care Board

Online:

Emma Willey (item 7)	Head of Mental Health - Norfolk & Waveney Integrated Care Board
Heather Roach (item6)	Independent Chair - Norfolk Adult Safeguarding Board

Officers:

Jonathan Hall	Committee Officer
Peter Randall	Democratic Support and Scrutiny Manager

1 Apologies for Absence

1.1 Apologies for absence were received from Cllr Brenda Jones (substitute Cllr Emma Corlett) and Cllr Emma Spagnola (substitute Cllr Victoria Holliday).

2. Minutes

2.1 The minutes of the previous meetings held on 14 July 2022 were agreed as an accurate record of the meetings and signed by the Chair.

3. Declarations of Interest

3.1 The following declarations were made:
Item 6
Cllr Penny Carpenter advised she was a member of the Norfolk Adults Safeguarding Board.
Item 7
Cllr Lucy Shires advised you she a member for the campaign for Mental Services in North Norfolk.
Cllr Emma Corlett advised she was a founder member of the Campaign to Save to Mental Health Services in Suffolk and Norfolk.
Cllr Daniel Candon advised as part of his employment he attends meetings with the minister and other MPs.

4. Urgent Business

4.1 There were no items of urgent business.

5. Chair's Announcements

5.1 The Chair had no announcements.

6 Health and care for adults with learning disabilities / autism: Cawston Park Hospital Safeguarding Adults Review (SAR) – progress update

6.1 The Committee received evidence in person from Heather Roach, the Independent Chair of the Norfolk Safeguarding Adults Board (NSAB) and Tricia D'Orsi, Director of Nursing, Norfolk & Waveney Integrated Care Board

6.2 The Committee received a presentation from Heather Roach, the Independent Chair of the Norfolk Safeguarding Adults Board (NSAB), which highlighted the progress made implementing the recommendations of the review that was published by NSAB in September 2021 following the deaths of Joanna, Jon and Ben, who were patients of Cawston Park, with learning disabilities and/or autism.

6.3 The Chair thanked Heather Roach for her presentation and during the ensuing discussion the following points were noted:

- The progress made in implementing the recommendations was widely accepted by the committee as being very good.
- It was noted that all patients removed from the hospital following the review had experienced good outcomes in their new environments with one success story highlighted of an individual moving into a self-contained flat and engaging in community activities.
- A number of providers looking to set up facilities and provide a service within the sector had been refused as a result of more robust due diligence taking place following the review.

- Difficulties had been experienced in recruiting a coordinator for the Coalition for Change group although progress in that regard was now being made.
- There was a need to ensure the coordination of the work being undertaken was maintained correctly as several stakeholders including the ICB were involved. It was felt this responsibility did not necessarily sit with NSAB but needed careful consideration to ensure all stakeholders within the sector implement the correct changes.
- Reassurances were provided that the measures and safeguards in place currently ensured that the possibility of such an event as Cawston Park Hospital happening again were significantly reduced, although there was a strong desire not to be complacent.
- Tricia D'Orsi confirmed that the recommendations from the review are a priority for the ICB and herself personally. Tricia acknowledged that the capacity for mental health services was a significant challenge particularly with regard to ensuring providers could meet the require standards. Tricia acknowledged that the situation was dire in terms of capacity in health and social care and work was underway to support the flow of patients through the system to make sure people were getting the right support at the right time. Work was also underway with acute hospital trusts and other system partners looking at how to facilitate more timely discharge into the community.
- Following on from the focus on racism at the SAR summit, Tricia D'Orsi acknowledged that racism is an issue throughout health and social care and that there was a need for a collaborative system-wide response to racism.
- Recruitment to roles to increase capacity and ensure a quicker diagnostic pathway were being addressed, but the current situation was challenging. This was against a backdrop of increased demand, especially since the pandemic. Recognised the need for more to be done in regard for the recognition, treatment and care of patients with co-morbidities and the need for a greater focus on physical health needs of people with mental health issues or physical disabilities.
- Discharge to appropriate housing for patients was vital to ensuring hospital stays were reduced and work with the districts councils and others was underway to look at the current housing stock and the issues of supply to a mixed model of housing requirements.
- Tricia D'Orsi also committed to investigating how additional support can be provided for relatives if they feel their concerns regarding a patient's physical health are not being addressed.
- The system currently had 13 adult patients and 2 child patients in a residential setting and robust weekly reviews of care plans were taking place to ensure that discharge into a community placement can happen in a timely fashion.

6.4 The Chair concluded the discussion:

- Thanking Heather Roach for all the hard work of the NSAB to oversee the implementation of the required changes.
- The chair further commented that she was pleased to note that the CQC were robustly applying their support care and culture guidelines and that new providers were being refused permissions to open new private facilities if these could not be met.
- Underlying health conditions were now being correctly identified and treated in addition to a patient's mental health needs.
- Cawston Park Hospital failed to provide care or assessment for patients and that this absence of provision will not be tolerated again in the future.
- Specialist Housing provision provided by district councils was a vital part of the transition for patients and that members of the committee should use their

influence where possible to ensure that a better mix of housing stock was provided.
- The Chair suggested that an update on the item was provided within the December HOSC briefing.

The committee undertook a comfort break and reconvened at 11.10am

7 Examination of the Norfolk & Suffolk NHS Foundation Trust (NSFT) improvement plan following the Care Quality Commission inspection from November – December 2021

7.1 The Chair expressed her disappointment that the papers for the agenda item arrived from NSFT after the legal publication date and as a result a supplementary agenda had to be issued. This had meant that the Chair was unable to review the papers before they were issued and any inaccuracies or omissions would not have been spotted, for which she apologised. The Chair further expressed disappointment in the quality of the papers, with little of the requested information being provided in enough detail to allow for meaningful scrutiny to take place.

