

REPORT OF THE
Health and Adult Social Care Select Committee
PART II

1. SUMMARY AND LEGISLATIVE CONTEXT

- 1.1. This report provides an update on the work of Hampshire County Council's Health and Adult Social Care Select Committee from April 2019 to March 2020.
- 1.2. For 2019-20, the Health and Adult Social Care Select Committee held the Local Government statutory responsibility for health scrutiny powers. These powers are intended to ensure that decisions about health services are taken with due regard to the people affected. The legislative framework within which the Committee functioned in this year allowed Members to consider any aspect of health that affects the population of Hampshire. It also placed very specific duties on the NHS with regard to consultation, information and responses to any recommendations made by the Committee.
- 1.3. The Committee was a statutory consultee on any potential substantial change being considered by the NHS, and had the power to refer contested decisions about health services to the Secretary of State for Health or to Monitor for Foundation Trusts.
- 1.4. In accordance with the Constitution of Hampshire County Council, the Health and Adult Social Care Select Committee also focuses on how the County Council is contributing to delivering the Wellbeing agenda for adults' social care; promoting independence and quality of life for older people; healthy and safe families; Public Health; the integration of Health and Care services and relevant financial management.

2. WORK OF THE COMMITTEE

- 2.1 The annual report of the Health and Adult Social Care Select Committee is appended to this report.

COUNCILLOR ROGER HUXSTEP

Chairman, Health and Adult Social Care Select Committee

Scrutiny Annual Report: April 2019 to March 2020

Select Committee: Health and Adult Social Care

Report of Chairman: Councillor Roger Huxstep

1. In-depth or Light Touch Reviews undertaken / outcomes being monitored:

a) Social Inclusion Update:

Members received an update in January 2020 on Social Inclusion following the £2.4 million investment made in December 2018 in partnership with district and borough councils which have the statutory responsibility for these services. The HASC Task and Finish Working Group had worked on this item in the past. This service provides supported housing and community aid for those who are homeless or at risk of becoming homeless. The goal is to support people with the most complex needs and minimise the impact of funding challenges while ensuring that services dovetail with the work being done under the Homelessness Reduction Act. Members viewed progress as a success story with good outcomes of enthusiasm, collaboration and support at the district level and commended the whole Hampshire approach.

b) HIOW Long Term Plan and HIOW Sustainability and Transformation Partnership (STP) Working Group:

In April 2019, Members received a verbal update on the work of the Working Group the HASC had established in 2018 to scrutinise work taking place under the Sustainability and Transformation Partnerships covering the Hampshire population (Hampshire and Isle of Wight STP and the Frimley STP). In October 2019, an update was received on the process and progress in developing an NHS Long Term Strategic Delivery Plan for Hampshire and the Isle of Wight, alongside a report from the HIOW STP Task and Finish Working Group. Members noted the priority areas identified by the HIOW Long Term Plan and the new service model which is currently in development. Detailed papers and appendices were shared following the November 2019 submission and the HASC will continue to monitor progress made in 2020.

c) Covid-19

Members received an update in March 2020 about COVID-19 being contained in Hampshire and the UK. Hand hygiene, where handwashing is more effective than using an alcohol-based gel and using disposable tissues and throwing them away, remains the main advice. Public Health was working closely with partners in emergency planning and critical authorities on the dynamic situation in Hampshire and the Isle of Wight. It is anticipated that the fallout from the COVID-19 pandemic will give rise to further work to be undertaken by the HASC.

2. Statutory Duties Undertaken (actions, monitoring and information on proposals to develop or vary services) have included:

a) Portsmouth Hospitals Trust and University Hospital Southampton: Spinal Surgery Service Implementation Update

At its May 2019 meeting, the Committee heard from Portsmouth Hospitals Trust regarding the transfer of the Elective Spinal Service from Portsmouth Hospitals NHS Trust to University Hospital Southampton NHS Foundation Trust on 31 October 2018. No specific patient feedback or concerns had been noted but Members drew attention to the difficult nature of recovery from surgery. Members received an update from University Hospital Southampton at the November 2019 meeting on the work in progress. To take on this service in its entirety from Portsmouth, other services were moved to be absorbed into this service fully. Only those needing surgery proceeded to Southampton and this has been a successful pathway. Members noted the developments on the implemented service transfer and requested updates on staffing challenges and wait times. A further update was received from University Hospital Southampton in March 2020 regarding an additional operating theatre, regular performance audits, benefits of having a centre of excellence, and hiring new surgeons. The HASC is continuing to monitor the re-provision of these services in 2020.

b) Southern Health NHS Foundation Trust: Planned Changes to West Hampshire Learning Disability Service

