

SHOPSHIRE COUNCIL

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

Minutes of the meeting held on 25 September 2017
Times Not Specified in the Shrewsbury Room, Shirehall, Abbey Foregate,
Shrewsbury, Shropshire, SY2 6ND

Responsible Officer: Amanda Holyoak
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Present

Councillors Karen Calder, Madge Shingleton, Roy Aldcroft, Gerald Dakin, Simon Harris, Heather Kidd, Paul Milner and Pamela Moseley

1 Election of Chairman

Councillor Karen Calder was elected Chairman for the remainder of the Municipal year 2017 – 18.

2 Apologies for Absence

Apologies for absence were received from Councillor Tracey Huffer.

3 Appointment of Vice-Chairman

Councillor Madge Shingleton was appointed Vice-Chair of the Committee for remainder of the municipal year 2017 – 2018.

4 Declarations of Interest

Councillor Madge Shingleton reported that she was a Member of Health Concern.

5 Minutes of the Meeting held on 24 July 2017

The minutes of the meeting held on 24 July 2017 were confirmed as a new record.

6 Public Question Time

Mr J Bickerton had written a letter questioning the Future Fit Pre Consultation Business Plan and asking if Members had seen a copy of an audit report by Grant Thornton. As this was a matter under the remit of the Shropshire and Telford Joint Health Overview Scrutiny Committee which would be meeting later in the day, it was agreed to circulate his letter and this report to Members of the Joint HOSC.

7 Member Question Time

The Director of Public Health reported that Councillor Tracey Huffer had e-mailed him and the Chair of the Committee regarding the recent case of Legionnaires Disease in two separate buildings in Ludlow. Councillor Huffer had sought reassurance regarding the learning from the event and asked whether the correct procedures had been followed,

particularly with regard to communication. She had emphasised the need to reassure the public.

The Chair reiterated the need to clearly communicate facts clearly to the public to reduce concern and prevent ill-informed rumours from spreading. She also advocated the use of the most local newspapers for communicating information.

The Director confirmed that Public Health England had agreed an updated statement for the public and reported that the Communications Team were targeting Ludlow and would be making use of the Ludlow local newspapers. He reported that the investigation was complex but that the two incidences were not related. The Portfolio Holder for Adults and Health acknowledged the importance of the need for proactive and clear communication in such cases.

The Director confirmed that he had met with Councillor Huffer to discuss the issue.

8 Claypit Street Medical Practice APMS contract (Whitchurch)

The Committee considered a report (copy attached to signed minutes) from the Director of Primary Care, Shropshire CCG, on the measures the CCG was taking to commission a primary care service for patients in Whitchurch currently receiving an interim service from Shropdoc at Claypit Street Medical Practice

Nicky Wilde, Director of Primary Care, took Members through the report, explained that the novated contract was due to be signed with Bridgewater Medical Practice within the week and offered to answer questions.

In response to questions from Members about the importance of communicating what was going on, the Director of Primary Care reported that:

- Press releases had been issued through the Whitchurch Herald (which had been identified as a preferred means of communicating)
- The CCG had attended Patient Group meetings
- Further meetings had been arranged for late September
- As soon as the contract was signed, a letter would be sent to all Claypit Street Medical Practice patients

In response to further questions Members were informed that patients would be able to access a doctor from 8.30 am to 6.00 pm on Monday – Friday but that on Tuesday, Thursday and Friday afternoons this would be at the Bridgewater Practice not Claypit Street. The two practices were approximately 500 metres apart and on the same bus route.

Contact details would remain the same as they were currently and prescriptions could still be picked up from Claypit Street as the building would remain open, even when GPs were located at the Bridgewater Practice.

Councillor Gerald Dakin, member for Whitchurch South, reported that Whitchurch Patients Group were happy with the proposals and that the CCG, GPs and CCG had worked well

together. It was now hoped by all that it might be possible to recruit an additional GP. The Committee asked about plans for review of the arrangements. Members heard that Patient Groups would be supported to run surveys and gather feedback to pass the CCG and that a formal review would be made by the CCG Primary Care Committee.

