Social Care and Health Overview and Scrutiny Committee

Thursday 1st October 2020 at 4.00 p.m.

Virtual meeting via Microsoft Teams

Held in accordance with the Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020; and conducted according to the Councils Standing Orders for Remote Meetings and those set out in the Council's Constitution.

Present:

Councillor Hussain (Chair) Councillor Allen (Vice-Chair) Councillor Clarke Councillor Ditta Councillor Jukes Councillor Rasab Councillor Robertson Councillor Sarohi Councillor Waters

Portfolio Holders Present

Councillor S. Craddock – Health and Well Being

Officers

Geraint Griffiths Kerrie Allward Daren Fradgley	(Managing Director, Walsall CCG) (Interim Director, Adult Social Care) (Executive Director of Integration, WHT)
Marsha Foster Health Trust)	(Director of Partnerships, Dudley Walsall Mental
Nikki Gough	(Democratic Services Officer, Walsall Council)
Mandy Poonia	Healthwatch Walsall representative

Welcome

At this point in the meeting, the Chair opened the meeting by welcoming everyone, and explaining the rules of procedure and legal context in which the meeting was being held. He also directed members of the public viewing the meeting to the papers which could be found on the Council's Committee Management Information system (CMIS) webpage. Members confirmed that they could both see and hear the proceedings.

01/20 Apologies

Apologies for attendance were received on behalf of Councillor D. Coughlan.

02/20 Substitutions

Councillor T. Jukes substituted for Councillor D. Coughlan for the duration of the meeting.

03/20 **Declarations of Interest and party whip**

A declaration of interest was received on behalf of Councillor B. Allen as an employee of Walsall Healthcare Trust.

04/20 Minutes of the previous meeting

The minutes if the meeting that took place on 25th February 2020 were discussed.

Resolved

That the minutes of the meeting held on 25th February 2020, were agreed as a true and accurate record of the meeting.

It was agreed that item 7 would be received prior to item 6.

05/20 The Future of Commissioning in the Black Country and West Birmingham

The Managing Director of Walsall CCG spoke to the Committee in relation to the proposal for CCGs to work collaboratively together as wider partnerships, under this arrangement Walsall would be part of the Black Country and West Birmingham partnership. A statutory formal consultation was required to merge the CCGs. The Committee was reassured that the CCG would operate a local Walsall based decisionmaking committee, made up exclusively of professionals and partners who worked within the Walsall boundary. There would also be a dedicated budget for Walsall. Feedback to this proposal had been broadly positive, with support for a place-based structure. Attendance by the CCG at Scrutiny and the Health and Wellbeing Board would continue.

The proposal would reduce management costs and remove duplication, financial savings achieved would be returned to the delivery of front line care. However, the merger would be subject to a vote by the four membership GP organisations. Members were directed to the slides for further information.

A Member questioned if the savings proposed were achievable, The Managing Director stated the reduction of management costs was a

national target and this type of CCG mergers were happening across the country. Back office services would be provided from a central base, however staff working within social care and hospitals would continue to be based locally, and this would be managed by the current Managing Director of Walsall CCG. In response, a Member challenged if the practitioners were supportive of proposals. The CCG representative stated that GP colleagues had been keen for decisions affecting Walsall to continue to be made locally, and that the local management team would be based in Walsall. These concerns had been addressed and it was hoped that the GP group would support the merger. Other consultation feedback had been positive.

A Member asked if the merger would improve GP services, and in response, officers stated that, this was an administrative merger and would not affect services. However, the financial savings released from the merger would be made available to service provision. Members described frustration at difficulty accessing primary care. The Managing Director of the CCG recognised this issue and stated that this would be reviewed in light of the Covid-19 pandemic. It was important to understand which patients had benefited from virtual appointments. An independent report on patient access to primary care could be taken to a future meeting if Members wished.

The Chair of Healthwatch Walsall asked if the merger would consolidate IT systems across the footprint of the single CCG. The Managing Director stated during the pandemic, acute hospitals had worked more closely together, and if the CCGs merged there would be more opportunity for this to happen.

