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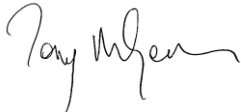
9 November, 2018

Dear Councillor,

**WELLBEING SCRUTINY COMMITTEE
4:00 PM., MONDAY 19 NOVEMBER, 2018
ESPERANCE ROOM, CIVIC CENTRE, CANNOCK**

You are invited to attend this meeting for consideration of the matters itemised in the following Agenda.

Yours sincerely,



**T. McGovern,
Managing Director**

To: Councillors:

Cooper, Miss. J. (Chairman)
Smith, C.D. (Vice-Chairman)

| | |
|-----------------------|---------------------|
| Buttery, M.S. | Johnson, T.B. |
| Cartwright, Mrs. S.M. | Lyons, Miss. O. |
| Crabtree, S.K. | Stretton, Mrs. P.Z. |
| Davis, Mrs. M.A. | Sutton, Mrs. H.M. |
| Freeman, Miss. M.A. | Tait, Ms. L. |
| Grice, Mrs. D. | |

Also invited:

Staffordshire County Council Co-opted Member: Councillor P. Hewitt
Independent Co-opted Member: Jackie Owen, Healthwatch Staffordshire

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AGENDA

PART 1

1. Apologies

2. Declarations of Interests of Members in Contracts and Other Matters and Restriction on Voting by Members

(i) To declare any personal, pecuniary or disclosable pecuniary interests in accordance with the Code of Conduct and any possible contraventions under Section 106 of the Local Government Finance Act 1992.

(ii) To receive any Party Whip declarations.

3. Minutes

To approve the Minutes of the meeting held on 3 July, 2018 (Enclosed).

4. Update – Healthwatch

To receive an update on the current work undertaken by Healthwatch.

5. Update – Staffordshire County Council’s Healthy Staffordshire Select Committee

To receive an update from the Chairman from the recent meeting of the Staffordshire County Council’s Healthy Staffordshire Select Committee, held on 29 October, 2018.

Healthy Staffordshire Select Committee and Joint Health Scrutiny Accountability Sessions

To receive for information Digests previously emailed to Members from the Healthy Staffordshire Select Committee (HSSC) and Joint Health Scrutiny Accountability (JHSA) Sessions held on the following dates:

- HSSC – 16 July, 2018 (Item 5.1 – 5.2);
- JHSA – 23 July, 2018 (Item 5.3 – 5.4);
- HSSC – 13 August, 2018 (Item 5.5 – 5.7);
- HSSC – 17 September, 2018 (Item 5.8 – 5.10);
- HSSC – 29 October, 2018 (Item 5.11. – 5.13).

6. Quarter 2 2018/19 Improving Community Wellbeing (Health, Culture and Sport) Priority Delivery Plan Update

To receive the latest performance Information (Item 6.1 – 6.4).

7. Wellbeing Scrutiny Review – Obesity in the District

To receive a presentation and consider the Scoping Document on Obesity in the District (Item 7.1).

CANNOCK CHASE COUNCIL
MINUTES OF THE MEETING OF THE
WELLBEING SCRUTINY COMMITTEE
TUESDAY 3 JULY, 2018 AT 4.00 P.M.
IN THE CIVIC CENTRE, BEECROFT ROAD, CANNOCK

PART 1

PRESENT: Councillors:

Cooper, Miss. J. (Chairman)
Smith, C.D. (Vice-Chairman)

| | |
|-----------------------|---------------------|
| Buttery, M.S. | Johnson, T.B. |
| Cartwright, Mrs. S.M. | Lyons, Miss. O. |
| Crabtree, S.K. | Stretton, Mrs. P.Z. |
| Davis, Mrs. M.A. | Sutton, Mrs. H.M. |
| Freeman, Miss. M.A. | Tait, Ms. L. |
| Grice, Mrs. D. | |

Invited:

Staffordshire County Council Co-opted Member: Councillor P. Hewitt
Independent Co-opted Member: Jackie Owen, Healthwatch Staffordshire

1. Apologies

No apologies.

