

**NORFOLK HEALTH OVERVIEW AND SCRUTINY COMMITTEE
MINUTES OF THE MEETING HELD AT COUNTY HALL, NORWICH
On 8 December 2016**

Present:

Mr R Bearman	Norfolk County Council
Mr M Carttiss (Chairman)	Norfolk County Council
Mrs J Chamberlin	Norfolk County Council
Michael Chenery of Horsbrugh	Norfolk County Council
Ms E Corlett	Norfolk County Council
Mr D Harrison	Norfolk County Council
Mrs L Hemsall	Broadland District Council
Dr N Legg	South Norfolk District Council
Dr K Maguire	Norwich City Council
Mrs M Stone	Norfolk County Council
Mr G Williams	North Norfolk District Council
Mrs S Young	King's Lynn and West Norfolk Borough Council

Also Present:

Michael Ladd	Member of Suffolk Health Scrutiny Committee
Bert Poole	Member of Suffolk Health Scrutiny Committee
Wendy Thomson	Managing Director of Norfolk County Council and the Lead for the N&W STP
Roisin Fallon-Williams	Chief Executive, Norfolk Community Health and Care NHS Trust
Oli Matthews	Head of Strategy and Business Development, Norfolk and Suffolk Foundation Trust
Jan McLachlan	NHS Norfolk Action Group
Heather Edmondson	NHS Norfolk Action Group
Susan Bourne	NHS Norfolk Action Group
Chris Walton	Head of Democratic Services
Maureen Orr	Democratic Support and Scrutiny Team Manager
Tim Shaw	Committee Officer

1 Apologies for Absence

Apologies for absence were received from Mr C Aldred, Mrs S Weymouth and Mr P Wilkinson.

2. Minutes

The minutes of the previous meeting held on 13 October 2016 were confirmed by the Committee and signed by the Chairman.

3. Declaration of Interest

3.1 There were no declarations of interest.

4. Urgent Business

There were no items of urgent business.

5. Chairman's Announcements

5.1 Film recording of the meeting

The Chairman pointed out that a member of the public would be taking a film recording of today's proceedings. This met with the Council's protocol on the use of media equipment at meetings held in public.

5.2 Welcome to Mr Glyn Williams, North Norfolk District Council member of NHOSC

The Chairman welcomed to the meeting Mr Glyn Williams who was attending his first meeting as the North Norfolk District Council member of the Norfolk Health Overview and Scrutiny Committee.

5.3 Welcome to Mr Michael Ladd and Mr Bert Poole from Suffolk Health Scrutiny Committee

The Chairman welcomed to the meeting Mr Michael Ladd, who represented the Kessingland and Southwold division on Suffolk County Council and was the Chairman of Suffolk Health Scrutiny Committee and Mr Bert Poole who represented the Oulton division on Suffolk County Council and was a member of the Suffolk Health Scrutiny Committee.

The Committee was informed that Mr Michael Ladd and Mr Bert Poole (together with Mrs Alison Cackett, the Waveney District Council Member of Suffolk Health Scrutiny Committee who had given her apologies) were invited to attend today's meeting to ask questions and make comments during the Norfolk and Waveney Sustainability & Transformation Plan (STP) item.

The Chairman added that the input of Mr Ladd and Mr Poole would be taken into account in any formal comments or recommendations that Norfolk Health Overview and Scrutiny Committee might wish to make to the STP Executive Board at this stage in the process. The Suffolk Councillors were not joining with the Committee in the formal sense of establishing a joint health scrutiny committee and they did not have voting rights at this meeting. That was not felt to be necessary at this stage because the STP was still a high level strategic plan and there were no specific proposals for substantial changes on the ground as yet.

6 Norfolk and Waveney Sustainability and Transformation Plan

6.1 The Committee received a suggested approach by Maureen Orr, Democratic Support and Scrutiny Team Manager, to the Norfolk and Waveney Sustainability and Transformation Plan (STP) which was being jointly developed by all the health and social care organisations in the area.

