

## Minutes of the Healthy Staffordshire Select Committee Meeting held on 10 August 2020

Present: Jeremy Pert (Chairman)

### Attendance

Philip Atkins, OBE	Phil Hewitt
Adam Clarke	Jill Hood
Tina Clements	Barbara Hughes
Janet Eagland	Paul Northcott (Vice-Chairman)
Ann Edgeller	Kath Perry, MBE
Richard Ford	Bernard Peters
Maureen Freeman	

**Apologies:** Charlotte Atkins, Julie Cooper, Janet Johnson, Dave Jones, David Leytham, Ross Ward and Ian Wilkes

### PART ONE

#### 14. Quorum

The Chairman verified that the meeting was quorate.

#### 15. Declarations of Interest

Mr. Bernard Peters declared an interest in all matters included on the Agenda as they related to University Hospitals of Derby and Burton NHS Foundation Trust owing to his appointment on the Council of Governors.

#### 16. Minutes of the meeting held on 6 July 2020

That, subject to (i) the list of attendances being amended to include the name of Mrs. Barbara Hughes; (ii) Dr. Olubukola (Buki) Adeyemo being recorded as a representative of North Staffordshire Combined Healthcare NHS Trust and not Midlands Partnership NHS Foundation Trust and; (iii) Minute No. 10 paragraph 10 (x) being amended to:-

“suicide rates in the County were currently at levels similar to those experienced prior to the Pandemic. Measures to prevent suicide and self-harming had been given a greater priority by central government and Staffordshire had been involved in piloting a new model of care which was now being rolled-out nationally;”,

the minutes of the meeting held on 6 July 2020 be confirmed and signed by the Chairman.

#### 17. Membership Changes following Annual Council Meeting

The Chairman highlighted changes made to the Committee's membership following the Annual meeting of the County Council on 23 July 2020.

In addition, Mr. John Cooper, the County Councillor for Newcastle – Bradwell County Electoral Division would be invited to attend future meetings of the Committee as an observer. Mr. Cooper had been co-opted onto Newcastle-under-Lyme Borough Council's Health, Wellbeing and Partnerships Scrutiny Committee from the County Council in order to provide a communication and co-ordination link between the two Authorities on matters of health.

## **18. Backlog of Hospital Appointments arising from the 2020 Covid-19 Pandemic**

The Committee considered a joint PowerPoint presentation/report (slides attached at Appendix A to the signed minutes) by the Chief Executive of University Hospitals of North Midlands NHS Trust (UHNM), Chief Executive Officer of University Hospitals of Burton and Derby NHS Foundation Trust (UHDB), Chief Executive of Royal Wolverhampton NHS Trust (RWT) and Accountable Officer, Staffordshire Clinical Commissioning Groups (CCGs) regarding the backlog of hospital appointments arising from the 2020 Covid-19 pandemic in Staffordshire.

Tracy Bullock (Chief Executive) and Paul Bytheway (Chief Operating Officer) from UHNM were present at the meeting.

Duncan Bedford (Executive Managing Director) and Sharon Martin (Executive Chief Operating Officer) from UHDB were present at the meeting.

Gwen Nuttall (Chief Operating Officer) from Royal Wolverhampton NHS Trust was present at the meeting.

Lynn Millar (Director of Primary Care) and Marcus Warnes (Accountable Officer) from Staffordshire CCGs were present at the meeting.

Mary Porter (Lead, Child Health Information Service) from NHS England was present at the meeting.

Jennie Collier (Managing Director, Staffordshire & Stoke-on-Trent Care Group) and Sue Garland (Service Manager, Universal and School Aged Immunisation Service) from Midlands Partnership NHS Foundation Trust were present at the meeting.