2. Declarations of Interests of Members in Contracts and Other Matters and Restrictions on Voting by Members and Party Whip Declarations

No declarations of interests in additions to those already confirmed by Members in the Register of Members Interests were made.

3. Minutes

A Member referred to Page 13, Minute 21. Minutes and asked for an update in respect of the situation concerning community beds.

The Chairman advised that she had contacted both Staffordshire County Council (SCC) and the Clinical Commissioning Group (CCG) and had received no response.

The Staffordshire County Councillor indicated that he would liaise with the County on this issue and report back.

RESOLVED:

That the Minutes of the Health, Culture and Environment Scrutiny Committee meeting held on 26 March, 2018 be approved as a correct record.

4. End of Year 2017-18 Health and Culture Priority Delivery Plan Performance Update

Consideration was given to the End of Year 2017-18 Health and Culture Priority Delivery Plan Performance Update (Item 4.1 – 4.11 of the Official Minutes of the Council).

The Head of Environment and Healthy Lifestyles presented the report and indicated that all of the projects were either on target or complete.

A Member referred to Item 4.6 of the report and the hard work that the volunteers from the Princes Trust had put into the Tesco Gardening Project, and despite some issues, the Group had overcome these to complete the garden.

5. Health, Culture and Environment Scrutiny Committee Annual Report 2017-18

Consideration was given to the Report of the Head of Environment and Healthy Lifestyles (Item 5.1 – 5.4 of the Official Minutes of the Council).

The Head of Environment and Healthy Lifestyles reported on the work undertaken by the Health, Culture and Environment Scrutiny Committee during 2017-18 and the work of the Task and Finish Group and the impact of hot food takeaways.

Members noted the work that had been undertaken by the Task and Finish Group and how hot food takeaways had contributed not just locally towards the obesity problem but also nationally. They also discussed how obesity linked to deprivation and how education was crucial for families and young people.

RESOLVED:

That the Health, Culture and Environment Scrutiny Committee Annual Report 2017-18 be noted, and submitted to Council on 25 July, 2018, for information.

(At this point the Chairman agreed to change the order of the Agenda).

6. Update – Healthwatch

Members welcomed Jackie Owen to the meeting to provide an update on the work carried out by Healthwatch.

Jackie Owen reported that following a re-tender the organisation had now received a 58% reduction over 3 years.

She reported that the Healthwatch AGM had been arranged for 11 July, 2018 at Staffordshire Rugby Club and indicated that the main speaker would be Simon

Whitehouse, Director for the Staffordshire Together We're Better Programme and also work with Sustainability and Transformation Partnership (STP).

She reported that a steering group had been established to look at the problems surrounding community hospitals and beds. She advised that consideration was being given to some proposals and a consultation would be held this year. She also indicated that there were some other priority areas to consider at both Lichfield and Burton Hospitals.

Jackie Owen reported on a number of areas and advised that Ian Wright from Healthwatch was involved with a number of District Participation Groups and activities through Cannock Community Centre and SEND. Engagement had taken place with 88 individuals through visits, a health and wellbeing survey had been carried out and a report would be due to go to the Health and Wellbeing Board this month.

It had been highlighted that there were issues around accessing assessment services and groups to help people with autism. There were also other problems with trying to access appointments and requesting assessments for support for parents of children with autism. A report would be produced which would go to the CCG.

She reported on work undertaken with the STP who would be carrying out consultation events, however there had been little publicity and therefore they were being encouraged to be more open and transparent with the public.

Jackie Owen also reported that Healthwatch was currently trying to recruit 23 maternity champions who could gauge patient experiences and report back on their findings in respect of maternity services.

She highlighted the issue of unregulated day care services which were being offered to people with learning difficulties and also the issues surrounding direct payments.

It was reported that some investigative and research work would be carried out with regard to community hospitals due to the common misconception that they were better than care homes.

Finally, she reported that that under the 'Enter and View' Programme, Healthwatch had visited Talbot House, Rugeley and The Heathers, Cannock.

