HEALTH AND HOUSING SCRUTINY COMMITTEE

Wednesday, 14 April 2021

PRESENT – Councillors Bell (Chair), Donoghue, Heslop, Layton, McEwan and Tostevin

APOLOGIES – Councillors Lee, Newall and Wright

ABSENT – Councillor Dr. Chou

ALSO IN ATTENDANCE – Councillors A J Scott, Jill Foggin (Communications Officer, County Durham and Darlington Foundation Trust), Avril Lowery (Tees, Esk and Wear Valley NHS Foundation Trust), Jennifer Illingworth (Tees, Esk and Wear Valley NHS Foundation Trust), Dr Chris Lanigan (Tees, Esk and Wear Valleys NHS Foundation Trust), Mark Pickering (NHS Tees Valley Clinical Commissioning Group) and Diane Lax (Healthwatch Darlington)

OFFICERS IN ATTENDANCE – Penny Spring (Director of Public Health), Anthony Sandys (Head of Housing and Revenues), Ken Ross (Public Health Principal) and Hannah Fay (Democratic Officer)

HH54 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

HH55 TO APPROVE THE MINUTES OF THE MEETING OF THIS SCRUTINY HELD ON 3 MARCH 2021

Submitted – The minutes (previously circulated) of the meeting of this Scrutiny Committee held on 3 March 2021.

RESOLVED – That the Minutes of the meeting of this Scrutiny Committee held on 3 March 2021 be approved as a correct record.

HH56 TEES, ESK AND WEAR VALLEY NHS FOUNDATION TRUST QUALITY ACCOUNTS 2020/21 AND 2021/22

The Director of Quality Governance and Head of Planning and Business Development, Tees, Esk and Wear Valleys NHS Foundation Trust gave a presentation on the Quality Account 2020/21 and 2021/22, updating Members on the progress made on the Quality Account improvement metrics and priorities for 2020/21 and outlining the proposed quality improvement priorities for 2021/22.

Members were advised that the four quality improvement priorities for 2020/21 were supported by 40 actions, of which ten were either completed; and 26 were not completed.

In relation to the priority 'Further Improve the clinical effectiveness and patient experience at times of transition from CYP to AMH services' Members were advised that the work of the Transitions Project has been superseded by the Trust-wide work requested by the Trust's Senior Leadership Group on 'Improving Transitions and Service Provision for People aged 16 to 25 years in Tees, Esk and Wear Valleys NHS Foundation Trust', and as a result four of the planned actions were no longer required.

Members noted that work on the priority 'Improve the personalisation of Care Planning' had been impacted by redeployment of staff to undertake actions relating to the Covid-19 pandemic; and that this work would continue in 2021/22; and in relation to the priority 'Reduce the number of Preventable Deaths (with a focus on learning from deaths', whilst a Family Conference could not be held in 2020 due to COVID-19, work continued to be undertaken with individual families; and a Family Conference would be held in 2021 as soon as social distancing restrictions allow.

In relation to the priority 'Increasing the proportion of inpatients who report feeling safe on our wards', Members were advised that specific actions relating to this priority were put on hold due or delayed to COVID19, however these would be carried over into 2021/22 as part of the 'Feeling Safe' quality improvement priority; and reference was made to the work undertaken to address patient safety in relation to drug use on wards, including the introduction of drug detection dogs.

Details were provided of the Quality Metrics as of Quarter 3 2020/21, of which there was data available for nine of the ten quality metrics. It was reported that three of the quality metrics were reporting Green whilst six were reporting Red; and all six of the Red metrics were showing an improvement when compared to 2019/20.

In relation to Metric 1– Percentage of patients who report 'yes, always' to the question 'Do you feel safe on the ward?', it was reported that whilst still below the Trust target of 88 per cent, this metric had seen a significant improvement from 62.39 per cent in 2019/20 to 64.66 per cent in Q3.

Regarding Metric 2 - Number of incidents of falls (level 3 and above) per 1000 occupied bed days (OBDs) – for inpatients, Members were advised that the number of falls would be included for future reports.

In relation to Metric 3 – Number of incidents of physical intervention/restraint per 1000 occupied bed days, it was reported that the Trusts position had also seen an improvement, from 30.45 per cent in 2019/20 to 20.90 per cent in Q3, and that Durham and Darlington had achieved the Trust target of 19.25 per cent in Q3 at 17.84 per cent.

With regard to Metric 6b – Average length of stay for patients in Mental Health Services for Older People Assessment and Treatment wards, it was reported that the target was not being met, however the average length of stay was significantly less than in previous years.

In relation to the patient experience Metric 7 – Percentage of patients who reported their overall experience as excellent or good, it was reported that whilst still below the Trust target of 94 per cent, this metric had shown no significant changes, with a slight increase from 91.65 per cent in 2019/20 to 93.21 per cent in Q3.

