Unconfirmed



Minutes of the meeting of the **Health Scrutiny Committee** held on 18 March 2015 at 10:30am in the King Edmund Chamber, Endeavour House, Ipswich.

Present: Councillors Michael Ladd (Chairman), Sarah Adams, Terry

Clements and Bert Poole.

Co-opted Councillors Trevor Beckwith (St Edmundsbury Borough

members: Council), David Bimson (Forest Heath District Council), Jan

Garfield (Suffolk Coastal District Council), Elizabeth Gibson-Harries (Mid Suffolk District Council), Mary Munson (Babergh District Council) and Hugh Whittall (Ipswich

Borough Council).

Also present: Councillors Alan Murray, Joanna Spicer and Inga

Lockington.

Supporting Theresa Harden (Business Manager (Democratic Services)

officers present: and Rebekah Butcher (Democratic Services Officer).

34. Public Participation Session

There were no requests to speak from members of the public.

35. Apologies for Absence and Substitution

Apologies for absence were received from Councillor Colin Noble and Councillor Alison Cackett. There were no substitutions.

36. <u>Declarations of Interests and Dispensations</u>

Councillor Jan Garfield declared a non-pecuniary interest in Agenda Item 5 (GP Services in Suffolk) by virtue of the fact her son was employed as a Consultant at Ipswich Hospital.

37. Minutes of the Previous Meeting

The minutes of the meeting held on 20 January 2015 were confirmed as a correct record and signed by the Chairman.

38. **GP Services in Suffolk**

Agenda Item 5 provided an opportunity for the Committee to consider the current challenges for general practice and the steps being taken to secure high quality GP services to meet the needs of Suffolk residents both now and in the future.

The Committee noted the following discrepancy in the reports:

In Evidence Set 1, page 21, paragraph 7, it stated: "Currently in Suffolk there are 66 GP practices: 42 PMS contracts (4 of which are proposing to move to GMS contracts from 1 April 2015), 23 GMS contracts, 1 APMS contract"

In Evidence Set 2, page 27, paragraph 4, it stated: "By April 2015, 39 practices will hold a PMS contract with 26 holding a GMS contract."

The correct figures were as set out in Evidence Set 1.

The Chairman welcomed the following witnesses to the meeting:

Sharon Gray, Assistant Contract Manager, East Anglia Area Team, NHS England;

Stuart Smith, Primary Care Support Officer, East Anglia Area Team, NHS England;

Maddie Baker-Woods, Chief Operating Officer, Ipswich and East CCG;

Dr Giles Stevens, West Suffolk CCG;

Andy Evans, Chief Executive, HealthEast CCG;

Tanya Simpson-Biles, Inspection Manager, Care Quality Commission;

Stephen Dunn, Chief Executive, West Suffolk Hospital;

Nick Hulme, Chief Executive, Ipswich Hospital;

Councillor Alan Murray, Cabinet Member for Health and Adult Care and Chairman of the Suffolk Health and Wellbeing Board, Suffolk County Council; and

Tony Rollo, Chairman, HealthWatch Suffolk.

The Chairman invited the witnesses to introduce the relevant sections of the report. Questions were then received from the Committee.

Recommendation: The Committee agreed:

- a) to offer its support to NHS England and the local CCGs in communicating key health messages to Suffolk residents;
- b) to request further information about training and recruitment of GPs from Health Education East for a future meeting;
- to ask members of the Committee to email the Business Manager (Democratic Services) with the issues they would like to see addressed;
- d) to request information about the number of practices offering training opportunities for GPs in Suffolk;
- e) to request an update on the Suffolk bid to the Prime Minister's Challenge Fund; and
- f) to request an information bulletin update on work to develop links between HealthEast and Waveney District Council in six months' time.

Reason for Recommendation:

- a) The Committee felt it was important to ensure Suffolk residents, particularly patients, were kept informed of the latest information from the NHS. The Committee was informed that GP practices were experiencing a range of pressures including financial pressures, increasing demand for services from changing demography and patients with more complex conditions, local housing growth, and problems with the recruitment and retention of GPs. A range of steps were being taken to help to address these challenges. Although overall patient experience was reported to be good for Suffolk, there were some inconsistencies and the ability for patients to get an appointment with a GP was reported to be problem in some areas. Practices were looking at initiatives to help to address this, for example by extended opening hours and initiatives such as "Doctor First", which provided patients with an opportunity to speak to a GP on the telephone as a first step, potentially averting the need for a GP appointment. It was reported that the role of GP practices was evolving with practices moving towards a multi-disciplinary team approach, providing opportunity for patients to been seen by a range of professionals such as nurses or community healthcare staff, depending upon However, it was reported that some patients were their needs. less willing to engage with this approach, preferring to wait for an appointment to see their GP. Members suggested they were in a good position to help the CCGs communicate these messages to their local residents.
- b) The Committee understood there were many potential reasons why newly qualified Doctors were not becoming GPs. Examples included workload pressures, cost of buying in (for example to the premises) or not wanting to commit to a certain locality. The Committee requested further information about the arrangements for training and recruitment of prospective Doctors in Suffolk to better understand the issues.
- c) Members of the Committee had a number of questions regarding training and recruitment of GPs. It was agreed questions should be sent to the Business Manager who would be able to ensure this information was provided to a future meeting
- d) The Committee was keen to understand how many surgeries in Suffolk were providing training opportunities for GPs and whether there were opportunities for rotation within system to provide prospective Doctors with a greater variety of experience.
- e) The Committee heard that a response was awaited on a bid that had been placed for Suffolk, led by the GP Federation and supported by the CCGs, to the Prime Minister's Challenge Fund and requested an update on the outcome of this. The Committee noted that the funding available was for a period of one year.

f) The Committee was interested to hear about a new role, 'Head of Communities', which had been a joint appointment between Waveney District Council and HealthEast CCG. The role was to develop improved links between the two organisations with a view to ensuring people and organisations were aware of the range of services available locally. It was hoped the role could help to ease pressure on GP practices and the Committee wanted to receive an update as to how this was working at a future meeting.