Members Questions

A Member discussed the need for Patient Participation Groups (PPG) and explained to Members that this provided the public with the opportunity of meeting at a GP Practice to discuss services, improvements and express concerns. However, he expressed concern that some GP practices did not have a PPG.

Jackie Owen commented that in order for a PPG to be established, it required the support from both GPs and the CCG, however she was keen on advocating PPGs.

A Member highlighted the issue that support for young people with learning difficulties was reducing with current cuts to funding. He was of the opinion that cuts in funding could lead to problems in the long term and investment for the future was needed.

In response to questions raised by a Member, Jackie Owen commented that Healthwatch had planned to undertake a visit with carers in order to try and establish what issues carers had with the assessment procedure. She also advised that Wolverhampton Hospitals NHS Trust remained under Staffordshire Healthwatch.

7. Task and Finish Group – Impact of Hot Food Takeaways Notes and Final Report of Hot Food Takeaways Task and Finish Group

Consideration was given to the Report and Notes (4 June, 2018) of the Hot Food Takeaways Task and Finish Group (Item 6.1 – 6.7 of the Official Minutes of the Council).

The Food Safety and Licensing Manager presented the report to Members and reported on the work undertaken by the Task and Finish Group who considered ways of how the Council and partners could influence and limit the impact of hot food takeaways on local health outcomes.

He referred to the recommendations contained within the report and advised that recommendation 2.5 should read 'That Cabinet at a future meeting' and not 'That Council, at its meeting on 27 July'.

Members discussed the use of planning powers, takeaway food outlets being within very close proximity to each other and how planning could influence this with more control being given to Local Authorities. They also discussed portion sizes and how education towards food could have a positive effect on both families and young children.

The Staffordshire County Councillor commented that cooking sessions for families would be held throughout August at the Rugeley Community Church.

RESOLVED:

- (A) That the Committee notes the content of the report;
- (B) That the Committee would identify an appropriate mechanism to ensure the findings are used to contribute to the current Corporate Plan 2018-23, in particular in relation to development, with partners, of a strategy on healthier food choices.
- (C) That the Committee notes that officers will work with partner agencies to develop and present to the Committee a data set which will give insight into the local make up of take away premises, the "healthiness" of foods sold and levels of obesity in the localities.

- (D) That the Committee would engage in the forthcoming consultation on the Local Plan, and submit a response requesting consideration be given both to strengthening the health policy within the Plan and the option of including a Supplementary Planning Document in respect of takeaways;
- (E) That the Committee recommends that Cabinet, at a future meeting, instructs Officers to write to the Secretary of State for Health and Secretary of State for Housing, Communities and Local Government expressing concern over the lack of powers available to local authorities to control the local health impact of take away premises. In particular powers to control total numbers, locations and “clustering” of outlets selling cheap, unhealthy food; powers to limit local advertising and promotion of unhealthy foods; powers to require clearer consumer information on the salt, fat and sugar content of takeaway meals.

8. Update - Staffordshire County Council’s Healthy Staffordshire Select Committee

The Staffordshire County Councillor circulated the following update:

‘Healthy Staffordshire Select Committee - 11 June 2018

The Healthy Staffordshire Select Committee met on Monday 11 June 2018 when they considered an update on progress in relation to Staffordshire and Stoke-on-Trent Sustainability and Transformation Partnership (STP) and a detailed report on the STP work stream - Urgent and Emergency Care.

The STP presented their update paper on progress to date and detailed the priorities, the engagement and consultation process and timetable, Members of the Committee put questions to the STP representatives on a range of issues including work force, opportunities for digital, community provision, the extent of the consultation, the scale of financial deficit and the progress of the early adopters.

The STP Commissioning and Clinical Leads presented their report and presentation on the Urgent and Emergency Care work stream. They detailed the Programme overview, the targets which had been set, the risks and mitigation, the workforce implications and winter planning. Members of the Committee put questions to the leads querying the work stream, especially the implications for the workforce, when winter planning would commence and its delivery plan and the role of the ambulance service.

