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Notice of Meeting

Dear Member

Health and Adult Social Care Scrutiny Panel

The Health and Adult Social Care Scrutiny Panel will meet in the Virtual Meeting - online at 2.00 pm on Thursday 14 April 2022.

This meeting will be webcast live and will be available to view via the Council's website.

The items which will be discussed are described in the agenda and there are reports attached which give more details.

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Julie Muscroft Service Director – Legal, Governance and Commissioning

Kirklees Council advocates openness and transparency as part of its democratic processes. Anyone wishing to record (film or audio) the public parts of the meeting should inform the Chair/Clerk of their intentions prior to the meeting.

The Health and Adult Social Care Scrutiny Panel members are:-

Member

Councillor Habiban Zaman (Chair) Councillor Aafaq Butt Councillor Bill Armer Councillor Vivien Lees-Hamilton Councillor Lesley Warner Councillor Fazila Loonat David Rigby (Co-Optee) Lynne Keady (Co-Optee)

Agenda **Reports or Explanatory Notes Attached**

	Pages
Minutes of previous meeting	1 - 8
To approve the Minutes of the meeting of the Panel held on 10 March 2022.	
Interests	9 - 10
The Councillors will be asked to say if there are any items on the Agenda in which they have disclosable pecuniary interests, which would prevent them from participating in any discussion of the items	

3: Admission of the public

1:

2:

Most debates take place in public. This only changes when there is a need to consider certain issues, for instance, commercially sensitive information or details concerning an individual. You will be told at this point whether there are any items on the Agenda which are to be discussed in private.

or participating in any vote upon the items, or any other interests.

4: **Deputations**/Petitions

The Committee will receive any petitions and hear any deputations from members of the public. A deputation is where up to five people can attend the meeting and make a presentation on some particular issue of concern. A member of the public can also hand in a petition at the meeting but that petition should relate to something on which the body has powers and responsibilities.

In accordance with Council Procedure Rule 10 (2), Members of the Public should provide at least 24 hours' notice of presenting a deputation.

5: Financial Update 2022/23

Representatives from local health and social care providers will be in attendance to present an update on the financial position of the Kirklees Health and Adult Social Care Economy.

Contact: Yolande Myers, Principal Governance Officer 01484 221000

6: Review of 2021/22 Work Programme

33 - 48

The Panel will review its activity during 2021/22 and determine those items from the Work Programme to be carried forward into 2022/23.

Contact: Yolande Myers, Principal Governance Officer 01484 221000

Agenda Item 1

Contact Officer: Yolande Myers

KIRKLEES COUNCIL

HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL

Thursday 10th March 2022

Present:	Councillor Habiban Zaman (Chair) Councillor Bill Armer Councillor Vivien Lees-Hamilton Councillor Fazila Loonat
Co-optees	David Rigby
In attendance:	Emily Parry-Harries - Consultant and Head of Public Health Protection Lucy Wearmouth - Public Health Manager Sean Berry – Operational Manager, Air Quality Steve Brennan – Kirklees CCG Jacqui Stansfield – Service Manager, Commissioning, Quality and performance Richard Parry – Strategic Director, Adults and Health Rob McCulloch – Independent Chair, Kirklees Safeguarding Adults Board

Observers: Councillor Alison Munro Councillor Elizabeth Smaje

Apologies: Councillor Aafaq Butt Councillor Lesley Warner Lynne Keady (Co-Optee)

- 1 Minutes of previous meeting The minutes of the meeting held on 9 February 2022 were approved as a correct record.
- 2 Interests No interests were declared.
- 3 Admission of the public All items were taken in public session.
- 4 **Deputations/Petitions** No deputations or petitions were received.
- 5 Public Question Time

The Panel received a question from Councillor Alison Munro regarding the availability of NHS dentists.

Cllr Munro was informed that the Panel would seek a formal written response.

6 Population Health Management

The Panel welcomed representatives from Kirklees Public Health, Air Quality Energy and Climate Change, and the NHS Kirklees Clinical Commissioning Group (CCG) to the meeting.

Ms Parry-Harries informed the Panel that Population Health Management was about a long-term system-wide approach looking at the health and well-being of an entire population, equally for physical and mental health outcomes.

The Chair opened up the discussions to a question and answer session that covered a number of areas that included:

- A question regarding prioritising the introduction of local initiatives, and in relation to the cancer screening pilot health checks, what feedback had been received around outcomes and how effective the interventions had been.
- Confirmation that the priority was relationships and people working together to effectively use the data to make decisions.
- Details of the difficulties and challenges in identifying priorities as there were many things that could be done to improve the health of the population.
- Confirmation that if relationships were in place, anything that could be done to improve people's ability to identify their symptoms early to present and intervene early would have a positive outcome on people's health and well-being.
- An overview of how important peoples housing and the quality of green space was and how it had an impact on a person's health and well-being.
- A question about cancer screening and how it came about, whose idea was it and how it got implemented.
- Confirmation that there were a number of people living in Kirklees social housing who had engaged and built relationships with housing officers who had received training to help people living within the community to understand the importance of cancer screening and how to access it.
- Details of the early feedback from the cancer screening programmes that indicated that there had been an uptake in the numbers of people who wouldn't usually have engaged or taken up the screening as a result of having a better understanding of the benefits of early detection.
- An offer for elected Members to support projects where officers felt it would be appropriate and beneficial.
- A question around the level of training received by housing officers to support the local communities.
- Confirmation that the interactions that housing officers had with people were centred around health-seeking type conversations, and to support people in understanding that screening was not something that was done once a person has been diagnosed with a disease or condition.
- Confirmation that the training for housing officers would evolve over time and become more nuanced as learning developed but was initially provided

Health and Adult Social Care Scrutiny Panel - 10 March 2022

collaboratively between the Wellness Service, Public Health and clinical screening providers.