7.2 Cath Byford, Deputy Chief Executive NSFT apologised for the lateness of the report and committed to installing a process which she had undertaken in her previous role within the local CCG to ensure the position does not arise again. Cath also advised that Stuart Richardson had been called to an urgent meeting in London of all NHS Chief Executives in the country and he sent his apologises.

7.3 The Committee received the annexed report (7) from Dr Liz Chandler, Scrutiny & Research Officer, which provided an update on the NSFT's improvement plan following the inadequate rating from the CQC inspection that took place in late 2021.

7.4 The Committee received evidence in person from representatives of Norfolk & Suffolk NHS Foundation Trust: Cath Byford, Deputy Chief Executive Officer and Chief People Officer, Kathryn Ellis, Director of Strategy & Partnership and Diane Hull, Chief Nurse. Norfolk & Waveney Integrated Care Board (ICB); Tricia D'Orsi, Director of Nursing, and Emma Willey Head of Mental Health.

7.5 Cath Byford, NSFT Deputy Chief Executive Chief People Officer advised that the Trust had made significant progress and that changes implemented had been designed to ensure these were embedded and sustainable. However, there was still work to do and the Trust needed to work on gaining and building trust amongst service users and the wider community.

7.6 The reports submitted were taken as read and during the ensuing discussion the following points were noted:

- There was a national shortage of consultant psychiatrists and recruitment was an issue. However Alex Lewis the Trust's Medical Director was treating recruitment as a priority to ensure services and treatment could be improved and enhanced and waiting lists reduced.
- The issues at Northgate Hospital were acknowledged as disappointing and the CQC report had identified poor leadership as an issue. Improvements had included a change in leadership, bringing in an experienced senior nurse from another Trust as well as changing policies on training and improving quality safety reviews of patients' care plans. There has also been an external review of observation processes which the CQC requested immediate action and have subsequently been assured with progress.

- Changes following the CQC report were happening at pace and were being embedded within processes and training to ensure these are sustainable.
- Cath Byford, Deputy Chief Executive and Chief People Officer committed to providing data and timely information to the committee and reiterated her early apologies. It was agreed that future reports need to concentrate on how changes are making a difference and what will happen next to improve services further.
- The improvement plan was tackled on three levels. The first was the 'must do's' the CQC asked the Trust to address immediately relating to quality and safety. Root cause issues which prevented sustained improvement were also being addressed within the Trust and other partners. A key part of the plan to ensure that changes were sustainable was to acknowledge how staff, service users and carers were feeling. As an example an evidence group had been created at Queen Elizabeth Hospital in King's Lynn to provide independent check and challenge on how services were received, and this provided evidence that changes were having an effect.
- Numerous changes had taken place within Dragonfly Ward in Lowestoft to improve safety including extensive training and webinars, in addition 120 safety reviews had been undertaken since December 2021. A new consultant psychiatrist had been recruited as well as other team members. The ward had been moved into the Suffolk Children's and Young People's Care Group where there is greater experience and knowledge to provide more resilience and robustness.
- Emma Willey, Head of Mental Health for Norfolk and Waveney ICB advised that NSFT were now more proactive in providing information with regards to business continuity measures, and that at the next Board meeting the Trust will speak about the challenger they face with staff culture issues, including the issues around racism.
- It was acknowledged that the report lacked detail in a number of areas, especially context with data provided around the reported recruitment of 750 new staff.
- The report advised 20% of the Section 29a 'must dos' have not been completed. The 20% related to mandatory training, waiting lists and recording of care plans for service users. Each outstanding area had a clear plan which was being implemented to ensure the 20% was completed in a timely manner.
- The Trust is having issues retaining staff as 41% of new staff leave within two years of starting.
- The balance of recruiting the right leadership staff and clinical staff had been difficult for the Trust and this had exacerbated the void that had appeared for the leadership to support the frontline staff in their day to day activities. It was acknowledged the culture at NSFT had to change and this was being addressed by the Board.
- Both Norfolk and Suffolk ICBs had agreed to an independent review of the mortality data. The number of deaths was known although there was some confusion as to how this data had been collected and recorded. The findings of the review would it is hoped will end the confusion. Members asked whether bereaved families would be included in the discussions around mortality numbers. The trust agreed to explore this.

7.7 The Chair concluded the discussion and thanked all from NSFT for their input.

- It was acknowledged that scrutiny of the item had been difficult as the report did not really provide the detail required.
- It was agreed that NSFT would return to the committee in November 2022 and that a precise list of questions would be provided prior to ensure detailed answers could be provided.

- The Chair advised, with the agreement of the committee, that she would write to the new Secretary of State for Health and express concerns that the committee faced today and that further scrutiny will take place in November 2022.

8 Forward Work Programme

8.1 The Committee received a report from Peter Randall, Democratic Support and Scrutiny Manager which set out the current forward work programme and briefing details that were agreed subject to the following additions:

Meetings
November 2022

- NHS dentistry services – (Access for patients and award of new NHS contracts). The response letter from the Health Secretary in respect of NHS dentistry in Norfolk would be circulated with the papers.

Date TBC

- System approach to hospital discharge
  To review the patient journey from arrival by ambulance at A&E through to discharge into social care placements. To include mental health patients. Duncan Baker MP to be invited to meeting as he served with EEAST during summer recess.

Alison Thomas Chair
Health and Overview Scrutiny Committee

The meeting ended at 12.23pm