

PARTNERSHIPS SCRUTINY COMMITTEE

Minutes of a meeting of the Partnerships Scrutiny Committee held in Conference Room 1a, County Hall, Ruthin on Thursday, 17 September 2015 at 9.30 am.

PRESENT

Councillors Raymond Bartley (Vice-Chair), Jeanette Chamberlain-Jones (Chair), Meirick Davies, Martyn Holland, Pat Jones, Dewi Owens and Arwel Roberts

Observer: Councillor Alice Jones

ALSO PRESENT

Corporate Director: Customers (NS), Scrutiny Co-ordinator (RE) and Committee Administrator (SLW)

1 APOLOGIES

Apologies for absence were received from Councillors Merfyn Parry, Pete Prendergast and Bill Tasker

2 DECLARATION OF INTERESTS

Councillor Jeanette Chamberlain-Jones declared a personal interest in items 4, 5 and 6.

3 URGENT MATTERS AS AGREED BY THE CHAIR

No urgent matters.

At this juncture of the meeting, it was agreed by all present to vary the order of items on the Agenda to accommodate the representatives from Betsi Cadwaladr University Health Board, two of which had previously scheduled meetings to attend in the afternoon.

4 BETSI CADWALADR UNIVERSITY HEALTH BOARD'S THREE YEAR PLAN 2015-2018

The Betsi Cadwaladr University Health Board's (BCUHB) Executive Director of Strategy (EDofS), Mr Geoff Lang, introduced the Three Year Plan 2015-2018.

The EDofS explained to members that prior to the Health Board being put into Special Measures, discussions had taken place with the Welsh Government (WG). During the discussions it had been agreed that the Board would not draw up a three year plan to start from 2015. The three year plan would commence from the 2016/17 financial year onwards. For the current year, the Board, as part of its improvement plan, would be concentrating on the following areas:

- Reconnecting with the public, staff and communications

- Mental Health improvement
- Obstetrics and Gynaecology
- Corporate Governance, and
- GP Out-of-Hours services.

To improve communications and reconnect with staff and stakeholders, the Board had attended numerous events, during the summer months. The events included ones arranged by the Board together with established shows and fairs which the public regularly visited. The purpose of attending the events was to try and re-engage with people and collate their views on the Health Service in North Wales as to what had been working well and which areas required improvement. The feedback from the events would be analysed and the main conclusions and findings would be provided at future public events to ascertain whether they resonated with the general public's view, prior to being utilised to plan future service changes.

The consultation regarding temporary changes to the obstetrics and gynaecology services was currently taking place. Future consultations on the Mental Health Service and the GP Out-of-Hours Service would also be taking place shortly.

BCUHB representatives informed members of the following:

- The Board was now in the process of developing its financial plan and priorities for 2016/17
- Part of the planning included working with Public Health Wales (PHW) on mapping health challenges and how to improve health in general, including the work required in the region's most deprived areas. Work would also take place with Social Services to comply with the requirements of the Social Services and Well-being (Wales) Act 2014
- A meeting of the Board was scheduled to take place during the second week in October to discuss how to balance their priorities and the community's priorities
- The Board had to finalise and agree its Plan by January 2016 to enable it to enter into discussions on the priorities with the WG between January and March 2016
- On a local Conwy and Denbighshire level, they were keen to reconnect with communities in both counties to discuss the Board and the communities' health and social care priorities on a local level. To facilitate this, a number of workshops were to be arranged in October 2015
- The EDofS confirmed it had been crucial to open a two way dialogue between Health and Social Care Services to ensure the needs of the community would be met.

Discussion took place and responding to Members' questions, BCUHB Officers:

- Confirmed that the redevelopment of Ysbyty Glan Clwyd would be a large and complex project which had caused a lot of inconvenience for patients, staff and visitors alike. Whilst the initial aim had been to rid the building of asbestos, the Board had utilised the project as an opportunity to upgrade the fabric of the hospital and equip it with the latest medical facilities i.e. state of the art wards, theatres, Accident and Emergency Department, Critical Care

Unit etc. The benefits of the redevelopment programme would become more visual on the opening of the new main entrance in October and when the first of the new wards were opened in November. Staff working in the new areas had given extremely positive feedback regarding the changes