- An overview of the work being done with local mosques and the focus on 'working with' and not 'doing to' local communities.
- A question around whether the housing officers were having support for their mental health whilst they were supporting residents.
- A question that highlighted how a person with multiple conditions could find the various pathways to care confusing and which had the potential to lead to some people slipping through the net.
- Confirmation that the support offered was around the awareness and understanding of the importance of screening and that this wasn't a clinical service, with the primary care service being the first port of call for anyone with multiple conditions.
- An explanation that there was an increase in the numbers of people with complex health needs and multi-morbidities which was causing the greatest challenges as opposed to early death.
- Details of the work that was being done with the acute trusts, so that those with multiple health difficulties, who had regular and frequent appointments, could have their appointments clustered together as far as possible, to help reduce the frequency of visits to hospital.
- A question around whether the breast, cervical and bowel screen pilot had finished.
- Confirmation that the initial pilots had ended but that it was anticipated that once the learning was collated, the screening programmes would continue.
- A query around the health checks that were identified within the Council Plan and confirmation that they would continue at key locations in the community in order to help remove as many barriers as possible to accessing the service.
- A question as to whether updated data packs which had previously been given to the primary care networks would be given out again, and if they were, what the content would be.
- Confirmation that discussions were taking place with the primary care networks to ascertain if they found the previous packs helpful and what a refresh of the data packs would need to look like, while recognising the progress that the networks had made.
- A query around what work was being done to reduce health inequalities.
- Confirmation that although population health management didn't have a specific workstream on health inequalities this was deliberate as the work would be woven through other areas that would include the conversations taking place in partnership arenas which would inform and strengthen the system leadership work.
- A concern as to how the work would make a difference to the health inequalities in a practical way, given the Kirklees Observatory Data was for 2016-2018 and therefore not up to date.
- Confirmation that this was the start of a practical programme of work that would make a difference to the health and well-being of the population, and that ambition was high.
- Details that the new ways of working would be analysed and the programmes that were the most effective would be continued.

- Details that the vaccination programme was a very successful example of everyone coming together with a single vision to understand why certain residents were not coming forward for their vaccinations which resulted in a pop-up centre being put in the community to allow more residents to receive their vaccinations.
- A concern that there was no detail around where the programme would be in five or ten years as milestones of improving health inequalities.
- Confirmation that air quality had a direct link to public health, with pollution or pollutant sources that were directly impacting the health of residents being monitored.
- Details of the requirement for local authorities to provide the government with details of air quality management areas or areas which had exceeded the air quality objectives to create a five-year action plan, and to submit air quality status reports.
- Confirmation of the various acts and regulations which set air quality limit values and defined regulatory and statutory requirements related to air quality or other air quality matters.
- That there were legally binding limits for concentration of outdoor air pollutants that affected public health and the primary pollutant monitored within Kirklees was nitrogen dioxide or NO2 and this pollutant was always linked to transport emissions which was why monitoring was done at the roadside in particularly congested areas.
- The monitoring focuses on the impact on the health of residents with samples being taken in representative locations near houses or on streetlamps.
- Confirmation that there were 87 locations across Kirklees monitored by diffusion tubes, two fixed monitoring locations at Bradley and Ainley Top and five zephyr stations which could be located at various locations to either co-locate or compare results with the diffusion tubes and fixed monitoring locations.
- The service was looking to deploy the zephyr stations at locations such as schools, where links could be made with public health initiatives such as Scoot to School so that baseline emissions for pre and post drop-off times could be monitored.
- Confirmation of the nine air quality management areas being Thornton Lodge, Huddersfield Town Centre (inside the ring road), Outlane, Liversedge, Edgerton, Birkenshaw, Ainley Top, Bradley (Leeds Road intersection) and Eastborough.
- These areas were targeted as there was a level above the air quality objective and air quality actions were being taken in these locations.
- Details of the potential impact to residents' health as a result of poor air quality, being acutely aware of links between poor air quality and inequalities and poor health including for those in high risk groups and vulnerable populations including exacerbating asthma, respiratory illnesses, heart disease and reduce life expectancy.
- Confirmation that changes announced within the new Environment Act may have an impact on current compliance with more stringent air quality targets being anticipated, meaning more air quality management areas being declared.
- Details of how air quality continued to be improved through electrical vehicle infrastructure, school engagement activities, work with active travel and public health to support campaigns such as the Scoot to School, anti-idling awareness and opportunities for enforcement where appropriate.

• Confirmation that any feedback from Defra would be included in future reports

RESOLVED –

7

- 1. That the Panel recognise the opportunities for learning and development.
- 2. That the Panel would welcome a further update on the progress to include, where appropriate, data around the outcomes of the new approaches and initiatives in working with the population to improve their health.
- 3. That a further discussion take place at a future meeting of the Panel

Kirklees Safeguarding Adults Board 2020/2021

The Panel welcomed representatives from Kirklees Safeguarding Adults Service and the Chair of the Kirklees Safeguarding Adults Board (KSAB).

Mr Rob McCulloch explained to the Panel that the KSAB had three main functions (i) to produce a strategic plan (ii) to report on the strategic plan and (iii) to undertake safeguarding adult reviews.

Mr McCulloch informed the Panel that he had worked with safeguarding adults' boards for almost his entire career, and he gave the Panel assurance that the work done in Kirklees in recent years by the Board and its previous chair was second to none.

The Panel were advised that systems in place within Kirklees were effective in monitoring safeguarding, reporting on it, with continuous improvement and a culture that was open to enquiry.

The Panel opened up a discussion which covered a number of items which included:-

- A question regarding the reference in the report to self-neglect, having previously not been reported upon, and whether this was an arising issue.
- A query in relation to the Covid-19 response, and whether there had been any specific Covid related issues that needed responding to by the Board.
- A question relating to the Liberty Protection Safeguarding which was due this year, and what that included.
- Confirmation that self-neglect was a priority for the Board and a toolkit had been introduced to help agencies respond to it with a partnership approach across agencies.
- Details that the last two reviews had been around self-neglect and were particularly difficult issues to address with national issues also coming to the fore.
- A difficulty with self-neglect is that if an agency couldn't get access, get a response, or couldn't engage well with the individual, the danger was that the individual was not transferred on to another agency and confirmation that the toolkit that had been introduced was focusing on this difficulty.
- Details that there had been an increase in self-neglect, but this was partly due to the Board being more aware of it and reporting on it.

