Minutes of the meeting of the Health Overview Policy and Scrutiny Committee, held in the Committee Room 1, County Hall, Chelmsford on Thursday 7 September 2023 at 10:30am

Present

Cllr Jeff Henry (chairman)	Cllr June Lumley
Cllr Ian Grundy	Cllr Anthony McQuiggan
Cllr Dave Harris (vice-chairman)	Cllr Richard Moore
Cllr Eddie Johnson	Cllr Mike Steptoe (vice-chairman)
Cllr Daniel Land	Sharon Westfield-de-Cortez (HWE)
<u>Apologies</u>	
Cllr Paul Gadd	Cllr Stephen Robinson
Cllr Martin Foley	Cllr Stacy Seales (co-opted)

The following officers were supporting the meeting:

- Graham Hughes, Senior Democratic Services Officer
- Freddey Ayres, Democratic Services Officer

1. Membership, apologies and declarations

Apologies were received from Cllr Gadd, Cllr Foley, Cllr Robinson and Cllr Seales.

Cllr Henry declared an interest that he sits as a council governor at Mid and South Essex NHS Foundation Trust.

2. Minutes of previous meeting

The minutes of the meeting held on Wednesday 12 July 2023 were approved and signed as an accurate record.

3. Questions from the public No questions from the public were received.

4. Children's Mental Health Services The Chairman welcomed to the meeting:

- Gill Burns, Children's Services Director, NELFT
- Sarah Harrington, Programme Director, Hertfordshire Children Services
- Chris Martin, Director for Strategic Commissioning and Policy (ECC)

The committee received the following update and responses to their questions:

- NELFT set out the broad overview about current commissioned services including aspects of transformation and some of the current issues and challenges
- New 7-year contract awarded to NELFT and the name of the service changed to CAMHS
- Original partners still in place on the commissioning side including Essex, Southend and Thurrock
- Single point of access remains in place
- Focussing on early intervention and they still have a crisis team and learning difficulties team, as well as provision for young offenders
- Recognised there has been a lot of change in terms of landscape with ICB's
- Not many services have been retained across the whole County but CAMHS has been. This is positive and can gain efficiencies from this
- NELFT has a partnership with HCRG (Health Care Resource Group) and makes up 20% of the contract
- Would like HCRG to pick up the lower level and non-clinical interventions which means NELFT can concentrate on the clinical and therapeutic interventions for more complex cases. This is helping with managing overall demand
- Have robust transitions process for small number of children who may have to move into adult services
- Data peaks and troughs on referrals during the year. Referrals have been fairly consistently high in recent years. Main source of referrals usually around behaviour and conduct
- In terms of the crisis pathway, again referral and demand is fairly consistent with some peaks and troughs as would expect
- There is a 24/7 crisis care offer with a 4-hour target for any emergency crisis care
- Less positive feedback is around people deciding to go to A&E although people are discouraged from doing that for mental health conditions as A&E is not the best environment or therapeutic environment for young people with mental health issues
- Vacancy rates can look alarming. Assurance is that this is not a dissimilar picture for other NHS providers. Crisis teams tend to use significant numbers of career agency people
- CAMHS consultants can be difficult to recruit (national shortage). Particular struggle to recruit in west Essex as directly competing with London
- Caseloads tend to be higher for lower interventions
- System wide transformation the production of all-age mental health strategy has been highlighted and promoted across the ICB's
- Been vocal about putting the right investment into children's services in ICB budgets
- Work in primary care to start more at locality level. Lot of work on eating disorders
- Mental Health in Schools Team across MSE. Also, NELFT have awarded the contract for this same service in north east Essex
- Mental Health in Schools Team practitioners have been grown in a different way - not coming through traditional career (nursing) paths but through universities and colleges

- Working with Health Education England to try and develop something to help retain this new workforce
- Trying to convert agency staff to permanent staff and sell the benefits and security of being a permanent employee. Also have a large apprenticeship scheme as well
- NELFT is also using international recruitment. Have team within nursing directorate to put a whole support package in place for those coming from abroad. Support with qualification transfer equivalences
- Not sure presentations post Covid are vastly different but a lot more cases of generalised anxiety. Need to normalise some day-to-day anxiety as a normal life state
- Can be a disconnect from what health professional thinks is required and what a family thinks is required. If really complex would get a second opinion from another consultant within the team
- Have put in place some training and coaching aimed at family support and commissioned Barnardo's for some of this family centred therapeutic support.