- Agreed that the Clostridium Difficile (C-diff) outbreak had been a very difficult experience for the Board and its staff. The redevelopment work at Ysbyty Glan Clwyd had not helped the infection control situation. A great deal of work had been undertaken since the outbreak with respect to infection control and cross-contamination, but a lot more work would be required in order to be as good as the remainder of Wales. The opening of the new wards, each of which would have eight single rooms to help isolate patients, would be beneficial, however, the ultimate aim would be to be as good, if not better, than the best in England. With a view to achieving this, Professor Duerden of the National Centre for Infection Prevention and Management would return to Ysbyty Glan Clwyd within the next 3 to 6 months to monitor progress and produce a second evaluation report
- Confirmed that there were national standards for hospital cleaning and these standards had to be met
- Advised that difficulties in recruiting suitably qualified staff had been a cause of concern across the whole NHS and not unique to North Wales. Nevertheless, there had been additional difficulties in recruiting staff to certain medical disciplines, or to certain grades, particularly those where the Deanery had withdrawn the hospital's "training" status. UK Government policies with respect to immigration and visa regulations had further compounded the problems. The Board were, however, actively working with both Liverpool and Manchester Medical Schools with a view to getting them to place students in hospitals in North Wales during their training period. This was due to the fact that it was widely acknowledged that medical students often preferred to stay at their training hospitals upon the completion of their training
- There had been a shortage of nurses in many areas of the UK due to an insufficient number of nurses being trained in recent years. Whilst the number of student nurse places at universities had been on the increase, it would take a couple of years for those nurses to complete their training and be ready to work at the hospitals. In recent years, a number of nurses had been recruited from outside the UK, particularly Ireland and Spain. Whilst there were clear standards of comparability between nursing qualifications in different countries, it was the nursing procedures and practices in countries which varied. Therefore, nurses from those countries would commence six month induction training to familiarise themselves with NHS practices and procedures
- Clarified the Deanery's role and its view on the number of training hospitals in North Wales
- Agreed that there had been a need to raise awareness of the Welsh language and its use throughout the Deaneries, including Liverpool and Manchester. There was also an opportunity to use the need for Welsh speaking medical staff as a means to attract medical students from North Wales back to the area to practice
- Work had been underway to review the type of accommodation and the availability of accommodation for junior medical staff who moved to the

district general hospitals to work, as the accommodation offered could also be a factor that would shape a medical student's choice of hospital placement

- Discussions were continuing with a view to having a School of Medicine in North Wales in the future. Students were now able to study for a Bachelor of Medical Science degree at Bangor, which could then be used to access a medical training course
- Confirmed that the Health and Social Care Advisory Service (HASCAS) had been working with the Board to look at all individual alleged cases of abuse on Tawelfan Ward. A number of staff members were currently suspended pending the conclusion of the investigations and, if appropriate, disciplinary proceedings would be invoked
- In the past the Health Service had operated on a "sickness/intervention" model, the aspiration for the future was to work on a "proactive/well-being" model. This would see Health working with partner organisations to address issues such as deprivation, regeneration and not in education, employment or training (NEET) with a view to improving health and well-being outcomes throughout an individual's lifetime. This work would be progressed through the TRAC project
- Informed members that work was currently underway via the Local Development Plan (LDP) Leads and WG Group as to how the Health Service could improve its service planning to accommodate population changes and demands following the adoption of Local Authority LDPs across North Wales. Whilst population growths were a challenge throughout all sectors of the health service, it was anticipated that the greatest challenge would be faced by the primary care sector as they did not have surplus capacity to accommodate large population growths.

At the conclusion of the discussion BCUHB Officers undertook to explore the following matters and report back to members:

- Concerns raised regarding the staffing numbers at the new Critical Care Unit and whether it had a full complement of appropriately qualified staff at all times
- The number of mixed wards and mixed bays at Ysbyty Glan Clwyd and the Board's policy on mixed wards and bays (apart from in the Intensive Care and Critical Care Units and on the Acute Medical wards)
- The Board's Policy regarding the wearing of uniforms whilst not on duty (and the number of staff disciplined for non-compliance with the Policy). Committee members were advised that members of the public were within their rights to report staff who were observed wearing their uniforms whilst off duty
- PHW's work relating to health inequalities
- Concerns raised regarding certain consultants not commencing clinics on time and, consequently, their patients not being afforded the full time entitlement for their consultation, and
- To report the concerns raised by the Committee to the Health Board in due course.

The Committee expressed their gratitude to the Executive Director of Strategy for attending and it was:

RESOLVED that subject to the provision of the above information, the Partnerships Scrutiny Committee received the progress report.

5 TEMPORARY CHANGES TO WOMEN'S AND MATERNITY SERVICES IN NORTH WALES

The Betsi Cadwaladr University Health Board's (BCUHB) Assistant Director, Strategy and Engagement (ADS&E), Sally Baxter, introduced the Temporary changes to Women's and Maternity Services in North Wales. "Have Your Say".