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- Confirmation that the impact of Covid-19 would be long lasting, particularly when focusing on the isolation and individuals being unable to access services.
- Challenges were also evident within services due to staffing issues, absences, and demand on resources, but some of the benefits that had been identified was better partnership working between health and the local authority.
- Confirmation that there were shared budgets and resources between health and the local authority with shared outcomes that didn't exist before the pandemic.
- A concern about individuals with mental health issues who had not had access to services during the pandemic, or who had been avoiding services due to isolation.
- Confirmation that Deprivation of Liberty's would end and would move to Liberty Protection Safeguards, but that this was on hold until 2023.
- A question regarding the demand for support for abuse, particularly domestic abuse in the future.
- Details that although an increase in demand had been expected throughout the pandemic, the number of referrals hadn't gone up as far as the Board had expected it to.
- Confirmation that the lower numbers of referrals may not necessarily be due to lower incidents and a further deep dive would be undertaken to understand the numbers given that it was not what was expected.
- Over the coming year, a much closer alliance with communities would be developed with the aim of growing and supporting communities, providing some extra elements into promoting safeguarding.
- Details that the new domestic abuse strategy had a focus on working with perpetrators and increasing awareness of the mechanisms that individuals could use to raise concerns.
- Confirmation that further consideration would be given to understand what was driving the data changes, be it increased instances of domestic abuse or increased awareness with some of those preventative activities being successful in reducing the overall number of incidents.
- A question regarding Section 42 inquiries noting that 60% of inquiries were in the care home sector and whether any preventative strategies were being put in place that would lessen the likelihood of those risks.
- Confirmation that most Section 42 inquires would be in the places where there was more access to individuals in those arenas.
- Details of the care home early intervention team led by the CCG who work closely in care homes to identify risks before it reaches safeguarding.
- Confirmation that the CCG reports to the quality and performance subgroups in Kirklees so that they can be kept abreast of what's happening in the care homes.

RESOLVED –

- 1. That the Panel thank officers and the Chair of the KSAB for attending the meeting
- 2. That the report be received and noted.

8 Work Programme 2021/22

A discussion took place on the Panel's Work Programme and agenda plan with a focus on the next Panel meeting and the need to consider the next municipal year's work programme.

Areas that were covered included:

- An overview of the planned financial position item scheduled for the April meeting.
- Consideration of the work programme at the April meeting, looking back over the previous municipal year, and identifying work that the Panel believe was complete.
- April's meeting will also consider areas of work that needed to be carried forward to the next municipal year.
- Consideration of new areas of work for the 2022-23 municipal year.
- Details that the first meeting of the new municipal year would invite comments from health partners and colleagues within the council around any emerging issues that the Panel may need to consider.
- Confirmation that excess death data and air quality should be added to the work programme for 2022-23.

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KIRKLEES COUNCIL COUNCIL/CABINET/COMMITTEE MEETINGS ETC DECLARATION OF INTERESTS Health & Adult Social Care Scrutiny Panel	ETINGS ETC TS y Panel		of the Brief description of your you to interest he meeting which you is under [Y/N]			
		(eg aDoes the nature of the interest require you to withdraw from the meeting while the item in which you have an interest is under consideration? [Y/N]				
X	COUNCIL/CABI DECLA Health & Ao		Type of interest disclosable pec interest or an "C Interest")			
		Name of Councillor	Item in which you have an interest			Simod.

Disclosable Pecuniary Interests
If you have any of the following pecuniary interests, they are your disclosable pecuniary interests under the new national rules. Any reference to spouse or civil partner includes any person with whom you are living as husband or wife, or as if they were your civil partner.
Any employment, office, trade, profession or vocation carried on for profit or gain, which you, or your spouse or civil partner, undertakes.
Any payment or provision of any other financial benefit (other than from your council or authority) made or provided within the relevant period in respect of any expenses incurred by you in carrying out duties as a member, or towards your election expenses.
 Any contract which is made between you, or your spouse or your civil partner (or a body in which you, or your spouse or your civil partner, has a beneficial interest) and your council or authority - under which goods or services are to be provided or works are to be executed; and which has not been fully discharged.
Any beneficial interest in land which you, or your spouse or your civil partner, have and which is within the area of your council or authority.
Any licence (alone or jointly with others) which you, or your spouse or your civil partner, holds to occupy land in the area of your council or authority for a month or longer.
Any tenancy where (to your knowledge) - the landlord is your council or authority; and the tenant is a body in which you, or your spouse or your civil partner, has a beneficial interest.
Any beneficial interest which you, or your spouse or your civil partner has in securities of a body where - (a) that body (to your knowledge) has a place of business or land in the area of your council or authority; and (b) either -
the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body: or
if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you, or your spouse or your civil partner, has a beneficial interest exceeds one hundredth of the total issued share capital of that class.

NOTES

Agenda Item 5



Name of meeting: Health and Adult Social Care Scrutiny Panel

Date: 14 April 2022

Title of report: Financial Update 2022/23

To provide members of the Health and Adult Social Care Scrutiny Panel with the financial position of the Kirklees Health and Adult Social Care Economy.

Key Decision - Is it likely to result in spending or saving £250k or more, or to have a significant effect on two or more electoral wards?	No		
Key Decision - Is it in the <u>Council's Forward Plan</u> (key decisions and private reports)?	Not Applicable		
The Decision - Is it eligible for call in by Scrutiny?	Not Applicable		
Date signed off by <u>Strategic Director</u> & name			
Is it also signed off by the Service Director for Finance?	No – The report has been produced to support the discussions with health and social care.		
Is it also signed off by the Service Director for Legal Governance and Commissioning?			
Health Contact	Alison Needham, Kirklees CCG		

Electoral wards affected: None Specific

Ward councillors consulted: Not Applicable

Public or private: Public

Has GDPR been considered? Yes. The report does not include any personal data that identifies an individual.

