

Contact Officer: Richard Dunne

KIRKLEES COUNCIL

HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL

Tuesday 13th December 2022

Present: Councillor Jackie Ramsay (Chair)
Councillor Lesley Warner
Councillor Jo Lawson
Councillor Bill Armer
Councillor Vivien Lees-Hamilton
Councillor Alison Munro

Co-optees Helen Clay
Kim Taylor

In attendance: Ruth Buchan - Chief Executive Officer, Community Pharmacy West Yorkshire
Jane Close - Chief Operating Officer, Locala
Helen Duke – Assistant Director of Operations, Locala
Alexia Gray - Head of Quality Standards and Safeguarding Partnerships Kirklees Council
Jill Greenfield – Service Director Customer and Communities, Kirklees Council
Jen Love - Programme Manager Community Mental Health Transformation, Kirklees Health and Care Partnership
Richard Parry - Strategic Director for Adults and Health, Kirklees Council
Andrew Singleton - Service Planning and Development Manager, Local Care Direct
Catherine Wormstone - Director of Primary Care, Kirklees Health and Care Partnership

Observers: Stacey Appleyard - Director, Healthwatch Kirklees

1 Minutes of previous meeting

The minutes of the meeting held on the 19 October 2022 were approved as a correct record.

It was noted that the Panel wished to follow up on the question on the risks associated with the increased use of spot contracts with a particular focus on those providers who were not accredited.

Health and Adult Social Care Scrutiny Panel - 13 December 2022

2 **Interests**

Cllr Lesley Warner declared an interest in item 7 (Joined up Care in Kirklees Neighbourhoods) on the grounds that she was a member of the Calderdale and Huddersfield NHS Foundation Trust Council of Governors.

3 **Deputations/Petitions**

No deputations or petitions were received.

4 **Public Question Time**

No questions were asked.

5 **Admission of the public**

All items were taken in public session

6 **New Plan for Adult Social Care Reform**

The Panel welcomed Richard Parry Strategic Director for Adults and Health and Alexia Gray Head of Quality Standards and Safeguarding Partnerships to the meeting.

Mr Parry informed the Panel that despite the delays in implementation in key elements of the reforms it was felt important to provide scrutiny members with an overview of the breadth of planned social care reforms.

Ms Gray provided an overview of the key elements of social care reform and explained that the reforms placed greater emphasis on personalisation, housing, technology enabled care and advice and information.

Ms Gray informed the Panel that there would be significant reform in the way in which people would pay for their social care and highlighted that there were considerable concerns about the capacity needed to address the reforms.

Ms Gray explained that the primary aim of the charging reforms was to redistribute the financial responsibility for paying for an individual's care which would mean that the cost to the local authority would increase.

Ms Gray stated that the charging element of the reform had been delayed until October 2025 although the lead in period would require councils to start preparation work from summer 2023.

Ms Gray presented an overview of the overall programme of changes that would be taking in place that included the work being done to recover from the pandemic, the period of reform and the transformation into new models of care.

Ms Gray provided an overview of the predicted demand in adult social care that included pressure of unallocated backlogs and reform care act assessments and reviews.

Ms Gray informed the Panel of the Council's approach to social care reform that included taking a cross council approach, regional peer support and continuing with activity to help provide the opportunities for efficiencies and better outcomes.

Health and Adult Social Care Scrutiny Panel - 13 December 2022

Ms Gray stated that the Council would also be commissioning external support to model the impact of the charging reform, demographic demand and to identify opportunities for savings.

Ms Gray stated that there would be a statutory duty for Care Quality Commission (CQC) to assess the Council's adult social care services from April 2023 and new legal powers for the Secretary of State to intervene in local authorities to secure improvement.

Ms Gray provided an overview of the work that had been done in conjunction with local authorities to co-design the local authority assessment which included the importance of being informed by what matters to people who draw on care and support.

Ms Gray presented details of the assessment framework that was split into a number of areas that included "I" statements based on what people expected and needed as a basis for gathering feedback, quality statements, evidence categories based on peoples experience and data and information.

Ms Gray outlined the scope of CQC that was split across 4 domains that included working with people, providing support, ensuring safety and leadership and workforce.

Ms Gray provided a summary of the key work that had taken place and next steps that included the submission of the fair cost of care exercise to the Department for Health and Social Care, preparing the Local Account, exploring digital options and the procurement of external support to look at increased demand and trajectories.

