

AT A MEETING of the Health and Adult Social Care Select Committee of  
HAMPSHIRE COUNTY COUNCIL held remotely via Microsoft Teams on  
Monday, 1st March, 2021

Chairman:

\* Councillor Roger Huxstep

\* Councillor David Keast  
\* Councillor Martin Boiles  
\* Councillor Ann Briggs  
\* Councillor Adam Carew  
\* Councillor Fran Carpenter  
\* Councillor Tonia Craig  
\* Councillor Rod Cooper  
\* Councillor Alan Dowden  
\* Councillor Jane Frankum  
Councillor David Harrison

\* Councillor Pal Hayre  
\* Councillor Neville Penman  
\* Councillor Mike Thornton  
\* Councillor Rhydian Vaughan MBE  
\* Councillor Michael White  
Councillor Graham Burgess  
Councillor Lance Quantrill  
\* Councillor Dominic Hiscock  
Councillor Martin Tod

\*Present

**Co-opted members**

\*Councillor Diane Andrews, Councillor Cynthia Garton, Councillor Julie Butler and  
Councillor Jonathan Canty

Also present with the agreement of the Chairman: Councillor Liz Fairhurst, Executive  
Member for Adult Social Care and Health, and Councillor Judith Grajewski, Executive  
Member for Public Health.

**256. APOLOGIES FOR ABSENCE**

Apologies were received from Councillor Harrison. Councillor Hiscock, as the  
Liberal Democrat standing deputy, was in attendance in his place.

**257. DECLARATIONS OF INTEREST**

Members were mindful that where they believed they had a Disclosable  
Pecuniary Interest in any matter considered at the meeting they must declare  
that interest at the time of the relevant debate and, having regard to the  
circumstances described in Part 3, Paragraph 1.5 of the County Council's  
Members' Code of Conduct, leave the meeting while the matter was discussed,  
save for exercising any right to speak in accordance with Paragraph 1.6 of the  
Code. Furthermore Members were mindful that where they believed they had a  
Non-Pecuniary interest in a matter being considered at the meeting they  
considered whether such interest should be declared, and having regard to Part  
5, Paragraph 2 of the Code, considered whether it was appropriate to leave the  
meeting whilst the matter was discussed, save for exercising any right to speak  
in accordance with the Code.

No declarations were made.

**258. MINUTES OF PREVIOUS MEETING**

The Minutes of the meeting of the Health and Adult Social Care Select Committee (HASC) held on 11 January 2021 were confirmed as a correct record.

**259. DEPUTATIONS**

The Committee did not receive any deputations.

**260. CHAIRMAN'S ANNOUNCEMENTS**

Joint Committee on Hampshire Together

The Chairman reported that the second meeting of the Joint Scrutiny Committee looking at the Hampshire Together proposals had been scheduled for 8 March. The Committee would be considering further details of the options that were due to be put forward for public consultation at the end of May.

**261. ISSUES RELATING TO THE PLANNING, PROVISION AND/OR OPERATION OF HEALTH SERVICES**

NHS 111 Performance

The Committee received a presentation from the Head of Integrated Urgent Care and NHS 111 Services at South Central Ambulance Service NHS Foundation Trust, regarding the performance of the NHS 111 service in the Hampshire area over the past year (see Item 6 in the Minute Book). It was noted that this item had been deferred from the previous meeting. Members heard that the 111 service had experienced an increase in demand during the pandemic and had recruited additional staff to respond to this.

Members asked questions for clarification and heard that:

- There was a separate call centre being used for booking covid vaccinations
- The local clinical assessment service includes mental health staff so that those ringing 111 with mental health issues could be appropriately assessed and referred on

RESOLVED:

That the Committee:

1. Note the briefing on NHS 111 performance.
2. Request a written only update later in the year.

CCG Merger Update

The Committee received a written update regarding the merger of a number of the Clinical Commissioning Groups covering the Hampshire and Isle of Wight area (see Item 6 in the Minute Book). The Chief Executive of the Hampshire and Isle of Wight Partnership of CCGs gave a verbal summary of the paper. It was

highlighted that the government had recently published a White Paper on health and care, regarding plans for further join up between health and care services in England. Consideration would need to be given to the implications of this locally.

Members commented on the proposed merger and expressed concern regarding wasting money on reorganisation, and wanting to ensure the new arrangements would retain the good work that had taken place at a local level.

