

Adult Social Care and Health Select Committee

A meeting of Adult Social Care and Health Select Committee was held on Tuesday, 22nd June, 2021.

Present: Cllr Evaline Cunningham (Chair), Cllr Clare Gamble, Cllr Luke Frost, Cllr Ray Godwin, Cllr Lynn Hall, Cllr Mohammed Javed, Cllr Steve Matthews, Cllr Paul Weston

Officers: Emma Champley (A&H); Darren Boyd (FD&BS); Gary Woods (MD)

Also in attendance: Dominic Gardner (Tees, Esk & Wear Valleys NHS Foundation Trust)

Apologies: Cllr Jacky Bright

ASH 1/21

Councillor Evaline Cunningham declared a personal, non-prejudicial interest in relation to agenda item 4 (Scrutiny Review of Hospital Discharge (Phase 2)) as she was currently a Director of Eastern Ravens.

Councillor Ray Godwin declared a personal, non-prejudicial interest in relation to agenda item 5 (Tees, Esk & Wear Valleys NHS Foundation Trust – Update on CQC-related issues) as he was currently an employee of Tees, Esk & Wear Valleys NHS Foundation Trust.

ASH 2/21

Consideration was given to the minutes from the Committee meeting held on the 18th May 2021.

AGREED that the minutes of the meeting on the 18th May 2021 be approved as a correct record and signed by the Chair.

ASH 3/21

Consideration was given to the draft final report and recommendations for the Scrutiny Review of Hospital Discharge (Phase 2). Amendments were proposed as follows:

- Paragraph 1.14 (page 10) (replicated at paragraph 5.8 (page 40)): The Chair had requested a minor re-wording of the second sentence for increased clarity.
- Recommendation 7 (page 12) (replicated at recommendation 7 (page 42)): Acknowledging the expiration of funding in mid-2022 for the Five Lamps Home from Hospital initiative, the Committee suggested that an update on developments around this service is built into recommendation 7 (in addition to the NTHFT Home But Not Alone volunteer service).

With reference to the survey feedback from Eastern Ravens at paragraph 4.55 (page 29), Members were keen to learn if there had been any positive changes in the experiences of young carers since the data was collected, particularly around information being given to support their family. It was noted that one of the review's recommendations involved local NHS Trusts developing their

relationships with Eastern Ravens, and that an update on young carer involvement in the discharge-from-hospital process would form part of the monitoring procedures that follow the completion of a scrutiny review once a final report has passed through Cabinet.

Although unable to be present at this meeting, the Deputy Leader of the Council and Cabinet Member for Health, Leisure and Culture had asked for his thanks to be passed onto the Committee for their work on this important issue.

AGREED that the final report be approved for submission to Cabinet, subject to the two amendments identified.

**ASH
4/21**

Tees, Esk & Wear Valleys NHS Foundation Trust – Update on CQC-related issues

Further to an unannounced Care Quality Commission (CQC) inspection on some of Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) adult inpatient wards in January 2021, and the subsequent CQC report published in March 2021, the TEWV Director of Operations (Teesside) was in attendance to present an overview of the organisation's response to the concerns identified.

The Committee was informed that the CQC visit in January 2021 focused on 'risk' and was in response to a serious incident which took place in 2020. Following the inspections, TEWV received correspondence from the CQC relating to concerns about its risk management processes, which they felt were complex and difficult to follow. Due to these concerns, and subsequent enforcement action, the CQC had rated TEWVs acute wards for adults of working age and psychiatric intensive care units 'inadequate' for both the 'safe' and 'well-led' domains. This rating was an individual service rating and did not affect TEWVs overall Trust CQC rating which remained 'requires improvement'.

Several significant steps that TEWV had taken to address the issues raised were detailed in a briefing note, and this was supplemented by a presentation which further outlined improvement actions in response to the CQCs concerns, the main features of which included:

- CQC inspections in January: Concerns raised around a duplication of processes which were not aligning, as well as where risk information could be accessed (i.e. if there were any changes to risk during the day).
- Our action plan: TEWV had operated the PARIS care record system for numerous years but this had become unwieldy for staff to navigate and use. A new system was being developed (with input from service-users and their carers) based on patient pathway and would include a section for key partners (e.g. GPs / ambulance service) to access along with a portal for patients and carers (with permission) to view their own records – this had been due for roll-out at the start of 2021 but had been delayed until next year due to the impact of COVID-19.

