

PUBLIC

**MINUTES** of a meeting of **IMPROVEMENT AND SCRUTINY COMMITTEE - HEALTH** held on Monday, 24 July 2023 at Committee Room 1, County Hall, Matlock.

## **PRESENT**

Councillor J Wharmby (in the Chair)

Councillors M Foster, D Allen, E Fordham, P Moss, G Musson, L Ramsey, P Smith and A Sutton.

Officers present: Craig Cook (Director of Planning, Derby and Derbyshire ICB), Keith Griffiths (Chief Finance Officer, Derby and Derbyshire ICB), Juliette Normington (Democratic Services Officer), Tim Slater (Divisional Director for Derbyshire, EMAS), Jackie Wardle (Improvement and Scrutiny Officer) and Vicky Wright (Deputy Director of Strategy and Participation, EMAS).

### **23/23 DECLARATIONS OF INTEREST**

There were no declarations of interest.

### **24/23 MINUTES OF PREVIOUS MEETING**

**RESOLVED** – to confirm the non-exempt minutes of the meeting of the Improvement and Scrutiny Committee – Health held on 15 May 2023.

### **25/23 PUBLIC QUESTIONS**

#### **Question from Mr David Ingham:**

“I recently attended and observed a meeting of the Health and Wellbeing Board on 13-07-23. During the meeting there was a highly informative presentation which highlighted the highest areas of deprivation within Derbyshire - which appeared in the majority to extend down the eastern boundary of the County. It highlighted a stark picture but the level of data and the transparency of such is to be applauded and key to effective decision making.

I note with interest the report of the ICB relating to the Derby and Derbyshire 5 year plan. I also consider this really informative. At 2.4.3.3. key actions will include: Reallocating primary and community care resource between localities – so that people with the poorest health outcomes have greater access to services and 2.4.5.2. Promoting health literacy - particularly amongst people living in some of the most

disadvantaged communities in Derby and Derbyshire, as a way of improving self-management of conditions.

I don't underestimate for one moment the extensive challenges presented within the 5 year plan but having a regard for the concentrations of deprivation within Derbyshire how will this be specifically factored for and considered when progressing actions such as 2.4.3.3 and 2.4.5.2?"

### **Response from the Integrated Care Board:**

"Many thanks to Mr Ingham for asking the question which asks about how we will ensure that socio-economic deprivation is factored into our work - particularly from the perspective of improving health literacy and building the multi-disciplinary service model at 'PLACE':

### **Health literacy**

The recently published 5-year plan sets out to put people much more control over their healthcare.

A core component of this is the focus to achieve greater 'health literacy', particularly within those individuals and communities which are subject to high levels of socio-economic deprivation, given that:

- it is the strongest correlation to ill health – stronger than education level, deprivation, age, or ethnicity.
- and there is a close link between socio-economic deprivation and low health literacy.

The challenge for the Health and Care Partnership over the next period, is to turn around a situation where only a third of the working age population routinely understand health and wellbeing information they are given.

As a key member of the Partnership, the NHS holds the issue of health literacy intersected socio-economic deprivation in high regard and is taking the following action.

1. **Technology has an important role to play.** There are a variety of different digital platforms that are coming into play and increasingly being used by citizens to interface with the NHS. The most prominent initiative in this regard is the "NHS App" which is developing functionality at a rapid pace – allowing citizens to book appointments, access their personal health information and check symptoms. Whilst there is much more for us to do to achieve

greater uptake of this application, it is positive to see that a greater proportion of people living in the most deprived communities across Derby and Derbyshire are using the functionality compared to those people living in the least deprived.

2. **The role of the voluntary sector is key.** Over the next five-year period, the NHS will strengthen its support to the voluntary sector which plays an instrumental role in connecting health and wellbeing services to Derbyshire Communities, particularly the most marginalised. This will come in the form of infrastructure support and financial settlements which will allow the sector to plan in the medium to long term.
3. **Training and Development.** The NHS in Derby and Derbyshire has a comprehensive training and development programme in play to ensure that staff 'make every contact count' with citizens. More detail of this programme can be found at the following link for further information <https://www.mecclink.co.uk/east-midlands/>

**Give the teams working in our localities, the authority to determine the best ways to deliver improvements in health and care delivery for local people**

Over the next five-year period we intend to 'back' multi-disciplinary teams of professionals, working in and with local communities, with the resources they need to improve 'up stream' intervention. This is one of the most important aspects to our reform agenda and is the only viable course of action. This operating model - a new form of 'organisation of professionals' - offers significant opportunities for greater innovation and flexibility, quickly adapting to errors, fixing problems and targeting their time to those communities in the greatest need.

