Minutes of the meeting of the Health Overview Policy and Scrutiny Committee held in Committee Room 1, County Hall, Chelmsford, CM1 1QH at 10.15am on Wednesday 4 September 2019

Present:

County Councillors

Councillor Reeves (Chairman) Councillor Massey
Councillor Wood Councillor Harris
Councillor Egan Councillor Moran
Councillor Chandler Councillor Brown

Councillor McEwen

Graham Hughes - Senior Democratic Services Officer

Andrew Seaman - Democratic Services Officer

Meeting started at 10:22

Membership, Apologies, Substitutions and Declarations of Interest

Apologies had been received from Councillors Lumley, Gadsby, Edwards and Hannah Fletcher from Health Watch Essex.

Councillor Wood had been voted as Vice-Chairman Councillor Sergeant had stepped down as Councillor.

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.
- (ii) Councillor Wood Governor of EPUT
- (iii) Councillor Brown Son is cardiovascular Surgeon at Southend

1. Appointment of Vice-Chairman

The Chairman advised the Committee that Colin Sargeant had stood down as councillor and thanked him for his service on the committee and it was agreed that a letter to that effect would be sent to him. The Chairman then invited nominations for Vice-Chairman, Councillor Egan proposed Councillor Wood, seconded by Councillor Harris. With no other nomination Councillor Wood was appointed as Vice-Chairman.

2. Minutes

The Minutes of the meeting of the Health Overview Policy and Scrutiny Committee (HOPSC) held on 4 July 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. Mid & South Essex Hospitals – Cardiology Clinical Reconfiguration

The Committee considered report **HOPSC/29/19**. The following joined the meeting and at the invitation of the Chairman, introduced the item.

Mid & South Essex University Hospitals Group:

Tom Abell – Deputy Chief Executive Dr Stuart Harris – Group Clinical Director, Cardiovascular Dan Turner – Head of Integrated Care

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

- (i) It was noted that the last few winters had been quite difficult, and preparations had been made to increase capacity at all three hospitals.
- (ii) Aim would be to transport coronary patients directly to Basildon as opposed to being treated at Broomfield, after stabilisation.
- (iii) There were ongoing discussions between health organisations, local government and bus companies to further support people visiting patients.
- (iv) The number of patients needing transferring was relatively small (2 to 3 patients needed to be transferred a day, 921 a year). Improving the car parking issue at Basildon was to benefit the patient transfer changes but was also to improve the day to day operations.
- (v) There was an aim of working with Basildon Borough Council to identify staff parking opportunities within the town centre.
- (vi) It was noted that there were ongoing discussions to find opportunities for patient and visitor transport.
- (vii) It was noted that NICE guidelines suggested that better outcomes were achieved if clinical interventions were made within 72 hours for all cases.
- (viii) Urgent pacemakers were an area that could be improved.
- (ix) There was continued focus on minimising admissions.
- (x) Weekends were a challenge; the new process would allow cardiologists to be available at weekends. Though this was temporary, it was noted that should this be effective a review would take place to consider if it should continue.

- (xi) There would be evaluations to take the positives from the temporary measures and apply them in future planning.
- (xii) Hospitals would become more specialised in certain clinical disciplines. Basildon cardio, Southend cancer, Broomfield complex inpatient surgery. was the target model. Currently, it was a challenge to provide all these specialisations at all three
- (xiii) Hospitals continue the same bed model at an assumed rate of 95% occupancy; therefore, should any spikes occur this would dampen that effect.
- (xiv) It was noted that South and Mid Essex Hospitals were in communications with other Hospitals in order to share knowledge and best practice.
- (xv) The hospitals intended to increase the use of 'virtual beds' to relieve hospital beds. This was where patients are transferred home but still not signed off from the hospital. These are patients who need minor treatment.
- (xvi) The average length of stay for this cohort of patients was anticipated to be between 4.5 day to 6.5 days.

Conclusion:

The Chairman thanked the witnesses for attending and the HOPSC support the proposed changes. It was agreed:

- That the witnesses would come back March/April to debrief on the pilot.
- Further information to be provided on transport arrangements.
- A separate update to be planned to discuss STP plans.

The witnesses then left the meeting.

Adjourned – 11:09 Restarted 11:15

5. Public Health Update

The Committee considered the report (HOPSC/30/19) the paper specially addressed issues raised by the HOPSC in advance. The following joined the meeting and, at the invitation of the Chairman, introduced the item.

Essex County Council:

Dr Mike Gogarty – Director of Wellbeing, Public Health, and Communities

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

- (i) It was noted that ECC continued to receive the same level of public health grant from national government.
- (ii) Various public health initiatives were outlined and that the 'Live Well' scheme was highlighted to have worked well.
- (iii) The biggest challenge was providing better education opportunities to children to improve health and wellbeing.
- (iv) Loneliness in the elderly community was an issue. It was noted that loneliness in younger people was being dealt with in a similar way to elderly.
- (v) It was noted that there was a possibility that parishes could be involved in tackling loneliness. They had been implementations to introduce roles at a localised level.
- (vi) An updated deprivation index would be released in October, Tendring and Colchester was likely to decline. The profile of the Tendring mental health hub needs improvement.
- (vii) Saw a decline in school readiness.
- (viii) Colchester, Basildon and Tendring –national grant funding was received by Active Essex. – active aging was a target; infrastructure changes and cultural changes need to be made. Target was to get those inactive people active.
- (ix) Compared to northern and metropolitan authorities Essex seems poorly funded per person, Suffolk and Hertfordshire were similar in terms of funding per person. Though this may look different when needs are considered.

Conclusion:

The Chairman thanked Dr Gogarty for attending and the HOPSC support the proposed changes. The chairman request that Dr Gogarty returned to present the deprivation index later in the year.

6. Chairman's Report

The report (HOPSC/31/19) was noted, there were no questions.

7. Member Updates

The report (HOPSC/32/19) was considered and noted.

Councillor Brown – JHOSC, noted a lack of representation from west Suffolk.

Councillor Wood – ESNEFT, Updated members on the most recent meeting he attended, including improved vacancy rates and reduced agency costs.

8. Work Programme

4.

The committee noted and considered report (HOPSC/33/19).

Amendments would need to be made to reflect the updates requested in item

9. Date of next meeting

The committee noted that the next committee activity day was scheduled for 09:30 on Wednesday 9 October 2019.

10. Urgent Business

There being no further business the meeting closed at 12:08

Chairman