

DURHAM COUNTY COUNCIL

At a meeting of **Adults, Wellbeing and Health Overview and Scrutiny Committee** held in Council Chamber, County Hall, Durham on **Friday 1 October 2021 at 9.30 am**

Present

Councillor P Jopling (Chair)

Members of the Committee

Councillors V Andrews, O Gunn, P Heaviside, J Higgins, L A Holmes, L Hovvels, J Howey, C Martin, J Purvis, S Quinn, I Roberts, K Robson, M Simmons, T Stubbs and C Varty

Co-opted Members

Dr G Ciesielska and Mrs R Hassoon

1 Apologies for Absence

Apologies for absence were received from Councillors Charlton-Laine, C Bell, Crute, Earley, Haney, Kay and Savory.

2 Substitute Members

Councillor Purvis for Councillor Charlton-Laine, Councillor I Roberts for Councillor Earley and Councillor Varty for Councillor Crute

3 Minutes

The minutes of the meeting held on 28 July 2021 were confirmed as a correct record and signed by the Chair

4 Declarations of Interest

There were no declarations of interest.

5 Any Items from Co-opted Members or Interested Parties

There were no items from Co-Opted Members or Interested Parties.

6 Shotley Bridge Hospital Update

The Committee received a presentation from Rachel Rooney, Head of Commissioning, NHS County Durham CCG that provided an update on Shotley Bridge Community Hospital Services (for copy of presentation, see file of minutes).

The detailed presentation highlighted the following:-

- New Hospitals Programme
- Principles of the Project
- Conditions of the current estate
- Aims of the clinical model
- Process of defining the clinical model
- Clinical Model
- Involvement via Engagement and Consultation
- CCG Duties
- OSC Duties
- Scope of ongoing engagement
- Proposal summary
- Project risks

In conclusion the Committee was advised that proposed location of future estate was approximately 1.8 miles from current site and that the proposed clinical model determined no significant variation in service provision, and in some cases this was an enhanced offer.

The next steps were outlined as:-

- Finalise Outline Business Case – Oct/Nov 21
- Development of full business case & approvals – Summer 2022
- Ongoing public engagement
- Construction start Summer 2022
- Construction completion

Finally, the Head of Commissioning asked the Committee a number of questions:-

- Based on the proposals set out in the presentation did OSC felt this warranted substantial service change?
- If OSC felt consultation was necessary, what would we actually be consulting on?
- Recognition of engagement to date and ongoing programme of involvement?
- Support for progressing the project at pace without the need for consultation?

Before opening up to questions from the Committee, the Chair invited Councillor A Shield to comment on the presentation. Councillor Shield thanked the Chair for the opportunity to address the Committee as a former Member of the cross-party Shotley Bridge Reference Group, chaired by Councillor L Hovvels. The Group first met in October 2017. There had been regular meetings by the Reference Group

on a monthly basis and updates had been provided for Overview and Scrutiny and the Derwent Valley AAP and ongoing public engagement. There had been debate on some issues, such as bed provision would be 8, 16 or 24, what service would be provided and the provision of mental health services. The initial Capital Funding was £14.7m, supplemented by Government backed finance to an indicative cost of £30m. This was a modest budget and Councillor Shield urged all Committee Members to support the proposal. There was no need for any further consultation as there was no substantial change, providing there would be ongoing engagement with staff, public and stakeholders. The proposed location was accessible with a new bus depot to be located nearby which would allow the facility to serve all people in north west Durham, not solely on the Consett area.

Councillor Watson informed the Committee that he too had been a member of the cross-party Reference Group since it was established in 2017 and thanked Councillor Hovvells for her work in chairing the Group. Councillor Watson considered that there was a need to let the CCG get on with their plans for the hospital. The CCG had engaged with the public many times and to now delay the process any further may put the project in jeopardy. Further consultation rather than engagement could cost the project dearly.

Councillor Hovvells informed the Committee that the Reference Group had been established because of the strong voice of local people and problems encountered of visiting the current Community Hospital and its current condition. The consultation and engagement which had taken place had come at a difficult time because of the Covid pandemic. There was a risk that if the project did not move forward the £30m funding could be lost and no new hospital would be provided. Councillor Hovvells considered this risk to be too great and there was a need for the project to move on.

In response to a question from Dr Ciesielska on the co-creation process the Head of Commissioning, NHS County Durham CCG informed the Committee of how the CCG had run this process.

Councillor Martin informed the Committee that Councillor Haney had been unable to attend the meeting but had asked him to ask questions on the proposal. The preferred site was a Project Genesis site and clarity was sought on whether there were any agreements in place on Project Genesis land around who carried out developments and whether the NHS would have the freedom to use their own developers. Councillor Martin referred to the consultation which took place in March 2021 and asked whether it was possible to see in more detail what was said. Thirdly, Councillor Martin asked at what stage details of the clinical offer at Shotley Bridge would be firmed up.

The Head of Commissioning, NHS County Durham CCG replied that within the NHS there was a strict and robust process which used a framework to commission a contractor from a list of contractors the NHS was able to use. The outline

Business Case needed to demonstrate the benefits which would be achieved, how these would be measured and how value for money would be demonstrated. The full Business Case, which would need to be done for next year, contained huge amounts of detail around this process. This was an open and transparent process, subject to commercial sensitivities.