With regard to Metric 8 – Percentage of patients that report that staff treated them

with dignity and respect, it was reported that whilst still below the Trust target of 94 per cent, this metric had remained static over the past few years, with a slight increase from 85.80 per cent in 2019/20 to 86.77 per cent in Q3.

In relation to Metric 9 – Percentage of patients that would recommend our service to friends and family if they needed similar care or treatment, this had shown an increase from 86.70 per cent in 2019/20 to 91.60 per cent in Q3.

Discussion ensued on the Quality Metrics; Members requested comparative data be included to enable Members to understand the performance of Durham and Darlington against the Trust and against NHS Trusts countrywide; with a specific request for comparative data in respect of patient safety. Members were advised that patient safety was not a mandated measure and as such was not measured consistently across trusts however contact had been made with other trusts to obtain comparative data; and a collaborative patient forum had been formed with Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust to enable comparisons at a regional level.

Members requested further information in relation to Quality Metric 7 'Percentage of patients who reported their overall experience as excellent or good'; and were advised that whilst there had been a reduction in responses to due COVID-19; this metric continued to be measured; improvement work had been undertaken which included triangulation of information with complaints and PALS to identify specific themes; and a toolkit had been developed for each locality and was supported by plans specific to each locality.

Details were provided of proposed quality improvement priorities for 2021/22 which were Care Planning; Feeling Safe; and Compassionate Care; and the detailed planning actions for each priority were outlined.

Members were advised that the suite of Quality Metrics were under review; that these would be aligned more closely to the improvement priorities; and some of the metrics would remain the same.

Following a question regarding the pilot of the body cameras in relation to the Feeling Safe priority, Members were assured that vigorous information governance checks had been undertaken prior to the commencement of the trial; patients were made aware of the presence of body cameras on arrival to the ward; and that an evaluation of the pilot would be undertaken before further roll-out. Members welcomed an update on the results of the pilot at a future meeting.

Member requested further information in respect of the CAMHS inpatient facilities and waiting times for Darlington CAMHS service; and Members noted that a new 10 bed unit, Acklam Road Hospital, had been commissioned by Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust and would be opening on 19 April 2021.

Following a question regarding staff surveys Members were advised that staff turnover/vacancy rates, morale and wellbeing were monitored; and that a new trust strategy 'Our Journey to Change' which had a priority relating to staff experience, was in place.

RESOLVED – That the thanks of this Scrutiny Committee be extended to the Director of Quality Governance and Head of Planning and Business Development, Tees, Esk and Wear Valleys NHS Foundation Trust for their informative presentation.

HH57 COVID-19 IN DARLINGTON

The Director of Public Health gave a presentation updating Members on the COVID-19 situation in Darlington.

In introducing the presentation, the Director of Public Health advised Members of the current rate of infection in Darlington, which, as of 10 April 2021, was 34.6 per 100,000 and was an improvement on previous figures.

Updates were provided on the four tests that must be met for England to progress through the stages of the Governments road map out of lockdown.

Regarding Test 1 - The vaccine deployment programme continues successfully, Members noted that as of 8 April 2021, 53,349 residents had received their first dose of vaccine; 95 per cent of 65 years and over had received their first dose of vaccine; and 8939 adults had received their second dose of vaccine.

In respect of Test 2 - Evidence shows vaccines are sufficiently effective in reducing hospitalisations and deaths in those vaccinated, it was reported that County Durham and Darlington NHS Foundation Trust bed occupancy rate had continued to decline; and 1.6 per cent of hospital beds were occupied by COVID-19 patients.

Regarding Test 3 - Infection rates do not risk a surge in hospitalisations which would put unsustainable pressure on the NHS, Members noted that rates of cases in those aged 60 had continued to decline; and in respect of Test 4 - Our assessment of the risks is not fundamentally changed by new Variants of Concern, it was reported that that 100 per cent of all positive cases that were genotyped showed the Kent variant to be present.

Details were provided of the stages of the Road Map; and the longer term impacts of COVID were outlined along with the UK Recovery Strategy.

Following a question, the Public Health Principal advised Members that Darlington had the second highest infection rate in the Tees Valley, however numbers of infections were low; that due to Darlington's population, when compared to other authorities, a small increase in case numbers resulted in a larger rate increase; and Members were assured that there was a downward trend in the infection rates for Darlington.

Discussion ensued in respect self-isolation and concerns that this was not being adhered by some residents that tested positive for COVID-19; Members were pleased to note the intentions for in depth work on self-isolation with a focus on support available to residents; and that Darlington were part of a local tracing partnership with NHS track and trace which enabled residents to be directed to local support to help during isolation. Members also noted the expansion of the testing programme; and that infection rates would be monitored closely as progression through the stages of the road map continued.