A question and answer session followed that covered a number of issues that included:

- A question asking for an explanation on what differences would a service user see and experience as a result of the changes.
- An overview of the main drivers of social care reform and the Council's vision for adult social care.
- Clarification that the key focus of the reforms was the way that social care was paid for and the removal of the cross subsidy for people living in a care home.
- An offer to have a more detailed discussion with scrutiny on the broader range of changes that the Council was developing to improve the social care offer.
- A concern regarding the Council's ability to cover the increased costs of the social care reforms.

RESOLVED –

1. That Richard Parry and Alexia Gray be thanked for attending the meeting and presenting details of the planned adult social care reforms.

7 Joined up Care in Kirklees Neighbourhoods

The Panel welcomed representatives from Kirklees Health and Care Partnership, Kirklees Council Adult Social Care, Locala, Community Pharmacy West Yorkshire, Local Care Direct and Healthwatch Kirklees to the meeting.

Ms Wormstone presented a summary of the Health and Care Act which included the formal creation of Integrated Care Boards (ICBs). Ms Wormstone stated that the development of a neighbourhood model of care was central to the strategy of the West Yorkshire ICB and was reinforced by the publication of the Fuller Stocktake report in May 2022.

Ms Wormstone provided an overview of the key themes from the Fuller Stocktake report that included building integrated teams in every neighbourhood, personalised care for people who needed it the most, working with people and communities and improving same day access for urgent care.

Ms Wormstone informed the Panel that the areas of focus for the nine Primary Care Networks (PCNs) in Kirklees depended on the populations they served, the health needs and the ambition of each PCN.

Ms Wormstone confirmed that the West Yorkshire ICB ambition was to accelerate the development of neighbourhood teams far beyond the original scope of the PCNs when they were first formed.

Ms Wormstone stated that PCNs were not formal organisations with significant infrastructure and they were groups of GP's that were working together often without any significant administrative support.

Ms Wormstone informed the Panel that at the first formal ICB meeting they had undertaken a deep dive into primary care and PCNs and themes that had emerged included the role of community pharmacy in helping to alleviate demand in the system; good examples of integration and working with partners; recognition of primary care estate; and variable patient experience.

Ms Close presented an overview of the community neighbourhood model and highlighted that an important factor was to ensure that the system pulled all its capacity together.

Ms Close informed the Panel that providers in Calderdale and Wakefield also were aligned to the Kirklees neighbourhood model as it was extremely helpful to have consistency in the pathways of care for people being admitted and discharged from hospital.

Ms Close stated that the ambition was to shift to a more proactive model of care with a much greater emphasis on prevention and would include the integration of the urgent care offer to ensure that all services would be working together in the community.

Ms Close presented details of the Canterbury Health System and explained that in its simplest form is what designed to ensure that all part of community capacity were

Health and Adult Social Care Scrutiny Panel - 13 December 2022

joined up with enablers to provide wrap around care for people and provide support at home.

Ms Close explained that digital technology was a key element in transforming the delivery of care and that the model required an increased alliance between providers.

Ms Close provided an overview of the progress to date in the development of the neighbourhood model and explained that the initial focus had been on unplanned and urgent activity.

Ms Buchan presented an overview of community pharmacy in Kirklees and highlighted the important role of pharmacies in helping to alleviate pressure across the wider primary care system.

Ms Buchan informed the Panel of the NHS Community Pharmacist Consultation Service (CPCS) that was aimed at improving access to primary care services for the local population.

Ms Buchan explained that the service could only be accessed via a referral from a GP Practice. Ms Buchan stated that referrals were currently low but there were discussions taking place to see how the use of this service could be increased.

Ms Buchan informed the Panel of the NHS Hypertension Case Finding Service provided by pharmacists that aimed to identify people with high blood pressure so they could be referred for preventive treatment.

Ms Buchan informed the Panel of the NHS Discharge Medicines Service (DMS) that helped patients to understand their prescribed medication following discharge from hospital and helped to prevent readmission to hospital.

Mr Parry provided an overview of the capacity of adult social care to support out of hospital care and explained that the role of adult social care in helping people to be supported in their own homes meant that the service was a natural part of the neighbourhood model.

Mr Parry stated that like the rest of the system adult social care did have pressures with retention and recruitment of staff although the Council had been successful in securing domiciliary care packages to provide day to day care in people's homes.

Mr Parry informed the Panel that the Council had invested in a care association that was helping to look at ways that domiciliary care could be part of the neighbourhood model solution to providing home care.

Mr Parry explained that the Council had been working with domiciliary care colleagues on what a digital offer would look like in areas such as digital records and assistive technology.