5. <u>Anchor Programme and Quality Improvement – Mid and South Essex NHS</u> <u>Foundation Trust</u>

The Chairman welcomed to the meeting:

- Charlotte Williams, Chief Strategy and Improvement Officer
- Shevaun Mullender, Head of Clinical QI Capability at MSE
- Kevin Garrod, Anchor Programme Manager

The committee received the following update and responses to their questions:

- Remit to improve operational capability and quality and make it more equitable and be a better employer and promote staff health and wellbeing
- Quality Improvement Facilitators to work alongside care group senior leadership teams
- Anchors are a US idea. Focus on building and supporting social value, sharing knowledge, equity, LU and inclusive employment
- Aim to get more people involved in skills development and become more active in their local area
- Currently 400 participants and 100 jobs. Expect will hit 900 and 300 in a year
- Candidate for the scheme are found via South Essex Community Hubs and also take referrals from wider set – Trustlinks, Princes Trust etc
- Try to be creative to bring about improvements and follow anchor principles
- Recently been talking to recruitment events with HR professionals. Also have support of ICS and other partners to sign up to Anchor charter and will need to measure their intent as to what they will each do
- Offering themselves as a resource to help partners and building on evidence base - evaluation and literature being produced to convince people
- There are Links with ARU medical school and University of Essex. Anticipate some of the cohort from ARU Medical School coming to MSE
- Half aimed to go into primary care (GPs)
- Offering a self-selected module within the fourth year of training to identify onsite work opportunities and see the NHS less from a service perspective and more as a potential employer

- Winner of Health Equality Award 2023 Parliamentary Award
- 80% of staff live in Essex, rest likely in London
- Housing affordability and proximity of housing is an issue
- Age of admin and clerical staff is older and median age of clinical staff is younger.

6. <u>Healthwatch Essex in prisons</u>

The Chairman welcomed to the meeting:

 Sharon Westfield-de-Cortez, Information & Guidance Manager and Safeguarding Lead, Healthwatch Essex

The committee received the following update and responses to their questions:

- Format of the review
- Lived experience should be at the heart of health and social care systems
- HWE work recently has focussed more on those who may be heard less
- Decided to look at health care needs for prisoners and those that leave prison
- Visited Young Offenders setting and HMP Chelmsford
- One to one interviews
- Over 50 current and ex-prisoners fed into the project.
- Findings
- Reoffender rate in the focus group HWE set up was high
- So scope of project opened up straightaway to ex-offenders as well
- Physical health was low on inmates and ex offenders' priority list yet what was
 of greatest concern was their mental health
- There is supposed to be a support framework already in place to help and support prisoners but it is not always effective due to resources and other factors
- Trauma was another issue seen early life trauma could lead to greater tendency towards offending.
- What happens once released?
- A few might have a support network ready for them. There are teams in the prison to help with this but they are not able to fully engage due to the volume of demand/need
- There are going to be ex-prisoners at addiction and homeless centres. They don't often know where to go for help, once released. CVS sector engagement - told similar stories, people turning up with no money, no accommodation arranged, no food arranged etc
- Release times Seems to be a significant volume of prisoners being released on a Friday afternoon and then turning up at help centres at 4pm on a Friday just as everything is closing
- Agencies supporting prisoners need more access to them before they leave prison so that they can help prepare them
- No surprise when people go back to their old contacts and reoffend. There is still significant levels of re-offending
- There is a process where veterans can be prioritised for housing allocations etc ex offenders could be supported similarly.

Following discussion, the committee **resolved** the following:

- Further consideration is needed of the issue raised
- Further discussion with Leadership Team
- Need to scrutinise the appropriate and responsible agencies.

7. Chairman's Report – September 2023

The committee noted this report.

8. Member Updates

Cllr Harris reported he had recently walked around Colchester Hospital, specifical the development of the new elective care centre. A written update on the centre was requested.

9. Work Programme – September 2023

The committee noted the current work programme.

Regular monthly update from MSE on CQC improvements and action plans.

In relation to arranging a future session on NHS s106 monies Cllr Henry had met with Director of Public Health to initiate planning it.

10. Date of Next Meeting

To note that the next meeting will be held on Thursday 5 October 2023 at 10:30am in Committee Room 1, County Hall.

11. Urgent Business

No urgent business has been received.

12. Urgent Exempt Business

No urgent exempt business has been received.

The meeting closed at 12:42pm.

Chairman