A copy of the summary version had been distributed to members on publication of the committee papers. In her introduction, the ADS&E emphasised that the proposed changes were a temporary measure until the staffing situation could be stabilised. The proposals involved temporary changes to the location of consultant-led obstetrics, gynaecology and breast surgery services. Midwifery services and neo-natal services would remain on all three sites. The Board acknowledged that the proposals were a cause of great concern to residents across the region, but it felt that something had to be done in the interim to minimise the risk to expectant mothers and their babies. The Board's preferred option was Option 4, temporary changes to maternity services at Ysbyty Glan Clwyd, as in its view it had the least significant impact on travel and other services could be put in place quickly. The Board was open to suggestions, and all four options were out for consultation until 5 October 2015. Members were advised that they could respond as individuals and collectively as a Committee to the consultation. Members were also requested to encourage residents within their wards to respond.

Discussion took place on all options and responding to Members' questions, the ADS&E:

- Informed members that an additional public consultation event had been arranged for 2 October in Denbigh, with sessions being held at 2.00 p.m. and 5.30 p.m. The ADS&E asked members to draw this to residents' attention
- Medical and technological advances had moved on significantly since the time when the three district general hospitals were built, as had the Deanery and national expectations for the health service. There was much more emphasis now on specialist medical centres of excellence and on moving patients out of the hospital environment as soon as it was safe to do so
- Reassured members that the Board would have measures in place to move mothers who would require consultant-led care to the appropriate site as quickly as possible – if it was a pre-planned consultant-led birth, arrangements would be made well in advance for them to attend their preferred site. If it was an emergency situation, a general medical team would be on hand to stabilise the patient whilst arrangements were put into motion with the Ambulance Service to move her to the nearest consultant-led site
- The number of emergency caesarean births in North Wales per year, was approximately 1% of the total number of births

- Re-affirmed that the proposals were a temporary measure and were linked to the development of the Sub-Regional Neonatal Intensive Care Centre (SuRNICC) at Ysbyty Glan Clwyd as the centre of excellence for babies with more complex needs – this unit would be consultant-led
- If it transpired that the staffing problems could not be solved and the temporary changes needed to be extended for a longer period of time, the Board would be required to re-consult on the proposals as they could not be extended indefinitely
- Stated that there were deaths occasionally even in consultant-led maternity units
- Confirmed that there was not a shortage of midwives in North Wales at present, and an additional 27 midwives had been recruited recently
- Assured members that the temporary changes were not a cost saving exercise. They were being proposed as a measure to address staffing level problems which could pose a risk to women and to the Board. At the conclusion of the consultation exercise, the implementation of whichever option, would have a cost implication
- The current service was heavily dependent on locum consultants, this was unsatisfactory and very expensive
- Confirmed that whilst neither Ysbyty Gwynedd nor Wrexham Maelor had parent accommodation similar to Tŷ Croeso Dawn Elizabeth House on site, arrangements would be made to accommodate parents near the hospital site if required
- Confirmed that a summary of the consultation responses would be available on the Board's website in due course, and
- That the points raised at the current meeting would be fed back as part of the evidence gathered during the consultation period.

Prior to concluding the discussion, the ADS&E agreed to furnish members with the following information:

- A link to the full consultation document
- The number of problematic/complicated births at each district general hospital site during the last 3 years, and
- The number of midwives who had left the Board's employment during the last three years as well as the number of midwives recruited in that time (including the total number of midwives in post for the years in question).

Members were encouraged to send any additional questions or comments they wished to submit as part of the consultation exercise to the Scrutiny Co-ordinator who would then forward them on to the Assistant Director, Strategy and Engagement.

The Committee expressed their gratitude to the Assistant Director of Strategy and Engagement for attending the meeting, and it was:

RESOLVED that subject to the provision of the above information, to note the proposals put forward and request that in the long-term, the residents of Denbighshire should be served by a safe consultant-led obstetrics and gynaecology

service at a site as near as possible to their homes, preferably within the county boundary, unless they were nearer to a unit that was outside the county.

At this juncture (11.15 a.m.) there was a 15 minute break
Meeting reconvened at 11.30 a.m.

6 BCUHB IN CONWY AND DENBIGHSHIRE

The Betsi Cadwaladr University Health Board's (BCUHB) Area Director for Conwy and Denbighshire, Bethan Jones introduced the BCUHB in Conwy and Denbighshire presentation.

The Area Director was welcomed to the meeting and proceeded to give a presentation on the progress made to date with developing a sub-regional area structure for the Health Board's work in Conwy and Denbighshire. The Area Director explained how the new structure would engage and interact with partners and stakeholders. During her presentation the Area Director gave an overview of the Leadership Team and the Area Structure that operated below it. She outlined the Corporate Support Services available to them, the Area Structure's operating principles and their key priorities for the next three years.