The STP agreed to provide further responses on a number of issues raised, in particular the financial deficit and the delivery plan for winter planning.

County Council Members Workshop – South Staffordshire Community Hospital Provision - 20 June 2018

Members attended a workshop on the 20 June 2018 to consider the Community Hospital provision in the south of the County. A presentation was given by Marcus Warnes, Accountable Officer – Staffordshire Clinical Commissioning Groups in which he stated that the of the workshop was to understand how the

redesign of the Community Hospitals in South Staffordshire fits into the overarching STP, to discuss the options that are currently being considered in line with the top 10 deliverables agreed through the STP aligned to D2A, Urgent Care, Planned Care and EPCC and to understand the steps we must go through next in relation to consultation and how this will be approached. He further detailed the Community Beds and benefits in relation to the Discharge to Assess programme, the Urgent Care Offer and Integrated Care Teams and links to the Community Hospital's.

Members were advised that it was not the intention to close any beds in the south of the County. Members raised a number of issues in particular, progress with the Integrated Care Team, the utilisation of the estate, issues in relation to Mental Health, work force skills and recruitment, the Burton and Derby merger, the locality hubs and the financial position'.

9. Wellbeing Scrutiny Committee Work Programme 2018-19

Consideration was given to the Report of the Head of Environment and Healthy Lifestyles (Item 7.1 – 7.5 of the Official Minutes of the Council).

The Head of Environment and Healthy Lifestyles referred to Appendix 1 and discussed the work programme for the forthcoming year, and outlined the following suggested topics for review:

- Urban Forestry Strategy 2018-2023
- Revenues and Benefits Performance
 - a. Council Tax Collection
 - b. Business Rates Collection
 - c. Benefit Processing Times
- Obesity in the District and actions to address – Public Health
- Review of Taxi and Private Hire Licensing Policy

This was then open to discussion from Members of the Committee.

Review of Taxi and Private Hire Licensing Policy

Members of the Committee discussed this and queried whether or not the Policy should be reviewed through the Licensing and Public Protection Committee.

Hospitals – Bed Blocking

Members discussed separately whether this item should form part of the work programme for the forthcoming year, due to the issues surrounding the failure of care packages which was making the issue surrounding bed blocking worse.

The Staffordshire County Councillor commented that work surrounding care plans was taking place, although he felt that bed blocking was not on the increase. He suggested that he could bring some information back to the Committee on this issue.

Obesity in the District and actions to address – Public Health
Vulnerable People and Accessibility

Members of the Committee discussed this and agreed that this topic should form part of the work programme for the forthcoming year together with support for vulnerable people and accessibility.

Members discussed the various aspects associated with the vulnerability of people and also accessibility of premises and transport, communication and the complexities associated with both areas.

Following consideration of the draft work programme for 2018-19 Members agreed that the following topics should be scoped and agreed for review at future meetings in 2018-19:

- Obesity in the District and actions to address
- Vulnerable People and Accessibility

(Councillor C.D. Smith left the meeting at this point).

RESOLVED:

(A) That the following items be approved for inclusion in the 2018-19 work programme:

- Community Wellbeing PDP Progress Report - April to September, 2018
- Community Wellbeing PDP Progress Report – October to December, 2018

(B) That the following review topics be scoped and agreed:

- Obesity in the District and actions to address
- Vulnerable People and Accessibility

CHAIRMAN

The meeting closed at 5.28 pm

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**Healthy Staffordshire Select Committee – 16 July 2018
District/Borough Digest**

Under the Health Scrutiny Code of Joint Working with District and Borough Councils, Authorities have undertaken to keep relevant Partners informed of their consideration of health matters having regard to the general working principle of co-operation and the need to ensure a co-ordinated Staffordshire approach.

