

PUBLIC

MINUTES of a meeting of **IMPROVEMENT AND SCRUTINY COMMITTEE - HEALTH** held on Monday, 21 November 2022 at Committee Room 1, County Hall, Matlock.

PRESENT

Councillor J Wharmby (in the Chair)

Councillors M Foster, D Allen, P Moss, D Murphy (substitute for A Sutton), G Musson and P Smith.

Apologies for absence were submitted for Councillors E Fordham, L Ramsey and A Sutton.

Officers present: Juliette Normington (Democratic Services Officer), Jackie Wardle (Improvement and Scrutiny Officer), Helen Dillistone (Executive Director of Corporate Affairs, Derby and Derbyshire ICB), Keith Griffiths (Chief Finance Officer, Derby and Derbyshire ICB), Berenice Groves (Deputy Chief Executive and Chief Operating Officer, Chesterfield Royal Hospital NHS Foundation Trust), Helen Henderson (Chief Executive, Healthwatch Derbyshire), Zara Jones (Executive Director of Strategy and Planning, Derby and Derbyshire ICB) and Sean Thornton (NHS Derby and Derbyshire).

21/22 DECLARATIONS OF INTEREST

There were no declarations of interest.

22/22 MINUTES OF PREVIOUS MEETING

RESOLVED – to confirm the non-exempt minutes of the meeting of the Improvement & Scrutiny Committee – Health held on 11 July 2022.

23/22 PUBLIC QUESTIONS

There were no public questions.

24/22 THE TRANSITION OF SERVICES FROM GLOSSOP TO DERBYSHIRE ICB

Helen Dillistone, Executive Director of Corporate Affairs and Zara Jones, Executive Director of Strategy and Planning introduced the report, which had been circulated prior to the meeting and provided information on the process of transitioning the commissioning of healthcare for the Glossop population from the former Tameside and Glossop Clinical

Commissioning Group (TGCCG) to the newly formed NHS Derby and Derbyshire Integrated Care Board (DDICB), on 1 July 2022.

The report provided a detailed timeline of the process. The first year would see no changes to the service in order to expediate a smooth transition and to identify the areas that required attention going forward. The benefits of the transfer were stated, together with the ambition of progressing the Place agenda.

The Chair of the Committee stated that the local neighbourhood teams had told her they were very pleased with the way the transition arrangements were going but as expected some local people had concerns, especially regarding the access to GP services. When asked if there would be changes to services as a result of the transition the reply was that none were planned but the Committee would be informed if any arose in the future.

RESOLVED to:

1. Note the process for the transition of healthcare arrangements into the Derby and Derbyshire Integrated Care System from 1 July 2022;
2. Note the engagement undertaken to build and sustain relationships with local community leaders;
3. Note the process currently being undertaken to understand variation on health service provision across Derbyshire; and
4. The ICB would notify the Committee to any service changes as the transition progresses.

25/22 DERBY AND DERBYSHIRE ICS MID-YEAR FINANCIAL UPDATE

Keith Griffiths, Chief Financial Officer introduced the report, which had been circulated in advance of the meeting, and which showed the aggregate financial position for the five NHS providers across Derby and Derbyshire, as well as the ICB with its Primary Care, Commissioning, Prescribing and Community Health Care responsibilities.

The report showed a deficit of £39m. It was noted that the Government's COVID-19 financial assistance had ended but problems were still present, particularly around staff sickness absences. The recruitment of nursing and medical staff had a detrimental impact, with many leaving as a result of the COVID situation. Staff shortages cause issues but savings were being made through the lack of recruitment.

The historical debt from the CCG was inherited by the ICB. The COVID-19 funding over the last 2 years had allowed the CCG to breakeven but as that funding had now ceased, achieving breakeven was becoming more difficult. It was noted that the ICB commitment to achieving a breakeven position was a statutory commitment and the ICB would not enter into agreements that would worsen the financial situation. The aim was to stabilise the situation in the current year so that the Board was in a good place to go forward in the future.

The financial situation was limiting the potential to get services back to pre-COVID levels. This was mainly due to staffing levels, not funding. Members asked for more information on how effective the work on reducing health inequalities was – and where these inequalities were occurring. The ICB officers stressed that their position was not about reducing services to save money, but rather ensuring they were using the money most effectively. There was no room for complacency and the formalisation of the ICB and ICP gave the opportunity to ensure that income was used effectively across the whole health and care system.

