



Confirmed

Minutes of the Great Yarmouth and Waveney Joint Health Scrutiny Committee Meeting held on 25 October 2019 at 10:30 am in the Thomas Crisp Room, Riverside Campus, Lowestoft.

Present: Councillors Stephen Burroughes (Chairman, Suffolk County Council), Nigel Legg (Vice Chairman, South Norfolk District Council), Emma Flaxman-Taylor (Great Yarmouth Borough Council), Judy Cloke (East Suffolk Council), Richard Price (Norfolk County Council) and Keith Robinson (Suffolk County Council).

Also present: Councillor James Reeder and Andy Yacoub (Chief Executive, Healthwatch Suffolk).

Supporting officers present: Rebekah Butcher (Democratic Services Officer) and Theresa Harden (Business Manager, Democratic Services).

10. Public Participation Session

There were no requests to speak in the public participation session.

11. Apologies for Absence and Substitutions

There were no apologies for absence.

12. Declarations of Interest and Dispensations

Councillor Emma Flaxman-Taylor declared a non-pecuniary interest by virtue of the fact she was an appointed governor at the James Paget University Hospital.

13. Minutes of the Previous Meeting

The minutes of the meeting held on 12 July 2019 were confirmed as a correct record and signed by the Chairman.

14. Norfolk and Waveney Health and Care Partnership Five-Year Plan

At agenda item 5, the Joint Committee received a presentation from Jocelyn Pike, Director of Special Projects, NHS Norfolk and Waveney CCGs.

The Chairman welcomed Jocelyn Pike and Kathryn Ellis (Locality Director, Great Yarmouth and Waveney CCG) to the meeting.

Recommendation: The Joint Committee agreed:

- a) to commend the work which had taken place to develop the Draft Five-Year Plan;

- b) to highlight the importance of culture change and ongoing engagement with the front-line as a key factor in ensuring the Plan would be deliverable and sustainable;
- c) to request that early dialogue should take place with the relevant health scrutiny body on any potential substantial variations or developments in service emerging from the Plan;
- d) to request information bulletins setting out:
 - i) examples of how assistive technology could be useful to help people experiencing early onset dementia;
 - ii) how the additional funding for diagnostics and mental health facilities will be used.
- e) to request further information about how the Five-Year Plan will be delivered and measured for a future meeting; and
- f) to consider whether the Joint Committee should scrutinise the use of technology in supporting health and care integration (including what are the barriers and how might these be overcome), or whether this should be a matter for the “home” Health Scrutiny Committees.

Reason for recommendation:

- a) Members heard that a significant amount of work had been undertaken with patients and other key stakeholders about their care in order to form the Plan, with Healthwatch Norfolk undertaking two surveys on the behalf of the CCGs as well as six workshops being held across the patch in Spring 2019 and Healthwatch Suffolk being a key stakeholder on the group overseeing the Plan. There had also been engagement with the staff and clinicians, with the Plan being discussed in various forums and meetings.
- b) The Joint Committee heard that there were issues with recruitment and retention of staff across the Norfolk and Waveney area, although it was stated that this was a situation not uncommon nationally across the NHS. Members heard that the Plan included more collaboration, working together with health care professionals and hospitals, utilising the different skill sets of staff and technology. Members noted the importance of ensuring front line staff were fully engaged in these developments. In addition, new ways of working were presently being tested with locality groups such as health teams sitting at practice level. Workforce mental health and wellbeing was being monitored throughout the trial which would continue over the next 12-months. It was hoped this would be rolled out to all primary care networks in due course. Members were also aware that neurology departments were working closer together, but there were no plans to have these departments merged. It was stated that a culture change needed to take place with members of the public on how NHS services were accessed in the future. Members noted that often emergency service access was good, however there were often a long waiting periods for elective care which the CCGs accepted the need for it to be improved. The Joint Committee was informed that staff and services were under unprecedented pressure and it was hoped the new model would better manage patient care in the future.

- c) The Joint Committee were informed that the draft Plan could not be circulated at the present time in order to restrict the number of draft documents in the public domain. Members heard that the Plan had been developed with good public engagement and shared the CCGs disappointment that it could not yet review the Plan, however the Joint Committee understood that NHS England was planning to release all plans nationwide in one go. The Joint Committee wished to offer its support and advice as a critical friend to the CCGs and to be engaged at an early stage on any plans for substantial variations or developments which might emerge.
- d) The Joint Committee:
 - i) wished to further understand the different types of technology available to assist patients with dementia to overcome forgetfulness.
 - ii) was aware that the CCGs were investing £70m to build three new Diagnostic and Assessment Centres to speed up diagnosis of cancer and other diseases, one being at the James Paget University Hospital early in 2020, as well as £40m to update and modernise mental health inpatient facilities, and wished to further understand what this would involve.
- e) The Joint Committee was interested in being kept up to date with the implementation of the Five-Year Plan and hoped to review the plan in 6-months' time.
- f) The Joint Committee heard that there were many digital systems in use across the Norfolk and Waveney area, and a lot of the technology was out of date. Members were informed that a lot of work had been done at locality level around aligning services with GP and community services and this was impacting positively. It was also possible for clinicians to view records and to share information, however it was recognised that there was still a lot to do. Members heard that there was a desire to have a single assessment form which clinicians could complete electronically, saving staff time and reducing the various templates and forms currently completed throughout a patient's care. Members were also aware of the CCGs desire to have a single digital care record for patients that all parts of the system particularly frontline health and care professionals, particularly when caring for someone in crisis, could access. The desire to have digital systems that talked to each other would also greatly benefit patients enabling them to manage their own health, in particular those people with long-term conditions and booking appointments via applications and online support, with training available, whilst still providing more traditional means for patients to access NHS services.