The external Quality Assurance Board, which oversees and reviews the TEWV improvement programme, includes Local Authority engagement, and embedding change during a pandemic was a big challenge, particularly when staff were dealing with their own personal issues brought about by COVID-19 in

addition to those in the workplace.

- Actions: Patient risk information consolidated into two documents, with the safety (risk assessment) summary informing the accompanying safety (risk management) plan for individuals in both inpatient and community settings. Assurance schedules were in place previously, but these were more focused on elements of records in isolation – this had now changed. The introduction of practice development teams (initially in acute adult areas) has provided support for staff (nursing and the broader multi-disciplinary teams) around documentation.

The Oxehhealth Digital Care Assistant had already seen a positive impact and offers patient support in addition to the engagement and observation methods (a clinical judgement is made as to what modes of support best suit an individual). Additional administrative staff are being recruited to help free-up nursing staff from clerical tasks.

- Assurance and oversight: The CQC had conducted a further focused inspection in the last few weeks, and whilst the formal report had yet to be released, no immediate concerns had been raised with the Trust. Encouragingly, verbal feedback had been received which indicated that clear improvements had been made. TEWV was currently subject to a CQC ‘well-led’ inspection across multiple settings.
- Further actions (‘Our Journey to Change’): This concept pre-dates the CQC inspection in January 2021 and is the output of the ‘Big Conversation’ engagement exercise with patients, carers, staff and partners. It is a five-year plan that TEWV are at the beginning of, and this vision, the values and the three strategic goals are seen as the bedrock of what the Trust do.

The Committee reflected on the challenging times experienced by all those connected to TEWV (its patients, frontline staff and, now, senior management) and drew attention to the Trust’s governance and assurance mechanisms which should be giving the organisation a sense of what needs addressing.

Members probed the situation around staffing levels and asked if the CQC had identified any concerns in relation to the TEWV workforce (e.g. staff turnover and / or experience). In response, the Committee was informed that there were no specific issues raised around staffing levels in the January 2021 inspection report, though the reasons for risk documentation becoming a concern could be exacerbated by certain staff not being as familiar with a patient, a situation which can be caused when using bank staff (which the Trust does rely on). The investment in inpatient staff is to reduce reliance on bank and agency staff.

Acknowledging the need to address existing shortcomings as well as consider the likely increase in demand for mental health services brought about by the COVID-19 pandemic, the Committee questioned the current situation around staff recruitment. TEWV highlighted, and indeed welcomed, the national investment which had been made available around recruitment, though noted that this needed to be viewed in the context of numerous years of underinvestment and negatively-impacting changes to training programmes. Issues regarding the recruitment of Psychiatrists and Medics in general were well documented, and it was crucial that the Trust engaged with the population

(both local and further afield) to clearly demonstrate the benefits of working for the organisation (i.e. ensuring roles are supported, realistic and manageable). It was in the interests of all partners (not just TEWV itself) that people were attracted to mental health professions, and satisfying current and future demand on services required a whole-system response. TEWVs involvement in a 'safe staffing tools' pilot (to determine levels of acuity to ensure appropriate staff levels) was also noted.

Reference was made to the historical failings at West Lane Hospital, Middlesbrough, which preceded the issues raised in this latest inspection of the Trust's adult inpatient wards, and expressed concern that the same Board had presided over both. Assurance was given that lessons had been learned from West Lane regarding environmental risk, and that the key issues from the adult acute inspection were more around information / documentation aligning. Members also raised concerns in relation to the Trust's latest Friends and Family Test results which, it was suggested, had deteriorated (though caution was noted around survey return rates).

On a more positive note, the Committee was pleased to hear of plans to get families and carers more involved in shaping the care that an individual can receive, as well as the additional administrative staff to support clinicians. Members also highlighted the importance of ensuring staff can, and feel able to, speak out if they feel things are not right – this needed to be embedded as part of the Trust's culture.