The outbreak of the virus had placed huge pressure on the NHS both in terms of resources and maintaining the delivery of essential services whilst complying with guidance on social distancing and infection control. Members had previously expressed concern regarding the impact of the pandemic on Primary and Secondary Care in specific areas including:- (i) Cancer emergency two week wait backlog (including investigations and endoscopy); (ii) Chemotherapy, Radiotherapy and Surgery backlog for existing Cancer patients in treatment at the time of lockdown; (iii) Routine surgery backlog particularly in orthopaedics (hips and knees); (iv) Cataract surgery backlog; (v) Cancer screening backlog including breast cervix and colorectal; (vi) Childhood

immunisation programme; (vii) Coronary bypass and angioplasty backlog; (viii) Routine out-patient review backlog; (xi) Chronic disease management review backlog and; (x) Primary care capacity. Therefore, the Committee invited the various representatives of Health to outline their performance in the above-mentioned areas since lockdown and explain the steps they were taking to address areas of particular concern/backlogs and restore the proper functioning of services as necessary.

The Committee were provided with comprehensive background statistical and graphical information from the Trusts/CCGs in advance of the meeting (Appendix A) which also gave context and set out the measures taken following the imposition of lockdown in March 2020. A co-ordinated presentation was then given by Tracy Bullock on behalf of all three Acute Trusts and Staffordshire CCGs during which she outlined:- (i) background and Department of Health and national NHS response to the pandemic; (ii) the six priorities contained in Trusts' Long-Term Plans which had been accelerated owing to the effect of the pandemic; (iii) measures included in 'Phase 3' (requirement for recovery of services to March 2021) of the emergency; (iv) the whole system approach being adopted towards the recovery at national, regional and sub-regional levels; (v) the impact of the Covid-19 pandemic on key services together with further headline statistics eg 50% reduction in type 3 and 5 urgent care activity and 55-63% reduction in delivery of outpatient first appointments; (vi) key risks and challenges associated with restoration and recovery; (v) Trusts' restoration strategies; (vi) the extra support being provided to the NHS's workforce during the pandemic and; (v) strategic challenges presented by the Covid-19 in the medium and long terms.

Members then gave detailed scrutiny to the information received from the Trusts and CCGs holding them to account for their responses to the crisis to date, seeking clarification and asking questions where necessary.

With regard to the use of buildings, Health explained that services were being spread across sites in order to make best use of resources and facilitate recovery whilst adhering to social distancing guidelines. Many staff had retrained to enable them to provide resilience in areas other than their usual placements and representatives of UHDB gave the example of orthopaedic theatre nurses working on wards. In addition, they were looking to re-open their community sites which had been closed during lockdown, under their recovery plans.

The representative of MPFT acknowledged that managing their estate during lockdown had presented a significant challenge for the Trust. However, they had sought to maximise home visits where appropriate and cited dementia assessments as an example. The Chief Executive of UHNM spoke for Health when she said that they recognised that the disruption to services during the pandemic was inconvenient and stressful for many patients but home visits helped to keep waiting times for appointments to a minimum in these circumstances.

In response to concerns expressed by a Member regarding support available for key health workers during the pandemic, the Chief Executive from UHNM explained that her Trust maintained close links with local mental health Trusts in order to provide specialist care/advice where necessary. In addition, various wellbeing initiatives had been undertaken internally to ensure that clinicians and administrative/managerial staff were properly cared for in order to maintain services where possible. However, whilst risk

assessments were routinely undertaken for vulnerable staff, a disproportionate number had been directly affected by the virus and its wider consequences. She also confirmed that staff were being given the opportunity to work from home where possible. These arrangements would continue until social distancing guidelines had been lifted. The CCGs Accountable officer added that most staff within his organisations had been instructed to work from home during lockdown with few exceptions. Consequently, their sickness absence rate had declined enabling greater organisational and service efficiencies to be made.

The representatives of CCGs also outlined the pro-active measures being undertaken to engage with Black, Asian and Minority Ethnic (BAME) communities in respect of Covid-19 and seasonal flu vaccinations (which had been maintained during lockdown). Specific plans had been made in respect of these groups and local teams were working closely with community representatives. A representative of UHDB added that the Trust's BAME Working Group (chaired by their Chief Executive Officer) had established good working relationships with the local South Asian community who had been disproportionately affected by the virus.

The Member went on to raise further concerns about those with Type 1 and 2 Diabetes and the need to give special re-assurance and advice to people in these and other high-risk groups.