1. Summary

- 1.1 The Kirklees Health and Social Care Scrutiny Panel as part of their 2021/22 Work Programme asked Calderdale and Huddersfield NHS Foundation Trust, Locala, Mid Yorkshire Hospitals NHS Trust, South West Yorkshire Partnership NHS Foundation Trust and Kirklees Council Social Care to provide them with an update on their financial position.
- 1.2 The local health and social care providers have collaborated to provide a presentation which is appended to this report and representatives will be in attendance to provide the panel with:
 - An update on the impact of Brexit and Covid-19 to include exploring the implications on staff numbers/shortages.
 - An update on the local approach to developing a workforce strategy.
 - A focus on the implications of the financial pressures on services provided and commissioned by Adult Social Care.
- 1.3 Information covering the areas above is attached.
- 2. Information required to take a decision N/A
- 3. Implications for the Council N/A
- 3.1 Working with People No specific implications
- **3.2 Working with Partners** No specific implications
- 3.3 Place Based Working No specific implications
- 3.4 Climate Change and Air Quality No specific implications
- **3.5** Improving outcomes for children No specific implications
- **3.6 Other (e.g. Legal/Financial or Human Resources)** No specific implications
- 4 Consultees and their opinions Not applicable
- 5 Next steps and timelines That the Overview and Scrutiny Panel for Health and Adult Social Care takes account of the information presented and considers the next steps it wishes to take.
- 6 Officer recommendations and reasons That the Panel considers the information provided and determines if any further information or action is required.
- 7 Cabinet Portfolio Holder's recommendations Not applicable

8 Contact officer: Yolande Myers – Principal Governance and Engagement Officer yolande.myers@kirklees.gov.uk

9 Background Papers and History of Decisions Not applicable

10 Service Director responsible Julie Muscroft – Service Director, Legal, Governance and Commissioning

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Kirklees Place Financial Update 2022/23 Update by Finance leads



Overview

- The new West Yorkshire Integrated Care System (WYICS) commences on the 1st July 2022 and Kirklees CCG in its current form will
 end from the end of June and become the Kirklees Health and Care Partnership.
- The Kirklees Place is being developed to support the Health and Social Care needs of its population and how it makes the right decisions, whilst ensuring financial sustainability.
- It will be responsible to achieve financial balance in the Kirklees place as part of the WY ICS. However, the statutory duties are held by the ICS
- Our financial position will be fed into the wider system financial position.
- There is a clear direction to work together, to manage financial issues as a group not shifting problems but solving things together.
- The finance function of West Yorkshire has been working together for a number of years, including the development of joint financial plans. These system plans originate by the development of local level plans in each place. It is considered creation of a more formal approach, that the ICS will be bring, will allow greater, cohesive working.
- The current ICS financial plans only include NHS Providers and the current CCG. However, information in relation to the Locala and the Local Authority has been shared.
- The plans are current still to be approved in individual organisation and due to Purdah are not presented here. However, each finance lead will provide an overview.
- As a Kirklees place and as finance leads it is our overall aim to provide a comprehensive overview of the wider financial position of other key stakeholders.
- The next future years will be challenging as we come out of Covid and the ongoing backlog and health and social care challenges

How are we going to work – as part of ICS

- There are a number of financial principles that we are working towards to develop a joint financial plan as part of West Yorkshire these include
 - Decisions are clinically led
 - There is a collaborative approach
 - Transparency of financial information and plans
 - Simplify where possible
 - Comprehensive and inclusive
 - Deliverable
 - Fairness
 - Consistent
 - Includes specialist commissioning
 - Future Proofing

Approach to funds management

Place based partnership are key to financial decision making – along existing governance

Resources received in the ICS will be delegated to place wherever appropriate Financial flows (wherever possible) to providers will be routed via the place rather than at system level The system will ensure that there is a consistency in allocations for baseline funding

The system will take account of population health needs in place when agreeing allocation disbursement The Mental Health Investment, Primary Care and Community services targets will continue and will be met by both place and system

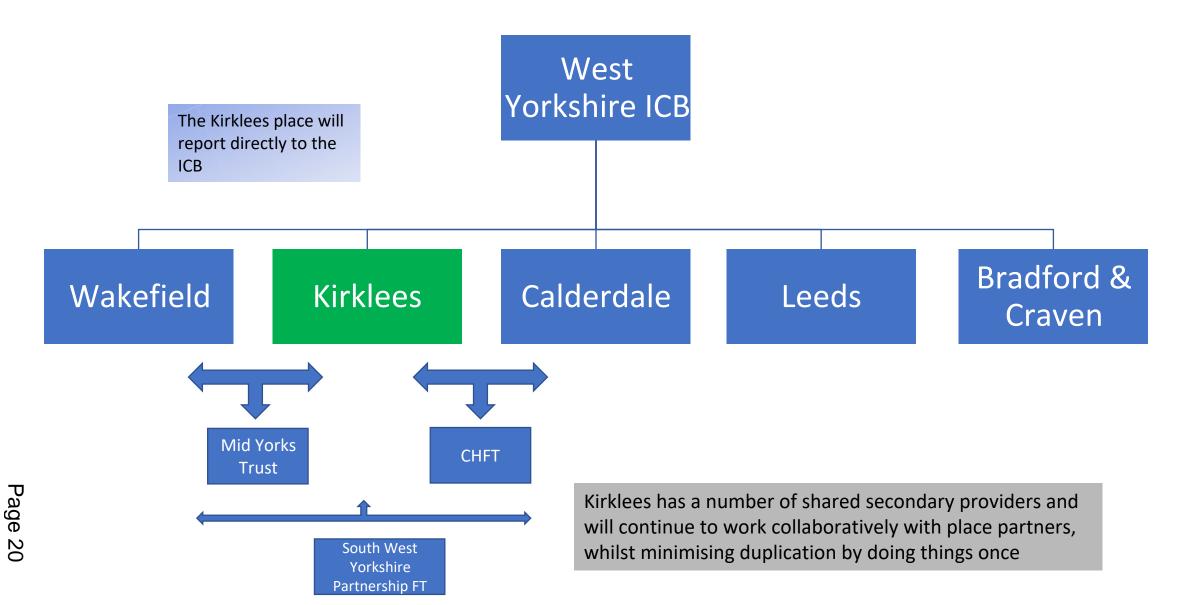
The system will develop efficiency and productivity plans at organisation, place and at a system level

Strong and robust risk management approaches will be put in place

Financial Planning – system headlines

- System plans being pulled together from a West Yorkshire place.
- Moving out of the current financial framework that was in place due to Covid
- Some elements of funding have ended
- Recognised that it will be financially challenging
- Real focus on clearing backlogs, but continuing to deliver services to get them provided in the right place – system working
- Looking at things that can be done once to promote the best value for money, but not losing the local place focus

