## DURHAM COUNTY COUNCIL

#### At a meeting of the Adults, Wellbeing and Health Overview and Scrutiny Committee held in Committee Room 2, County Hall, Durham on Monday 20 March 2023 at 9.30 am

#### Present:

## **Councillor P Jopling (Chair)**

#### Members of the Committee:

Councillors J Howey (Vice-Chair), R Crute, O Gunn, D Haney, L Holmes, L Hovvels, C Kay, C Martin, S Quinn, A Savory, M Simmons and T Stubbs.

#### **Co-opted Member:**

**Rosemary Gott** 

Prior to the formal business of the Committee, attendees observed a minute's silence in respect of the serving Chair of the Council, Councillor Beaty Bainbridge, who died on 27 February 2023.

## 1 Apologies

Apologies for absence were received from Councillors V Andrews, I Cochrane, K Earley and J Higgins.

Apologies for absence were also received from Co-opted Member, Angela Stobbart.

## 2 Substitute Members

Councillor B Kellet attended as substitute for Councillor V Andrews.

## 3 Minutes

The minutes of the meeting held on 16 January 2023 and the special meeting held on 3 February 2023 were confirmed as correct records and signed by the Chair.

## 4 Declarations of Interest

The following declarations of interest were made:

• Councillor S Quinn, in respect of agenda item 6 as an employee in the care sector.

• Councillor D Haney, in respect of agenda item 7 as a public governor of Tees Esk and Wear Valley Foundation Trust.

# 5 Any Items from Co-opted Members or Interested Parties

There were no items from co-opted members or interested parties.

# 6 Winter Planning and service pressures 2022/23

The Committee received a presentation from Michael Laing, Director of Integrated Community Services, County Durham Care Partnership on winter planning and service pressures for 2022/23 (for copy of presentation see file of minutes).

Introducing the presentation, the Director of Integrated Community Services explained the presentation was an update on the health and social care response to winter pressures, since the previous presentation to the Committee in November 2022. The Committee heard that the local winter plans reflected the national plans with the key elements being surge planning and cold weather planning. To date, due to the mild winter weather, the cold weather plan had not been activated. In terms of surge planning, daily operational meetings were being held throughout the winter, to manage pressures with a focus on national priorities which included supporting the health and wellbeing of the workforce, protecting elective surgery and embedding infection prevention principles. There had been a period of sustained demand over the Christmas holiday period which was managed with the help of short term changes to alleviate pressure, such as increasing bed capacity and front of house staff cover. There had also been additional investment in transport and pharmacy provision to support discharges to take place on evenings and during public holidays.

The Committee noted the introduction of an £8 million Discharge Fund for County Durham to increase capacity in post-discharge care. The County Durham Care Partnership had agreed priorities and the projects funded included care home capacity and mental health housing support.

There had been a marked decrease in demand during the days affected by the recent industrial action and the Director of Integrated Community Services commented on the co-operation between trade union representatives and staff, during the period.

In conclusion, the Director remarked that the winter plans were progressing well, with thanks to additional funding and the great effort made by staff and he added that patient and staff wellbeing will continue to be at the forefront of future work.

Comments and questions were invited from the Committee.

Councillor Martin commended the work and he asked how the mild winter had contributed to the smooth running of the winter plan thus far.

The Director of Integrated Community Services replied that the mild winter had led to fewer incidents of slips, trips and falls and minimised the impact of cases of flu and Covid-19, however, other factors such as the impact of the cost of living crisis on mental and physical health were placing pressure on services. Councillor Martin welcomed the Discharge Fund and, noting that the funding will be recurrent, he asked how the funding will be used in the future. The Director of Integrated Community Services replied that he expected the funding to be spent on roles within hospitals and the independent and voluntary sectors, to support safe discharge.

