

## **JOINT HEALTH OVERVIEW & SCRUTINY COMMITTEE**

### **Minutes of a meeting of the Joint Health Overview & Scrutiny Committee held on Tuesday, 5 July 2022 at 2.00 pm in 4th Floor, Addenbrooke House, Ironmasters Way, Telford, TF3 4NT**

**Present:** Councillors S Charmley, E J Greenaway, K Halliday, H Kidd, S J Reynolds and D R W White (Co-Chair).

**In Attendance:** T Dodds (Scrutiny Manager, Shropshire Council), L Gordon (Democracy Officer (Scrutiny), Telford & Wrekin Council), G Robinson (Director of Delivery & Transformation, Shropshire, Telford & Wrekin Integrated Care System) and R Robinson (Executive Director of Health, Wellbeing and Prevention).

**Apologies:** Co-optees: H Knight and D Saunders

#### **JHOSC1 Declarations of Interest**

None.

#### **JHOSC2 Minutes of the Previous Meeting**

**RESOLVED** – that the minutes of the meeting held on 28 March 2022 be confirmed and signed by the Chair.

#### **JHOSC3 Work Programme 2022/2023**

The Committee noted proposals for the work programme which would be updated as necessary as required should major changes within the health systems transpire. Members agreed that Primary and Urgent care needed wider reviews over the next 12 months. It was confirmed that the Committee wished to additionally explore rural access to care, elective care recovery and the cancer agenda.

## **JHOSC4 Winter Plan & UEC Action Plan Update**

The Director of Delivery & Transformation, Shropshire, Telford & Wrekin Integrated Care System explained to Members that the Urgent and Emergency Care Improvement Plan to be outlined feeds directly into winter planning and preparedness. The Committee heard that the Shropshire, Telford & Wrekin system had experienced a number of challenges in relation to the delivery of Urgent and Emergency Care (UEC). This had been exacerbated recently by unprecedented levels of demand, not only in UEC but across the health and care sector with ongoing issues with workforce and supply.

Members heard that following the effects of Covid the patient profile had changed. The system was experiencing the problems associated with an aging population who had not had the same access to healthcare as pre-Covid. The Director of Delivery & Transformation explained that this not only effected the number of patients accessing urgent and emergency care, but also the number of patients accessing secondary care services.

The Committee heard that the UEC Improvement plan had been finalised in May 2022 and focused on three key areas of change: pre-hospital improvement, in hospital improvement and discharge improvement. The Director of Delivery & Transformation stated that some of the larger-scale plans involved acute floor reconfiguration at the Royal Shrewsbury Hospital (RSH). This had been designed to increase access to trauma and cancer beds which would ultimately increase flow across the hospital. Members heard that more immediately there had been a focus on deploying an additional cohort of staff to the Emergency Department. However, the Director of Delivery & Transformation did not believe that this had been constrained by workforce shortages, but contingencies were being worked on.

The Director of Delivery & Transformation explained that whilst linked to the UEC Improvement Plan, the aims of the winter plan had the additional focus of preventing admissions, reducing patient's length of stay and improving the discharge process. The Director of Delivery & Transformation recognised that there were additional areas of concerns such as the Primary Care Networks, however the decision had been taken to address the biggest risks first.

Members of the Committee asked a number of questions:

*Workforce issues are often cited as the cause of ongoing problems but as Councilors we hear about patients waiting in corridors as there is no physical space. Is there a solution to this?*

The Director of Delivery & Transformation acknowledged that the patient flow through pathway was not as disciplined as it could be and that improvements were to be made. Members heard that due to the use of bank staff, handovers in the discharge lounge at Princess Royal Hospital (PRH) can cause delays of up to an hour. The ICS were looking to recruit permanent staff to ensure that this flow runs smoothly from the outset. This was to be in addition to other changes to other areas of admittance and discharge.

*We have previously been advised that Shropshire, Telford & Wrekin Hospital Trust (SaTH) cannot provide 24-hour care or pharmacy provision due to staffing with delays discharges further. What are your plans to address this?*

The new regime under the ICS will be creating a daily report detailing how many patients were awaiting discharge and what requirements needed to be fulfilled to ensure that. Members heard that this was to promote early identification of needs, so that the requirements for discharge were met prior to one of the three staff meeting points throughout the day; morning, afternoon evening. The Director of Delivery & Transformation advised that by creating a pathway where patients were discharged earlier in the day it creates beds for incoming admissions which often peak in the evening.

*NHS Digital provided data indicated that 9% of patients discharged in Shropshire were returning to A&E within week. Are there safeguards in place to prevent patients being discharged into unsuitable circumstances?*

The Director of Delivery & Transformation advised that this was something that required further review. Part of the ongoing process the ICS were undertaking was to review the operational measures to ensure that the correct safeguards were in place. It was noted that at least a proportion of the 9% could be attributed to return outpatient appointments at A&E following an initial visit. The Director of Delivery & Transformation assured the Committee that this would be looked into further and that an update would be provided.

*Can you advise on what impact the introduction of Virtual Wards will have?*

Shropcom will be responsible for providing the virtual wards but whilst the funding has been provided it was still currently at the business case stage. Should it be approved it would create 100 virtual beds available to citizens, approximately 50 of which being acute beds. The benefits and success of this programme needed to be measured and tracked once introduced. The Director of Delivery & Transformation advised that they would look into specific details pertaining to the roll out and update the Committee.

*A recent report identified that there were to be 30% less doctors by 2030 and that recruitment into the health sector will only become more difficult. What can be done to attract staff to our hospitals?*

The Director of Delivery & Transformation recognised that recruitment was a legitimate concern and it was the responsibility of the Integrated Care Board to build a strategy around it that included developing their own staff. Members were informed that this was currently in development. The Director of Delivery & Transformation highlighted that they foresaw more collaborative working based on clinicians needs in the future, and that the Hospital Transformation Project model once implemented would aid with the retention of staff as it is heavily backed by clinicians.

It was noted that in order to attract staff the ICS needed to focus on the number of ways the system performed well, in addition to highlighting the benefits of the local area as a desirable place to work.

**JHOSC5 Ambulance Summit Update**

The Director of Delivery & Transformation, Shropshire Telford & Wrekin Integrated Care System provided the Committee with an overview of the recent Ambulance Summit that was attended by local Members of Parliament (MP). Members heard that the discussions were focused around delays to ambulance handovers at both Princess Royal Hospital (PRH) and Royal Shrewsbury Hospital (RSH). The resulting plans with the metric from this meeting were to be made available in August 2022 and were to be shared with the Committee.

The Committee heard that Shrewsbury, Telford & Wrekin Hospital Trust had requested the MP's assistance to continue to advocate for them and citizens access to healthcare in Westminster.

**JHOSC6 Co-Chair's Update**

None.

The meeting ended at Time Not Specified

**Chairman:** \_\_\_\_\_

**Date:** Monday, 12 September 2022