Therefore, the following is a summary of the business transacted at the meeting of the Healthy Staffordshire Select Committee held on 16 July 2018 - link to Agenda and reports pack:

<http://moderngov.staffordshire.gov.uk/ieListDocuments.aspx?CId=871&MId=8813>

| Agenda Item | District(s)/Borough(s) |
|---|--|
| <p>Burton Hospital NHS Foundation Trust</p> <p>A presentation was given by the Chief Executive of the University Hospital of Derby and Burton NHS Foundation Trust. It explained the timeline of activities leading to the merger of Burton Hospital NHS Foundation Trust (BHFT) and Derby Teaching Hospitals NHS Foundation Trust (DTHFT) on the 1 July 2018. The main aims of the merger were to retain a vibrant district general hospital at Burton; to combine catchment populations which would enable the development of specialised services; deliver more care closer to home; make the best use of community hospitals; maximise benefits for patients and deliver a better care at less cost.</p> <p>The first set of services to integrate were listed as: Cardiology, Stroke, Trauma and Orthopaedic, Imaging, Renal and Cancer services. Work will continue through all services until all at both Trusts are integrated.</p> <p>The merger was expected to save in the region of £23m by 2022/23 and deliver better services for all patients. The new organisation could also take advantage of an extra £16.5m Sustainable and Transformation Funding (STF) this year which would not have been available without the merger.</p> | East Staffordshire Lichfield Tamworth South Staffordshire |

There was a debate which covered the following areas:

- How any changes in services would be communicated with the public
- Workforce recruitment and retention
- Prevention and the reduction of admissions to hospital
- Service improvement
- CQC inspection and patient safety
- Culture change and integration
- How the STPs worked across County boundaries and how this impacted on the Trust.

The Committee felt that this was an exciting but challenging time for the Trust which should bring opportunities for improvement. The Committee asked for an update on the progress of the merger in six months time.

Their next meeting will be held on Monday 23rd July 2018.

**Joint Health Scrutiny Accountability Session – 23 July 2018
District/Borough Digest**

Under the Health Scrutiny Code of Joint Working with District and Borough Councils, Authorities have undertaken to keep relevant Partners informed of their consideration of health matters having regard to the general working principle of co-operation and the need to ensure a co-ordinated Staffordshire approach.

Therefore, the following is a summary of the business transacted at the meeting of the Healthy Staffordshire Select Committee held on 23 July 2018 - link to Agenda and reports pack:

<http://modern.gov.staffordshire.gov.uk/ieListDocuments.aspx?CId=871&MId=8947>

| Agenda Item | District(s)/Borough(s) |
|---|-------------------------------|
| <p>West Midlands Ambulance Service NHS Foundation Trust</p> <p>A presentation was given by the Chief Executive Officer of the West Midlands Ambulance Service NHS Foundation Trust (WMAS) covering the issues facing the service and the performance both for the West Midlands region and specifically for Staffordshire. The Trusts Vision, Strategic Objectives, Priorities and Values were outlined. The Trust was the top performing ambulance service in the country and had the second lowest cost base. The Trust was running at 100% staffing levels with no agency staff employed. The WMAS was the only ambulance service in the country to be rated 'Outstanding' and in a report due to be published by Lord Carter later that week, they were the most productive service nationally.</p> <p>The CEO informed the Select Committee that there were no vacancies for Paramedics and the Trust had the lowest level of staff sickness in the county. The Trust was training 300 paramedics this year and 100% of the ambulances were manned with a Paramedic. Training was important to the Trust and where staff missed sessions due to long term sickness or maternity leave, this was always rescheduled on their return.</p> | All Districts and Boroughs |

The Trust continues to prepare for major incidents such as those seen at the Manchester arena or in Salisbury, but also more regional activity such as winter planning and the Community Defib Vanguard. The Trust had exceeded all the national targets with the exception of one which was missed by .08 of a minute.

The new Electronic Patient Record system was described and the link and transfer of data between the ambulance service and hospitals explained. The data collected by the paramedics can be sent to hospitals/treatment centres before patients arrive which ensured quicker and more efficient information sharing and diagnosis.