- 6.2 The Committee received a detailed presentation about the Sustainability and Transformation Plan (STP) for Norfolk and Waveney, which was submitted to NHS England in October 2016 (note: the STP timetable is listed in these minutes), along with a summary document “In Good Health - our proposals for changing health and social care in Norfolk and Waveney why health and social care services in Norfolk and Waveney needed to change”, from Dr Wendy Thomson, Managing Director of Norfolk County Council and the Lead for the N&W STP. The presentation can be found on the County Council’s committee pages website.
- 6.3 The Committee also received evidence from Mrs Roisin Fallon-Williams, Chief Executive, Norfolk Community Health and Care NHS Trust and Mr Oli Matthews, Head of Strategy and Business Development, Norfolk and Suffolk Foundation Trust.
- 6.4 In addition, the Committee heard from Michael Ladd and Mr Bert Poole, Members of Suffolk Health Scrutiny Committee (who were introduced at the start of the meeting) and three members of the public who, at the discretion of the Chairman, were allowed to make comments and raise questions about the STP.
- 6.5 The following key points were noted:
- The Committee was informed that Sustainability and Transformation Plans (STPs) were being introduced across the country as a delivery mechanism for the NHS Five Year Forward View (5YFV).
 - The purpose of the STP was to provide a focused strategy over five years (up to March 2021) to tackle the fundamental issues facing the local health and care system, resulting in an affordable, high quality service that was effective in meeting the needs of the local population into the future.
 - The Norfolk and Waveney geographic ‘footprint’ was covered by a single STP, with the rationale being that it was important for the “footprint” to reflect the geography of the county of Norfolk as well as that of the Great Yarmouth and Waveney CCG area.
 - Of the country’s 44 STPs, only four (including that for the Norfolk and Waveney area) were led at Local Government level.
 - The County Council was represented on the STP Executive Board by the Managing Director (who was the nominated lead for the Norfolk and Waveney STP), the Director of Public Health and the Acting Executive Director of Adult Social Services.
 - Reference was made during the meeting to the fact that an integrated health and adult social care manager was a member of Norfolk Community Health and Care NHS Trust’s Board. Members asked for consideration to be given to the suggestion that an integrated health and children’s social care manager should also be included on the Norfolk Community Health and Care NHS Trust’s Board.
 - In reply to questions it was pointed out that the STP had not originally been written with the intention of it becoming a public document.
 - A public report about the STP had, however, been presented to the County Council at its meeting on 17 October 2016.
 - The County Council had endorsed the overall strategic direction of the Norfolk and Waveney STP and the key areas for change for submission to NHS England by the 21 October 2016 deadline and had supported the ongoing work with partners in moving to the next stages of detailed planning.
 - The STP timetable was:
 - June 30 2016 – initial submission to NHS England
 - August 15 – KPMG engaged
 - October 7 – Publication of “In Good Health” and June submission

- October 17 to 21 – Council, all Trust Boards, HWB and CCG Governing Body meetings
 - October 21 – Submission to NHS England
 - November to December – Wider engagement and detailed planning
 - November 24 – Submission of full draft 2017/18 to 2018/19 Operating Plans
 - December 23 2016 – Submission of final 2017/18 to 2018/19 Operating Plans and signed contracts
- It was pointed out that the Norfolk and Waveney STP documents could be found on the Healthwatch Norfolk website.
- Comments about how the STP should be developed and what might be included in it could be left on the Healthwatch Norfolk website until 22 January 2016.
- The public were also encouraged to make comments about the STP to their local County and District Councilors.
- Members were able to make detailed comments to Maureen Orr, Democratic Support and Scrutiny Team Manager.
- Local stakeholder meetings about the STP were being planned across the Norfolk and Waveney area and details would be posted on the Healthwatch website when they became available.
- Dr Wendy Thomson and Mrs Roisin Fallon-Williams outlined how health and social care partners in Norfolk and Waveney (including the Chief Executives of the Borough, City and District Councils) were defining the issues included in the STP, and the approaches that were being developed to tackle them.
- The Committee was informed that the STP would be a major strategic initiative that provided the “blueprint” for the development of services, but care was being taken to ensure that it developed alongside and enhanced the delivery of existing strategies (the Health and Wellbeing Strategy was one such example).
- In reply to questions, the speakers spoke about how the STP would not only build on the Health and Wellbeing strategies in Norfolk and Waveney but would also provide the basis for a focused approach to targeted health and social care interventions where they were considered to be most effective (for example, in providing a long term approach to issues of child obesity and support for children attending school with special educational needs; issues which Mr Ladd and Mr Poole regarded to be of the highest importance).
- It was suggested by Members of the Committee that the STP should be developed alongside other Central and Local Government and NHS strategies (such as the Government’s plans for 7 day working in all sectors of the NHS and the operating plans of the NHS which were not directly a part of the STP).
- Breaking down barriers in the provision of care was seen by Members as fundamental to success, particularly between GPs and hospitals, physical and mental health and between health and social care.
- The co-location of health and social care staff in the west of the county was another example of the cooperation between health and social care that was currently being addressed.
- The financial position was such that the health and social care system could not be sustained without a significant shift to more efficient ways of delivering services.
- It was pointed out by the speakers that there would not be enough professional medical and care staff to meet the rising demand through the traditional services provided now, and the gap between the money available and the cost of providing NHS and social care in Norfolk and Waveney would

rise to just over £415m in five years' time unless something was done now to balance the 'whole system'.

