# **APPENDIX 1**

#### TEES VALLEY JOINT HEALTH SCRUTINY COMMITTEE

Friday, 23 September 2022

**PRESENT** – Councillors Layton (Chair), Bell, Mrs H Scott, Rob Cook, Rachel Creevy, Ian Blades, Alma Hellaoui, Dan Rees, Anne Watts, Evaline Cunningham, Clare Gamble and Lynn Hall

APOLOGIES - Councillors Angela Falconer, Dorothy Davison and Sandra Smith

ALSO IN ATTENDANCE – David Gallagher (North East and North Cumbria Integrated Care Board), Craig Blair (North East and North Cumbria Integrated Care Board), Jackie Bendle (County Durham and Darlington NHS Foundation Trust), Gordon Lau (County Durham and Darlington NHS Foundation Trust), Brent Kilmurray (Tees, Esk and Wear Valley NHS Foundation Trust), David Jennings (Tees, Esk and Wear Valley NHS Foundation Trust), James Graham (Tees, Esk and Wear Valley NHS Foundation Trust), Kedar Kale (Tees, Esk and Wear Valley NHS Foundation Trust), Chris Morton (Tees, Esk and Wear Valley NHS Foundation Trust), and Ranjeet Shah (Tees, Esk and Wear Valley NHS Foundation Trust)

**OFFICERS IN ATTENDANCE** – Hannah Miller (Democratic Officer), Alison Pearson (Governance Manager), Joan Stevens (Statutory Scrutiny Manager), Gary Woods (Scrutiny Officer), Caroline Breheny (Democratic Services Officer), Gemma Jones and Rae Puggmurr

### 8 APPOINTMENT OF CHAIR FOR THE MUNICIPAL YEAR 2022/23

**RESOLVED** – That Councillor Layton be appointed Chair of this Committee for the remainder of the 2022/23 Municipal Year.

## 9 APPOINTMENT OF VICE CHAIR FOR THE MUNICIPAL YEAR 2022/23

**RESOLVED** – That Councillor Cunningham be appointed Vice-Chair of this Committee for the remainder of the 2022/23 Municipal Year.

### 10 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

### 11 MINUTES OF THE MEETING HELD ON 8 JUNE 2022

Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 8 June 2022.

In relation to Minute 3, Members highlighted concerns regarding the accessibility of the minutes for the special meeting of the Council of Governors on the Trust's website and requested a copy of the minutes be provided.

**RESOLVED** – That the Minutes of the meeting of this Scrutiny Committee held on 8 June 2022 be approved as a correct record.

# 12 CLINICAL JOURNEY AND QUALITY JOURNEY - TEES, ESK AND WEAR VALLEY NHS FOUNDATION TRUST

The Chief Executive, Tees, Esk and Wear Valley NHS Foundation Trust submitted a presentation (previously circulated) updating Members on the Clinical Journey and Quality Journey of the Trust. The Chair, Tees, Esk and Wear Valley NHS Foundation Trust introduced the presentation.

The presentation outlined the key achievements and progress made to date by the Trust; particular reference was made to improved operational oversight as demonstrated in the recent CAMHS CQC inspection report and the significant increase in compliance for statutory and mandatory training and workforce growth of 10 per cent; a number of challenges remained and responses to the challenges included listening to feedback and engaging with people and strengthening governance and assurance.

Details were provided of the five themes of the Journey to Change and the ambitions and principles of the clinical journey were outlined; reference was also made to how the Trust would deliver on its ambitions, including developing Community Mental Health hubs, personalising care plans and enabling digital transformation.

Following a question regarding the increase in the Trusts workforce by 700 staff, Members were informed that the roles appointed to were across a range of service areas, that 65 new nurses were due to commence working with the Trust in September and an apprenticeship pathway enabled support workers to train to become a Registered Nurse over a five year period; and the Trust were working with partners to provide a range of different pathways for staff recruitment and development.

A question was raised regarding cyber threats; Members were assured that business continuity plans were in place to avoid cyber-attacks and there had been significant investment in this area. Members also questioned the progress of digital transformation work and accessibility of patient records and were informed that work was ongoing to provide digital access for those patients that attend digital appointments and that access to the electronic patient records was being improved to ensure GP's and hospitals had access to the appropriate information.