Replying to a question from Councillor Gunn for further information on the increase in bank rates, the Director of Integrated Community Services explained that the increase in rates had been used to encourage bank staff to fill vacant shifts in order to meet the national ratio of qualified staff to beds. Councillor Gunn also welcomed the Discharge Fund, however, she observed that it was a small amount for the scale of the work involved. Referring to the fall in demand during the period of industrial action, Councillor Gunn expressed her opinion that this may be a reflection of the public support for the industrial action and she expressed concern as to how a pay award would be funded. The Director of Integrated Community Services replied that it was unclear as to whether a pay award could be funded from within the existing NHS budget. He commented that there was work to be done to promote careers in social care and he referred to workforce pressures and the government's new national workforce strategy which is expected in the summer. The Director also commented on pressures in GP practices, as a decreasing number of doctors are willing to become partners, deterred by the additional responsibilities. In response to a question from the Chair as to how he expected GP surgeries to adapt in the future, the Director of Integrated Community Services responded that he expected that an increasing number of GP practices will seek support from Trusts or form larger practices, in order to share the burden of non-medical responsibilities related to running a GP practice.

Councillor Quinn referred to the pressure in the domiciliary care sector and to the untapped potential, with an increasing number of people being encouraged to return to the workforce. Councillor Quinn suggested that more work could be done to highlight the benefits of a career in the care profession, including the flexible working hours and job satisfaction. Referring to supporting discharge from hospital, Councillor Quinn spoke of her concern that people are often discharged into a care setting many miles away from their home and family. The Director of Integrated Community Services acknowledged the staffing pressures in respect of domiciliary care and he agreed with Councillor Quinn's comments on the benefits of being discharged into a provision in familiar surroundings. The Director pointed out there is a balance to be achieved as discharges must be carried out in a timely manner.

In addition, he pointed out that the rural nature of the county can lead to community hospitals taking patients from a wide region and, in some cases, the closest provision may be many miles from home.

Councillor Hovvels enquired as to what percentage of the Discharge Fund had been invested in mental health services and what plans were being considered for future investment to improve mental health. The Director of Integrated Community Services replied that approximately £2 million had been spent on mental health housing support and he added that, as the county lacks a dedicated mental health A&E, he suggested this may be an area for future investment together with the crisis service. Councillor Hovvels spoke anecdotally of concerns from residents regarding the impact on their mental health due to cost of living pressures and whilst she welcomed the introduction of Warm Spaces, she questioned how many vulnerable people including those with mental health problems would access the spaces. She asked what mechanisms are in place to ensure those with mental health issues and other vulnerable groups are not neglected. The Director of Integrated Community Services informed the Committee that the winter planning group which is chaired by the Director of Public Health draws on expertise across the Council and voluntary and community partnerships such as County Durham Together, to support mental health and wellbeing. District and Community Nurses receive training to identify vulnerabilities and, in response to rising energy costs, the service had contacted all those who were supplied with electrical medical devices at home, to offer financial assistance.

Councillor Kay asked whether admitting those suffering from a mental health crisis to a general medical bed was the most appropriate treatment for that person and whether it was the best use of a surgical bed. Councillor Kay also asked what checks were done to ensure that when patients who had been treated for mental health issues are discharged from hospital, they are safe. The Director replied that in many cases, those in mental health crisis, upon examination, are also found to have physical issues which require treatment. He clarified that a multi-disciplinary team must agree the discharge and those who are homeless are provided with a package of care including supported accommodation.

In response to a question from Councillor Stubbs as to whether there had been a spike in demand for services in the days following the period of industrial action, the Director replied that information on the impact will be reported to the Health and Wellbeing Board and will also be shared at a future meeting of the Committee.

## Resolved

- a) That the presentation be noted.
- b) That winter planning be included in the Committee's work programme for 2023/24.

# 7 North East Ambulance Service NHS Foundation Trust CQC Inspection Report and Improvement Action plan

The Committee received a presentation from Julia Young, Director of Quality and Patient Safety NEAS, on the findings of the CQC inspection report and the action taken in response to the findings (for copy of presentation see file of minutes).

Introducing the presentation, the Director of Quality caveated that the inspection took place in light of the impact of the Covid-19 pandemic. A summary of the ratings was provided, with safety and effectiveness being downgraded from 'good' to 'requires improvement' and the rating for leadership being downgraded from 'good' to 'inadequate'. Since then, a number of changes had been made to the leadership team and a great deal of work had been done in response to the findings. On a more positive note, the ratings for caring and responsiveness both remained 'good'.