In May 2019, Members heard that due to enduring logistical challenges, a change in base for the staff would make possible a more efficient and effective range of services for users. Users and carers had been engaged and the change had been positively received. The new location would be easily accessible with better technological connectivity allowing for better and more effective use of time. The HASC noted the update of the change in service base and determined it was not a substantial change, and would continue to monitor the item in 2020.

c) Fareham and Gosport and South Eastern Hampshire CCGs and Southern Hampshire Primary Care Alliance: Integrated Primary Care Access Service

In May 2019, Members heard, regarding integrated care and the changes introduced and proposed next steps. Previously, a complex range of services were offered that resulted in duplication and competition, as well as difficulties in staffing that led to cancelled appointments. Multiple sites were running with operational challenges and some services were also used more than others at various times. New integrated primary care access services would combine GP extended access service for out-of-hours, home visits, and urgent appointments. Areas of difficulty and access would continue to be monitored and addressed. A further update was provided in January 2020 after seven months of running services had highlighted stresses and operational

delivery issues. Geographical challenges, inadequate GP recruitment, and service challenges if GPs were absent had been significant hurdles leading to system pressures and challenges, reliability of service provision, and missed appointments alongside expected winter pressures. Consistent direction from 111 and A&E providing up to date information about hub locations and appointment availability was key. The Committee noted the update as well as current challenges and resolutions. The HASC will continue to monitor this item in 2020.

d) Proposed Changes to the Mental Health Crisis Teams Across Solent NHS and Southern Health for Portsmouth and South East Hampshire

In May 2019, Members received a briefing on the change in approach to improving the delivery of mental health services by bringing together two NHS mental health trusts in partnership. The crisis element of mental health provisions is a priority and the crisis resolution team in Solent and acute mental health services at Southern Health would form a single provision across the south east and Solent for timely service for crisis assessments and enhanced alternatives. Members noted their appreciation of the importance of robust strong community mental health teams, especially with limited resources for care in the community. The committee was broadly supportive of the proposal and believed it would help some in crisis mode, but that it was vital to concentrate on the bigger picture and understand why people are getting into these situations in the first place and to obtain more resources for these critical underfunded services. However, the HASC was informed in January 2020 that the Solent crisis team had faced significant staffing pressures and identified service improvement activities needing attention. After careful consideration and in consultation with Portsmouth CCG, they had decided to pause involvement in the PSEH Crisis Team development for the next 9 to 12 months and concentrate on resolving local challenges. The HASC will continue to monitor this item in 2020.

e) Southern Health NHS Foundation Trust: Out-of-Area Beds and Divisional Bed Management System

In September 2019, Members received an overview of one of Southern Health's most significant organizational challenges - managing out-of-area beds. Managing demand of inpatient services within capacity has led to moving patients out of county and into private care. Having a variety of inpatient facilities and in keeping with the reorganization, there are 4 divisions that are managed together. More local ownership and a new approach has led to fewer patients in out-of-area beds, and more capacity is being created to address demand. While currently in the early stages of proposals and commissioning beds, purchasing additional beds will eventually be no longer necessary. Members noted the update, current challenges, and resolutions. The HASC resolved that the proposed changes are in the interest of the service users affected. A further update was provided in January 2020, confirming that Out-of-Area patients placed

outside Hampshire had been decreasing. Though there remained a dependence on Out-of-Area beds (currently with a 17-bed block contract) at significant cost, it has proved to be better for care and a preferable alternative to purchasing beds piecemeal from various providers. Private bed provisions will no longer be purchased by the end of the financial year. Members noted that this is a positive direction for patients and loved ones, but cost, growing provisions, and accurate forecasts remain a challenge in service provision. The HASC will continue to monitor this item in 2020.

f) NHS North Hampshire CCG: Beggarwood and Rooksdown Surgeries Update

In September 2019, Members received an update on the Beggarwood and Rooksdown Surgeries with approximately thirteen and a half thousand patients affected across the two sites, when Cedar Medical's contract came to an end. Concerns were escalated by patients and the CQC due to deteriorating outcomes with commissioners intervening and the contract withdrawn. Rooksdown was taken on by another GP practice and absorbed as another branch. Beggarwood was taken on by North Hampshire Urgent Care for 2 years and the practice continues to be supported by the CCG. The Committee noted the update as well as any challenges and resolutions. The HASC will continue to monitor this item in 2020.

g) Hampshire Hospitals NHS Foundation Trust and West Hampshire CCG: Orthopaedic Trauma Modernization Pilot

In September 2019, Members received an overview of the Orthopaedic Trauma Modernization Project as wait times for orthopaedic surgery had been an issue without a straightforward solution. There is significant evidence that immediate surgery is crucial for emergency situations and this can be done rapidly in Basingstoke while all elective work would be at the Winchester site. The aim is better results and safer, timely care with lower mortality rates and less complications. Approximately 93 percent of patients would be unaffected by these changes and 3-4 people per day would benefit from them. Members noted that this was a positive prospect for creating centres of excellence and that it would be in the interest of the service providers.

