

HEALTH AND HOUSING SCRUTINY COMMITTEE

Wednesday, 23 February 2022

PRESENT – Councillors Bell (Chair), Layton, Lee, McEwan and Newall

APOLOGIES – Councillors Bartch, Dr. Chou and Heslop

ABSENT – Councillor Wright

ALSO IN ATTENDANCE – Jill Foggin (Communications Manager, County Durham and Darlington Foundation Trust), Jennifer Illingworth (Tees, Esk and Wear Valley NHS Foundation Trust), David Gallagher (NHS Tees Valley Clinical Commissioning Group) and Andrew Izon (County Durham and Darlington NHS Foundation Trust)

OFFICERS IN ATTENDANCE – Penny Spring (Director of Public Health), Anthony Sandys (Assistant Director - Housing and Revenues) and Hannah Miller (Democratic Officer)

HH41 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

HH42 TO APPROVE THE MINUTES/NOTES OF THE MEETING OF THIS SCRUTINY HELD ON :-

(1) 15 DECEMBER 2021

Submitted – The Notes (previously circulated) of the meeting of this Scrutiny Committee held on 15 December 2021.

RESOLVED – That the Notes of the meeting of this Scrutiny Committee held on 15 December 2021 be approved as a correct record.

(2) 5 JANUARY 2022

Submitted – The Notes (previously circulated) of the meeting of this Scrutiny Committee held on 5 January 2022.

RESOLVED – That the Notes of the meeting of this Scrutiny Committee held on 5 January 2022 be approved as a correct record.

(3) 19 JANUARY 2022

Submitted – The Notes (previously circulated) of the meeting of this Scrutiny Committee held on 19 January 2022.

RESOLVED – That the Notes of the meeting of this Scrutiny Committee held on 19 January 2022 be approved as a correct record.

(4) 2 FEBRUARY 2022

Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 2 February 2022.

RESOLVED – That the Notes of the meeting of this Scrutiny Committee held on 2 February 2022 be approved as a correct record.

HH43 INTEGRATED CARE SYSTEM

The Chief Officer, Tees Valley Clinical Commissioning Group gave a presentation (previously circulated) providing Members with an update on the development of the Integrated Care System (ICS).

The presentation outlined the engagement with local authorities to develop the ICS which included one-to-one meetings with the ICS Chair, council leaders and executives, Joint Management Executive Meetings, which were held throughout October-November to develop proposals on the ICS governance and operating model, ongoing engagement with local and regional scrutiny meetings and engagement on the Integrated Care Board (ICB) Constitution.

Reference was made to the current CCG statutory duties and powers; the existing structures for the eight CCG's in the North East and North Cumbria; and the current CCG commissioning spend in the ICS area.

Members were provided with details of the potential distribution of the ICS functions at both a System and Place level; particular reference was made to joint work between NHS and Local Authorities including participation in Health and Wellbeing Boards to develop Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies, joint initiatives to promote health, prevent disease and reduce inequalities and joint commissioning and leadership of local services. Members also noted the governance options for place based partnerships and that the ICB would be in place by June 2022.

The presentation outlined the core elements of the ICB governance arrangements; governance features of the ICB; and that membership had been proposed to NHS England in December 2021, with 25 voting Members, 13 non-executive and 12 executive, with a commitment to review after one year.

Members were informed of the requirement to establish an Integrated Care Partnership (ICP) alongside the ICB; the ICP would have a key role to play in setting the tone and culture of the system, operating a collective model of accountability, including to local residents; and the ICP was required to mutually agree terms of reference, membership, ways of operating and administration. Reference was made to the four ICP's in the North East and North Cumbria ICS; and the Chief Executive Officer designate and ICB Chair designate had been appointed.

Discussion ensued regarding concern in respect of the scale of the management structure; the importance of engaging with place; and engagement opportunities with regional and local scrutiny committees.

RESOLVED – That the Chief Officer, Tees Valley Clinical Commissioning Group be thanked for his informative presentation.

HH44 DIGITAL HEALTH

The Chief Information Officer, County Durham and Darlington NHS Foundation Trust (CDDFT) gave a presentation providing Members with an update in respect of Digital Health.

It was reported that CDDFT Digital Strategy which was developed with patients, staff and partners was published in 2016; had been extended up to 2022 due to COVID and was now approaching the end of its lifespan.