In response to a question from another Member, a representative of MPFT spoke of the significant impact the virus had had on the School Aged Immunisation Programme in the County. However, whilst the Programme had been suspended during lockdown owing to the closure of many schools, the Trust were making great efforts to restore the service during the recovery phase, including identification of suitable third-party venues where vaccinations could be undertaken. However, notwithstanding these efforts, the service were not expecting to have fully caught up with the backlog until approximately August 2021/at the end of the recovery period.

A Member expressed his thanks and paid tribute to the work of the Trusts and CCGs during the 2020 covid-19 pandemic and said that he was re-assured by the information he had received during the meeting. He referred to the County Council's Communications (Comms) Team and the local knowledge they had acquired of the County which might be useful to the NHS in their health promotion work. In reply, UHNM's Chief Executive confirmed that they had previously worked closely with Comms Leads at many local authorities and would have regard to Staffordshire's, in the future, as necessary. The CCG's Accountable Officer agreed that joint working with the County Council had assisted in tackling the local Covid-19 spike which had recently occurred in Stone. The Director of Health and Care added that the Authority's Communications Programme in respect of seasonal flu had been brought forward and meetings already held with NHS England regarding extending coverage of the scheme to include the over 50 age group and Year 7 pupils.

A Member expressed serious concern about recent press reports regarding suspension services to cancer patients. He therefore asked health how these critical services would be re-instated as soon as possible and referred to the anxiety caused to patients and their families by extended delays in receiving appointments. In response the representatives of all Trusts confirmed that services to cancer patients remained a high

priority although many challenges were being experienced system wide. However, all cancer patients had been contacted in some way during lockdown and those who had received a clear diagnosis had been dealt with appropriately. Performance data in respect of waiting times from referral to diagnosis during July 2020 were expected to be published in the near future and would be shared with the Committee, as necessary. The representative of RWT explained that her Trust had been using their Cannock Hospital site for endoscopy procedures during lockdown which had provided an additional diagnosis stream. However, the longest waits were currently being experienced in their neurology department. Therefore, the Trust were undertaking training of an additional consultant in the use of robotic surgery which would help to reduce this backlog. The representatives of UHDB added that whilst performance against cancer wait targets had been good pre-Covid, unfortunately, this had declined since lockdown. However, their Trust were actively engaging with patients in order to provide re-assurance and the situation was improving following implementation of the restoration and recovery phase. With regard to two-week referrals, the number of patients seen by their Trust had declined since March although this was now starting to improve.

In response to a request for further clarification from another Member regarding patients who failed to attend appointments at clinics and the alternative measures being implemented to contact them, the representatives of CCGs cited their good record in embedding digital solutions within General Practice (GP) surgeries. 95% of all Staffordshire general practice surgeries had held online patient consultations during lockdown with the aid of Personal Computers supplied by the CCGs. However, whilst access to GPs had been maintained, Health were anxious to return to face to face appointments where necessary. It was hoped that some of the lessons learned during the pandemic could be used to provide flexible access to GPs in the future. The representatives from UHDB added that whilst consultants at their Trust were gradually gaining confidence in the use of virtual technology, face to face appointments continued to be held where possible. In addition, they spoke of the joint working which had been undertaken with GP leads in order to provide outpatient follow-up appointments and hoped that the positive consequences of the pandemic in the area of virtual technology could be sustained once the national crisis had passed. The representatives of UHDB highlighted the particular challenges they had encountered with holding consultations by telephone owing to the high numbers of residents with only a limited use of English, in the locality. However, the feedback they had received from patients during this time had been encouraging and they were confident services continued to improve.

Members stressed the importance of services to elderly residents during this time and reminded Health to have careful regard to the needs of this group.

Discussion then turned to the planning/logistics being undertaken by Health in advance of a Covid-19 vaccine being made available. A Member highlighted the County Council's Covid-19 Support Fund which could be used to help mobilize communities in due course.

The Chairman then thanked all the representatives of Health for their attendance, an interesting and informative presentation and the opportunity to provide constructive scrutiny for the benefit of residents of the County.

**RESOLVED** – (a) That the joint report/presentation be received and noted.

(b) That the impact of the 2020 Covid-19 Pandemic on the backlog of hospital appointments be monitored closely and that further scrutiny of health Partners be undertaken at the appropriate time, as necessary.