Responding to a query around TEWVs learning disability offer, the Committee was informed of the current challenges involving learning disability packages in the community and the Trust's desire to strengthen local provision. Conversations with the Local Authority were ongoing as to how this could move forward, though there were plans in place to update some of the learning disability-related estates now they were re-opening following the lifting of COVID-19 restrictions.

AGREED that the TEWV update on CQC-related issues be noted and that a further update be presented to the Committee at a future meeting.

**ASH
5/21**

Care Quality Commission (CQC) Inspection Results - Quarterly Summary (Q4 2020-2021)

The Committee was presented with the latest quarterly summary regarding CQC inspections within the Borough. As with recent summaries, the reporting period (January to March 2021 (inclusive)) continued to be affected by the ongoing impact of COVID-19 on the CQC inspection programme.

Sixteen inspection reports were published during this period, most of which were 'focused inspections' which had been introduced as a result of the pandemic and involved checks on infection prevention and control management (a link to the published report was provided rather than a full briefing report). The exception to this was Roseville Care Centre, where a standard briefing was included in light of previously identified issues. Specific attention was drawn to the following:

- Care Matters Teesside (Homecare) Ltd: Improvements in both the 'safe'

and 'well-led' domains culminated in an overall "good" rating (up from 'requires improvement' when last inspected) – this was a particularly positive achievement considering the need to manage additional issues in relation to the ongoing pandemic.

- Roseville Care Centre: This latest targeted inspection was to check whether the previous breach of regulations and other concerns had been addressed. Not enough improvement had been made, therefore the overall rating remained 'requires improvement'. The CQC had not yet conducted a further follow-up, but the Council would soon be undertaking a PAMMS assessment (online tool to assess the quality of care delivered by providers).
- Woodside Grange Care Home: Despite further improvements being needed for the 'well-led' domain, all other areas were now rated 'good' (rather than 'requires improvement' as was previously the case). A further focused inspection (published on the 6th February 2021) showed that appropriate infection prevention and control (IPC) measures were in place.

In response to a Committee query, it was confirmed that two embargoes were currently in place which prohibited those care homes taking-on new residents (it was noted that neither Roseville Care Centre nor Rosedale were embargoed at present).

With reference to the IPC focused inspections listed within the quarterly summary, the Committee re-iterated previous concerns regarding the level of robustness and reporting detail (and again questioned the level of CQC visibility in care homes). To give Members assurance that providers were meeting the eight IPC measures shown in the Teesdale Lodge Nursing Home example, the Committee requested full briefing reports for all inspections (full and focused) in future quarterly summaries.

Correspondence circulated to Members regarding further recently-published CQC inspection reports was noted as it also included the first briefings following recent PAMMS assessment reports – these would be incorporated into future quarterly summaries alongside the briefings for CQC inspections.

AGREED that the Care Quality Commission (CQC) Inspection Results - Quarterly Summary (Q4 2020-2021) report be noted

**ASH
6/21**

Minutes of the Health and Wellbeing Board

Consideration was given to the minutes of the Health and Wellbeing Board from the meetings in March and April 2021.

AGREED that the minutes of the Health and Wellbeing Board from the meetings in March and April 2021 be noted.

**ASH
7/21**

Work Programme 2021-2022

Consideration was given to the Committee's current Work Programme. The next meeting was scheduled for the 20th July 2021 and would involve consideration of the draft scope and plan for the Committee's next in-depth review of Day Opportunities for Adults, as well as a further progress update on

outstanding actions in relation to the previously-completed Scrutiny Review of Hospital Discharge (Phase 1). It was noted that the Healthwatch Stockton-on-Tees Annual Report 2020-2021 would likely be considered in September 2021 (not July 2021 as stated).

Members were also informed that a date for the next meeting of the Task and Finish Group undertaking the Scrutiny Review of Multi-Agency Support to Care Homes during the COVID-19 Pandemic (Task & Finish) would be circulated in due course.

AGREED that the Adult Social Care and Health Select Committee Work Programme for 2021-2022 be noted.

**ASH
8/21**

Chair's Update

The Chair had nothing further to report.