

## Health Overview and Scrutiny Committee

### Wednesday, 4 November 2015, - 1.00 pm

#### Minutes

#### Present:

Mr A C Roberts (Chairman), Mr W P Gretton, Mr P Grove, Mr A P Miller, Mr G J Vickery, Mr T Baker, Dr B T Cooper, Mrs F S Smith, Mr A Stafford, Mrs N Wood-Ford and Mrs F M Oborski

#### Also attended:

Mr M J Hart, Cabinet Member with Responsibility for Health and Well Being  
Simon Gartland, Redditch and Bromsgrove, Wyre Forest and South Worcestershire Clinical Commissioning Groups

Richard Harling (Director of Adult Services and Health), Suzanne O'Leary (Democratic Governance and Scrutiny Manager) and Jo Weston (Overview and Scrutiny Officer)

#### Available Papers

The members had before them:

- A. The Agenda papers (previously circulated);
- B. Presentation handouts for items 5 and 6 (circulated at the Meeting)
- C. The Minutes of the Meeting held on 16 September 2015 (previously circulated).

(Copies of documents A and B will be attached to the signed Minutes).

#### 757 Apologies and Welcome

Apologies had been received from Mrs J L M A Griffiths, Ms P Hill, Prof J W Raine and Mrs M A Rayner. Mrs F Oborski stated she would have to leave the meeting early.

The Chairman was very disappointed that a Member Briefing had been arranged at the same time as a HOSC meeting and had reported his concern to the Cabinet Member.

#### 758 Declarations of Interest and of any Party Whip

The Chairman declared an interest as he was a Governor of St Richards Hospice.

#### 759 Public Participation

None.

**760 Confirmation of the Minutes of the Previous Meeting**

The Minutes of the Meeting held on 16 September 2015 were agreed as a correct record and signed by the Chairman.

**761 Draft Joint Health and Well-being Strategy 2016-19**

Attending for this item were the Cabinet Member for Health and Well-being and the Director of Adult Services and Health.

By way of presentation, the Cabinet Member and Director provided the Committee with some background to the issue and the actions taken to date in developing the draft 2016 – 2019 strategy, alongside the key themes which would be adopted throughout the strategy period.

Background

In summary, production of a strategy had been a statutory duty since the Health & Social Care Act 2012 and the duty lies with County Councils and Clinical Commissioning Groups to set out the context for plans across all health bodies.

Taking in to account local intelligence about the County and national policy areas, the overall health of the Worcestershire was good. However, it was disappointing that there continued to be persistent inequalities and some emerging challenges, mainly due to the ageing population, some with increased complex medical needs and more adults requiring long term care.

Development of 2016-2019 Strategy

A Stakeholder event had taken place on 4 June 2015 where 140 people from across many health, local authority and community organisations attended. The purpose was to establish what had worked well during the previous three years and consider some priorities for the future.

It was suggested that the strategy had helped to promote partnership working, however, it was acknowledged that communication and awareness could be improved.

It was further acknowledged that the vision and key principles remained relevant for the upcoming Strategy.

The Committee was reminded of the Vision:

*"Worcestershire residents are healthier, live longer and have a better quality of life, especially those communities and groups with the poorest health outcomes."*

and the six key principles:

- *Working in partnership*
- *Empowering individuals and families*
- *Taking local action*
- *Using evidence in decision making*
- *Involving people*
- *Being open and accountable.*

The Director and Cabinet Member reiterated that it was felt that prevention had the greatest impact and outlined some ways which organisations were promoting prevention. These included commissioning prevention services such as sexual health services, signposting individuals and families to appropriate self-help materials and creating a health promoting environment, for example by encouraging walking and cycling.

Following agreed criteria to assess priorities, three areas were highlighted as being relevant to a large number of people, across all age groups. In addition, without achieving change, the number of people affected would grow. The three areas were:

- Mental health and well-being throughout life
- Being active at every age
- Reducing harm from drinking too much alcohol

In relation to mental health, it was suggested the focus should be on:

- building resilience to improve mental well-being and dementia
- under 5's and their parents
- young people
- older people
- populations with poorer health outcomes

In relation to being active, the focus would be on:

- increasing everyday physical activity
- under 5's and their parents
- older people
- populations with poorer health outcomes.

In relation to alcohol, the focus would be on:

- middle aged people
- older people
- populations with poorer health outcomes

A draft strategy was then developed and approved by the Health and Well-being Board on 20 September 2015, for consultation during the winter.

The Director concluded the presentation by outlining the next steps. The draft strategy was released for wide consultation across Worcestershire, where it was hoped that feedback would be received in time for a revised strategy to be taken and approved at the Health and Well-being Board in January 2016. To launch the consultation a further stakeholder event was planned for 10 November 2015.