RESOLVED – That the Director of Public Health be thanked for her update on COVID-19 in Darlington.

HH58 CUSTOMER ENGAGEMENT STRATEGY 2021/24

The Director of Economic Growth and Neighbourhood Services submitted a report (previously circulated) requesting that Members give consideration to the draft Customer Engagement Strategy for 2021-24 (also previously circulated).

It was reported that one of the key strands of the new Social Housing Regulator's Consumer Standards covers 'Tenant Involvement and Empowerment'; these state that the Council must consult its tenants at least once every three years on the best way of involving them in the governance and scrutiny of the Council's housing service; and the Customer Engagement Strategy for 2021-24 sets out the process for how the Council will involve and empower it's tenants, including how the engagement activities will be monitored and reported.

The submitted report stated that the Council's Housing Services had a long and successful track record of engagement and consulting with its tenants on every aspect of service delivery; and the strategy had already been considered by the Tenant's Board, with regular progress updates to be provided to the Tenant's Board and to this Scrutiny Committee on an annual basis.

Details were provided of the four specific themes of the Customer Engagement Strategy; an annual Engagement Plan would support specific actions within the strategy; and where possible, opportunities for engagement would be promoted through digital channels, whilst always providing more traditional methods of engagement.

RESOLVED – (a) That the Customer Engagement Strategy for 2021-24 be recommended to Cabinet for approval.

(b) That this Scrutiny Committee receives six monthly progress reports on the Customer Engagement Strategy.

HH59 JOINT AUTISM REVIEW GROUP

The Chair of the Joint Autism Review group submitted a report (previously circulated) presenting the outcomes and findings of the joint review group; and requested that this Scrutiny Committee consider the most appropriate way to progress the key themes identified by the joint review group.

In presenting the report, the Chair of the Joint Autism Review Group made reference to the work undertaken to date to make Darlington an autism friendly town.

It was reported that the Health and Housing Scrutiny Committee approved a draft terms of reference in January 2020 to examine the autism provision with Darlington Borough Council; and agreed that a joint review group be established with the Adults and Children and Young People Scrutiny Committees.

Members noted that although an initial meeting of the review group was held on 2 March 2020, in light of the COVID-19 pandemic the review group did not meet again until 24 February 2021, where an in-depth discussion regarding the 2018 Autism Self-Assessment Framework was held.

It was reported that the review group identified a number of key themes requiring further investigation and concluded that a Cross Party Autism Working Group be established to progress the key themes of training and awareness, support, diagnosis and employment; and in considering the recommendation of the review group, Members of this Scrutiny Committee were asked to consider whether the establishment of a Cross Party Autism Working Group was the appropriate way forward to progress the key themes.

Members welcomed the recommendation of the review group and gave consideration to the governance arrangements including membership, frequency and reporting arrangements of a Cross Party Autism Working Group; and reference was made to the possibility of extending membership to external partners and service users.

RESOLVED – (a) That Cabinet be advised that this Scrutiny Committee supports the recommendation of the Joint Autism Review Group to establish a Cross Party Autism Working Group to progress the key themes identified by the Review Group and be requested to support this recommendation.

b) That Cabinet be requested to consider this Scrutiny Committee's proposed governance arrangements for the Cross Party Autism Working Group:

- (i) that the Cross Party Autism Working Group meets bi-monthly;
- (ii) that all interested Members be invited to join the Working Group; and
- (iii) that the Cross Party Autism Working Group reports to Health and Housing Scrutiny Committee.

HH60 WORK PROGRAMME

The Managing Director submitted a report (previously circulated) requesting that consideration be given to this Scrutiny Committee's work programme and to consider any additional areas which Members would like to suggest should be included in the previously approved work programme.

Discussion ensued in respect of a Quad of Aims that had been submitted by Councillor Holroyd requesting that this Scrutiny Committee consider a joint review of Adult Care Services during COVID; Members of the this Scrutiny Committee agreed that further information was required before a decision could be made as to the involvement of Members in the review.

RESOLVED – That the current status of the work programme be noted.

HH61 HEALTH AND WELLBEING BOARD

The Director of Public Health advised Scrutiny Committee that issues considered by the Health and Wellbeing Board at its meeting on 18 March 2021 included an update presentation on COVID-19 in Darlington; Darlington Carers Action Plan 2020-22; and a discussion in respect of a recommendation from Cabinet on 9 March 2021 that the Health and Wellbeing Board investigate the impact of hot food takeaways on the health of residents, and in particular on childhood obesity in Darlington.

Members noted that the next meeting of the Board was scheduled for 24 June 2021.

RESOLVED – That Members look forward to receiving an update on the work of the Health and Wellbeing Board at a future meeting of Scrutiny Committee.