Contact Officer: Richard Dunne

KIRKLEES COUNCIL

HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL

Tuesday 12th February 2019

Present: Councillor Elizabeth Smaje (Chair)

Councillor Nell Griffiths Councillor Fazila Loonat Councillor Alison Munro

Co-optees David Rigby

Peter Bradshaw

Apologies: Councillor Habiban Zaman

Lynne Keady (Co-Optee)

1 Minutes of previous meeting

RESOLVED - That the minutes of the meeting held on 15 January be approved.

2 Interests

Co-optee David Rigby declared an interest in item 4 Kirklees Community Services Review on the grounds of being an ordinary member of Locala.

3 Admission of the public

All items were taken in public session.

4 Kirklees Community Services Review - Progress Report

The Panel welcomed Helen Severns Service Director – Integrated Commissioning Greater Huddersfield CCG/North Kirklees CCG/Kirklees Council.

Ms Severns presented the report that had been submitted to the Governing Body – Committees in Common: North Kirklees & Greater Huddersfield CCGs at their January 2019 meeting which outlined the progress on future Kirklees Community Services and the decision on the Locala Care Closer to Home contract that was required in March 2019.

Ms Severns provided the Panel with the context and background to the Locala contract and outlined the contract review process that the Clinical Commissioning Groups (CCGs) were following.

Ms Severns informed the Panel of the options that had been recommended to the CCGs Governing Body – Committees in Common to be determined at its meeting in March 2019.

Ms Severns explained that one of the options was to make a case for changing the specification and extending the Locala contract and outlined details of the criteria and evidence that would help inform the decision.

Ms Severns informed the Panel of the work that was being done on reviewing and evaluating the current contract and outlined details of the areas that the service review was focusing on.

Ms Severns stated that the recent publication of the NHS Long Term Plan and the five year GP contract reform had indicated a different model and way of working within the community.

Ms Severns stated that locally the Health and Wellbeing Plan and Integrated Commissioning Strategy had been agreed and they also both identified a need to develop and enhance a different model for community services.

Ms Severns informed the Panel of the extensive engagement that had been undertaken as part of the review of the current community services model and outlined details of the further engagement that was planned.

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

- Whether serious consideration would be given to going to the market with a new specification and contract terms.
- The need to evaluate the level of financial investment required to adequately support community services.
- An overview of the evaluation of the current model including the focus on performance indicators in the contract.
- An explanation of the process for managing the performance indicators.
- The work that was being done to manage Locala's case load with a focus on reducing the numbers being unnecessarily admitted to hospital or only attending for short periods of time.
- An explanation of the work being done to develop 9 Primary Care Networks (PCN) across the district.
- An overview of the roles and aims of the PCNs.
- The role of GPs in the PCNs.
- The work that was still being done to develop the operational aspects of the PCNs
- The challenges in developing a comprehensive service that would cover all of the needs of each PCN.
- An overview of the direction of travel indicated by the NHS Long Term Plan for the funding of community services.
- The role of social care in the process.
- An overview of the work that was looking at the integration of commissioning across the health and social care sectors.
- The theme emerging from the engagement sessions on moving towards a holistic approach to patients.
- Clarification that the new GP Contract would include the requirement to sign up to a PCN.

- Details of the Integrated Provider Board.
- A request to see the CCGs conflict of interest policies.
- An explanation of some of the organisations included in the engagement list.
- An overview of the commissioning arrangements for out of hours access to health professionals.
- An explanation of how the CCGs intended to provide assurance of the evaluation process.
- The need to ensure that the evaluation of the contract included input from service users.
- The CCGs plan to produce a summary engagement report that included patient experience.
- An overview of how the engagement process would include feedback on specific services provided by Locala.
- A request for the evaluation process to include navigation and access to services.
- An explanation of the evaluation work that had been done to assess the aim of the Care Closer to Home Programme in reducing hospital demand and facilitating quicker patient discharge.
- Confirmation that the timescale for completing the engagement and making a decision in March was achievable.
- Details of the work that was being done by CCGs to assess the funding and capacity that would be required to meet the demand for community services.
- The focus and monitoring on the Locala workforce issues that was being undertaken by the CCG Quality Board.