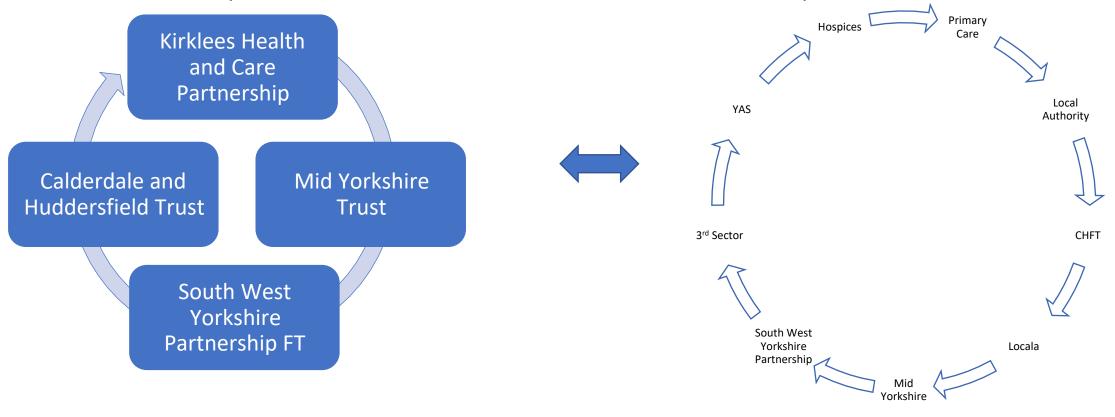
West Yorkshire system - structure



Kirklees Financial Place

The following areas will be reported and be part of the WYICS financial overall plan

Kirklees has a much wider financial position and as we move together a wider financial system position will be reported



Financial Overview

The following provides an overview of the financial position of the Kirklees place by individual provider



Key Risks and Opportunities

Kirklees Health and Wellbeing Partnership Calderdale and Huddersfield Foundation Trust

Mid Yorkshire Foundation Trust South and West Partnership Foundation Trust

Kirklees Local Authority

Locala Health and Wellbeing

Kirklees Place - Overview

- The West Yorkshire system is currently working on developing its high level financial and activity plans
- The Kirklees place includes four main commissioner/providers
- The complexity of Kirklees is that we share providers with Wakefield and Calderdale Place
- Committed to do things once to limit bureaucracy
- Kirklees will have a financial challenge moving into 2022/23, the scale is currently being worked through
- NHS Financial plan submission on the 28th April 2022
- Working to understand how we manage as a place managing risk, doing things once, joint working
- There are a number of risks as a system as we move forward including inflationary pressures and resurgence of Covid
- The following give a general overview of the key stakeholders position and will be discussed by each lead

Kirklees Health and Care Partnership

- Allocation received from ICS to support Kirklees some transfers direct to providers included in this
- Plans focus on all elements of commissioning of services for Acute, Mental Health, Continuing Health Care, Primary Care and Community Services
- All plans align with national expectations
- Focus on supporting system to develop services in the right place
- Continued pressures in a number of areas
- Continued focus on delivery of financial balance, and recognising this will be challenging this year
- Plans adhere to all the planning asks both local and national
- Continued support in Mental Health Services
- Work to align services with providers getting the £ in the right place

Planning assumptions - operational

- Zero waits of over 78 weeks and improvement in waits of over 52 weeks by the end of 2022/23
- Delivery of 104% of 2019/20 elective, day case and outpatient first appointment levels
- Delivery through increased internal capacity, improved productivity and use of Independent Sector
- Bed base assumed to return to June 2021 level with Covid number of 20
- Return to Summer 2021 Covid and TOC levels assumed at 70
- 92% bed occupancy assumed with length of stay improvement vital in delivery of this

Planning assumptions - financial

- Block allocations uplifted by 3.8%
- Covid-19 funding reduced by 57%
- Assumes Elective Recovery Funding will flow to Acute Providers from local CCGs on a fair shares basis
- Pay inflation assumed as per national guidance at 3%
- Non Pay inflation includes estimated impact of current RPI based contracts and expected pressure on Utilities

Mid Yorkshire Hospitals NHS Trust

Planning Assumptions

- On costs of covid with a reduction in national funding
- National efficiency target is challenging
- Inflationary pressures in excess of national inflation funding
- Local qualitive pressures

Work continues to refine plan, this will include

- Review of cost pressures
- Securing additional ICS income
- Developing more efficiency programmes to support VfM in the system

South West Yorkshire Partnership Foundation Trust

Financial Plan Covers

Financial Plan for 2022/23is being finalised, but recognises

- Includes an efficiency to balance budgets
- Includes an indicative Covid budget to support Out of Area Placements
- Workforce expansion of 8% by March 23. Increase expected across substantive and bank etc. and include a large element of international nurse recruitment.

Kirklees investments

The in principle agreed additional investments are:

- · Expansion in early intervention in psychosis services (EIP) to support the expansion to the at risk of mental health state pathway
- · Expansion of perinatal services
- · Consolidation of the position in relation to IAPT expansion
- · Consultant psychiatrist funding for the intensive home-based treatment team
- · Additional medical capacity adult mental health
- · Increasing capacity of the core and enhanced community mental health teams
- · Increasing capacity within the outreach team/older people's crisis
- · Children and young people's eating disorders
- · Expansion of Children and young people's crisis services
- · Additional dietetic support for the children's and young people's avoidant restrictive food intake disorder pathway.

Kirklees Local Authority – Adult social Care and Public Health

Council context

- Budget now set Council 16th Feb 2022
- Local Govt Finance Settlement = Only a one year settlement
- Core Spending Power increase for Kirklees of 3.7% in real terms (assumes full allowable uplift on CT (1.99%) and ASC precept (1%)
- Kirklees Council 3rd lowest funded of 36 met. authorities (per/head)
- Difficult budget to balance against funding uncertainty (reliance on short term funding)

Kirklees Local Authority – Adult social Care and Public Health

Adult Social Care – Budget 2022-23

- Provider cost pressures (including National Living Wage increase)
- Pressures on demographic growth (especially OP and MH) + Heightened pressures on complexity of packages

Other key ASC issues

- 'Fair cost of care' for resi/nursing/home care govt driven programme
 - what is the fair cost?, how do we compare?, Sustainability plan for next steps.
- Addressing market/system pressures
 - Workforce recruitment/retention/fair rate of pay & recognition
- Charging policy reform 2023 (national)
 - Cap on care costs / Change for self funders / Impact on the market?
- New/higher levels of inflation further pressure
 - Energy/fuel pressures on providers and workforce
 - Increased cost of living/operating
- Continued joint working
 - Regional and local partners continue to work jointly to ensure that funding is managed flexibly within the overall system for maximum local benefit.