Discussion ensued regarding the recent CQC inspection report for CAMHS; Members were assured that in terms of statutory and mandatory training, the targets for safeguarding training were being met and the Trust were working through a training backlog which came as a result of covid. Members requested copy of the CAMHS CQC inspection report and the CQC inspection report for SIS once published.

In relation to the Clinical journey in action, reference was made to the Three Hartlepool Community Hubs; these would help any person who was seeking support through the wide collection of services delivered through the hubs; that the aim was for hubs to be in place across the Tees Valley by Spring/Summer 2023. Details were also provided of the programme of work undertaken by Stockton CAMHS to deep dive their caseload and review the assessment and allocation processes in place. Members were informed that caseload size had reduced by more than 50 per cent over a period of 12 months through appropriate and

planned discharge or referral to alternative services; and the significant improvements to capacity and demand had resulted in low wait times for assessments and treatment.

The Clinical Journey next steps were outlined; discussion ensued regarding engagement and feedback and Members were advised of engagement activities via parent and carer forums, friends and family tests and participation groups.

The presentation provided details of the three domains of the Quality Journey; the Trusts commitments to the Quality Journey and the patient safety priorities were outlined; and reference was made to the elements of patient experience and involvement and effective care. Members were also provided with details of the progress in respect of the Quality Journey with particular reference made to the investment in environmental and assistive technology to improve safety on wards.

Discussion ensued regarding governance and challenge; Members were advised that the governance restructure had simplified the flow of information and improved transparency, a new Head of Risk had been appointed and workshops delivered to encourage staff to report risks. Members also noted the role of the Board of Governors in providing challenge and it was suggested that the governance structure be shared with Members.

Following concerns raised regarding restrictive interventions, Trust representatives advised Members that whilst this was an area of challenge, the Trust had received advice from nationally recognisned experts, were implementing the Merseycare HOPES model and had seen a decrease in prone restraint by 60 per cent.

The presentation outlined the background to the Lived Experience roles which were created following a review of coproduction and service user and care involvement; the responsibilities of the Lived Experience roles were outlined; and Members noted that two Lived Experience Directors were in place, Chris Morton for Durham, Tees Valley and Forensics Care Group Board and Charles Nosiri covering North Yorkshire, York and Selby Care Group Board. Particular reference was made to the main focus of the lived experience directors to date.

Discussion ensued regarding capturing the voice of the parent/carer particularly those accessing CAMHS and communication of the Trusts progress to the public; and sought assurance from the Trust in respect of safeguarding the mental health of staff. Members were assured of a range of measures in place to support the wellbeing of staff and that the Trust had invested in comms resources to ensure positive news stories and areas of improvement could be highlighted to the public.

**RESOLVED** – That the Chief Executive and representatives from Tees, Esk and Wear Valley NHS Foundation Trust, in attendance at the meeting, be thanked for their informative presentation.

# 13 NORTH EAST AND NORTH CUMBRIA INTEGRATED CARE BOARD AND SYSTEM IMPLEMENTATION

The Executive Director of Place Based Delivery, Tees Valley and Central, North East and North Cumbria Integrated Care Board submitted a presentation (previously circulated) updating

Members on the North East and North Cumbria Integrated Care Board and System Implementation.

It was reported that the North East and North Cumbria Integrated Care Board (ICB) was now in place; reference was made to the confirmed ICB leadership team and Members were informed that the ICB holds regular meetings across the region.

Details were provided of the Integrated Care Partnership (ICP); that four area ICPs would be established alongside the strategic ICP; and the area ICPs would be based on existing geographical groupings, with one covering the Tees Valley area. The presentation outlined the roles and accountabilities, proposed roles and membership of the ICPs.

**RESOLVED** – (a) That the Executive Director of Place Based Delivery, Tees Valley and Central, North East and North Cumbria Integrated Care Board be thanked for his informative update.

(b) That a workshop be arranged for this Scrutiny Committee on the Integrated Care Partnership.

#### 14 URGENT AND EMERGENCY CARE ACCESS

The Director, North East and North Cumbria Integrated Care Board provided an update on Urgent and Emergency Care Access. A presentation and stakeholder briefing (previously circulated) accompanied the update.