**RESOLVED:**

That the Committee:

1. Note the update on the merger of Clinical Commissioning Groups in Hampshire.
2. Request an update in Autumn 2021 on the development of an Integrated Care System (ICS) for Hampshire and the Isle of Wight.

## **262. PUBLIC HEALTH COVID-19 UPDATE**

The Committee received a presentation from the Director of Public Health (see Item 7 in the Minute Book) providing an update on the latest position on covid 19 in Hampshire. It was noted that infection rates were starting to reduce and excess deaths were below the 5 year average that week.

Offering community testing of asymptomatic residents had commenced on 22 February to try to identify and encourage to isolate some of the estimated third of cases where people have the virus without symptoms. Surge testing had also been undertaken in the community of Bramley where a case of the South African variant had been identified. There had been a 90% return rate of tests put through doors in the area and the results were awaited.

It was highlighted that under the governments recently announced 'roadmap' people would potentially be able to hold gatherings of six people outside from 29 March and no earlier than 21 June social contact rules could be fully relaxed.

**RESOLVED:**

The Committee note the update.

## **263. NHS HAMPSHIRE AND ISLE OF WIGHT COVID-19 UPDATE**

The Committee received a report from the Clinical Commissioning Groups providing an update on the impact to date of the pandemic and third wave of COVID-19 on the NHS in Hampshire and Isle of Wight and the COVID 19 vaccination programme (see Item 8 in the Minute Book). The Committee also noted that written updates had been provided by the following Trusts:

- Hampshire Hospitals NHS Foundation Trust
- University Hospital Southampton NHS Foundation Trust
- Portsmouth Hospitals University NHS Trust
- Frimley Health NHS Foundation Trust
- Southern Health NHS Foundation Trust

The Hampshire and Isle of Wight COVID-19 Deputy Incident Commander gave a verbal update on the progress locally of the covid vaccination programme. It was reported that 93% of residents in the priority 1 category had been vaccinated. The current focus was the over 65s and those over 16 with long term conditions. Those with learning disabilities had been risk assessed as a priority group and specific clinics had been designed for this cohort along with the offer of home visits.

Members asked questions for clarification and learned that:

- It was hoped a vaccination site local to the population in Alton would be confirmed soon
- All those shielding due to being clinically vulnerable were due to be offered the vaccine by the end of March

Members expressed their thanks to the NHS and the volunteers involved for the success of the vaccination programme so far.

The Hampshire and Isle of Wight Covid-19 Clinical Medical Acute Lead and Interim Clinical Transformation Director gave a verbal update on the position, reporting that hospitals were now caring for around 400 covid patients compared to around 1,000 at the peak. More than 10% of those waiting for an operation had now been waiting over a year. It would be the priority for the next six months to address waiting times.

RESOLVED:

The Committee note the update.

## 264. **ADULTS' HEALTH AND CARE COVID UPDATE**

The Committee received a presentation from the Director of Adults Health and Care (see Item 9 in the Minute Book) providing an update on the response to the pandemic by the Adults Health and Care department since the last meeting. Upper tier local authorities were responsible for coordinating support to the clinically extremely vulnerable and those shielding. It was reported that a further cohort had been identified as vulnerable nationally, with 30,000 in this category in Hampshire. The County Council had received details of 11,400 so far that would be approached to offer support and prioritised for vaccination.

It was reported that nearly all social care staff had been vaccinated by 15 February and carers were now able to get the vaccine. A recovery roadmap was being developed to establish next steps for services over the next 2 years.

Regarding care homes, it was noted that from 8 March residents would be able to nominate a loved one who could come for regular visits. Members asked questions for clarification and heard that visits still needed to be carefully managed once residents and their visitors were vaccinated as there remained a chance of transmission and immune response to the vaccination was variable.

The Chairman wanted to place on record on behalf of the committee thanks to county council staff for their efforts over the past year, noting that the Council would be acknowledging the anniversary of the start of the first lockdown on 23 March.

RESOLVED:

The Committee note the update.

## 265. **PROPOSALS TO VARY SERVICES**

At the start of this item, Councillor Jonathan Canty declared a pecuniary interest due to working for a charity that lobbies regarding orthopaedic services. He left the meeting while this item was discussed.