RESOLVED -

- 1. That the Panel is sent details of the Clinical Commissioning Groups policy on conflicts of interest.
- That the Panel would wish to see steps taken to include greater involvement from Kirklees Council's Social Care Services in the commissioning process of the contract with an emphasis on continuing to improve integration between health and social care services.
- 3. That following the decision of the CCGs Governing Body Committees in Common decision on the contract options that a further update is presented to the Panel that provides details of how the future contract will be developed.
- 4. That the Panel is sent details of the strategic document that outlines Locala's plans for delivery of the remaining two years of the contract.
- 5. That the Panel would wish to see details of the outcomes of the engagement work that is informing the evaluation of model to include a focus on any emerging work that helps to improve: the sharing of records and information; and communications between providers.
- 6. That the Panel is provided with a detailed explanation and information on the assessment of the Care Closer to Home programme to include how it has helped

to reduce demand on Kirklees hospital's and supported the reconfigurations in hospital services.

- 7. That the Panel would wish to see greater involvement in the engagement work from services users and patient groups.
- 8. That the evaluation of the model includes an assessment of the impact on the GP Out of Hours service to include looking at the demand on week day extended hours and the weekend service.
- That the Panel is sent details of the mapping for the Primary Care Networks in Kirklees.

5 Ambulatory Emergency Care at Mid Yorkshire Hospitals Trust

The Panel welcomed Trudie Davies Chief Operating Officer Mid Yorkshire Hospitals Trust (MYHT) and Michelle Eardley Director of operations, division of medicine MYHT to the meeting.

Ms Davies provided an overview of the background to Ambulatory Emergency Care (AEC) services at MYHT and explained that the challenge of staff shortages remained a key issue.

Ms Davies informed the Panel that the AEC services should be looked at alongside the totality of all service provision that was available on the Dewsbury site and offered same day emergency care.

Ms Davies informed the Panel of a recent meeting with CCGs and GP representatives to discuss the activity at Dewsbury which included the work that was being done to reduce the need for patients to be admitted to hospital.

Ms Davies stated that work that had focused on getting earlier discharges for patients had been successful and the length of stay and numbers of admissions to hospital had reduced.

Ms Davies informed the Panel that the Trust's recommendation was to continue with the centralisation of the AEC service at the Pinderfields site for the next six months while it continued to recruit and train more Advanced Nurse Practioners (ANPs).

Ms Davies stated that the Trust would also review with its partners the totality of provision of same day emergency care at both Dewsbury and Pinderfields and to assess the impact of the enhanced services.

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

- An explanation of the reasons for the reduction in the numbers of patients being referred by GPs in North Kirklees to the AEC service and the Operations Centre.
- An overview of the Operations Centre and the plans to consider introducing a single point of contact supported by clinical staff to help direct GPs and patients to the appropriate service.

- An explanation of the assessment that had been carried out on the referral pathways used by GPs.
- The work being done by the Trust in understanding why some GPs always chose to refer to A&E and others who always chose the Operations Centre.
- The work being done by the Trust on improving the provision of information to help support GPs and the general public in making a more informed choice for their pathway of care.
- A detailed explanation of the qualification criteria for the ANP role.
- A question on whether an assessment had been carried out to check if any admissions to hospital or transfers to Pinderfields could have been avoided if the AEC at Dewsbury had been open.
- Clarification that the Trust had a lot of information that covered the admission rates across the Trust and the impact of the Dewsbury closure which would have helped to inform the discussions with scrutiny.
- An overview of the specialist services that were available at Pinderfields.
- An offer to include in the review with CCGs an assessment of the Trust's services and provide scrutiny with a comprehensive report that would demonstrate what services patients from Kirklees were accessing.
- An overview of the feedback from patients who self-presented at A&E Dewsbury and ended up being transferred to Pinderfields for AEC services.
- An overview of the process for transferring patients from Dewsbury to Pinderfields AEC Unit.

RESOLVED -

- 1. That the Panel agree that a more detailed scrutiny of Ambulatory Emergency Care (AEC) Services at Mid Yorkshire Hospitals NHS Trust is required.
- 2. That the Panel's supporting officer is authorised to approach the Wakefield Adults Services, Public Health and the NHS Overview and Scrutiny Committee to see if they wish to participate in the review of AEC Services.

6 Work Programme 2018/19

That progress of the work programme and the forward agenda plan for 2018/19 be noted.

7 Date of Next Meeting

RESOLVED – That the date of the next meeting be confirmed as 12 March 2019.