It was reported that a review of demand in urgent and emergency care by the Integrated Care Board had been undertaken over the past 18 month period; during this period services had seen an increase in demand across the region; this increase was thought to be due to confusion regarding access to urgent care services; and it was noted that services in Stockton, Hartlepool and Darlington differed to those in Middlesbrough and Redcar and Cleveland.

Scrutiny were informed of the proposed new model of integrated urgent care service which had been developed by groups of local Doctors and Nurses who deliver urgent care services; the key changes included a new Integrated Urgent Treatment Centre (UTC) at The James Cook University Hospital and increased opening hours at Redcar Primary Care Hospital, providing 24/7 access to urgent care for all residents of South Tees and the wider Tees Valley; and the benefits of the proposed new model were outlined.

Reference was made to the engagement activity being undertaken which would help to inform the development of proposals; and that feedback would be collated, key themes identified and shared.

Discussion ensued regarding lack of services for the residents of Guisborough and availability of public transport to access services; the Director assured Members that the proposed new model would provide a standardised offer, ensuring all residents across the Tees Valley would have the same access to the same high standard of urgent care and that a transport study had been commissioned to identify gaps. A Member from Middlesbrough Council informed the Committee that residents of Middlesbrough were in support of the proposals.

Following concerns raised regarding long wait times for NHS111 services Members were informed that work was underway to increase the capacity of NHS111. Further discussion ensued regarding the NHS111 service including the need to improve comms/messaging in relation to accessing urgent care services via NHS111. It was suggested a workshop be arranged for Members respect of 111 and urgent care services.

**RESOLVED** – (a) That the Director, North East and North Cumbria Integrated Care Board be thanked for his informative update.

(b) That a workshop be arranged for this Scrutiny Committee on the 111 and Urgent Care Services.

### 15 PAEDIATRIC OPHTHALMOLOGY SERVICES

The Clinical Lead for Ophthalmology, County Durham and Darlington NHS Foundation Trust submitted a report (previously circulated) informing Members of the national and regional situation with regards to Paediatric Ophthalmology Services and the situation of the local service at County Durham and Darlington NHS Foundation Trust (CDDFT).

It was reported that, due to a combination of factors, hospital eye services were overstretched; that nationally Ophthalmology was recognised as the busiest outpatient attendance by speciality, accounting for 8 per cent of 94 million hospital outpatient attendances; and that County Durham Commissioners and CDDFT had worked collaboratively for several years to introduce community optometry services to relieve pressures on overstretched clinics.

The submitted report stated that there was a national shortage of Paediatric Ophthalmologists and service provision had been critically affected in the last two years following the retirement of two Paediatric Ophthalmologists and scaling back of another; and in order to manage the situation, routine referrals to the Paediatric Ophthalmology were suspended from 1 June 2022.

Members were informed that all children under the care of Paediatric Ophthalmology services at CDDFT continued to have their care delivered as planned; a small number of children required transferring to another hospital for specialist Consultant Paediatric Ophthalmology input; and from 1 June 2022 children requiring a routine referral to Paediatric Ophthalmology were referred to South Tyneside and Sunderland NHS Foundation Trust, Newcastle-Upon-Tyne NHS Foundation Trust or South Tees NHS Foundation Trust.

It was reported that the initial term of suspension of services at CDDFT was 6 to 18 months, however, following a successful recruitment programme, it was hoped that the service provided by CDDFT would reopen from January/February 2023.

Discussion ensued regarding succession planning and following concerns raised regarding waiting times for those not deemed as an emergency, Members were assured that a robust eye care system was in place across the region, with a range of schemes in place, ensuring that services were being delivered despite a lapse in consultant led services.

**RESOLVED** – That the update on the national and regional situation with regards to

Paediatric Ophthalmology Services be noted.

### 16 WORK PROGRAMME

The Assistant Director Law and Governance submitted a report (previously circulated) requesting that consideration be given to this Scrutiny Committee's work programme for the Municipal Year 2022/23 and that the future meeting dates for this committee be agreed.

A discussion was held in respect of the current items on the work programme and suggested additional items included Suicide and workshops in relation to TEWV CQC reports and benchmarking; it was also agreed that a Winter Plan update, to include Primary Care Access, be provided at the next meeting of this Scrutiny Committee.

**RESOLVED** – (a) That the Work Programme be updated to reflect the decisions of this Scrutiny Committee.

(b) That the proposed meeting dates for the remainder of the 2022/2023 Municipal Year be agreed.