CITY OF WOLVERHAMPTON COUNCIL

Health Scrutiny Panel

Minutes - 26 November 2015

Attendance

Members of the Health Scrutiny Panel

Cllr Harbans Bagri Cllr Craig Collingswood Cllr Mark Evans (Vice-Chair) David Hellyar Cllr Jasbir Jaspal Cllr Milkinderpal Jaspal (Chair) Cllr Peter O'Neill Cllr Stephen Simkins Cllr Wendy Thompson

Employees

Deborah Breedon	Scrutiny Officer
Juliet Grainger	Substance Misuse Commissioning Manager
Ros Jervis	Service Director - Public Health and Wellbeing
Ros Jervis	Service Director - Public Health and Wellbeing
Alison Shannon	Finance Business Partner

In attendance

Professor Linda Lang	Faculty of Education, Health and Wellbeing
Dr Helen Hibbs	Clinical Accountable Officer, Clinical Commissioning Group
David Loughton	Chief Executive of The Royal Wolverhampton Hospitals NHS Trust
John Campbell	Deputy Chief Executive, Black Country Partnership Health Trust

Part 1 – items open to the press and public

Item No. Title

1 Apologies

Apologies for non-attendance were received on behalf of Cllr Sandra Samuels, Mrs Jean Hancox and Vivien Griffin.

2 **Declarations of Interest**

Cllr Stephen Simkins declared a non-pecuniary interest in item 5 on the agenda in his role as Chair of the Scrutiny Board. He advised scrutiny Board would consider the Budget 2016/17 at a meeting on 15 December 2015.

3 Minutes of previous meeting

Resolved:

That the minutes of the meeting 24 September 2015 be approved and signed as a correct record.

4 Matters Arising

There were no matters arising.

5 **Draft Budget 2016/17**

Alison Shannon, Finance Business Partner provided a summary of the Budget report.

Cllr Peter O'Neill asked if any analysis had been carried out on the financial implications for Health budget arising from the spending review autumn statement. The Finance Business Partner advised that she was aware of the headlines but as yet no in depth analysis had been carried out.

Ros Jervis, Service Director Public Health and Well Being, indicated that there could potentially be implications and that a clearer steer was expected from Public Health England. She advised that it was not clear how the cuts would happen but that it was likely that it would have impact on the savings proposals.

Cllr Milkinderpal Jaspal, Chair, indicated the need for detailed information to be made available to inform the budget decision making process. The Finance Business Partner agreed to provide information to the Cabinet Member once further information was received in December 2015.

The Chair requested a further update relating to the implications of the autumn statement on the savings proposals to the next meeting of this Panel on 14 January 2016.

The Finance Business Partner invited the Scrutiny Panel's comments on the two proposals relating to 'Financial Transactions and Base Budget Revisions'.

Use of Public Health funding to support service areas with positive impact on public health outcomes:

The Service Director provided detail on the item, she advised that Cabinet had approved the use of Public Health funding to support services. The Scrutiny Panel made no comment on this proposal.

Further review of utilisation of Public Health funding - Community, Resilience, and Healthier Schools:

The Service Director advised that the proposal aims to maximise public health outcomes, secure added value through closer working with other Council services and maximise public benefit.

In response to a question from the Chair, the Service Director advised that the service covers a wide remit from drugs and alcohol issues to healthy schools. She advised that there is a full spectrum of training and health improvement available and clarified that training is not mandatory in schools but that schools have approached the healthy schools team as health improvement is included in Ofsted inspection. In response to questions form ClIr Stephen Simkins the Service Director advised that funding would need to be generated to replace Council mainline funding. She advised that decommissioning of certain contracts would be considered if they were not achieving value for money and other commissioned services considered. In response to a question about monitoring decisions and performance of commissioning and contracts the Chair advised that the Cabinet Member, Cabinet (Performance Management) and Audit Committees would be responsible.

The Scrutiny Panel made no comment on this proposal.

Resolved

6

- 1. That an update relating to the implications of the autumn statement on the savings proposals to be submitted to the next meeting of this Panel on 14 January 2016.
- 2. There were no specific comments on the savings proposals.

