

## Health Overview and Scrutiny Committee

### Monday, 16 November 2020, 1.30 pm, County Hall

#### Membership

**Worcestershire County Council** Mr P A Tuthill (Chairman), Ms P Agar, Mr G R Brookes, Mr P Grove, Prof J W Raine, Mrs M A Rayner, Mr C Rogers, Mr A Stafford and Mr C B Taylor

#### District Councils

Mr M Chalk, Redditch District Council  
Ms C Edginton-White, Wyre Forest District Council  
Dr J Gallagher, Malvern Hills District Council  
Mr M Johnson, Worcester City Council  
Mrs F Smith, Wychavon District Council  
Mrs J Till, Bromsgrove District Council

### Agenda Supplement

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Agenda produced and published by the Assistant Director for Legal and Governance (Monitoring Officer) Legal and Governance, County Hall, Spetchley Road, Worcester WR5 2NP. To obtain further information or hard copies of this agenda, please contact Emma James/Jo Weston 01905 844965, email: [scrutiny@worcestershire.gov.uk](mailto:scrutiny@worcestershire.gov.uk)

All the above reports and supporting information can be accessed via the Council's website [website](http://www.worcestershire.gov.uk/info/20013/councillors_and_committees)[http://www.worcestershire.gov.uk/info/20013/councillors\\_and\\_committees](http://www.worcestershire.gov.uk/info/20013/councillors_and_committees)

Date of Issue: Friday, 6 November 2020

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**HEALTH OVERVIEW AND SCRUTINY COMMITTEE  
16 NOVEMBER 2020****UPDATE ON RESTORATION OF HEALTH SERVICES AND  
IMPROVEMENTS ARISING FROM NEW WAYS OF WORKING  
DURING COVID-19**

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**Summary**

1. The Health Overview and Scrutiny Committee (HOSC) is to have a further update on the restoration stage of health services following the initial COVID-19 response.
2. The HOSC received reports on 18 June, 20 July and 30 September outlining the response of health and social care services to COVID-19 and early thoughts about how working practices were envisaged to change as a result of learning from new ways of working. The HOSC was also advised about services which have changed temporarily in response to the pandemic, either because it was not possible to keep the service safe, or because staff had to be redeployed to services considered of higher priority.
3. Representatives have been invited from NHS Herefordshire and Worcestershire Clinical Commissioning Group, Worcestershire Acute Hospitals NHS Trust and Herefordshire and Worcestershire Health and Care NHS Trust.
4. It is envisaged that this update will contribute to further scrutiny as health services continue to recover, and HOSC members have requested regular updates on any temporary service changes made in response to COVID-19.
5. The update will also build on the HOSC's on-going scrutiny to review performance of acute hospital services in Worcestershire and the impact on, and roles of, commissioners and health and care providers.

**Restoration of temporary service changes**

6. The NHS Long Term Plan (LTP) remains the road map for service integration and transformation and the majority of temporary service changes that have been made align with the LTP.
7. Whilst the NHS remains in emergency response mode, it may be necessary to make rapid changes to services as the situation changes. The NHS will retain flexibility across the system to respond to the changing environment.
8. As the NHS works through the temporary service changes it will always prioritise the safety of service users, patients, staff and the public – for some services it is currently not possible to fully restore them and comply with social distancing guidelines.

9. The NHS is continuing to monitor the impact and any benefits of temporary service changes on all the users of our services, keeping quality and equality impact assessments up to date, monitoring health inequalities and digitally excluded users of services. All services are proactively reviewing patients who are waiting to be seen and prioritising those at highest risk.

10. Proposals to make any temporary service changes into permanent changes would be subject to appropriate engagement and consultation to ensure patients and stakeholders have the opportunity to be involved before any decisions are made.

### **Purpose of the Meeting**

11. Members are invited to consider and comment on the information discussed and agree:

- whether any further information is required
- whether any further scrutiny work is required at this stage

### **Supporting Information**

- Appendix 1 – NHS Restoration and Performance Update

### **Contact Points**

Emma James / Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964 / 844965  
Email: [scrutiny@worcestershire.gov.uk](mailto:scrutiny@worcestershire.gov.uk)

### **Background Papers**

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance), the following are the background papers relating to the subject matter of this report:

- Agenda and Minutes from the Health Overview and Scrutiny Committee on 2 March, 18 June, 20 July and 30 September 2020 – available on the website: [Health Overview and Scrutiny Committee Agendas and minutes](#)
- Agenda and Minutes from COVID-19 Report to Cabinet on 4 June and 25 June 2020 – available on the website: [Cabinet Agendas and minutes](#)



# NHS Restoration and Performance Update

16 November 2020

- NHS has continued to try and restore services across Herefordshire and Worcestershire
- Restoration plans have been developed and submitted to NHS England / Improvement in September
- We are reviewing weekly progress against our overall restoration plan
- System ownership of the data - one version of the truth
- Incidence of Covid-19 rising which is bringing challenges to restoration
- Staff continue to work extremely hard as we approach a challenging winter

## Key challenges / areas of risk -

- Covid-19 cases rising across Worcestershire
- Endoscopy capacity
- Patients waiting 52 weeks for elective treatment
- Independent Sector (IS) capacity from 1 January 2021
- Workforce



# September 2020 in numbers



**4,671**

Walk-in patients (A&E)



**4,675**

Patients arriving by ambulance



**10,521**

Inpatients



**24,251**

Face to Face outpatients



**15,545**

Telephone consultations



**441**

Births



**1,035**

Elective operations



**153**

Trauma Operations



**326**

Emergency Operations



**4 days**

Average length of stay



**13,818**

Diagnostics



# Service update

- Services currently at 90% restoration
- Successful launch of digital Enhanced Primary Care Mental Health offer with huge amount of interest
- Marketing push has commenced with the aim of increasing IAPT therapies referral rate:
  - Social media/internet push – across Facebook, Instagram and Twitter focussed to key areas across both counties – e.g. Malvern, Evesham, Pershore, Redditch, Bromsgrove, Kidderminster and Worcester City, as well as utilising traditional press (radio, paper, online presence)
- Launch of Adult Mental Health survey looking at communication and access to services sent to several thousand service users
- Robust contingency plans are in place in the event of large numbers of staff being required to isolate
- Video contacts continue to be used, with face-to-face preferred for first assessments or in the event patients don't have access to the technology. Patient feedback around what works well and what doesn't continues to be sought.
- Delayed role out for Community Transformation happened on 1st October for 50% of Worcestershire.



- The predicted bow-wave of referrals to CAMHS has not yet been realised
- Referrals to CAMHS have returned to pre-pandemic levels now that the schools have returned
- There are currently no waiting time issues for CAMHS
- There has however been a significant increase in referrals to the Community Paediatrics service, with referrals in October 60% higher than the level received in the baseline month of January
- Whilst there are no current waiting time issues, given the total number of patients waiting, there will be a capacity issue in around 3 to 4 months that will need to be addressed.

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