Public Health issues

- Covid continuing threat vs continuing funding?
- Substance misuse Drugs & Alcohol strategy national sign off tbc?
- Sexual Health continuing cost pressures on prescribing

Locala Health and Wellbeing

- Plans being developed, as with other providers includes efficiency asks of approx. 3.2%
- Working closely with local colleagues
- Plans include investments on a non-recurrent basis
- A number of risks in delivery of service

Moving forward – tackling the financial challenge together

- Peer review of assumptions we have all made and how they feed into the overarching place
- Whilst there are risks, there are also opportunities
- Success in delivering efficiency
- Working together to really challenge the investments we make and how they impact staff and patient care
- Long Term aim is to ensure resources are allocated appropriately to ensure the greatest impact
- We are working now on how we will work and focussing on the Governance of our place to ensure on how we work
- This is something that we have been doing for a while and hope that this place approach together will reinforce this work.

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Agenda Item 6



Name of meeting: Health and Adult Social Care Scrutiny Panel

Date: 14 April 2022

Title of report: Review of 2020/21 - Work Programme

Purpose of report

To review the Panel's work programme for 2020/21 and identify areas of work that have been completed; those that need to be carried forward to next year; those that need to be monitored; and to consult on potential areas for scrutiny during 2022/23

Key Decision - Is it likely to result in spending or saving £250k or more, or to have a significant effect on two or more electoral wards?	N/A – Report produced for information only
Key Decision - Is it in the <u>Council's Forward</u> <u>Plan (key decisions and private reports?)</u>	Νο
The Decision - Is it eligible for call in by Scrutiny?	Νο
Date signed off by <u>Strategic Director</u> & name	
Is it also signed off by the Service Director for Finance IT and Transactional Services?	No – The report has been produced for information only.
Is it also signed off by the Service Director for Legal Governance and Commissioning Support?	
Cabinet member portfolio	Health and Social Care

Electoral wards affected: All

Ward councillors consulted: N/A

Public or private: Public

1. Summary

- 1.1 In July, at the start of the 2022/23 municipal year, the Health and Adult Social Care Scrutiny Panel met to determine its work programme for the year. The Panel followed an approach that is designed to help members prioritise and ensure measurable outcomes for scrutiny work.
- 1.2 The Panel is asked to reflect on the work it has undertaken, identify where work has been completed and highlight those projects that remain ongoing; continue to be a priority; and need to be carried forward to next year. In order to help members of the Panel to do this, a straightforward flowchart with key questions has been developed and is attached at **Appendix 1**.
- 1.3 A copy of the Panel's work programme, containing details of the work undertaken, is also attached at **Appendix 2**.
- 1.4 Members are asked to look at each item on their work programme and use the flowchart to help determine the next steps.

1.5 Looking Forward to 2022/23

- 1.6 In addition to identifying issues to be carried forward from the current work programme panel members are also asked to identify any additional issues that they consider to be of a strategic priority and would wish to propose for inclusion in the scrutiny work programme for 2022/23.
- 1.7 In order to assist the shortlisting and prioritising process undertaken by scrutiny, it is important that members also identify the remit of the proposed issue, the value that scrutiny would add by being involved, and why this should be a priority for scrutiny over the next 12 months.
- 2. Information required to take a decision N/A
- 3. Implications for the Council N/A
- 4. Consultees and their opinions N/A

5. Next steps and timelines

Following the Panel's discussion, the identified issues will be taken forward for inclusion within a Work Programme Long List. Following an initial overview by the Overview & Scrutiny Management Committee the Panel will receive a shortlist of potential work programme issues and will then go on to fully scope individual projects to ensure focused pieces of work with clear outcomes.

6. Officer recommendations and reasons

1. That the Panel review its work programme and identify where work has been completed and highlight those projects that remain ongoing and need to be carried forward to next year.

2. That the Panel identify any additional issues of a strategic priority that it wishes to propose for inclusion in the scrutiny work programme for 2022/23 together with details

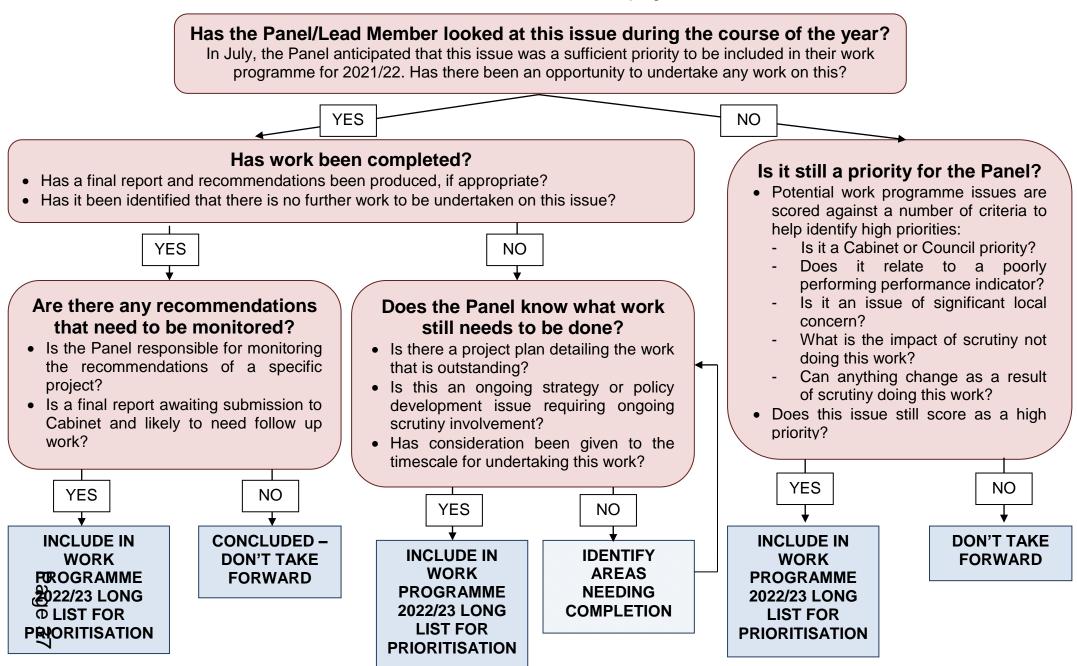
of the remit of the proposed issue, the value that scrutiny would add by being involved, and why this should be a priority for scrutiny over the next 12 months.