The HASC requested a further detailed engagement update and in March 2020 the Trust confirmed that the pilot was 12 weeks into the changes and reported on progress to date from the 2 December reconfiguration to date. There had been changes to processes and pathways to cope with additional demand and capacity, but models had been successful in predicting bed capacity. Patients can now be treated quickly with access to the right surgeon for the correct timely treatment with better outcomes. The Trust were considering patient outcomes, times, and quality of care, collating data for the test period to review with partners. The HASC will continue to monitor this item in 2020.

3. Responses to Health Inquiries received have included:

3.1. Care Quality Commission (CQC) Inspection Outcome and Monitoring

a) Portsmouth Hospitals NHS Trust

In April 2019, as part of their ongoing monitoring of progress against the Quality Improvement Plan, the Committee received an update on action taken by the Trust in response to the areas the Care Quality Commission had identified as requiring improvement, following their inspection of the Trust's services in 2018. Members heard the Trust had been implementing a detailed quality recovery plan in response to the inspection findings. A re-inspection against a section 29A notice was expected, and three section 31 notices had been removed. The Trust's view was that some improvements had been made, but in some areas there was still more to do. Members noted the CQC findings as well as the Trust's response to the findings.

In May 2019, the Trust provided an update following the CQC focused inspection of the Emergency Department in February 2019. There had been increased efforts with commitment, transparency, and collaboration. Whilst there were distressing "Must Do" items in the report, plans had been put into place to tackle specific issues building on the framework already in place. A further update was provided in July 2019 regarding the integrated joined-up improvement plan as well as actions taken to reduce ambulance delays with local health and social care partners (including the county) as well as collaboration with NHS England and NHS Improvement. In March 2020, Members heard that the Trust had received an improved overall rating of "Good" and that resolving must-do issues on a timely basis has been a Trust priority and further work continues. Members commended the improved rating, appreciated responsiveness to resident concerns and noted the excellent work being done even under great pressure. The HASC is continuing to monitor this item in 2020.

b) Local System Review of the Hampshire Health and Care System

In April 2019, Members received an update of the CQC Local System Review of Hampshire which had reviewed how health and care services worked together to support care for people aged 65 and over across the county. Members heard, regarding progress with the actions in the action plan developed following the CQC Local System Review undertaken in 2018. Following concerted efforts by the County Council and system partners over the past year, in December 2018 there had been a 75% reduction in Delayed Transfers of Care. The Health and Wellbeing Board was responsible for overseeing the Local System Review Action Plan and had recently refreshed the Joint Health and Wellbeing Strategy for Hampshire. It was noted that the HASC had a remit to scrutinise the Health and Wellbeing Board, and this could be reflected in future work programme items. The HASC commended the progress made and continued to monitor the Action Plan progress with a further update in October 2019. The action plan was signed off by the Health and Wellbeing Board and

responses submitted to the CQC and DHSC (Department of Health and Social Care) and then closed but progress continues with bigger pieces of work. Members noted this final report on the Care Quality Commission's Local System Review and its Action Plan that was jointly developed by Hampshire's health and care system leaders to respond to the Review's findings and endorsed in writing to the CQC and DHSC the outcome and achievements from the action plan.

c) Southern Health NHS Foundation Trust

In April 2019, Members received an update on action taken by the Trust in response to the areas the Care Quality Commission had identified as requiring improvement, following their inspection of the Trust's services in 2018. Members noted the findings of the inspection and the approach of the Trust in response to these. Members requested that the Trust provide a further update to a future meeting and provide a written paper in advance, so they have a chance to review the detail. At a further update in July 2019, Members heard that the delivery of the action plan was now part of the governance and operational procedure for greater traction and improvements. Members noted that progress was being made but further work remains to be done.