Responding to members questions she:

- Confirmed that the Health Board had established three "new area" structures for North Wales, based on the local authority areas of:
 - Anglesey and Gwynedd
 - Conwy and Denbighshire, and
 - Flintshire and Wrexham

The base for Conwy and Denbighshire was located at Llandudno Hospital

- Agreed that effective and timely communication was key to delivering quality services and to build up a high level of trust and confidence amongst residents. Shortfalls in timely and effective communication between health service personnel required improvement as it posed a risk to the Board, caused undue delay in patients' treatments at times and incurred additional costs for the health service
- Confirmed that a great deal of work would be undertaken in relation to the Out-of-Hours Service across North Wales. There were concerns that patients who were unable to get appointments with their own GPs were accessing the Out-of-Hours Service at the weekends
- Confirmed that GPs contracts actually specified that they were not required to work weekends at the present time
- Informed the Committee that there was a need to promote the availability of Minor Injuries Units (MIU) at the community hospitals to residents, together with the services they offered in order to relieve the pressures on the district general hospitals' Accident and Emergency (A&E Departments). Members suggested that it could be advantageous if the name of the MIUs were changed to Minor Injuries and Ailments Departments

- Confirmed there was a need to assist people to return to their homes much quicker following a period of hospitalisation, particularly when only very minor adaptations were required e.g. fitting of handrails etc. This work would be progressed via the “What matters” project
- Confirmed that there were examples of both good and bad practice with respect to hospital discharge plans together with the provision of specialist equipment
- Confirmed that in recent years, primary care had been organised into clusters with a view to building up resilience, particularly in areas such as IT and support for single doctor GP practices
- Acknowledged that low level mental health issues had not previously been addressed by GPs, this had led to higher level intervention required in due course.
- Advised that, at present, mental health matters formed part of the secondary healthcare sector. However, the Area Director was of the view that this should eventually form part of the “area” work, particularly given the evidence that dementia would form a large proportion of the local health service’s work going forward
- Another aspect which required improvement was palliative care and the need to upskill the care sector to provide palliative care rather than cause undue distress to the patient and their family by moving them into a general hospital environment for their end of life care.

Members agreed with the issue of palliative care and asked that the Board consider employing a community consultant and pharmacist with a view to supporting families etc., with palliative care. They also asked that flexible working practices in the health service be examined to determine whether some of them were putting patients at risk.

The Corporate Director: Communities, reminded members of the important role the Single Point of Access (SPoA) Service had in delivering cohesive health and social care services to people who need support to access the right services at the right time.

BCUHB’s Area Director for Conwy and Denbighshire agreed to follow-up the following queries and report back to members in due course:

- Whether there were any plans in place to utilise the former children’s clinic adjacent to the GP surgery at Rhuddlan for health, social care or community use
- Why patients attending the Morfa Doc Out-of-Hours services were not permitted to collect prescriptions from the Dispensary at Ysbyty Glan Clwyd and were advised to attend the nearest duty pharmacy to collect prescriptions
- Whether phlebotomy services could be delivered from GP practices, and
- To arrange to assign a member of staff from the Conwy and Denbighshire Area structure to each Denbighshire County Council Member Area Group (MAG) as a point of contact for members on Health Board matters and to

attend MAG meetings periodically to brief on area developments and hear local members' views on matters.

The Committee expressed their gratitude to the Area Director of Conwy and Denbighshire for attending at the Committee meeting and briefing them accordingly. It was:

RESOLVED that subject to the provision of the above information, and the pursual of the points raised, to receive the report.

7 MINUTES OF THE LAST MEETING

The minutes of the meeting of the Partnerships Scrutiny Committee held on Thursday 30 July, 2015, were submitted.

Matters Arising

Page 6, Item 6 – CCTV Savings. Councillor Arwel Roberts confirmed that each Town Council were in support of the initiative. Rhyl Town Council would have finances for only 20 cameras. Cllr Roberts confirmed Rhuddlan Town Council would not enter into an agreement until all Rhuddlan CCTV cameras were in working order.

RESOLVED that the minutes of the Partnerships Scrutiny Committee held on 30 July 2015 be received and approved as a correct record.

8 SCRUTINY WORK PROGRAMME

The Scrutiny Co-ordinator introduced a report (previously circulated) regarding the Partnerships Scrutiny Committee Forward Work Programme.

8 October 2015 – the Partnerships Scrutiny Committee will be taking place in Llangollen Town Hall. The Scrutiny Co-ordinator confirmed she would contact Officers to remind them the meeting would be taking place in Llangollen and not Ruthin.

It was agreed to postpone inviting BCUHB officers back to Partnerships Scrutiny until after the Special Council meeting with BCUHB which would be taking place on 7 October 2015.

RESOLVED that the Partnerships Scrutiny Committee Forward Work Programme be approved

9 FEEDBACK FROM COMMITTEE REPRESENTATIVES

None.

The meeting concluded at 1.05 p.m.