Resolved

That the Social Care and Health Overview and Scrutiny Committee noted the presentation on 'the future of commissioning in the Black Country and West Birmingham'

06/20 Health and Care response to the Covid-19 pandemic.

The Interim Director of Social Care stated that Adult Social Care, the Hospital Trust and Walsall CCG had worked closely together during the pandemic to provide health and care services to the population of Walsall.

The Managing Director of Walsall CCG spoke to the presentation, and stated that the Walsall Together Partnership had been a solid platform to provide a Covid response. This allowed staffing to be shared, PPE to be distributed and consistent guidance to be put in place. This allowed an effective response to the pandemic.

The Executive Director of Integration agreed that the Walsall Together Partnership response had been strong. The work carried out in the Borough had been recognised as good practice nationally. Partnerships were developed with private hospitals to maintain cancer services and staff were redeployed to work in care homes. Decisions were made quickly based on the needs of the population. There was now an opportunity to retain the levels of transformation achieved during the pandemic.

Holly Bank House had been redesigned to protect stroke rehabilitation services, and the Local Authority provided support for this to happen.

Walsall Together Partners centralised PPE stock, and Walsall health and care providers did not run out of PPE at any point. Lessons learnt had led to more efficient care provision. On a daily basis, care home capacity was identified and risk was identified with technology utilised to connect family members. Although, it was acknowledged, that this could have been introduced more quickly.

Through the 'Making Connection Walsall' scheme, over 10,000 vulnerable people, due to shielding or isolation, were supported in the community.

Physiological support had been provided to health and care staff. The impact of the pandemic on staff was significant.

The pandemic provided an opportunity to progress the transformation of services. Walsall's approach to care homes had been recognised by the CQC and was cited in the Department for Social Cares 'Social Care Task Force Paper' as an area of best practice. Work with care providers had been positive and the partnership had worked with care companies to meet individual's needs in a flexible way.

Healthwatch Walsall had been hugely beneficial in providing insight into the population and this would be built on for future service provision.

A Member questioned if care homes and schools would be compensated for the cost of PPE. Officers stated that £2.8 million grant had been provided to care providers in the Borough for infection control, in addition to £800,000 for additional costs due to the pandemic. In addition, the partnership had ensured that there had been a continuous supply of PPE to care providers.

Hospital capacity was queried, and the Executive Director of Integration stated that the Hospital was planning 92% capacity during the winter. Currently the hospital was operating at 81% capacity, with eight patients in critical care, two of which were Covid-19 patients.

The Portfolio Holder informed the Committee that the Local Outbreak Board would meet the following week and would be best placed to answer questions on 'test and trace' and the rising cases of Covid-19 in Walsall.

Members thanked the Walsall Together Partnership for their excellent work during the pandemic. The Portfolio Holder highlighted that the transformation agenda had been accelerated due to the pandemic and the positive impact this would have on the future of Walsall.

The Interim Executive Director stated that a Team had been established to collect data from care homes each day, subsequently the National Team created a dashboard for completion by every care home. The National League Table highlighted Walsall as number two in the League table (response by care homes), demonstrating the strength of local work in this area.

During the winter a single plan for Walsall had been developed. The backlog had grown but the Committee were assured that patients were being prioritised. It was recognised that some patients were not attending appointments, and it was important that patients did not present late for their conditions or cancel allocated appointments.

Resolved

That the Health and Care response to the Covid-19 pandemic report be noted.

06/20 Areas of Focus

The areas of focus for the committee was considered, the Chair suggested that the Committee receive a further item on Covid-19. However, the Portfolio Holder stated that Members would have the opportunity to engage at the Local Engagement Board, and an item on Covid-19 would also be considered at the Scrutiny Overview Committee's next meeting.

Healthwatch Walsall suggested that health inequalities were added to the agenda, Members agreed with this suggestion.

Resolved

That an item on 'health inequalities' be added to the committees' areas of focus.

07/20 Forward Plans

The Forward Plan of Key Decisions from Cabinet and the Black Country Executive Joint Committee were considered.

08/20 Date of the next meeting

The date of the next meeting was agreed as 26th November, 6 p.m.

Termination of Meeting

The meeting terminated at 7.30 p.m.