In January 2020, Members heard there had been a delay in publication due to internal CQC issues and it was expected later in January. The action plan noted that most actions were complete, and the remaining items would be rolled over into the new plan based on the latest report. Two deputations were received regarding this item in March 2020 and Members heard an update regarding Southern Health's October 2019 CQC inspection and the four core services reviewed received an improved rating of "Good". The most recent report reflected positive changes, but the Trust's goal was not to be complacent and it recognized that a lot more work remained to be done. Workstreams are being led by Trust leadership and clinicians with an equality improvement plan in place. Listening to feedback from service users, patients, and families and with their support, improvements can be made alongside the efforts of compassionate and passionate staff for better services. The HASC is continuing to monitor this item in 2020.

d) Hampshire Hospitals NHS Foundation Trust

In April 2019, Members received a report on progress and an update on action taken by the Trust in response to the areas the Care Quality Commission (CQC) had identified as requiring improvement, following the inspection of the trust's services in 2018 and new 2019 inspections against the 29a warning notice. Members noted the CQC findings as well as the update on action taken by the Trust. Members received another update in January 2020 regarding further 'must do' actions having been completed alongside weekly reports, better training and awareness, governance improvements, cultural changes, and hiring developments. CQC priorities aligned with those of the Trust but trying to address competing priorities such as finance, operations, and quality with increased pressures on staff remains a challenge. Members noted the update and the HASC is continuing to monitor this item in 2020.

e) *Solent NHS Foundation Trust*

In April 2019, Members received a report regarding the Care Quality Commission inspection of the Trust's services undertaken in October and November 2018. Members heard that the Trust had been rated as 'Requires Improvement' following their previous inspection in 2016, and were proud to report that the outcome of the 2018 inspection was an overall rating of Good, with all categories overall good or outstanding. Members noted the findings and congratulated the Trust on their overall improved rating requesting the Committee be kept updated on further progress. The HASC is continuing to monitor this item in 2020.

f) *Frimley Health NHS Foundation Trust*

In July 2019, Members received an update on action taken by the Trust following their Care Quality Commission inspection of the Trust's services with an overall rating of "Good". Improvements are already being put into place in areas such as maternity staffing, mandatory training, and other critical areas, to be able to provide the best care for patients. Members congratulated the Trust on their rating and requested that the detailed improvement plan put into place be shared with the HASC. A written update was shared in March 2020 and the HASC is continuing to monitor this item in 2020.

g) *University Hospital Southampton Foundation Trust*

In July 2019, Members received an update on action taken by the Trust following their Care Quality Commission inspection of the Trust's services with an overall rating of "Good". The CQC inspections included 4 key services across 4 sites with positive findings of good and outstanding observations, but also a number of 'must do' actions and ongoing audits. An action plan was then submitted to the Committee and a further update in March 2020 confirming 'must do' items and range of actions to be completed by April 2020. Members heard that areas of improvement were being addressed by working differently and prioritizing patient driven care. Nursing leadership been updated and posts are being filled timely, as well as updates being made to the facility. The HASC is continuing to monitor this item in 2020.

3.2. Temporary and Permanent Closures or Restriction of Hours of Services

a) *Hampshire Hospitals NHS Foundation Trust and West Hampshire CCG: Andover Hospital Minor Injuries Unit - Update*

Members received an update in April 2019 regarding Minor Injuries Unit at the Andover War Memorial Hospital provided by Hampshire Hospitals NHS Foundation Trust and the West Hampshire CCG. In recent years, a temporary variation to the commissioned opening hours had been implemented followed by progress on transitioning the MIU at Andover War Memorial Hospital to an Urgent Treatment Centre.

In September 2019, a further update was provided noting patients are currently being assessed only for minor injuries and the new service will have longer hours and people can then be seen for illnesses. Hours will change to accommodate more homes and patients. Current impediments include safely meeting needs within the budget provided current staff are trained to look after injuries, not illnesses. In January 2020 an update was provided on the outcome of the co-production work undertaken to develop a viable service model for the delivery of an Urgent Treatment Centre (UTC) in Andover. The goal remains simplifying services for patient access in the community to avoid a confusing landscape offering fragmented services. Members noted the update and the HASC continues to monitor the outcomes of this change in 2020.

b) Southern Health NHS Foundation Trust: Update on Temporary Closure of Older People's Mental Health Ward (Beaulieu)

In May 2019, Members received an update regarding the reopening of Beaulieu Ward with a new dementia friendly environment, a significant cultural shift, and multi-disciplinary recruitment that would benefit all new patients. The facility is now updated, environmentally friendly, and single sex compliant. While the ward is reopening with 3 fewer beds (from 17 down to 14), this will have no impact on patients and allow for improved patient service and innovative care. Members noted the improvements and the HASC will continue to monitor this item in 2020.