- 7. Cabinet portfolio holder's recommendations N/A
- Contact officer Yolande Myers, Principal Governance and Democratic Engagement Officer, Tel: 01484 221000 Email: yolande.myers@kirklees.gov.uk
- 9. Background Papers and History of Decisions N/A
- 10. **Service Director responsible** Julie Muscroft Service Director: Legal, Governance & Commissioning

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REVIEWING THE PANEL'S WORK PROGRAMME FOR 2021/21

For each issue on the Panel's work programme:



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HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL – WORK PROGRAMME 2021/22

MEMBERS: Cllr Habiban Zaman (Lead Member), Cllr Bill Armer, Cllr Aafaq Butt, Cllr Vivien Lees-Hamilton, Cllr Fazila Loonat, Cllr Lesley Warner, David Rigby (Co-optee), Lynne Keady (Co-optee).

SUPPORT: Richard Dunne and Yolande Myers, Principal Governance Officers

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FULL PANEL DISCUSSION		
THEME/ISSUE	APPROACH AND AREAS OF FOCUS	OUTCOMES
1. Financial position of the Kirklees Health and Adult Social Care Economy	 Maintain a focus on the finances of the local health and social care system to include: An update on the impact of Brexit and Covid-19 to include exploring the implications on staff numbers/shortages. Assessing the local approach to developing a workforce strategy. A focus on the implications of the financial pressures on services provided and commissioned by Adult Social Care. 	
2. Impact of Covid-19 on the Health and Adult Social Care Sector	 To look at the impact of Covid-19 on the local health and adult social care sector to include: Considering the capacity of the system Monitoring the impact on planned surgery waiting lists Considering planned changes to service delivery as a consequence of the pandemic. Assessing the impact of the "health debt" due to delays in health screening, cancer treatments, vaccinations etc. Looking at the local plans for catching up with delayed treatments. Lessons learned to include looking at how services across the health and adult social care sector have adapted practice to take account of the impact of the pandemic. 	Panel meeting 19 August 2021Representatives from Calderdale andHuddersfield NHS Foundation Trust and MidYorkshire Hospitals NHS Trust provided anupdate on the impact of Covid-19 on AcuteHospital Trust.The update was noted and the panel requesteda written update on the suspension of theprovision of planned inpatient surgery atDewsbury Hospital.

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	 Assessing the broader impact on adult social care including the increased social care needs for older people as a consequence of reduced mobility and access to services and activities during the pandemic. The impact of long Covid 	
Page 40	 An overarching theme that covers the move to increasing the integration of services across the health and adult social care sector to include: Looking at the progress and effectiveness of Community Care Services (CCS) in Kirklees. Reviewing progress of the Primary Care Networks (PCNs) to include the effectiveness of their integration with other key services and agencies across the local health and social care network. Assessing the impact of CCS in Kirklees in reducing avoidable A&E attendances; hospital admissions; delayed discharges; and reducing avoidable outpatient visits. To consider the implications of the changes from legislative proposals that are intended to integrate care within the NHS and encourage greater collaboration between the NHS and local government and other agencies to include: How the changes will impact on local commissioning and delivery of service. Considering the changing health and care landscape to include a focus on the progress of collaboration between local providers. 	Panel meeting 11 November 2021Representatives from Locala provided anupdate on services delivered by them, includirreducing unnecessary hospital admissions anddelays in discharge. Locala updated the Panelon the development of the same dayurgent/emergency response and the integrationof Gateway to Care Service and Single Point ofContact Service.The Panel requested that the blueprintregarding the integration of services reflect horit felt as a carer and as a community partner.Panel meeting 9 February 2022Representatives from Kirklees ClinicalCommissioning Group presented an update orthe development of Primary Care Networks(PCNs) and access to primary care medicalservices.The Panel agreed that a further update bearranged to assess the progress of PCNs and tolook at the work being done to continue tobuild an efficient and effective GP service.

I. Digital Technology	An overarching theme that looks at the impact of the use of digital	V10
. Digital recimology	technology in the delivery of health and adult social care services.	
5. Mental Health and Wellbeing	 An overarching theme that looks at services that focus on providing support in areas that cover mental health and wellbeing to include: Reviewing progress of the work being delivered through the Kirklees Integrated Wellness Service. Suicide prevention Looking at the Council's work in supporting mental health provision across the various localities in Kirklees. To look in more detail at the services provided by South West Yorkshire Partnership NHS Foundation Trust (SWYPF) to include redesign of services and any post pandemic new initiatives. Looking at the wellbeing and support for unpaid carers including working carers. 	Panel meeting 9 February 2022Representatives from Kirklees Public Health arSouth West Yorkshire Partnership NHSFoundation Trust presented an update on thework being done across Kirklees on suicideprevention.The Panel endorsed and supported therecommendations that all partners shouldproactively promote and raise awareness of thtraining offers via Northorpe Hall; and that theZero-suicide alliance training should berecommended to all to help with consistency oflanguage and approach to help more people tostay safe.In addition the Panel requested that a broaderdiscussion be arranged to focus on the workthat is being carried out through the ThrivingKirklees Single Point of Access Service.
5. Quality of Care in Kirklees ව හ ග අ	 Receive an annual presentation from CQC on the State of Care across Kirklees to include: A focus on Adult Social Care The impact of COVID-19 on the quality of care in Kirklees. 	Panel meeting 7 December 2021Representatives from CQC presented an overview of the state of care in Kirklees.The Panel agreed that a follow up session should be arranged to include dentistry and to consider progress of the new CQC strategy.