A Health Workforce for the Future - University of Wolverhampton

Professor Linda Lang, Faculty of Education, Health and Wellbeing (FEHW) provided a presentation. Health Scrutiny had, at a previous meeting, identified that there was a national issue of a shortage of young doctors and medical professionals and requested a report on 'building a workforce for the future' at a later meeting. The presentation focused on health courses and informed the Panel about the following:

- Range of Health courses, research and CPD
- Quality and innovations
- New Developments
- Horizon scanning
- Partnerships

Professor Linda Lang informed the Panel about the FEHW mission and strategic priorities. During the presentation she highlighted that the University was a large provider of all types of nursing and midwife provision, which have quality assurance with Health Education West Midlands. She advised that the University is very dependent on Partners for placements in the City.

In relation to the shortage of nurses in the City, she advised the Panel that this was not necessarily the fault of work force planning. She informed the Panel that in the height of austerity the cuts to budget had had a large impact and the Francis report 'nurse to patient ratio' recommendation had worsened the issue. She informed the Panel that it takes three years to train a nurse; that there were not enough student placements and that the number of placements restrains the number of students; thereby there were not enough nurses graduating to meet the demand.

The Professor indicated that the Autumn Budget announced changes, to remove student nurse bursary of £1,000 and introduce means testing which would have an impact on numbers of students entering nursing. She advised that the university has looked at introducing fee paying nursing masters degrees and had clarified that a four year integrated master's degree would be entitled to a student loan. She informed the Panel that the first intake of 18 would be on a short trajectory, that a post graduate degree would also be developed and that they would either have experience already or the university would enable them to gain experience.

The Professor outlined the achievements of the University and the University Technical College (UTC), which focuses on health services and was one of the most successful in the Country. She highlighted that the university had grown responsibly and introduced innovations that would help people with no formal qualifications to become qualified nurses and that it was now oversubscribed. She outlined how one of the new innovations - 'LEAP' involved both young and older people with no qualifications, but who have the right attitude and that 15 LEAP students had achieved first class degrees in 2014-15. Other innovations outlined in the presentation have been developed to attract good people to study and stay in Wolverhampton, from local areas and internationally.

The Professor provided a summary of the horizon scanning carried out by the University; she advised that there were 51 horizon seams. She highlighted the quality of teaching, the EU bid writing facilities and the willingness to work with the City of Wolverhampton Council.

Cllr Milkinderpal Jaspal, Chair, welcomed the presentation and the wonderful work that was happening to make the links and address the shortage of health staff and workforce in the City.

The Professor indicated that nursing was not purely 'technical' and that nurses have to understand why they do what they do and to have an all-round education, gaining a degree at the same time as developing skills. She highlighted the need for nurses to understand physiology, bio-chemistry, have confidence and be able to challenge a colleague if they think a mistake is being made. She indicated that 50% of nurse education is in practice, working with people and understanding the issues from a patient perspective.

In response to questions about the autumn statement and the removal of the grant for student nurses, David Loughton, Chief Executive of The Royal Wolverhampton Hospitals NHS Trust, advised that the costs would need to be looked at, but that it was likely that the numbers of student nurses would potentially half and that work would be needed to look at loans for student nurses. He advised that teams of recruitment staff were sourcing nursing staff in the Philippines but that immigration rule changes may have an impact on numbers recruited. He advised that another issue with recruitment was that candidates were attending multiple interviews and accepting several jobs, which frustrated the process and had impact on the number of actual numbers recruited.

In response to questions from Cllr Wendy Thompson relating to escalating agency fees and the proposed cap on agency staff, the Chief Executive advised that between 30-50% of Accident and Emergency (A&E) unit staff across the Country is commissioned locums and that the cap may not work. He advised that agencies do not have a contract and many offer a £50 welcome for phoning it. He recognised the need to tackle A&E but that this was a national issue and decisions taken in one area would have impact on another.

David Hellyar, Health Watch Member, referred to the shift of emphasis of trained nurses moving to community care. The Professor suggested that some people prefer to work in the community rather than acute hospitals.

In response to further questions the Panel was advised that recent reports had highlighted that over a quarter of all medical graduates are going abroad, paramedics are moving to New Zealand where they are paid considerably more than in the UK.

Resolved:

- 1. The Panel received the presentation.
- 2. That a site visit is arranged to the University Technical College (UTC) and the next meeting of the Panel be held at the UTC.