### Hampshire and Isle of Wight Partnership of Clinical Commissioning Groups: Integrated Primary Care Access Service update

The Committee received a written update from Commissioners regarding Integrated Primary Care Access Services across Fareham, Gosport and south east Hampshire. It was noted that while electronic options had been developed in response to the pandemic, contact by phone would still be available for those that couldn't access the electronic option.

RESOLVED:

The Committee note the update and request a further update in late 2021 regarding plans for these services from April 2022.

### Hampshire Hospitals NHS Foundation Trust: Trauma & Orthopaedics Transformation update

The Committee received a written update from Hampshire Hospitals NHS Foundation Trust providing an update on the transformation of their trauma and orthopaedics services.

RESOLVED:

The Committee note the update and request a further update in early 2022.

### Hampshire and Isle of Wight Partnership of Clinical Commissioning Groups: Whitehill & Bordon Health and Wellbeing Hub update

The Committee received a written update from commissioners regarding the development of a health and wellbeing hub for the Whitehill and Bordon area.

RESOLVED:

The Committee note the update and request a further update in late 2021 if the situation has developed.

## **266. HEALTH AND SOCIAL CARE SYSTEM RESILIENCE DURING COVID-19**

The Committee received a report of the Director of Adults' Health and Care regarding the key activities undertaken across the health and social care system to maintain system resilience in the discharge of people from hospital settings during the response to COVID-19 (see Item 11 in the Minute Book).

Members heard that over 6,000 patients had been discharged from hospital during the pandemic under a new discharge model. This had resulted in 2% going to care homes as new entrants compared to around 20% of discharges pre pandemic. This was positive news for individuals, however it created an occupancy gap at care homes which often need to have high occupancy rates to maintain their viability. Under the new pathway the Clarence Unit had been established as 'step down' care for covid positive patients that no longer required acute care.

It was noted that while respite care had been reduced in the pandemic, it was still available to access if there was a risk of family breakdown. The Hampshire Safeguarding Adults Board had commissioned a review of the response to the pandemic. It was hoped this would report in April and an update could be provided to the next HASC meeting.

### **RESOLVED:**

1. That the Health and Adult Social Care Select Committee support the continuation of discharge pathways and funding arrangements to maintain and build on progress and performance described in this report and in-line with the White Paper - Integration and Innovation: working together to improve health and social care for all, published on 11 February 2021.
2. That the Health and Adult Social Care Select Committee note:
  - a) This update report on Health and Social Care system resilience during COVID-19 which will be received by Cabinet on 16 March 2021.
  - b) The overall performance in the most extraordinary circumstances to support residents to be discharged from hospital settings and return to their appropriate place of residence.
  - c) The efforts of all staff and partner organisations in maintaining safe, appropriate and resilient discharge pathways, within a new national operating framework, introduced at pace, in the spring of 2020.
  - d) The fundamentally changed nature of the health and care sector as a consequence of its response to COVID-19.

## **267. CLARENCE UNIT, WOODCOT LODGE**

The Committee received a report of the Director of Adults' Health and Care regarding the Discharge to Assess service known as the Clarence Unit (located in Gosport) and operated by HCC Care as part of a multi-agency venture with the NHS (see Item 12 in the Minute Book). This had enabled patients to be discharged from hospital within 24 to 48 hours of being determined medically fit,

to a service where they could be cared for pending arrangements being established for their onward care.

Length of stay at the Discharge to Assess service was typically around 25 days, and as a result of this service less than 25% went on to residential care. This model had been supported by government discharge funding, however there was a desire to fund this locally to enable it to continue. A report was being taken to the Executive Member for Adult Social Care and Health for a decision day on 16 March to secure funding for the 21/22 financial year, with further work required in the coming months to confirm a more permanent arrangement. It was noted that it was planned to provide a similar model of care covering other parts of Hampshire.

RESOLVED:

That the Committee note:

- the significant system benefits of vastly improved patient flow and reduced discharge delays (bed days lost) as a direct result of the discharge to assess service at the Clarence Unit.
- the positive outcomes being achieved for vulnerable older adults by HCC Care at the Clarence Unit following discharge from Portsmouth Hospitals NHS Trust.
- the opportunities and challenges of sustaining the Clarence Unit Discharge to Assess service for the medium to long term.

## 268. **WORK PROGRAMME**

The Director of Transformation and Governance presented the Committee's work programme (see Item 13 in the Minute Book).

RESOLVED:

That the Committee's work programme be approved, subject to any amendments agreed at this meeting.

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Chairman,