4. Pre-scrutiny of Significant Executive Decisions:

a. Orchard Close Respite Service

In April 2019, a Working Group was instigated to feed into further consideration of options relating to Orchard Close Respite Centre. As part of the investigation of options being undertaken by officers, further engagement with stakeholders would be undertaken and the feedback received fed into the Working Group. A verbal update was provided in July 2019 on the Members' Group and the Voluntary Sector, Carer, Service User & Officer Working Group continuing to meet, collaborate, and explore options.

In November 2019, Members considered the reports from Healthwatch as well as findings from the Task and Finish Group Report. A deputation was received and all users, parent carers, and the voluntary and independent sector were thanked for their collaboration and contribution to the engagement. Members were supportive of the service continuing with 10 beds (down from 13) and the positive outcome of keeping Orchard Close's trusted, highly valued, and wonderful environment available for service users. The Committee hoped the Executive Member would agree as well but noted that the financial consequences of a further third of a million savings would still be necessary.

A further deputation was received in March 2020 and Members heard two proposals outlining a reduction of beds at Orchard Close and market capacity at 3 other respite services. For equitable access at Orchard Close occupancy would be temporarily increased to over 85% for summer months and booking groups together would be encouraged in quieter months. There would be minimal effect on Hampshire respite users and if agreed, the change would commence on 1 October 2020. Members supported the recommendations being proposed to the Executive Member for Adult Social Care and Health. A huge amount of work, thought, and care had gone into these recommendations and the impact would continue to be monitored.

5. Call-In of Significant Executive Decisions:

There were no Call-Ins of any executive decisions.

6. Referrals:

No topics were referred to the HASC for consideration.

7. Scrutiny of Budgets and Performance:

a) Adults Health and Care: Transformation to 2021

The committee reviewed the departmental transformation to 2021 savings proposals and public consultation feedback. Members heard an overview of the key findings of the balancing the budget consultation held by the County Council in summer 2019, and noted that all of departments in the Council had been asked to proportionately contribute a further 13% saving of their budget as part of the next 'Transformation to 2021' (Tt2021) programme.

For Adults' Health and Care, this resulted in an overall requirement of £43.1m (Adult Social Care £36.3m and Public Health £6.8m). With the proposed savings, this would bring the cumulative total to £242.4m by the end of 2022. Members supported the recommendations being proposed to the Executive Member for Adult Social Care and Health and Executive Member for Public Health and the Committee was invited to further review and highlight any concerns or questions to be followed up with the director and department to be addressed.

b) Revenue Budget for Public Health:

The Committee reviewed the revenue budget for Public Health in January 2020 and resolved to support the recommendations being proposed to the Executive Member for Public Health.

c) Revenue Budget for Adults' Health and Care and Capital Programme for Adults' Health and Care:

The Committee reviewed the revenue and capital budgets for the Adults' Health and Care Department in January 2020 and resolved to support the recommendations being proposed to the Executive Member for Adult Social Care and Health.

d) Capital Programme for Adult Social Care 2020/21-2022/23:

The Committee reviewed the capital programme in January 2020 which would carry forward funding from schemes in prior years and included locally sourced funding as well as government allocation. Members commended officers for navigating a difficult financial situation with ever growing complexities and challenges. The Committee resolved to support the recommendations being proposed to the Executive Member for Adult Social Care and Health.

8. Policy Review:

No policy reviews were undertaken during this period.

9. Questioning and exploring areas of interest and concern:

The following topics were considered--

- Integrated Intermediate Care (May 2019)
- Health and Wellbeing Strategy 2019-2024 (May 2019)
- Hampshire Suicide Audit and Prevention Strategy (July 2019)
- Adult Safeguarding Annual Report (November 2019)
- Annual Hampshire Safeguarding Adults Board Report (March 2020)

10. Upcoming topics:

The following topics feature on the Select Committee's Work Programme--

- Adult Safeguarding
- Public Health Policies
- Scrutiny of Health and Wellbeing Board
- Budget Scrutiny
- Care Quality Commission inspections of NHS Trusts serving the population of Hampshire
- Hampshire and Isle of Wight Sustainability and Transformation Partnership and Long-Term Plan

- Integrated Intermediate Care
- Temporary Service Closures and Planned Changes
- Hampshire Hospitals NHS Foundation Trust New Hospital (part of the Health Infrastructure Plan)
- Care and support of vulnerable adults and those with mental health issues in the community
- CAMHS Assessments of Children in Schools and Change in Provider
- CQC Inspector Overview of Inspection and Report Protocols
- Public Health Covid-19 Overview and Impact on Health and Wellbeing and Outbreak Control Plans
- Adults' Health and Care Response and Recovery
- Care Home Support Offer and Update
- Modernising our Hospitals and Health Infrastructure Programme
- Building Better Emergency Care Programme