7 Public Health contracting of Services - Consultation

Ros Jervis, Service Director, Public Health and Well Being, and Juliet Grainger, Commissioning Manager provided a summary of the report.

The Commissioning Manager explained the process to commission, procure and manage Public Health contracts post March 2016. Current service provision provided by GPs and Pharmacists would come to an end in March or May 2016. She explained that the Council was obliged to re-commission the services under financial regulations and contract procedure, and that this programme of work was agreed by CRP in December 2014 and contracts due to be issued on 1 April 2016.

The Commissioning Manager explained that a number of engagement events had already taken place, including market warming events to explain about procurement.

Cllr Craig Collingswood voiced concern that discarded syringes were of concern in his ward, large amounts of needles and equipment were discarded in the vicinity of the pharmacy, both new and used. He asked if the arrangements for needle exchange required a one for one exchange. The Service Director advised that the Council could not impose a one in one out scheme and proposed to use a pick and mix scheme for needle exchange. She advised that work was on-going to work with pharmacies that want to participate.

Cllr Stephen Simkins asked if local police had been involved in the consultation and if there were enough needle disposal bins provided on the streets as part of the crime, drugs and alcohol prevention measures. The Service Director advised that there had been a problem in the Whitmore Reans for some time and that local partners are working together to address the issues and tackle tasks to make a difference such as clearing bushes etc. The helicopter view of issues enables partners to work together better on every aspect of the issue, this was considered to be education in its broadest sense.

Cllr Wendy Thompson voiced concerns that residents were tired of the issues, resources were being used addressing the same issues and that as people moved in and out of the area the issues and education about them were repetitive. She suggested that a very sure effort would be needed to sort out standards in the area and that with increasing population of migrants mixed with poor housing standards the task was huge.

The Service Director advised that in terms of the wider determinates many were in place, the social determinates indicate a more settled community and that this is something the Council is getting involved with. She advised of the work Public Health and Housing Team are undertaking to rate landlords and how the Housing team is promoting healthy lifestyle and health improvement while working with the landlords about private rented sector housing.

Cllr Peter O'Neill referred to the issue of discarded needles and he asked if needle packs could be stamped during production to identify which batch or pharmacy discarded needles had come from.

The Service Director advised that the registration process would require that pharmacies demonstrate quality control measures and quality standards.

The Commissioning Manager advised that she would follow up enquiries from the Panel to understand whether syringes could be barcoded/colour coded to identify the pharmacy of issue.

In response to a question from David Hellyar, Health Watch co-optee, the Service Director advised that Health Guidelines go against one for one exchange to protect the individual from further harm though re-use of needles and to protect against blood born viruses. She confirmed that it is feasible to have discussions through forums at Regional and National level to ascertain whether syringes can be coded in some way on the syringe not on the packaging.

The Panel asked for confirmation that the contracts would not be sub contracted. The Service Director confirmed that initially the contract would be for a single provider service and suggested that in the future this can be looked at if and when required.

Resolved:

That the Panel endorse the engagement plan for Public Health Community Services and that comments made during the discussion be taken into account.

8 Francis report update - CCG

Dr Helen Hibbs, Clinical Accountable Officer, Clinical Commissioning Group provided the update report and highlighted that future reporting would be by exception or on specific request from Health Scrutiny Panel.

There was no specific question relating to the content of the report. The Clinical Accountable Officer highlighted that significant progress had been made against the recommendations and actions arising from the Francis report and that many have now been incorporated into established ways of working.

Resolved:

- 1. That the Panel note the content of the report.
- 2. That future reporting will be exception or on specific request from the Health Scrutiny Panel.

9 Exclusion of press and public

Resolved:

That, in accordance with Section 100A (4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following items of business as they involve the likely disclosure of exempt information falling within paragraph 3 of Schedule 12A to the Act.

10 Future Mental Health Provision

John Campbell, Deputy Chief Executive, Black Country Partnership Health Trust (BCPHT), provided a verbal presentation relating to specialist mental health and learning disability services in the Black Country.

Resolved:

- That the update is noted.
 That an update report is included on the agenda to the Health Scrutiny Panel meeting on 12 January 2015.