## **19. Work Programme 2020/21**

The Committee considered a rolling Work Programme for 2020/21 (Appendix B to the signed minutes).

During their discussion Members cited the following issues/topics for scrutiny at future meetings:- (i) Community First Responders – update from West Midlands Ambulance Service University NHS Foundation Trust; (ii) Focus on Young and Older People; (iii) Support and Joint Working between Public Health and the NHS; (iv) Focus on Mental Health; (v) Focus on Diabetes; (vi) National and Local Social Care Green Papers and; (vii) Backlog of Hospital Appointments arising from the 2020 Covid-19 Pandemic – Update from Staffordshire Secondary Care Providers and Clinical Commissioning Groups.

The Chairman sought agreement from the Committee for him and the two Vice-Chairmen to meet informally to consider their Work Programme in greater detail, make proposals and report back to their next meeting, as appropriate. He emphasised the need for flexibility in the Programme in order to take account of matters raised at short notice arising from the 2020 Covid-19 pandemic.

**RESOLVED** – (a) That the Chairman and Vice-Chairman consider their 2020/21 Work Programme in detail at an informal meeting on a date and at a time to be arranged.

(b) That the Chairman and Vice-Chairman have regard to the above-mentioned suggested issues/topics for scrutiny at their informal meeting referred to in (a) above.

(c) That the updated Work Programme 2020/21 be brought their next meeting for approval.

## **20. District and Borough Health Scrutiny Activity**

The Chairman invited the District/Borough Council representatives present to make oral reports of the health scrutiny activity which they had undertaken, since their previous meeting, in line with the Code of Joint Working Arrangements – Health.

The representatives of Stafford Borough and Staffordshire Moorlands District Councils said that their respective Committees/Panels had not met since the previous update reports were considered. Whilst the representative of Cannock Chase District Council

said that her Authority's Wellbeing Scrutiny Committee had not met again since the previous report, the Authority's Corporate Review Scrutiny Committee had temporarily assumed responsibility for health matters during the current Covid-19 pandemic. She had also attended a weekly virtual meeting of the Authority's Corporate Management Team and Group Leaders at which they had allocated additional funding in support of foodbanks in the District. In addition, their Environmental Health Team were actively engaged in providing advice to residents on social distancing measures.

The representative of Tamworth Borough Council reported that his Authority's Health & Wellbeing Scrutiny Committee was to meet on 14 July 2020 at which they would consider the Council's response to the 2020 Covid-19 pandemic. In addition, the letter which had been sent by the previous Chairman of Healthy Staffordshire Select Committee on 15 July 2020 regarding the operation of the standing joint working arrangements in health had been positively received his Authority looked forward to strengthening the operation of these arrangements, in the near future, for the benefit of residents of the Borough/County.

The representative of East Staffordshire Borough Council said that his Authority were currently focusing on a review of Sports Development. In addition representatives of University Hospitals of Derby and Burton NHS Trust and Clinical Commissioning Group(s) would be invited to the next meeting of their Scrutiny Community Regeneration, Environment and Health and Well Being Committee regarding the recent merger and local General Practitioner services, respectively.

The Chairman informed them of an emailed letter he had received from Mrs. P Wood of Leek Health Campaign Group on 5 August 2020 regarding the future of Leek Hospital. He said that he would reply to Mrs. Wood informing her that a copy would be forwarded to the Clinical Commissioning Groups' Accountable Officer for attention and any necessary action owing to their role in ensuring adequate capacity in local health services, going forward.

In addition, he informed them of correspondence he had received from Loggerheads Parish Council regarding Community First Responders and their concerns over the recent changes made by West Midlands Ambulance Service University NHS Foundation Trust which the Committee had scrutinised at their 8 June 2020 meeting. He went on to say that he would reply informing them their concerns had been noted and that an update report by the Trust was due to be made to the Committee at a meeting towards the end of 2020.

**RESOLVED** –That the reports/oral reports be received and noted.

**21. Date of Next Meeting - Monday 14 September 2020 at 10.00 am, Virtual/on-line**

**RESOLVED** – That the date, time and venue of their next meeting be noted.

**Chairman**