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7. Kirklees Safeguarding Adults Board (KSAB) 2020/21 Annual Report	To receive and consider the KSAB Annual Report to include consideration of the Impact of Covid-19 on safeguarding adults during periods of lockdown.	Panel meeting 7 October 2021The Panel received a presentation on the proposed approach to developing the Kirklees Joint Health and Wellbeing Strategy.The Panel requested that its comments and views on the proposed approach to the Strategy and the high level aspirations and ambitions for the health and wellbeing of the residents of Kirklees be noted.Panel meeting 10 March 2022 The new chair of the Kirklees Safeguarding Adults Board presented the 2020-21 Annual Report.The report was noted and the Panel was assured that the systems in place within Kirklees were effective in monitoring safeguarding, reporting on it, with continuous
8. Yorkshire Ambulance Service (YAS) Response Times	 To receive an update on performance and demand across all areas of Kirklees to include: A focus on response times for categories 1 and 2. Looking at the variances of performance across Kirklees. 	Panel meeting 8 July 2021. The Panel received an update on performance, demand and quality in Kirklees. The information provided was noted and the Panel requested that for future updates the data should also include the ambulance pick-up and drop-off times.
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9. Kirklees Public Health	 An overarching theme that looks at the work of Public Health Kirklees to include: Continuing to receive regular updates on the impact and response to Covid-19 (to be kept under review) Assessing the performance of the Immunisation Programmes in Kirklees to include any future coronavirus programmes. To review the work being done on population health management. 	 <u>Panel meeting 8 July 2021</u> Kirklees Public Health presented an update on the local position and response to Covid-19. Actions agreed included: A request for information on the current rates of covid-19 hospitalisations including the trend in Kirklees; and the current assessment of the impact on people who have been diagnosed with long Covid. That a further update be scheduled for the August meeting to include a focus on the impact of the proposed removal of national restrictions. Panel meeting 19 August 2021 Kirklees Public Health and Public Protection presented an update on the local position and response to Covid-19. Actions agreed included: Reviewing the approach to receiving future covid-19 updates. A request for information on the uptake of financial assistance to qualifying individuals who have to self-isolate.
		• A request for information on the uptake of financial assistance to qualifying individuals
		Panel meeting 10 March 2022 Kirklees Public Health and Kirklees CCG
Page		presented an update on Population Health Management that included a short overview covering the impact of air pollution.

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		 Actions agreed included: Providing information and / or data about the outcomes of the new approaches and initiatives in working with the population to improve their health. Providing information around the Public Health Outcomes Framework.
10. Update on Winter Planning	 Update on winter preparations 2021/22 from the Kirklees Health and Adult Social Care sector to include: Receiving details from key organisations across the local health and adult social care section on preparations for winter to include the key areas of focus. lessons learned from the winter period 2020/2021. feedback and experiences of service users from last winter period. 	Panel meeting 7 October 2021 Representatives from organisations across the Kirklees Health and Adult Social Care system presented an outline of the work that was being done to prepare for the winter period 2021/22. The information provided was noted. In addition the Panel requested that partners across the local health and adult social care system continue to review risks during the winter period and notify the Panel should any major issues affecting the provision of services occur.
11. Effectiveness of smoking cessation arrangements in Kirklees.	To review the effectiveness of smoking cessation arrangements in Kirklees to include a review on how people with complex mental ill health are supported.	
12. Kirklees Care Homes Programme Board including analysis of the home care market ບັ	 Receiving an update on progress of the Board to include: Looking at the key issues and challenges identified by the Board and the actions taken to address them. Details of the training and support that will be provided to care homes on the verification of expected death, end of life care plans and testing and swab taking. 	Panel meeting 11 November 2021 Representatives from Kirklees and the CCG attended to update the Panel on the work of the Programme Board which included some of the challenges following Covid affecting how the care home market operates.

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	 Continue monitoring the outcomes of the analysis of the home care market to include receiving a copy of the final report from Cordis Bright and implementation plan. 	 Agreed actions included: A request for further information relating to current bed occupancy.
13. Healthwatch Kirklees	To develop the working relationship with Healthwatch Kirklees to include sharing of work programmes and identifying local areas of concern to inform the work of the Panel.	Panel meeting 7 October 2021Representatives from Healthwatch provided an update on their workplan.The Panel noted Healthwatch's key areas of work and agreed to continue to share work programmes and monitor local areas of concern.
14. Air Pollution	To assess the health risk associated with air pollution.	Panel meeting 10 March 2022 The Panel welcomed a representative from Kirklees Air Quality – Energy and Climate Change to the meeting as part of the discussion with Public Health around Population Health Management.
		 Agreed actions included: A request for further consideration of air quality in the 2022-23 municipal year. That highways should be asked to input into the consideration on air quality, particularly in relation to traffic flow and the impact on air quality. That following monitoring of air quality in
Page	7	sites around Kirklees, provide details of what is being done to combat poor air quality.

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15. Rainbow Child Development Unit at Calderdale and Huddersfield NHS Foundation Trust (CHFT)	To consider proposals to relocate the Child Development Service (CDS) and create a central community hub for families to include co-location with specialist nursing input and community therapies.	Panel meeting 8 July 2021Representatives from CHFT presented the plansto relocate the CDS.The Panel supported the proposals includingthe Trust's preferred location and requestedthat the outcomes from the engagement workbe presented at a future meeting.
16. Reconfiguration of Bed Capacity in Kirklees supporting with Intermediate Care and Dementia Care	To consider proposals to reconfigure the dementia and Intermediate Care Beds across Moorlands Grange, Castle Grange, Ings Grove House and Claremont House to include a temporary decant of The Homestead Day Service.	Panel meeting 7 December 2021Representatives from the Adult Social care and Locala presented the plans for reconfiguring the dementia and intermediate care beds in Kirklees care homes.The Panel noted the proposals and requested feedback early in 2022 on the impact of winter pressures on IMC services.
	LEAD MEMBER BRIEFING ISSUES	
ISSUE	AREAS OF FOCUS	
1. Mid Yorkshire Hospitals NHS Trust (MYHT) Ambulatory Emergency Care (AEC) Services and Services provided at Dewsbury and District Hospital (DDH)	Update on the closure of the AEC unit at DDH.	
2. Transforming Outpatient Care at Calderdale and Huddersfield NHS Foundation Trust (CHFT) - and Mid Yorkshire Hospitals WHS Trust (MYHT)	 Receive an update on progress of: The programme of change at CHFT. The work being done by MYHT on its Outpatient Care. 	
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