Ms Greenfield informed the Panel of the work that was being done on personalised care that was focused on providing specific tailored support to an individual

Health and Adult Social Care Scrutiny Panel - 13 December 2022

Ms Greenfield explained that personalised care took a broader more holistic approach and how people were supported on non-clinical issues that were often linked to the presenting clinical issues.

Ms Greenfield outlined details of the roles that supported personalised care in Kirklees that included: social prescribers; care coordinators; and health and wellbeing coaches.

Ms Greenfield explained that the roles provided the bridge between clinical services and community services and had helped to provide support to NHS and social care partners in initiatives designed to alleviate pressures in the system such as out of hospital discharge.

Ms Greenfield presented an example of the integrated urgent service pilot scheme that had commenced in 2021 and aimed to provide an alternative clinical option for patients with same day urgent care needs.

Ms Love informed the Panel of the work that was taking place to build capacity in the system that would enable more people to access and receive mental health treatment closer to home.

Ms Love explained in detail the work that would take place in mini mental health hubs that would be located in each PCN and confirmed that they aimed to embed the new mental health roles within the PCNs by 2023.

Ms Love outlined in detail the next steps for the implementation of the new mental health service that would include input from stakeholders and service users.

Ms Love stated that they had met a few challenges with the programme of work that included challenges in recruiting to the additional roles reimbursement Mental Health Practitioners positions.

Ms Love explained that the new service would provide a one door entry into primary care with professionals providing wrap around support for people with a mental health illness.

Mr Singleton presented details of the new Urgent Community Response (UCR) service that was delivered through an alliance of 4 providers in Kirklees. Mr Singleton explained that the focus was on providing crisis response for people into the community with the aim of preventing people having to go to hospital.

Mr Singleton stated that a key focus was working with the Yorkshire Ambulance Service (YAS) and explained that there were a significant number of people who were in the 999 queue that could be potentially treated through the UCR service.

Mr Singleton explained that they were continuing to develop the workforce model using different staff disciplines to plan the team and were continuing to integrate with different services so that patients received a better experience and that services and resources were utilised more efficiently.

Health and Adult Social Care Scrutiny Panel - 13 December 2022

Ms Wormstone presented an update on the plans to have community diagnostic Centres (CDC) in West Yorkshire that included confirmation that approval had been given to have 2 CDCs one based in Huddersfield and one in Wakefield.

A question and session followed that covered a number of issues that included:

- A question on how the various initiatives were being communicated to service users and whether the benefits of the services were being explained to the patient.
- An explanation of the new roles that had been created and the importance of encouraging a collective effort from the various clinical and non-clinical professionals in explaining the benefits and breadth of services available to patients.
- Confirmation that some of the NHS communications that will be issued during the winter months will describe in more detail the range of primary care services available to people.
- A question on whether the planned changes to the way that primary care could be accessed was more of a vision than a reality.
- Considering the current financial pressures, a concern on whether the investment that would be needed to support the various initiatives would be available.
- A question on whether the community pharmacy minor ailment initiatives were sufficiently communicated to local communities particularly in those areas in Kirklees where demand for this service could be most beneficial.
- A question on what progress had been made to improve data sharing and patient information to support the integrated approach being taken in the neighbourhood model.
- Confirmation that many of the initiatives were “real” and a detailed explanation of examples of work that were taking place.
- Details of the work being done through the West Yorkshire ICB to attract and support local residents into the health and adult social care workforce.
- Confirmation that the certain parts of the system were able to access patients records and the work being planned to further improve access for the various organisations within primary care.
- The focus on looking at and utilising the different skill mixes in the workforce and developing further the use of digital technology.
- Confirmation that the community pharmacy initiatives were national funded and an overview of some of the locally funded schemes.
- Details of the national guidance that related to the discharge and supply of medication to treat minor ailments.
- A question seeking clarification on how the neighbourhood model would work within a PCN area.
- A concern regarding the sustainability of community pharmacy due the lack of qualified pharmacists, poor staff pay and pharmacy’s having to subsidise the cost of the drugs they dispense.
- Confirmation that there was concern regarding the viability of community pharmacy due to the level of national funding that had remained flat during the last few years.