We start in a good position across Derby and Derbyshire to achieve this and will build on the work that we have already started via our 'Team-Up' approach (that is focused on improving the health and care offer to some of the most vulnerable older people in the community) and we will enhance the scale to which this operates. However, we fully recognise that scaling this approach will involve having to redistribute resource at various levels given the resource constraints that we have - between different parts of the health system but also across different geographical locations. This will involve difficult decisions that the Partnership will work through in a considered way."

Mr Ingham thanked the ICB for their in-depth response. There was no supplementary question.

**26/23**      **EAST MIDLANDS AMBULANCE SERVICE STRATEGY 2023-28**

Vicky Wright, Deputy Director of Strategy and Participation and Tim Slater, Divisional Director for Derbyshire East Midlands Ambulance Service (EMAS) presented an overview of the EMAS Strategy 2023-28 and the work done locally, for consideration by the Committee. The Strategy had been circulated prior to the meeting.

Committee members appreciated the work that had gone into producing the Strategy and recognised that the service was very much valued however, they felt there was a disappointing lack of detail around response times, key performance indicators and staff retention figures and members asked for this to be provided.

In reply, significant improvement had been made with Category 2 responses, but this was a nationwide issue and there were many challenges to overcome, particularly around hospital handovers, staffing, achieving net zero and financial savings.

**RESOLVED** for EMAS be requested to provide the statistical data necessary to undertake scrutiny of performance.

**27/23**      **DERBY AND DERBYSHIRE NHS 5-YEAR PLAN 2023/24-2027/28**

Craig Cook, Director of Planning, Integrated Care Board introduced the report which had been circulated prior to the meeting briefing Committee Members on the Derby and Derbyshire NHS' 'Joint Forward Plan' which had been published on 30<sup>th</sup> June 2023. The Plan described how the ICB, and its partner trusts planned to arrange and/or provide NHS services to meet their population's physical and mental health needs.

The Plan set out the detail around the operating model which focussed on delivery and bringing down waiting lists. There were a series of challenges, including the freeing up the hospitals, keeping the vulnerable well over the Winter, the demography of the county and finance. Technology innovation was key to success.

Committee members welcomed the report and recognised that prevention and public engagement were crucial however the need for services that prevent ill-health and those that support the hospital discharge process be protected financially as a means to benefit acute services in the long term.

**RESOLVED** to note and discuss the Derby and Derbyshire NHS' Five Year Plan.

28/23

## **DERBY AND DERBYSHIRE ICB FINANCIAL UPDATE**

Keith Griffiths, Chief Finance Officer introduced the report, which had been circulated prior to the meeting and which gave an update on the current financial situation and a means of providing assurance of plans to maintain financial control in the NHS in Derby and Derbyshire.

The report was accompanied by a presentation which gave an income and expenditure summary breakdown. Derbyshire was now in a period of convergence and faced a sizeable challenge to breakeven. It was noted that NHS structures were now different to that pre-COVID with investment being retained. The convergence was welcomed to improve the health care environment and experience.

The financial outlook saw a need to improve productivity out of core hours and to manage an increased pay bill. A cultural change was needed in the primary and secondary care sectors and future health needed to be managed in order to ease in-hospital care, with cardio vascular being the standout area. Part of the five-year plan included the discharge of patients from Chesterfield Royal Hospital which had become a real challenge, working collectively with partners who provide adult care services to release acute beds.

Committee members welcomed the report and thanked Mr Griffiths for his openness around the current situation and recognised the challenges for leadership whilst maintaining care levels.

**RESOLVED** to note the update on the financial position of the Derby and Derbyshire NHS.

29/23

## **WORK PROGRAMME**

Jackie Wardle, Improvement and Scrutiny Officer advised the Committee of the items expected at the September meeting:

- Dean Wallace, Director of Operations, Derbyshire Community Health Service (Committee members were invited to submit issues they wished Mr Wallace to respond to);
- Maternity Services Update
- GP Access to Services

A Notice of Requisition signed by Councillors D Allen, L Ramsey and E Fordham was submitted to the Chair, requesting a meeting of the Committee in accordance with the Improvement and Scrutiny Procedure rules to consider the health implications for children following the decision taken by the Cabinet Member for Education to increase the

price of school meals.

Committee members were keen for EMAS to provide comprehensive, up-to-date figures on response times, particularly for Category 2 incidents, recruitment and retention details and key performance indicators.

**RESOLVED** to:

- 1) To accept the work programme for the meeting on 25 September 2023;
- 2) The Chair of the Committee accepted the Requisition Notice on behalf of the Committee and undertook to make the necessary arrangements to consider the issue further; and
- 3) Invite EMAS to a future meeting to present the statistics requested by Committee members.

The meeting finished at 4.15 pm