The NHS had provided two reports around engagement which had been brought to the Committee previously in 2019 and 2020 and these reports could be recirculated to Committee Members.

Referring to the clinical model, the Head of Commissioning, NHS County Durham CCG invited Noel Scanlon, Executive Director of Nursing, County Durham and Darlington NHS Foundation Trust to comment. The Executive Director of Nursing informed the Committee that large parts of the current Shotley Bridge Hospital were decrepit and unserviceable. The clinical model going forward had to meet the needs of the public and be sustainable clinically to the highest standards of modern healthcare. Consequently, hundreds of staff had been involved in dozens of meetings to clarify what the clinical model should be, not just in terms of delivering the best quality service to the community but also to attract, retain and develop the best people to come to Shotley Bridge. The Foundation had been very circumspect about not committing to delivering services which were not sustainable or might not be clinically safe going forward. The facility to be provided would be commensurate with current need and anticipate the potential for some expansion.

Councillor Martin asked, while he appreciated commercial sensitivities, whether dialogue could take place with local Members on a confidential basis so that they could get reassurances on behalf of their residents. The Head of Commissioning, NHS County Durham CCG replied that as much as possible would be shared with local Members.

R Hassoon considered that a robust consultation had taken place.

Councillor K Robson agreed there was a need for urgency to move this project forward and asked whether the identified site had space available for future expansion should this be needed. The Head of Commissioning, NHS County Durham CCG replied that a robust shortlisting process for potential land sites had taken place and one of the criteria was the potential for future expansion. The identified site scored highly on this.

Councillor S Quinn thanked the Head of Commissioning, NHS County Durham CCG for their presentation, but expressed concern that in the future services may be reduced as they had been at Bishop Auckland Hospital. The Head of Commissioning, NHS County Durham CCG reiterated the point made by the Executive Director of Nursing, County Durham and Darlington NHS Foundation Trust that future demand was being predicted to maximise the facility.

Councillor Stubbs agreed with the urgency for the project and asked whether consideration had been given to future plans for the current Shotley Bridge Hospital site once the new facility was operational. The Head of Commissioning, NHS County Durham CCG replied that the current site would be disposed of with the potential for some of the proceeds being brought into the local health system.

Councillor O Gunn commended the involvement of everybody in this project and asked whether, for the sake of transparency with the public, what exactly was the CCG going to say to the public. The Head of Commissioning, NHS County Durham CCG replied that the message to the public would be that the CCG wanted to proceed with the project, a clinical model had been worked up which could be delivered, and the preferred site was the Genesis Site.

Councillor V Andrews considered it was critical for this project to move forwards as quickly as possible.

Councillor J Howey expressed concern that if the project did not proceed the identified funding could be lost.

S Gwilym, Principal Overview and Scrutiny Officer, informed the Committee that Councillor Earley had made representations. Councillor Earley was under the impression that the Committee had, at its last meeting, backed the engagement route rather than a full consultation, which he had reservations about at the time. However, Councillor Earley was pleased for this to go forward given the increasing problems in the economy which may yet produce further delays.

The Chair thanked the Committee for their comments and debate on the issue and sought approval of the Committee to support the progression of the project without formal public consultation, with regular updates being brought to the Committee

Resolved:

- (i) That progression of the project without formal public consultation be approved,
- (ii) That regular updates be brought to the Committee

7 Winter Planning

The Committee received a report from the Director of Integrated Community Services, County Durham Care Partnership that provided an update on the joint work underway between partners to prepare for Winter 2021/22 (for copy see file of Minutes).

Sue Jacques, Chief Executive of County Durham and Darlington NHS Foundation Trust and Chair of the Local Accident and Emergency Delivery Board reported on the plans being put in place across the health and social care system for both surge and cold weather activity/admissions. She referenced a 13% increase in

activity between 2019 and 2021 with hospitals working to manage beds often at the highest levels of operation (OPEL4). She reported that North East ambulance service had also experienced the highest ever summer demand for ambulance services.

Ms Jacques also referenced the increase in sickness amongst staff due to both COVID-19 and also workplace stress which was also having an impact on the system's ability to cope with current demand. She went on to provide updates in respect of the following system service areas:-

- social care
- primary care
- community services
- acute hospital care
- mental health services provided by TEWV NHS FT
- North East ambulance service NHS FT
- public health
- Durham County councils highways and technical services
- Vaccinations programmes.

Members of the Committee raised the issue of patients experiencing difficulties in obtaining face to face GP appointments which was leading to increased pressure on hospital services and on the ambulance service.

The Principal Overview and Scrutiny Officer referenced the review the Committee undertook which was reported to the previous Cabinet on access to GP services. An update was due on progress against the recommendations of that review at the next meeting and as part of that update reference to the issues on face to face GP appointments could be made.

In referring to the impact of long COVID on the demand for health and social care services and the general health and wellbeing of the population it was suggested that a report be brought back to the committee once the detail of this had been assessed.