The Director of Quality outlined the four key findings of the inspection which were that medicine management was not operating effectively, improvements were required in respect of the processes for the investigation of incidents and responding to staff feedback and governance systems were not operating effectively. The Committee received details of the actions taken to address the key issues. The actions in respect of medicine management included an audit of internal practice and reinforcement of policies. In response to the finding in respect of improving the investigation of incidents, additional capacity had been put in place to implement a new framework, the Patient Safety Incident Response Framework, by September 2023. A new Head of Culture and Staff Experience had recently been appointed in response to the finding in relation to staff feedback. A governance review had been undertaken and new board members had been appointed to strengthen leadership. The Committee received information on how the North East Commissioning Support Unit is providing independent scrutiny and a CQC steering group was established which will become the Trust Improvement Board from 1 April, which will enhance external scrutiny.

The Director of Quality also provided information on ambulance response times and spoke of the work that had been done to improve the number of crew hours lost since December, which was testament to the good working relationship with health and social care colleagues.

Members of the Committee made comments and questions as follows.

Councillor Stubbs asked why it was necessary to create a new Head of Culture and Staff Experience and how the effectiveness of the post would be measured. The Director of Quality explained that the post was established to respond to reports from staff that they feel reluctant to speak up due to a lack of feedback. Therefore, a culture survey which includes a culture measure will be disseminated to staff and this will gauge whether the culture is improving, as changes are implemented. The Director added that a full action plan in response to the CQC report will be reported to the Trust Improvement Board and progress on actions would be shared with the Committee at a future meeting.

In response to a question from Rosemary Gott as to how controlled drugs are logged in emergency situations, the Director of Quality clarified that an electronic patient care report is completed at the time of an incident and both crew members must record and sign for controlled drugs, used and discarded.

Councillor Haney referred to the changes to the executive board and commented that it would be in the public interest for the non-executive board to be subject to the same scrutiny. The Director of Quality commented that some changes had been made to the non-executive board and funding had been secured for training for non-executive board members on the Patient Safety Response Framework.

Members acknowledged the pressures on staff in the aftermath of the pandemic and stressed that it was important to ensure staff did not feel demoralised by the report. The Director agreed with the sentiments and acknowledged the need to improve staff morale and recognise their value within the organisation as a whole. To that end, improvements were being put in place to ensure staff are listened to and that when an issue of concern is raised, that they are informed when action is taken.

Councillor Gunn remarked that the risk of the non-recurrent financial settlement will be crucial to success in the future.

The Director of Quality concluded by explaining that the CQC steering group will become the Trust Improvement Board on 1 April and the Trust Improvement Board will review the findings of the independent enquiry, the CQC findings and other system improvements.

## Resolved

- a) That the information detailed in the presentation be noted.
- b) That an update report on progress against the Improvement Action Plan be included in the Committee's work programme for 2023/24.

# 8 Adult Learning Disabilities across Durham Tees Valley Update

Due to unforeseen circumstances, the Committee agreed to defer the item to the next meeting.

# Resolved

That the report be deferred.

# 9 2022/23 Q3 Adults and Health Services Budget Outturn

The Committee received a report of the Corporate Director of Resources which provided details of the 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 December 2022 (for copy of report and presentation see file of minutes).

Delivering the presentation, Principal Accountant, Joanne Wilson, highlighted the forecast outturn position of £146,663 million compared to the revised annual budget of £137,989 million. A cash limit underspend of £1.608 million was reported, equating to 1.17% of the net budget and the Committee was provided with key reasons for budget variances. The Committee noted the capital budget for 2022/23 was £100,000 and as at 31 December 2022, capital expenditure of £19,000 had been incurred, with the majority of expenditure due to take place in the final three months of the financial year.

In response to a question from Councillor Stubbs referring to the adult care projected under budget of £2.3 million and the net under budget on employee related costs of £2.1 million, through the level of staff turnover being above budget, the Principal Accountant clarified the main area of overspend related to bad-debt provision and she added that steps were being taken to address the high level of staff turnover.

## Resolved

That the content of the report be noted.

# 10 Such other business

The Principal Overview and Scrutiny Officer reminded the Committee that a Climate Emergency Response Plan workshop was to be held on 27 March 2023 and all non-executive members were encouraged to attend.