

DURHAM COUNTY COUNCIL

At a meeting of **Adults, Wellbeing and Health Overview and Scrutiny Committee** held in Council Chamber, County Hall, Durham on **Monday 9 December 2019 at 9.30 am**

Present

Councillor R Crute (Chair)

Members of the Committee

Councillors A Batey, L Brown, S Quinn, H Smith, J Stephenson and O Temple

Co-opted Members

Mrs R Hassoon and Mr C Cunnington Shore

Also Present

Councillor L Hovvels

1 Apologies

Apologies for absence were received from Councillors J Robinson, J Chaplow, R Bell, P Crathorne, J Grant, T Henderson, E Huntington, P Jopling, C Kay, K Liddell, A Reed, A Savory, M Simmons and C Wilson

2 Substitute Members

There were no substitute members.

3 Minutes

The minutes of the meeting held on 15 November 2019 were agreed 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.

6 NHS Quality Accounts 2018/19: Progress against 2019/20 priorities

The Committee received information from Tees, Esk and Wear Valleys NHS Foundation Trust, North East Ambulance Service NHS Foundation Trust and County Durham and Darlington NHS Foundation Trust that set out progress made against their Quality Accounts priorities for 2019/20 (for copy see file of minutes).

Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV)

The Director of Quality Governance, Tees, Esk and Wear Valleys NHS Foundation Trust gave a brief update and highlighted the four priority areas for 2019/20 as:-

- Personalising care planning
- Reducing preventable deaths
- Improving child to adult service transitions
- Increasing the proportion of inpatients who feel safe on our wards

In referencing the Quality Improvement Metrics, members were informed that the average length of stay for patients in Mental Health Services for Older People Assessment and Treatment wards continued to be underperforming. The Director of Quality Governance indicated that this was often down to the lack of suitable alternative placements to enable transfers of care to be undertaken. Members also noted that the patient experience measures for the Trust were generally better for the Durham and Darlington locality than for other areas within the Trust.

North East Ambulance Service NHS Foundation Trust

The Assistant Director of Communications and Engagement gave a brief update and highlighted the three priority areas as:

- Continue to develop a Just and restorative Culture to improve patient safety
- To develop our mental health implementation plan, working in partnership with others to improve the experience and care provided to patients with mental health needs accessing our services
- To improve early intervention with patients in cardiac arrest

The Chair praised the service for delivering support and training for new community defibrillators and was pleased to learn of the new app 'GoodSAM' whereby a member of staff off duty could be called upon to deliver cardiac care until a paramedic arrived on scene. The Assistant Director of Communications offered to arrange a demonstration on the use of defibrillators and the Chair suggested that he could speak to the AAPs to get the message out to as many people as possible.

County Durham and Darlington NHS Foundation Trust (CDDFT)

The Associate Director of Nursing, County Durham and Darlington NHS Foundation Trust gave a brief update and highlighted the three priority areas as :-

- Safety including falls, dementia care, healthcare associated infections and pressure ulcers
- Experience including nutrition and hydration, end of life palliative care and the friends and family test
- Effectiveness including mortality ratio, reduction in readmissions to hospitals, reduction in length of time to assess and treat in A&E, paediatric care and excellence reporting.

The Associate Director of Nursing advised that the trust had received and outstanding judgement for their end of life care following the recent CQC inspection. She informed the committee that additional winter funding had been received to alleviate the pressure in the A&E assessments. She also went on to advise of two never events, both human factors and the patients were not harmed.

Referring to one of the never events Councillor Temple asked for an explanation as to whether it was private health care staff involved or another body using the facility. The Associate Director of Nursing advised that in this instance it was NHS staff from another facility who were involved.

Councillor Smith was aware of the long standing issues within the accident and emergency department and asked if they had a full complement of staff and if the trust had considered re-opening A&E at Bishop Auckland Hospital to alleviate some of the pressures. The Associate Director of Nursing responded that there was not a full complement of nursing or medical staff although the trust were actively recruiting and roles were being looked at. She was not in a position to answer the question about Bishop Auckland but went on to add that should the trust look at other venues they would also need to all other high level care settings including intensive care.

The Principal Overview and Scrutiny Officer referred to the recently announced CQC Re-section report for County Durham and Darlington NHS Foundation Trust and indicated that a report on this issue would be brought to the Committee's meeting in January 2020.

Resolved:

That the reports be received and noted.

7 Developing County Durham's Approach to Wellbeing

The Committee received a joint report of the Corporate Director of Adult and Health Services and the Director of Public Health, Durham County Council that provided an update on the development of the approach, highlighted examples of where and how the approach was being used and that outlined further areas to embed the approach (for copy see file of Minutes).

The Public Health Strategic Manager advised that the approach to wellbeing across County Durham was to improve physical and mental health with a community approach. There were significant challenges in health inequalities and a gap in some parts of the County with healthy life expectancy for women at 58.7 years and men at 58.9 years. Workshops had been held and 6 key principles had been agreed to support people, places and systems. Work was continuing with the Area Action Partnerships (AAPs) and all information was available through Durham Insight and supported by the Joint Strategic Needs Assessment, policies and plans.

Resolved:

That the contents of this report be noted and to actively support the continuing development of the County Durham Approach to Wellbeing be agreed.