Members also discussed the demands being placed on the 999 and 111 telephone services and the increase in aborted calls to these. Concern was expressed about the capacity available within these services to meet current demand with reference being made to and anticipated publication by government of their NH S winter plan and associated allocations to NHS trusts. Ms Jacques confirmed that the second half yearly allocations had been secured but that these were currently being assessed against system pressures.

Whilst highlighting the high levels of demand currently being placed on the health and social care system, Ms Jacques indicated that the Trust was working hard to increase the availability of elective surgery as this had also been severely impacted

by the COVID-19 pandemic. To this end it was important that elective surgery was not impacted by any increased demands on emergency surgery during the winter months. In conclusion, Ms Jacques sort to reassure Members that the system in her mind was well placed to address any increase in demand arising from COVID-19 or any other communicable diseases.

Resolved:

That the report be noted and further updates be provided to the Committee during the Winter period 2021/22.

8 Tees Esk and Wear Valleys NHS Foundation Trust Update

The Committee received a presentation from the Director of Operations - Durham and Darlington - Tees Esk and Wear Valleys NHS Foundation Trust (for copy see file of Minutes).

The presentation highlighted:-

- An update on service provision
- Business Plan or 2021/22
- Demand for services
- CQC Inspection
- Impact of Covid-19
- Staff Health and Wellbeing

The Director of Operations clarified for members that the statistics related to out of area placements referred to patients who were being cared for within the TEWV NHS FT organisational footprint but not necessarily within their residential locality. She referenced the significant pressures being placed upon the organisation in respect of the availability of inpatient beds for Adult mental health services and Mental health services for older people with the former being higher.

In discussing the outcome of the CQC inspection of TEWV NHS FT, members were advised that whilst a re-inspection had taken place in May 2021 of the acute wards for adults of working age and psychiatric intensive care units, Lanchester Road hospital had not been inspected. The Director of Operations then reported upon the inspection improvement plan that had been developed to address those issues identified by the CQC.

Members were informed that the 53 Trust inpatients had tested positive for COVID-19 since the start of the pandemic. In response to a question regarding the process is for the vaccination of an inpatient and ensuring that they had provided informed consent, the Director of Operations emphasised that there were no forced vaccinations of any service users and that where necessary and appropriate family consent for vaccinations was always sought.

Resolved:

That the presentation be noted.

9 Local Outbreak Management Plan Update

The Committee received the report of the Director of Public Health that provided an update on the Government Roadmap: COVID-19 Response - Summer 2021, County Durham's COVID-19 response and the Local Outbreak Management Plan (for copy see file of minutes).

The Director of Public Health reported that since the full easing of COVID-19 restrictions on 19 July a gradual upward increase in cases had been experienced and as of 14 September 2021 the County Durham seven-day rate was 429.7 per 100,000 population. This higher level of community transmission of infection aligned with rates across the North East and everybody was being encouraged to act carefully and remain cautious.

The report set out a number of issues following the route map out of lockdown including changes to the self-isolation guidance, the effectiveness of the vaccination programme, ongoing COVID-19 testing arrangements and the updated operational guidance for the vaccination of people working in care homes published in September by the Department of Health and Social Care.

In responding to Member questions, the Director of Public Health reported on work being coordinated with Durham University regarding the return of students to the City, ongoing activity in engaging with schools to promote vaccinations amongst school children and work in respect of return to the workplace.

Resolved:

That the report and the robust governance and outbreak control arrangements in place to identify, control and contain COVID-19 cases, clusters and outbreaks be noted and agreed.

10 Quarter 1 2021/22 Performance Management Report

The Committee received the report of the Interim Corporate Director of Resources which detailed progress towards achieving the key outcomes of the council's corporate performance framework (for copy see file of minutes).

Councillor Gunn asked question on behalf of Councillor R Charlton-Lainé about the breast-feeding action plan. Councillor Charlton-Lainé asked about developments to support mothers with breast-feeding outside of hospital hours. Angela Harrington, Strategy Team Leader replied that she was happy to take this away and provide some feedback outside of the meeting.

Councillor Hovvells referred to the Safe Street Play Programme which had been rolled out in South Moor and asked whether there were plans to roll this out elsewhere and what the evaluation had been of this. The Strategy Team Leader replied that through the Community Action Teams groups of various resources and agencies had come together to work in a particular geographical area and it was understood this would be rolled out in the future. Evaluation of such schemes was normally a cross-partnership effort and again further feedback could be provided to Councillor Hovvells outside of the meeting.

Resolved:

That the report be noted.

11 2020/21 Q4 and 2021/22 Q1 Adults and Health Services Budget Outturn

The Committee considered the report and presentation of the Interim Corporate Director of Resources, presented by the Finance Manager for Adult and Health Services, which provided details of the 2020/21 revenue and capital budget outturn position, highlighting major variances in comparison with the budget for the year and, details of the initial forecast outturn budget position for the Adult and Health Services (AHS) service grouping, highlighting major variances in comparison with the budget for the year, based on the position to the end of June 2021 (for copy of report and presentation, see file of minutes).

Resolved:

That the report be noted.