Alternative options: There were none considered.

Declarations of interest: Councillor Emma Flaxman-Taylor declared a non-pecuniary interest by virtue of the fact she was an appointed governor at the James Paget University Hospital.

Dispensations: There were none granted.

15. Primary Care Services in Great Yarmouth and Waveney

At agenda item 6, the Joint Committee received a report from the Senior Democratic Services Officer, examining the developments in the organisation and provision of primary care services across the CCG area and outcomes achieved to date. This included a focus on minor injury and x-ray, which have previously been available locally, and an examination of phlebotomy services.

Tabled at the meeting was some patient feedback received on the Beccles Medical Centre's new website and booking system, as well as some further information on phlebotomy services.

Recommendation: The Joint Committee agreed:

- a) to recommend that Clinical Commissioning Groups should make every effort to respond to planning consultations on housing developments as a priority and that work should take place to ensure appropriate processes are in place for this;
- b) to request a further update report on the development of Primary Care Networks including the performance of phlebotomy services, for its meeting in April 2020;
- c) to request a regular information bulletin setting out the STP Key Performance Indicators for the Great Yarmouth and Waveney area; and
- d) to encourage monitoring of the on-line appointment booking service, in order to understand how these are working and whether this is having an impact on missed appointments.

Reason for recommendation:

- a) Members heard that the CCG wished to build on relationships with the local district council's when new major housing developments were being built to ensure the appropriate planning could take place in regard to future demand for primary care services. Members were aware that local GP practices were included as statutory consultees to planning applications on East Suffolk Council where relevant, however it was pointed out that the responses were sometimes not as qualified as they could be. It was noted that in the Great Yarmouth area there was often no response from the CCG to planning applications. Members wished to see a more consistent approach in responding to future housing development consultations, considering whether the healthcare provision could cope with an expanded population, in order to give more resilience and robustness to the decision-making process. The CCG recognised its role in engaging with the local authorities and noted there was an opportunity to connect with the conversation in a more consistent way.
- b) Members considered it would be helpful to receive a further update on the development of Primary Care Networks. The Joint Committee also had concerns as to whether patients fully understood the arrangements for accessing phlebotomy services and wished to receive a further update on performance.
- c) The Joint Committee had received a report at page 64 detailing acute service performance across Norfolk and Waveney STP. Members learned that information similar to this could be obtained and that the data could be broken down by Locality. Members considered it would be useful to receive

this data in the form of a regular information update for the Great Yarmouth and Waveney area only.

- d) Members were aware that frequent patient feedback was received in relation to managing appointments. Members were informed that a lot of work was being undertaken to support GP practices in making the most of the new technology and to provide a level of consistency amongst all practices. The Joint Committee was aware that this work was in the very early stages having only gone live in the past few weeks. The CCG recognised the importance of working closely with the practices to further understand the scenarios in which a patient would make use of the new systems. It was hoped there would be an increase in online bookings in the future. National figures confirmed that patients were more likely to keep an appointment if self-service online booking was available.

Alternative options: There were none considered.

Declarations of interest: Councillor Emma Flaxman-Taylor declared a non-pecuniary interest by virtue of the fact she was an appointed governor at the James Paget University Hospital.

Dispensations: There were none granted.

16. Information Bulletin

The Joint Committee noted the information bulletin at agenda item 7.

17. Forward Work Programme

The Joint Committee received a copy of its Forward Work Programme at agenda item 8.

Decision: The Joint Committee agreed its Forward Work Programme with the inclusion of the following items:

- a) that a suggested topic of health checks for people with learning disabilities should be referred to the Suffolk Health Scrutiny Committee for a potential countywide review, as this was something the Norfolk Health Overview and Scrutiny Committee had already looked at in some detail.
- b) that Norfolk Health Overview and Scrutiny Committee may find it helpful to receive the Sustainability and Transformation Partnership (STP) Key Performance Indicators, possibly as part of the Member's Briefing;
- c) that the next meeting on 7 February 2020 should focus on mental health service provision in Great Yarmouth and Waveney, since the launch of the Mental Health Strategy, with a particular focus on Child and Adolescent Mental Health Services (CAMHS), early intervention and the work of the Mental Health Crisis Team.

Reason for decision: The Joint Committee regularly reviewed items appearing on the Forward Plan and was required to suggest topics to scrutinise at future meetings.

The meeting closed at 12:59 pm.

Chairman

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