

Minutes of the meeting of the Health Overview Policy and Scrutiny Committee held in Committee Room 1, County Hall, Chelmsford, CM1 1QH at 10.00am on Wednesday 6 November 2019

County Councillors Present:

Councillor Reeves (Chairman)	Councillor Harris
Councillor Egan (Vice-Chairman)	Councillor Brown
Councillor Chandler	Councillor Edwards
Councillor McEwen	Councillor Durham
Councillor Gadsby	Councillor Wood (Vice-Chairman)
Councillor Lumley	

Graham Hughes - Senior Democratic Services Officer

Andrew Seaman – Democratic Services Officer

The meeting started at 10:03

1. Membership, Apologies, Substitutions and Declarations of Interest

Apologies had been received from Councillors Massey, Moran, Stephenson and Hannah Fletcher from Health Watch Essex.

The following Councillors declared an interest:

- (i) Councillor Egan – Code interest. Her cousin is Managing Director of Basildon and Thurrock University Hospital Trust – however, she believed that this did not prejudice her consideration of the public interest and that she was able to speak and vote on the matters on the agenda. Councillor Egan also declared a code interest as a representative on Rochford and Castlepoint CCG, similarly she did not believe this impacted on her participation at the meeting.
- (ii) Councillor Wood is a governor for Essex Partnership University Trust.

2. Minutes

The Minutes of the meeting of the Health Overview Policy and Scrutiny Committee (HOPSC) held on 9 October 2019 were approved as a correct record and were signed by the Chairman.

3. Questions from the Public

There were no questions from the public

4. Public Health – Updated Deprivation Index

The Committee considered report **HOPSC/40/19**. The following representatives joined the meeting and at the invitation of the Chairman, introduced the item.

Essex County Council: Chris French, Head of Commissioning, Sofian Ragab, Senior Analyst and Laura Taylor Green, Head of Well-Being and Public Health.

During the discussion of the report and a related presentation gave an overview of the Deprivation Index report. The following points were highlighted and/or acknowledged:

- (i) It was highlighted that though Essex was less deprived than most counties in England, since 2007 there had been a decline in its relative position when compared to other authorities.
- (ii) Basildon, Tendring and Colchester were the most deprived areas in Essex. It was recognised that education, employment and material wealth had the biggest positive impact on deprivation along with lifestyle choices and infrastructure.
- (iii) There was a concern that migration of vulnerable families from London Boroughs was adding pressure to already deprived areas in Essex.
- (iv) In terms of supporting health in deprived areas, it was noted that infrastructure needed to be put into place. Deprived areas were more likely to encounter health issues, there was also a correlation between the percentage unhealthy lifestyles, including smoking and the level of deprivation the area experienced.
- (v) It was stressed that a child's early years significantly affects their future health. The Virgin Care Children and Wellbeing service was outcomes driven and Public Health was looking forward to working with that service to see how this would be evidenced.
- (vi) It was stressed that education and employment opportunities was a crucial factor to reduce local deprivation, the quality of employment was also emphasised. Anchoring institutions into these areas was emphasised in order to increase employment rates.
- (vii) Work was being done with major employers such as Department and Work Pensions, The National Health Service as well as Small to Medium Enterprises surrounding planning and employment.
- (viii) Regarding best practice the council noted well performing areas across the country as well as areas in Essex. This information was being shared

on multiple platforms and communication between organisations was being made, in order to gain the best possible results.

- (ix) It was noted that infrastructure surrounding Garden communities should be carefully planned and that existing neighbouring populations should be considered during this process.
- (x) It was noted that the updated local profiles within the Joint Strategic Needs Assessment would be published soon.

Conclusion:

The Chairman thanked the representatives for attending. The HOPSC agreed:

- (i) To have a further update in due course.
- (ii) Officers were asked to consider including in that future update a more localised deprivation index to aid Councillors to understand the challenges in their own areas.

Adjourned – 11:18

Restarted – 11:25

5. Mid & South Essex Hospitals Group - Ophthalmology - Update

The Committee considered the report **(HOPSC/41/19)**. The following representatives joined the meeting and, at the invitation of the Chairman, introduced the item.

Mid & South Essex Hospitals Group: Tom Abell, Deputy Chief Executive; Jenny Davis, Programme Director and Dr Celia Skinner, Group Medical Director.

During discussion of the report the following points were highlighted and/or acknowledged:

- (i) The proposal was to concentrate ophthalmology surgery to Broomfield hospital and that pre and post-operative care would remain at the patient's local hospital.
- (ii) As a result of these changes capacity would be freed up for other surgery to take place at the other hospitals in the group. Consolidating ophthalmology would bring further improvement to quality and outcomes.
- (iii) It was recognised that some patient may have needed to travel further due to the proposals and that mitigating actions were being developed. Travel costs would be refunded for carers and family members who qualified for assistance. Bus passes could be used for certain journeys. For those who required a car the cost would be capped and that there would be an annual joining fee. A partnership with Chelmsford

Community Transport had recently been formed to provide another option for family and carers.

Conclusion:

The Committee agreed and supported the changes disclosed in the report to reduce the waiting times for elective ophthalmology surgery.

6. Joint Health Overview Scrutiny Committee (with Suffolk) - Update

It was agreed to defer a detailed update on the Joint Health Overview Scrutiny Committee until the next meeting.

7. Chairman's Report

The report (**HOPSC/43/19**) was noted.

8. Member Updates

The report (**HOPSC/44/19**) was noted.

9. Work Programme

The committee noted and considered report (**HOPSC/45/19**).

The decision had been made to cancel the December meeting due to the General Election. Therefore, the items proposed for December had been pushed back to January 2020.

10. Date of next meeting

The committee noted that the next committee activity day was scheduled for 09:30 on Wednesday 15 January 2020.

11. Urgent Business

There was no urgent business.

The meeting ended at 11:45

Chairman