Alternative options: There were none considered.

Declarations of interest: Councillor Jan Garfield declared a non-pecuniary interest in Agenda Item 5 by virtue of the fact that her son was employed as a Consultant at Ipswich Hospital.

Dispensations: There were none noted.

With agreement of the Committee, the order of business was altered from the Agenda as reflected in the Minutes below.

39. Information Bulletin

The Committee noted the information bulletin at Agenda Item 7.

40. Forward Work Programme

At Agenda Item 8 the Committee considered its Forward Work Programme, having regard to the Information Bulletin and Health and Wellbeing Board Forward Work Programme.

The Committee put forward various suggestions for inclusion on the programme, with contributions from others present.

Recommendation: The Committee agreed:

- a) to consider mental health services at its next meeting, including a review of Child and Adolescent Mental Health Services (CAMHS);
- b) to invite clinicians to speak to the Committee regarding mental health services;
- to note the update from Councillor Gibson-Harries regarding services provided at Hartismere Hospital and to request further updates on progress through the Information Bulletin;
- d) to note comments from the Cabinet Member (Health and Adult Care), that the Health and Wellbeing Board was looking at communication with the public about health and care issues locally;
- e) to note the update from Councillor Spicer regarding the future of GP practices at Hopton and Stanton; and
- f) to request an information bulletin update on ambulance response times for Suffolk.

Reason for Recommendation:

a-f) Members wished to consider the views of those present and agree topics for inclusion in the Committee's forward work programme.

Alternative options: There were none considered.

Declarations of interest: There were none declared.

Dispensations: There were none noted.

The Committee adjourned for lunch at 12.45pm and reconvened at 1.30pm.

41. Care Quality Commission Report on Mildenhall Lodge: Follow up

Agenda Item 6 provided the Committee with an opportunity to consider the information requested at its meeting on 15 October 2014, and to raise any outstanding questions and concerns.

The Chairman welcomed the following witnesses to the meeting:

Cathy Craig, Assistant Director, Adult and Community Services (ACS), Suffolk County Council;

lan Patterson, Project Manager, Adult and Community Services, Suffolk County Council;

Andrew Knight, Managing Director, Care UK;

Rachel Gilbert, Regional Operations Director, Suffolk, Care UK;

Councillor Alan Murray, Cabinet Member for Health and Adult Care and Chairman of the Suffolk Health and Wellbeing Board, Suffolk County Council; and

Tony Rollo, Chairman, HealthWatch Suffolk.

The Committee noted that Jo Govett, Inspection Manager from the Care Quality Commission (CQC) had intended to be present, but had needed to send her apologies.

The Chairman invited the witnesses to introduce the relevant sections of the report. Questions were then received from the Committee.

Recommendation: The Committee agreed:

- a) to ask the Chairman to highlight the Committee's concerns regarding the CQC reporting timescales and to seek further information about their inspection process and reporting arrangements;
- b) to seek information from the CQC about how new homes will get their CQC rating;
- c) to request that the Committee receive a copy of the CQC report on Mildenhall Lodge at the earliest opportunity; and
- d) to request a copy of the Action Plan for Mildenhall Lodge, once this had been finalised.

Reason for Recommendation:

- a) The Committee was informed that Care UK had just received the draft CQC inspection report for Mildenhall Lodge and that a meeting would be held the following day to review the content, prior the final report being published. The Committee found it unacceptable that it had taken three months for the inspection report to be presented to Care UK and felt that a time lapse of this duration was not in the public interest, or in the interests of the residents, families and organisations involved. Representatives from Adult and Community Services reported that a number of improvements had already been put into effect by Care UK but the suspension by the County Council on making placements at the home had not been lifted pending availability of the findings from the most recent inspection. The Committee requested that the Chairman make these concerns known to the CQC and seek clarification regarding the process and arrangements for reporting.
- b) The Committee was informed that another of the new Care UK homes in Suffolk (Asterbury Place) had also been inspected by the CQC in late October and the outcomes had just been shared with Care UK. The Committee was informed that the CQC would not be providing this home with a rating as it was too soon since the home opened to be able to draw clear conclusions. The Committee wished to receive information on how CQC would provide ratings for other new care homes where they did not have a 'track record'.
- c) The Committee was appreciative of the frank and open approach taken by Care UK to answering the Committee's questions at the meeting. However, members were disappointed that the report from the latest inspection of Mildenhall Lodge was not available in time for the meeting. The Committee found this unhelpful and asked if a copy of the report could be made available to members at the earliest opportunity, ideally once the final content had been agreed by both parties, and in confidence if necessary, prior to formal publication.
- d) The Committee was informed that Care UK would be reviewing the content of the latest CQC report, and updating its existing Action Plans to ensure any areas for improvement identified by the CQC were being fully addressed.

Alternative options: There were none considered.

Declarations of interest: There were none declared.

Dispensations: There were none noted.

42. Urgent Business:

There was no urgent business.

The meeting closed at 2:02pm.