- It was pointed out that NHS England was seeking bids to enable common elements of the STPs to proceed throughout the country.
- It was suggested by Members that in addition to looking to design the whole system approach around the amount of money that was available emphasis should be placed on the importance of lobbying Government at the political level for additional resources to fill funding gaps.
- Lobbying Government for legislative changes to support health and social care policies was also considered important, for example so that changes could be made in the trading practices of supermarkets that lead to improvements in lifestyle choices.
- It was suggested by Members that it might take significantly longer than the 5 year timescale of the STP before the fundamental changes that the STP intended to bring about were viewed by the public as a success or a failure.
- There were questions around how acute services would be able to continue to meet demand before the real improvements to the public's health materialised. There would for example be a time lag between investing in public health and actually improving health to the extent of being able to cut demand for acute beds by 35%.
- The speakers spoke about how primary care and community services (both health and social care) had little or no capacity as currently provided to meet expanding levels of demand.
- Demand, based on the health needs of the population, would grow significantly without intervention, with the population of over-85s forecast to rise significantly between now and 2021.
- Demographic factors drove demand for services for people with learning disabilities and physical disabilities and demand for these services, which involved complex care packages, was rising.
- The result was a health and care system that faced serious challenges in providing the best and most effective care to the population unless the situation was addressed as a "whole system" approach where both health and social care acted together.
- Across the "whole system" there were workforce challenges such as overall shortages of some specialist skills, difficulties in recruiting or retaining staff in some parts of the county, as well as fundamental challenges that arose from having to find new ways to tackle diabetes, reduce admissions to A and E and provide health and social care support in the home environment.
- It was pointed out that different commissioners and providers of services were currently working to different sets of standards and care protocols.
- Members asked to be provided with the details of where the public could find the Norfolk and Waveney CCGs' single set of commissioning intentions.
- It was pointed out that joint commissioning was not being considered at this stage in the STP process but could be considered for the future.
- In the meantime the STP would help provide a mechanism for new forms of working that mean staff in both organisations worked together closer than they had before.
- In order to make improvements in ICT shared services, a senior officer lead for the ICT elements of the STP was considered to be important.
- There was a recognition that people with mental health problems did not have access to health services on a parity with the population as a whole, resulting in significantly shorter life expectancy, and often inappropriate treatment. It was intended that, by integrating mental health services with other services, these inequalities would be addressed.

- Members said that providing greater public access to therapies that tackled mental health issues should be addressed as a strategic issue.
- It was pointed out that the STP aimed to support cultural/ social changes in society in relation to issues such as smoking and choice of food and drink and the need for exercise. The STP also recognised the importance of public open spaces in urban areas and the work of the Borough, District and City Councils.
- The speakers agreed that the reference in the STP to resilience training for staff should be carefully reworded so that it related to specific areas of staff retraining and was not seen as referring to the whole workforce.
- It was agreed that Mrs Lana Hempsall should be provided with information on progress with provision of housing with care on a site in Acle.
- It was pointed out that the impact of the STP on third sector organisations should not be lost.
- Heather Edmondson, a member of the public, spoke about how she considered five CCGs for Norfolk and Waveney to be wasteful and how money could be saved by having one commissioner for health services. She was concerned about the lack of focus on mental health in the plans to date. She considered it essential that safe crisis services were there across the county. She said that money saved from reducing CCGs could be used to fund the mind out-of-hours crisis line, and extend it to the whole of Norfolk and Waveney which saved money from 999 services and A&E.
- Susan Bourne, a member of the public and retired GP, spoke about the importance of maintaining good relations with NHS and social care staff.
- Jan McLacklan, a member of the public, spoke about the importance of maintaining good staff relations throughout health and social care and about not seeking answers by the privatisation of NHS services.
- In reply, the speakers said that they fully understood the importance of maintaining good staff relations and welcomed comments from anyone on how the STP could be improved. The STP included no mention of the privatisation of NHS services and there were no plans in that direction.
- The Chairman said that any specific proposals for substantial changes to health services that might emerge at a later date would be subject to consultation with health scrutiny in the usual way. Depending on the 'footprint' of the proposed change, they would be dealt with by Norfolk HOSC, Suffolk HSC or Great Yarmouth and Waveney HSC.

6.4 The Committee noted the information contained in the STP and that provided by the speakers during the meeting.

6.5 It was agreed that a report based on the comments made in today's meeting would be produced and circulated to NHOSC Members prior to submission to the STP Executive Board.

7. Forward Work Programme

7.1 The Committee received a report from Maureen Orr, Democratic Support and Scrutiny Team Manager, that set out a proposed forward work programme for the remainder of 2016/17.

7.2 The forward work programme was agreed with the addition of an update on the Department of Health's progress with the new Primary Care Education and Training Tariff to be included in the NHOSC Briefing in October 2017 (i.e. approximately a year after Members' informal meeting with Mr I Newton from the DoH).

- 7.3 Mr Kevin Maguire had further questions he wished to raise with Norfolk and Suffolk NHS Foundation Trust (NSFT) to seek clarification on the responses it provided in its letter of 28 October 2016 in response to questions raised following NHOSC on 8 September 2016. It was agreed that Mr Maguire and Ms Emma Corlett would provide more context on why it was important that further questions were raised with the NSFT.
- 7.4 It was also agreed that the additional questions to the NSFT would be circulated to NHOSC members before they were sent to the Trust.

Chairman

The meeting concluded at 13:10 pm



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