The Committee was pleased to hear that all patients would receive a letter with a clear explanation of the new arrangements and contact details once the contract was signed.

Members asked if it was envisaged that eventually one Practice would operate in Whitchurch. The Director of Primary Care explained that this was an issue for Providers but that the CCG was actively encouraging this approach. The Director of Public Health referred to the GP Five Year Forward View.

(Subsequent to the meeting the following information was received from the Director of Primary Care and circulated to Committee Members :

I advised that Claypit Street Medical Practice would remain open 8.30am – 6.00pm Monday to Friday, however I have since received clarification that unfortunately the opening times of the Practice at Claypit Street will change as part of the novation of the contract to Bridgewater Medical Practice. At least in the short-term, the Practice will be open: Monday and Wednesday – 8.30 am – 6.00pm, Tuesday, Thursday and Friday – 8.30 – 1.00pm However, patients will be able to access care, collect prescriptions etc from the Bridgewater Family Medical Practice on Tuesday, Thursday and Friday afternoons.)

9 Maternity Services Task and Finish Group

Councillor Madge Shingleton, Chair of the Maternity Services Task and Finish Group introduced the report and recommendations of the Group (copy attached to signed minutes). She explained that the report was an interim one as work would not be completed until after the conclusion of Shropshire CCG's review of Midwife Led Units.

During discussion, Vanessa Barrett, Healthwatch Representative, reported on Enter and View Visits made to Midwife Led Units in 2015 where concerns were identified in relation to staffing issues and tariff arrangements. Many using services at Midwife Led Units had actually delivered outside of Shropshire and there were issues with patient notes and funding. Healthwatch had sent a summary of its findings to the Better Births national maternity review.

A number of Members of the Committee had attended recent consultation sessions run by the CCG in relation to Maternity Services. Several had noted that concerns of the public often related to ante and post-natal services and where these were accessed, rather than delivery itself. Members also remarked how at each of the meetings midwives in attendance had felt that they were not consulted or well informed about what was going on, were under significant strain and had not felt listened to. A Member was pleased that these views had been noted at the meeting she had attended and she had been reassured that these comments would be listened to as part of the review.

A Member said she had received recent anecdotal evidence about an occasion where there had been a serious staffing shortage due to staff sickness on an occasion where services had already been centralised due to a problem with a building. She also referred to a case where there had been no midwife available to visit a new born. The baby had

been suffering from jaundice and had to be taken by its parents a long distance to a Midwife Led Unit where the medical equipment needed had not been working. The Director of Public Health reported that the Head of Midwifery was accountable to the SaTH Board whose role it was to maintain and ensure a safe staffing level but ultimately this responsibility lay with the CCG Commissioners.

Discussion also covered: the need for upskilling opportunities; concerns about training in general; the likely implications of ending the student midwife bursary; whether there was any further action the Council could take in relation to making housing available for key workers; new language criteria for working in the NHS; implications of Brexit . Councillor Paul Milner confirmed that he hoped to join the Brexit Task and Finish Group recently set up by the Places Overview Committee.

The Chairman thanked Councillor Shineton for Chairing the Group. The Committee endorsed the list of recommendations set out in the interim report subject to an amendment to the second bullet so that it stated 'Shropshire CCG should *continue* to review the commissioning of Maternity Services in the light of the most recent clinical guidance'

Councillor Shineton thanked Members of the Group for their contribution to date and the Director of Public Health and Healthy Child Programme Co-ordinator for their help in supporting its work.

10 Work Programme

Members suggested a number of areas for potential scrutiny attention. These included: waiting times for the Improving Access to Psychological Therapies Service, CCG proposal to remove grant funding from the Voluntary and Community Sector, CAMHS reform, development of the Five Year Forward View; Neighbourhood work, rurality and working between health and adult social care services – variation in access; the Sustainable Transformation Plan; and the future of the Community Health Trust.

The Statutory Scrutiny Officer referred to the fit of some of these items with the broader Strategic Scrutiny Work Programme and different ways to approach them.

Signed (Chairman)

Date: