Adult Social Care, Health and Wellbeing Sub-Committee

7 March 2019

Present: Councillor N Craven (Chair)

Councillors L Bell, T Brady, M Green, J Kirwin, K Lee, L

Spillard.

ASCHW52/03/19 Apologies

Apologies were received from Councillors A Austin, S Brockbank, J Cassidy and A Percy.

ASCHW53/03/19 Substitute Members

There were no substitute members.

ASCHW54/03/19 Declarations of Interest and Dispensations

The following interests were declared:

- Cllr M Green declared a personal interest in relation to Item 5, Northumbria Healthcare NHS Foundation Trust Quality Account 2018-19, as a Council representative on the Trust Governing Body;
- Cllr M Hall, Cabinet Member for Public Health and Wellbeing, was in attendance, and, although not a member of the Sub-committee, declared a personal interest in relation to Item 5 as a Member of the Governors of Northumbria Healthcare Trust.

ASCHW55/03/19 Minutes

Resolved that the minutes of the meeting held on 14 February 2019 be confirmed and signed by the Chair.

ASCHW56/03/19 Northumbria Healthcare NHS Foundation Trust – Quality Account 2018-19

The Sub-committee considered the presentation from Jeremy Rushmer, Executive Medical Director, which set out the Trust's Annual Plan and Quality Account.

The Sub-committee noted the progress made over the year in relation to the priorities identified in the Quality Account for 2018-19 and the objectives agreed for the year ahead. It was noted that the final Quality Account will be published by the end of April and Local Authorities and stakeholders will be invited to provide their comments during May.

The Sub-committee was advised that the priorities for 2018-19 had largely been met. The one exception was the target for the use of the screening tool for Sepsis, where the 65% target had not been met. However overall bundle compliance within 1 hour had improved from 10% to 30%, with compliance within 70 minutes currently at approximately 50%. It was noted that this was a challenging target and further developments are underway. In addition there has been an improvement in relation to administration of IV antibiotics which is a key element of the target.

In relation to the priority around 'flow' it was noted that the Trust's four hour performance was 95% achieved for quarter 3, and this performance was in the top 10% of Trust's nationally.

Members considered the targets for 2019/20.

Members raised a question in relation to cancer targets and about the areas that were not currently meeting the targets. It was highlighted that there were some issues in relation to Urology – renal and prostate cancers. This was due to higher volumes of referrals as a result to a NICE change in the pathway and publicity from high profile cases. In addition, in relation to breast cancer, there is a capacity issue in diagnostics and recruitment of breast radiologists.

Members highlighted the objective in relation to bereavement and improving care at end of life. Members asked about the intention to consult with the public. It was highlighted that the trust hoped to do so but there are some issues around permission to follow up with patients and their families. The Trust highlighted the need for a wider discussion around 'realistic medicine' and it was suggested that this may be something the Trust could bring back to the committee for consideration at a future meeting.

In relation to Maternity Services Members questioned the reference to an increased birth rate. It was clarified that this related to an increase in the number of women choosing to give birth at the Trust since the opening of the Cramlington site, rather than a more general increase in the birth rate within the population. Members also asked whether there were any plans to open a special baby unit in North Tyneside but it was noted that this wasn't likely as a good service is in place in Newcastle.

There was some discussion about the golden thread of staff experience. It was noted that the Trust have good staff health and wellbeing services and staff engagement and this is something they will continue to develop.

The Sub-committee noted that in the past a working group of Members had been established to finalise the statement to the Trust in relation to the Quality Account. It was agreed that this approach should be adopted and volunteers be requested to take part in this group. Cllr Spillard and Cllr Brady both expressed an interest in joining this group.

The Chair thanked the Trust for the informative presentation.

It was **agreed** that volunteers be sought to join a working group to agree a statement on behalf of the Sub-committee to be submitted to the Trust for inclusion in the Quality Account.

ASCHW57/03/19 Screening Programmes

The Sub-committee considered a presentation from Rachel Chapman, Head of Public Health Commissioning Directorate, NHS England, on screening and immunisations. The presentation set out the range of screening and immunisation programmes and also provided an update on the national breast screening incident and review.

There was some discussion about the procurement arrangements in relation to HPV Primary Screening as part of the cervical screening programme. It was noted that the number of physical labs would be reducing from 50 to 9 and this was linked to the introduction of HPV primary screening which will lead to a reduced workload for labs, in addition to the impact of the HPV vaccination programme.

Members also requested further information about the age trial in relation to cervical screening and when this trial will end and the results will be rolled out. Members asked that further information be provided on this following the meeting.

The chair thanked officers for the presentation.

ASCHW58/03/19 Mental Health and Wellbeing Services for Children and Young People

The sub-committee considered a report from North Tyneside CCG which provided information on mental health provision for:

- Looked after children;
- Children and Young People involved in Youth Offending;
- · Children in crisis.

The report set out health elements of the pathway, together with additional details of other services involved.

It was noted that the main driver for pushing improvements in relation to children and young people's mental health and emotional wellbeing is the publication called 'Future In Mind' published in March 2015. Each area was required to develop a Local Transformation Plan to reflect how the requirements of Future in Mind would be developed at a local level. The North Tyneside Local Transformation Plan is in its fourth year and is refreshed each year and is signed off by the Chair of the Health and Wellbeing Board.

In relation to Looked After Children (LAC) the focus is on support with emotional health and well-being and increased earlier intervention opportunities. The LAC pathway was recently reviewed and further work will be done in the coming months to ensure this is fit for purpose moving forward to take into account how best to continue to meet the needs of LAC within funding constraints. A dedicated psychologist from the North Tyneside CAMHS team currently supports this pathway and provides advice and support to staff, foster carers and families. CAMHS also provides support into the four locality teams and this has been working well and is reducing the number of inappropriate referrals' to CAMHS. In addition there is specific input from the CAMHS team into the Raising Health and Education for Looked After Children (RHELAC) team.

In relation to the Youth Offending Team, the strategic direction and decisions are being informed by an in-depth needs assessment which was completed by Public Health in 2016. The needs assessment included in-depth case studies of prolific offenders and identified a number of common factors including adverse childhood experiences, high levels of emotional and mental health need, and school exclusion.

Following the needs assessment, partners in North Tyneside successfully bid for funding to enhance mental health services for children and young people in contact with the justice system. This work focuses on training children and young people's practitioners working with young offenders and their families in an Enhanced Case Management approach which is based on the Trauma Recovery Model (TRM). The North Tyneside partners have also submitted a bid for a Clinical psychologies post to develop the Enhanced Case Management process.

In relation to Crisis Provision, there is a dedicated 24/7 urgent and emergency mental health service for children and young people and their families in North Tyneside. It was noted that urgent access to the North Tyneside CAMHS service for children and young people meets, and usually exceeds, the target of 48 hours from the time of referral to being seen. The report also outlined the development of preventative services. This has included support for schools through a schools resource pack, the development of a professional link between the CAMHS team and schools and the opening up of direct referrals from SENCOS and Headteachers into the CAMHS.

Members considered the tables contained in the report which gave an overview of the number of new referrals to the specialist CAMHS team over the last 2 years. It was noted that the tables showed a drop in referrals during August due to a reduction in school referrals. It was also noted that the number of rejected referrals had reduced due to a reduction in appropriate referrals.

There was some discussion about capacity issues and it was noted there are some capacity issues within the CAMHS team, mainly in two pathways. In relation to non-crisis cases, most are assessed within 6 weeks. Longer waits are experienced in relation to neurodevelopment.

There was some discussion about support for young people with autism during periods of change such as moving out of school. It was noted that the NHS ten year plan has a requirement to develop 0-25 year old services and this is being looked at nationally, but it does involve some logistical issues, for example around child protection.

There was some discussion about the need to listen to the views of young people in relation to mental health. Members noted the recent MH2K event with young people that had been highlighted in the report. It was agreed that the report from this event would be circulated to members of the sub-committee.

The Chair thanked officers for the report.

ASCHW59/03/19 Health, Wellbeing and Social Care Commissioning Intentions 2019/20

The sub-committee noted that a joint meeting with the Health and Wellbeing Board had been held prior to this meeting to consider the Social Care Commissioning intentions. The Sub-committee did not wish to make any formal comments or recommendations as a result of this meeting.

ASCHW60/03/19 Exclusion Resolution

It was resolved that under Section 100A(4) of the Local Government Act 1972 (as amended) and having applied a public interest test as defined in Part 2 of Schedule 12A of the Act, the press and public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Paragraph 3 of Part 1 of Schedule 12A to the Act.

ASCHW61/03/19 Exempt Minutes from the Last Meeting

Resolved that the exempt minutes of the meeting held on 14 February 2019 be confirmed and signed by the Chair.

Signe	d By:	
Date:		

Cllr N Craven, Chair of the Adult Social Care, Health and Wellbeing Sub-committee