The presentation outlined the aims and status of the six strategic themes of the strategy, of which 'Working Together', 'Working Securely', 'Paper-light to Paperless' and 'Quality Services' had green status. Members were informed that the status of 'Working Smarter' was amber as the implementation of the electronic patient record (EPR) had not commenced and 'Citizen Access' had red status as this was awaiting development aligned to the Great North Care Record (GNCR).

It was reported that a baseline assessment of the Trusts digital maturity was undertaken in 2021. The assessment identified known gaps in provision however these gaps would be met through the adoption of the EPR and supporting technologies; and it was anticipated that this would take the Trust from Stage 1 to Stage 5.

Members were informed that the Trust straddled two of the four ICP's within the North East and North Cumbria ICS and played an active role in the development of the ICS digital strategy; the trust had established a 'Digital Durham Place' meeting with an intention to duplicate this in Darlington; and the Trust had worked with partners to develop a Digital OGIM within each ICP, which outlined how the ICP's schemes would contribute to the delivery of the ICS Digital Strategy and identifies key areas for investment and activity within the region in the future.

In relation to digital care in the community it was reported that as a response to COVID and to support the Trusts activity recovery programme, the Agile working provision had been extended; Health Call Digital Care Home had been deployed in all of the care homes for older people in Darlington, enabling patients to be seen in the home, reducing unnecessary visits to the hospital; and to ensure outpatient services continued for patients during the pandemic, the Trust adopted a nationally procured solution for Video Consultations, alongside teleconsultations, as an alternative to face-to-face sessions.

It was reported that the Trust had adopted the GCNR and this would be further enhanced with the development of the Public Engagement Platform; reference was made to the work being undertaken by the Trust for staff and patients in relation to digital health and digital exclusion; and details were provided of the next steps for the Trust.

Members raised concern regarding the sharing of information with private care providers and possible security risks and issues associated with the transfer of medical records from the GP to a hospital setting. Members were assured that robust processes were in place regarding access to patients information and that further development was required by the

GNCR team to address issues associated with GP information sharing.

RESOLVED – That the Chief Information Officer, CDDFT be thanked for his informative presentation.

HH45 CRISIS SERVICE CHANGES

The Director of Operations, Durham and Darlington, Tees, Esk and Wear Valley NHS Foundation Trust provided Members with an update on the Crisis and Home Treatment Team.

Members were informed that the Durham and Darlington teams were merged in 2019 following redesign work; the teams were relocated to a base in Bishop Auckland; reference was made to the purpose of the merger; and the purposes of the crisis and home treatment team were outlined.

It was reported that the model had been revised; implementation of the revised model and ongoing quality improvement work commenced in July 2021; the revised model consisted of a hub and spoke model, with a central access point at Bishop Auckland Hospital and two locality cells, one based at Lanchester Road Hospital and the other at West Park Hospital.

Details were provided of the current challenges, including increased referrals and high staff turnover and sickness; and these challenges provided opportunity to review the model and further develop and refine the service. Members were informed that a restructure in the Trust was ongoing which would bring together all crisis services across Durham and Darlington and the Tees Valley and it was suggested an update on the restructure be provided at a future meeting.

RESOLVED – That the update be noted.

HH46 DRUG AND ALCOHOL SERVICE CONTRACT - WE ARE WITH YOU

The Chair informed Members that the Executive Director for Services, We Are With You was not in attendance at the meeting and expressed disappointment that an update on the service had not been forthcoming.

RESOLVED – (a) That Members submit any questions to the Democratic Officer in relation to the drug and alcohol service for consideration by the Executive Director for Services, We Are With You.

(b) That a letter be sent to the Executive Director for Services, We Are With You from the Chair on behalf of this Scrutiny Committee to express Members disappointment that an update has not been forthcoming.

(c) That an update be provided at the next meeting of this Scrutiny Committee.

HH47 WORK PROGRAMME

The Assistant Director Law and Governance submitted a report (previously circulated)

requesting that consideration be given to this Scrutiny Committee' work programme and to consider any additional areas which Members would like to suggest be included in the previously approved work programme.

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

HH48 HEALTH AND WELLBEING BOARD

The Director of Public Health informed Members that the next meeting of the Board was scheduled for 17 March 2022.

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