Health and Adult Social Care Scrutiny Panel - 13 December 2022

- Confirmation that there was a lack of qualified pharmacists entering the system which was leading to viability issues as pharmacist stores were unable to open without a qualified pharmacist on the premises.
- Confirmation that the various pharmacy initiatives were nationally funded and by encouraging an increase in the use of these services this would help the viability of local pharmacies.
- The work that was taking place to align the agencies working in the neighbourhood model to general practice and the challenges in physically locating the services in a limited GP estate.
- The focus on building the network and infrastructure needed at a neighbourhood and PCN level and utilising the wider local health and adult social care system estate.
- Details of the closures of a number of pharmacies in the village of Slaithwaite and the problems created following the re-location of one the main pharmacies into smaller premises.
- Details of the regulatory framework for merging of moving a pharmacy.
- A question querying the locations of the Community Diagnostic Centres and whether they would be picking up new demand or re-allocated work from hospitals.
- A question seeking more information on the virtual ward initiative.
- Confirmation that the two large diagnostic centres would be supported by a number of smaller diagnostic hubs and they would pick up both new demand as well as re-allocated work.
- Details of the virtual ward initiative that had implemented an initial phase to support discharge and would be followed by a second phase that would focus on hospital avoidance.
- A concern that the location of the larger Diagnostic Centre in Wakefield would add costs and travel time to residents living in North Kirklees.
- Confirmation that a smaller diagnostic hub would be located in Dewsbury.
- A query on whether the smaller diagnostic hubs would provide a smaller range of diagnostic services compared to the larger centres.
- A comment that the involvement of councillors in PCN meetings had not been particularly positive and a question on the approach being taken to widen the involvement of councillors and other agencies in the work of the PCNs.
- An agreement that more work was needed to align the role of elected members in the work of PCNs and the neighbourhood model including developing the right forums to build that working relationship.
- An overview of the approach that could be taken to developing and creating a neighbourhood model with PCN involvement.
- An agreement that the development of the working relationships with the PCNs should be undertaken outside of the PCN formal business meetings.
- Confirmation that the approach for developing the neighbourhood models would be different in each of the nine PCN areas.
- A question seeking clarification on how the mental health practitioners would be working with the GP practices.
- Confirmation that the approach to providing a mental health service for each PCN would differ slightly and an explanation of the various roles within the mental health team.

Health and Adult Social Care Scrutiny Panel - 13 December 2022

- A question on whether the new neighbourhood model initiatives were just keeping up with demand or whether there was a genuine feeling that the system was accommodating growth.
- Confirmation that in some of the bigger services there was a significant growth in demand and these services were just keeping up with the demand.
- The opportunities to accommodating growth would need to come from bringing different skill sets and professional groupings.
- Confirmation that Huddersfield University was oversubscribed for its paramedic course which could provide an opportunity to work with the ambulance service to bring paramedics into primary care such as the Urgent Community Response service.
- An overview of the work being done through the West Yorkshire ICB to look at the overall workforce needs across the region.
- The importance of working with Huddersfield University to help with future workforce supply and providing a competitive offer to encourage people to work in the local health and adult social care system.
- A question on whether the urgent care service was picking up demand that used to be managed by primary care or was the service genuinely moving demand away from the hospital.
- Confirmation that the majority of referrals to the Urgent Community Response service was from general practice some of which in the past may have been directed to the hospital.
- Confirmation that the focus of the UCR service to work with the ambulance service was to prevent unnecessary attendance at hospital.
- The focus on increasing referrals into services like the UCR by having multi-disciplinary teams located in one hub and one access point.
- The importance of communicating with the public and raising awareness of the local neighbourhood services.

RESOLVED –

1. That attendees be thanked for presenting the information and participating in the discussions.
2. That the Panel acknowledge that the information submitted provides good evidence of the progress that is being made in integrated working despite the pressures in the local health and adult social care system.

8 Work Programme 2022/23

A discussion took place on the 2022/23 work programme and forward agenda plan.

It was confirmed that the Panel had received a holding response regarding the provision of maternity services in Kirklees. Cllr Ramsay stated that further contact had been made with Calderdale and Huddersfield NHS Foundation Trust on the matter and the Trust had invited the Panel to visit the maternity service in Calderdale Royal Hospital.

It was confirmed that the Panel would accept the invitation although focus would still be given to the wider issues covering the lack of provision in Kirklees.

Health and Adult Social Care Scrutiny Panel - 13 December 2022

It was proposed that the item on dentistry would be scheduled for the March 2023 meeting.

Cllr Ramsay stated the request for data and metrics covering capacity in community services would be shared with the Panel with the aim of reviewing the information at the January 2023 meeting.

Feedback from a personal experience of a panel member indicated that there continued to be challenges with data sharing between different hospital trusts.

It was confirmed that the items on palliative and end of life care and the inequalities in access to health care services would be covered at the January 2023 meeting.

There was a proposal to include a more detailed look at the provision of adult social care with a focus on community provision and domiciliary care potentially to be included in the March 2023 meeting.

It was agreed to review the work programme item covering the impact of Covid-19 to ensure that the issues listed had been incorporated into the wider panel discussions.