In the ensuing discussion, the following main points were made:

- Members agreed with the Cabinet Member and Director that the current strategy had not had time to show impact, as the impact may not be seen for years to come. However, the work undertaken had proved that partnership working to achieve outcomes was required
- The role of Schools should not be underestimated, where educating children and parents together was vital, especially to build resilience in order that all residents were able to signpost themselves to self-help solutions and community assets
- As the consultation had commenced, it was timely for HOSC to influence the strategy as it felt fit
- In relation to a query whether public health officers had any involvement in strategic discussions about County Council policies, it was clarified that they do, with examples of work with green spaces, the choose how you move project and Worcestershire Works WellThe Committee suggested that District Councils could do more to promote healthy lifestyles in particular around planning. There were community led successes, such as Park Runs, which could be more actively promoted at District level
- Members raised the issue of men's health as possibly an important focus
- The Committee was reminded that a Scrutiny Task Group was currently looking at Increasing Physical Activity
- Members were concerned about the in year funding cuts to the Public Health Ring-Fenced Grant, especially in the area of mental health, when it was clearly a priority for the Health and Well-being Board.
- The Your Life Your Choice website was an

exciting tool for signposting residents and although launched in April would always be a work in progress.

Overall, the Committee was content with the draft Joint Health and Well-being Strategy 2016 – 2019, would send comments in to the consultation and looked forward to receiving an update in due course.

**762 Cancer Services**

Mr Simon Gartland, the Deputy Director of Commissioning for Redditch and Bromsgrove Clinical Commissioning Group attended on behalf of all three CCGs.

Mr Gartland gave apologies on behalf of colleagues from Worcestershire Acute Hospitals Trust as they were attending an awards ceremony for the Worcestershire Oncology Centre.

By way of presentation, the Deputy Director outlined a number of achievements which had provided a more integrated oncology service since the new Worcestershire Oncology Centre opened in January 2015. Patient feedback was that 84% would recommend the Centre to others.

The number of patients being given radiotherapy in Worcestershire had increased and the type of cancer treated was widening across a phased implementation. It was predicted that over time, the number of patient attendances would also increase.

Nationally, performance against key cancer standards was below target and the picture in Worcestershire was no different. Members were reminded that some patients would have appointments set up within target timescales, yet for a variety of reasons the appointment may not be kept. The CCGs had met with the Acute Trust to understand some of the reasons around this issue and addressed some issues around capacity in particular areas. In addition, the CCGs had written to GP Practices to remind them of the need to communicate with patients the importance of keeping appointments. There was a move to work towards an e-referral system for two week waits, finishing the current use of faxed referrals.

In summary, the Deputy Director was extremely pleased with the progress made since the opening of the Oncology Centre in January 2015 and all health economy professionals were content with the direction of travel.

The aim was to have a world class service for the residents of Worcestershire, with as many services as possible delivered locally. It was recognised that some specialist areas would continue to be accessed outside the County, however, by working in partnership it was hoped that the Worcestershire model could be an exemplar in partnership working.

In the ensuing discussion, the following main points were made:

- There were some staff vacancies in this area, further details would need to be sought from the Acute Trust, but it was hoped that patient capacity would be increased and further recruitment anticipated. The Oncology Centre had further capacity built in in anticipation of increasing rates of cancer
- There would always be the need to refer some complex cancers to specialist centres out of County
- As more patients are surviving cancer, there needs to be further development of services after treatment. Locally, there are excellent services available
- Patient Surveys have provided some useful information and a positive experience
- Members agreed that it would be useful for Commissioners to further understand why patients do not attend appointments

The Chairman thanked the Deputy Director of Commissioning for his attendance and Members for the very interesting and positive discussion.

## **763 Health Overview and Scrutiny Round-up**

The Chairman updated colleagues on the Government's cut to the Public Health Ring Fenced Grant. The Overview and Scrutiny Performance Board would be discussing this further at its next meeting.

The Chairman invited updates from around the County.

From Worcester City, there was concern over possible cuts in grant funding for Homeless people and the impact any cuts would have.

In Redditch, residents were unhappy about the changes to Maternity provision at the Alexandra Hospital. The Chairman clarified that the change was temporary and would be reviewed in February 2016. If there was a substantial change, the issue would have to be brought

to an appropriate HOSC for consideration.

Reports from attendance at Board Meetings were welcomed and noted.

Councillor Vickery commented on a recent Fire Authority meeting where it was noted that Officers were not permitted to treat casualties, despite being clinically trained and often first on the scene. Members felt it could be a useful tool in rural areas.

The meeting ended at 3.00 pm

Chairman .....