It was noted that DCHS, Mental Health Services and EMAS were all performing at a breakeven level financially. EMAS operated across the whole East Midlands region and, where health settings in other ICB areas were affecting the performance of EMAS, they had to contribute more funding than Derbyshire.

RESOLVED to:

1. Note the report; and
2. A progress report be brought back to Committee at a future meeting.

26/22 HEALTHWATCH DERBYSHIRE IIA UPDATE

Helen Henderson, Chief Executive at Healthwatch Derbyshire introduced the report which presented the Healthwatch Summary demonstrating current key and emerging themes and priorities for Healthwatch Derbyshire. Work undertaken included access to GP services, the results of which were due in approximately a month from this meeting and would be shared with the Committee. Work had also been done on Maternal Mental Health and the results would also be shared with the Committee.

Members of the Committee asked for the outcomes of the survey done on the closure of DCC Care Centres. They also asked for any information Healthwatch Derbyshire had on other services, such as access to dental services.

It was agreed that the Committee would meet with Healthwatch Derbyshire informally to ascertain how they could work more closely together in respect of patients' experiences of services across Derbyshire.

RESOLVED to:

1. Accept and note the report; and
2. An informal meeting be arranged for the Committee and Derbyshire Healthwatch to consider ways of working together in respect of the patient experience across Derbyshire.

27/22 SCRUTINY REVIEW OF SECTION 75 AGREEMENTS

Jackie Wardle, Improvement & Scrutiny Officer introduced the report, which had been circulated in advance to the meeting, which informed the Committee of the outcomes of the review of the use of Section 75 Agreements between the County Council and partner organisations and to seek approval to the report recommendations.

The final report gave details of the working group's procedures and the key outcome of the review which was that Section 75 Agreements were a useful mechanism to facilitate joint funding of health and social care, offering flexibility for all parties to work together to provide services efficiently for local patients and clients.

The development and formalisation of the ICB and ICP was an ideal opportunity to prioritise the best use of funds available between partners and this had been highlighted during the discussion on the ICB financial situation earlier in the meeting.

It was stressed that collaboration between health and social care partners was crucial to achieving value for money and an efficient joint funding mechanism was key to this. As such, this review was timely and its recommendations would contribute to the endeavours of the ICP.

RESOLVED to:

1. Note the findings of the Review of Section 75 Agreements;
2. Recognise the benefits of the use of Section 75 Agreements, in appropriate circumstances, between the Council and NHS partners and support their continued use;

3. Promote that the Children's Services Early Intervention and Prevention receive a high priority with the JUCD Children's Board;
4. Submit the findings of this review to the Integrated Care Board and the Integrated Care Partnership to recommend that future joint funding structures between the Council and the NHS are a key element of the new partnership working arrangements to ensure parity and transparency for all funding contributors; and
5. Submit a report to Cabinet seeking agreement to the recommendations of this report.

28/22 PREPARING FOR WINTER

Berenice Groves, Deputy Chief Executive and Chief Operating Officer introduced the report, which had been circulated in advance of the meeting, and briefed the Committee on the substantive aspects of NHS Derby and Derbyshire Integrated Care Board's plan for winter (November 2022-March 2023), specifically:

- Protecting people from COVID-19 and Influenza
- Supporting people in their own home
- Providing an urgent response for those most in need
- Enhancing the resilience of General Practice
- Reducing discharge delays from hospital
- Reducing the backlog for elective and cancer care

Committee posed a number of questions, particularly asking for more details on the targets for Category 2 responders and whether these targets were being achieved. The ICB officers undertook to provide this additional information following the meeting.

In respect of EMAS delivering patients to A & E departments, there was a strategic communications centre which showed real time hospital queuing levels. However, it was not straightforward to send patients to hospitals with lesser queuing levels as they need to go to the departments where the consultants were available for their particular condition. Committee members asked to be informed on how the situation developed over the winter.

RESOLVED to note the current state of the ICB's plan for winter.

29/22 WORK PROGRAMME

Jackie Wardle, Scrutiny Officer informed the Committee of upcoming items for the January committee as follows:

- Primary Care Services – transition to the ICB/ access to services;
- Overview of Maternity Services (in the light of the Ockenden report); and
- The ICS Engagement Strategy – Development and Planning.

RESOLVED to:

1. Note the report: and
2. Note that the review of Urgent Treatment Centres was still on-going and would be reported to Committee in July 2023.

The meeting finished at 4.20 pm