

STAFFORDSHIRE MOORLANDS DISTRICT COUNCIL

HEALTH OVERVIEW & SCRUTINY PANEL MEETING

Minutes

WEDNESDAY, 12 FEBRUARY 2020

PRESENT: Councillor B A Hughes (Chair)

Councillors R Alcock, C J S Atkins, B Cawley, E Fallows, K Flunder, I Herdman, T Holmes, A Hulme, J T Jones, I Lawson, L A Malyon, T McNicol, D Price, T Riley, J Salt, L Swindlehurst and P Wood

IN ATTENDANCE: I Whitehouse

G Bentley

M A Deaville

Deputy Leader & Portfolio Holder for Leisure and Sports

K J Jackson

I Plant

H Sheldon MBE

L D Lea

P Routledge

APOLOGIES: Councillors Bowen and Ralphs

68 **NOTIFICATION OF SUBSTITUTE MEMBERS, IF ANY.**

There were none.

69 **TO APPROVE THE MINUTES OF THE PREVIOUS MEETING.**

DECIDED: That the minutes from the meeting held on 13th November 2019 be **APPROVED** as a correct record and signed by the Chair.

70 **MINUTES OF THE LAST MEETING OF THE HEALTHY STAFFORDSHIRE SELECT COMMITTEE.**

DECIDED: That the minutes of the meeting of the Healthy Staffordshire Select Committee held on 28th October 2019 be **NOTED**.

71 **URGENT ITEMS OF BUSINESS, IF ANY. (24 HOURS NOTICE TO BE PROVIDED TO THE CHAIRMAN).**

There were no urgent items of business.

72 **DECLARATION OF INTERESTS:**

Agenda No.	Member Declaring Interest	Nature of Interest
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Agenda Item 8 – Midlands Partnership NHS Foundation Trust Annual Update	Cllr P. Wood	Other – Daughter is employed by the Trust.
Agenda Item 10 – West Midlands Ambulance Service (WMAS)	Cllr J. Jones	Disclosable Pecuniary Interest – Employed by WMAS.
None Specific	Cllr T. Riley	Other – Family member is employed by the NHS.

73 QUESTIONS TO PORTFOLIO HOLDERS, IF ANY.

Question from Councillor Cawley:

Q1. I have been contacted by a resident of Leek who has told me about the difficulty local blood donors are having in giving blood.

He has relayed a message to me from the Operations Manager at the Blood Donation Service, who outlines the problems they are having finding a regular venue as the only one currently in use in Leek is at the High School where access is restricted during term time.

I gather that similar problems have been experienced in Biddulph.

As a consequence of this, have any discussions taken place between SMDC and relevant health authorities about alternative venues in the Moorlands, as all too frequently donors have to travel to Etruria to give freely of this life saving substance?

Response:

In Cllrs Ralphs' absence, Cllr Deaville gave the response below:

“The Blood Donation Service used to hire the Churnet Room, but not in the last 5 years. We understand they have also used Brough Park Leisure Centre for a short period of time.

Two years ago, I was approached by several people at, of all places Leek Show, who complained that they were no longer able to donate blood at Moorlands House, and they asked her to investigate. Senior management were consulted and they too didn't know why the Service had suddenly stopped coming.

The Blood Donation Service was contacted and a representative from the organisation came on 21st August 2018. She said that she needed to assess the Churnet Room as it was considered not appropriate for their needs. The representative spent an hour measuring the room and asking questions, and then left promising to get back as soon as possible.

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Since then, as far as we are aware, the Council hasn't been approached by Blood Donation Service for the use of our facilities."

By way of supplementary questions, Councillor Cawley suggested, that Leek Trestle Market would be a potential venue for the Blood Donation Service to hire in the future. Councillor Deaville responded to the effect, that this suggestion would be taken into account by Cabinet and Officers, as part of the current review of this asset.

74 **MIDLANDS PARTNERSHIP NHS FOUNDATION TRUST (MPFT) ANNUAL UPDATE - NEIL CARR, CHIEF EXECUTIVE. (PRESENTATION TO FOLLOW)**

The Panel received a presentation which covered services provided by the MPFT to residents of the Moorlands and details of the progress carried out by the Trust over the past year.

As a foundation trust it had more financial freedom to generate a surplus and reinvest it in local service. Local people could become members and influence what the Trust did. MPFT would use capital to fund three of the integrated care hubs, which included the one in Leek. By the end of this financial year, the organisation should be able to achieve its plan to return a planned surplus of £1.752m.

Results from the staff survey had improved. Over 60% of staff responded in each of the two years, which equated to approximately 5,000 colleagues.

The Trust was proud to have been rated good by the CQC. This included a second visit to the urgent care services. The minor injuries unit in Leek had gone from required improvement to good and end of life care was now also rated as good.

Discussion took place around the numbers of staff who had been transferred to work from Leek Moorlands Hospital to the Bradwell Hospital and the numbers of agency staff employed. The officer advised that these figures could be provided after the meeting. The Panel also discussed the limited provision of adolescent mental health care, the proposal for the hospital Cheadle to become a medical hub, re-habilitation services and the need for community beds.

It was also the opinion of some members that people needed to take more responsibility of their own health. In response to this, the Panel wished to add an item to the work programme – How the Council can empower people to take responsibility of their health and wellbeing.

Members had their concerns in regard to the Home First approach to receive care at home rather than at hospital. It was hoped that additional resources would be provided by the Government to ensure wrap around care for patients was robust.

The Chair thanked Neil Carr for attending the meeting.

DECIDED:

- 1) That the update be received;
- 2) For an item to be added to the Work Programme; How the Council can empower people to take responsibility of their health and wellbeing.

75 **ROYAL STOKE UNIVERSITY HOSPITAL (RSUH), UNIVERSITY HOSPITALS OF NORTH MIDLANDS NHS TRUST (UHNM) ANNUAL UPDATE - TRACY BULLOCK, CHIEF EXECUTIVE. (VERBAL UPDATE)**

Tracy Bullock – Chief Executive Officer, Royal Stoke Hospital, provided a presentation, which covered the following topics:-

- University Hospitals of North Midlands (UHNM) in Numbers
- Services at UHNM
- Chief Executives Perspective
- Challenges
- Achievements

The Panel was advised that the Royal Stoke Hospital was rated in the top ten of the largest hospitals in the county and also had one of the busiest A&E Departments in the country. The wait times for patients was too long, but once admitted, patients received a good level of care. The Hospital had the second best major trauma outcomes in the country but not all services were being delivered at this level. The 4 hour A&E target was not being met, along with the 18 week cancer referral target. Due to this, a Quality Improvement Programme was being introduced. Staffing levels had been increased in the A&E Department and a new Executive Team, with an aspiration to improve performance, had been created.

The Trust was currently seeking approval to come out of financial special measures and expected to reduce the deficit considerably by the end of March 2020. Recruitment was still a challenge and work to mitigate this included, new training programmes with universities.

Members asked questions and commented on the following:-

Stress and workload – To help to understand these issues the CEO regularly spent time in the A&E Department. Wellbeing Programmes, relaxation pods, Employment Support Advisors and Specialist Mental Health Champions were available to staff.

Re-instatement of the 24 hour A&E at Stafford – There were no aspirations at this time to re-instate this service.

Break facilities for Ambulance staff at the Royal Stoke Hospital – This would be looked into.

Long travel distances for patients from the Moorlands to Stafford Hospital – The specific number of patients affected by this were not known. There would always be a need for patients to travel to receive specialist services.

Improvement of the financial position and the impact to patients – The deficit had already reduced, the rate at which this was going to reduce had now accelerated. The Hospital would take a patient centred approach, be run by front line clinicians and there would be a focus around staff ownership. The reduction in costs would not have an impact on services or patients. Theatre productivity would increase, and

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outpatient clinics needed to be filled to capacity. Joint procurement and back office/support functions would be seen.

Brexit and staffing – The extent of the numbers of European staff who had returned home due to this was not at the level expected. The NHS had stopped recruitment from Europe and was now recruiting from further afield. New apprenticeship schemes had been introduced, visits to schools and career fayres had taken place.

Increased admittance to hospital/bed blocking due to reduced number of community beds & how these beds were financed – The RSUH had not seen an increase in admittance of patients from care homes. However, work needed to be done, nursing/care home staff required more support and these jobs should be made more attractive. It was confirmed that the UHNM shared the costs of the beds at the Haywood and Bradwell Hospital with the MPFT last winter, but this wouldn't be the case this year.

Coronavirus – The Hospital received guidance from Public Health England, emergency procedures and a plan was in place.

Discussion also took place around the fire in the new building, children's hospital status, staff retention, provision of mental health assessment rooms within A&E and family accommodation. A member of the Panel thought that the appointment system and transfer of patients between wards required improvement.

Following the fire in one of the hospital buildings, Members were assured that appropriate measures had now been put in place.

Members complimented the front line staff for their excellent work at the Hospital, and the Chair passed on her thanks to Tracy Bullock for the informative presentation.

DECIDED: That the presentation be **NOTED**.

76 WEST MIDLANDS AMBULANCE SERVICE - MARK DOCHERTY (EXECUTIVE DIRECTOR). (VERBAL UPDATE)

Councillor Jones had declared a Pecuniary Interest and left the meeting.

At the request of the Panel, a representative from the WMAS was in attendance at the meeting, to outline the recent decision to remove the Rapid Response Vehicles from the fleet.

Firstly, the officer gave an overview of the WMAS. This included statistical data and members were advised that the service had the highest performance in the county and hit all of its targets.

It was explained that the Rapid Response Vehicles would be removed from the fleet by the end of March 2020 and replaced with ambulance vehicles. As a paramedic would be part of the crew for each ambulance, back up vehicles would not be required, and this was the quickest way to transport a patient to a specialist centre. This operating model provided vast operational efficiencies and there would be an additional 250 paramedics by the end of the year.

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The What3Words App was demonstrated to members, which enabled the service to establish the exact location of a person who required assistance.

Members had the opportunity to raise their concerns and ask questions. The main issue being that no consultation had taken place, and it was felt that the replacement ambulance vehicles wouldn't be able to reach patients located in the rural areas as quickly as the Rapid Response Vehicles. Members wanted assurance that the response times to patients in the Moorlands wouldn't reduce and had previously requested the statistical data on this.

The WMAS officer recognised the concerns of the rural community and gave assurance that this model provided a robust response to patients and clinical outcomes were continually measured and monitored. The decision had been made and would not be reviewed.

Mark Doherty was thanked for his attendance at the meeting.

DECIDED: That the updated be **NOTED**.

77 WORK PROGRAMME.

DECIDED: That the Panel's Work Programme for 2019/20 be agreed, subject to, the following items being added:

- 1) How the Council can empower people to take responsibility of their health and wellbeing
- 2) Provision of defibrillators

The meeting closed at 6.15 pm

_____ Chairman _____ Date