The Committee asked questions on the following points:

- Staff training
- Staff safety and precautions taken to protect staff.
- The Trusts financial position
- Dementia training and how patients were dealt with
- Community Defib Vanguard project
- Electronic records and first responders
- The Trusts leadership team and what could other organisations learn from them
- Planning for winter pressures
- Patient survival rates and how they were monitored

The Chairman thanked the Trust for attending the meeting and congratulated them for leading such a highly efficient and well performing organisation.

Their next meeting will be held on Monday 13th August 2018.

**Healthy Staffordshire Select Committee – 13 August 2018
District/Borough Digest**

Under the Health Scrutiny Code of Joint Working with District and Borough Councils, Authorities have undertaken to keep relevant Partners informed of their consideration of health matters having regard to the general working principle of co-operation and the need to ensure a co-ordinated Staffordshire approach.

Therefore, the following is a summary of the business transacted at the meeting of the Healthy Staffordshire Select Committee held on 13 August 2018 - link to Agenda and reports pack:

<http://moderngov.staffordshire.gov.uk/ieListDocuments.aspx?CId=871&MId=8814>

| Agenda Item | District(s)/Borough(s) |
|---|-----------------------------------|
| <p>Staffordshire and Stoke on Trent Sustainability and Transformation Partnership (STP) - Workforce</p> <p>The Committee received a presentation on the STP workforce and Organisational Development Teams. The workforce strategy is made up of three parts:</p> <ul style="list-style-type: none"> • The sustainability pillar which covered: recruitment; retention; improving temporary staff utilisation; and reducing agency usage. • The future workforce pillar focused on widening participation and developing new roles at all levels to improve supply of staff • Transformation of the workforce pillar covered the planning of Clinical work streams, integration of Health and Social Care and transforming Primary Care. <p>The main achievements so far which included:</p> <ul style="list-style-type: none"> • Children’s Nurse Redeployment into Practice Nurse Development programme. • A Physicians Associate (PA) Programme which provided placements for groups of PA’s within primary and secondary care. • A redeployment team which worked with all NHS partners to redeploy staff at risk of redundancy. • Apprenticeships and the aim of rotational apprentices were outlined. | <p>All Districts and Boroughs</p> |

- The Falls prevention pathway

Members asked questions on the following areas:

- Whether staff were made redundant by one organisation and then immediately employed by another which would cost the NHS a substantial amount in redundancy pay.
- Why there were so many redundancies given the number of vacant posts in the local NHS.
- How the future demand for staff had been estimated
- How jobs were advertised
- Flexible working
- How apprenticeships schemes were advertised in schools
- The impact of Brexit.

RESOLVED The Committee made the following recommendations:

- a) The East of the County and Stoke on Trent had unique challenges and services need to be tailored to their specific needs.
- b) The work stream needs to ensure that the work force is future proof and can cater for the demands of changing populations.
- c) The Committee would like to see evidence of the individual organisations being able to adapt to their individual and differing demands and issues.
- d) The Committee would like to see evidence of redundancy numbers being reduced.

Staffordshire and Stoke on Trent Sustainability and Transformation Partnership (STP) - Enhanced Primary and Community Care

The Committee received a presentation on the STP Enhanced Primary and Community Care Programme (EPCCP) which is responsible for the delivery of:

- Integrated Care Teams
- Sustainable General Practice
- Reduced variation in the use of community hospital beds
- End of life care

All Districts and Boroughs

The programme will deliver Integrated Care Teams (ICT) in 23 localities each serving a population of between 30,000 and 70,000. The ICT's will deliver GP services, Nurses, Health Care support workers, Pharmacist, Social Care, Voluntary sector, District Nursing, Community Matrons, and Community Mental Health in one locality designed around individual local demand/need. These 23 ICTs will form 8 Specialist Team Hubs covering the Stoke North, Stoke South, Newcastle, Moorlands, Stafford, Cannock, Lichfield and Tamworth and East Staffordshire areas, which will provide a range of specialist services aligned to the local population e.g. Dementia services, Cardiac rehab, Specialist nursing Home first etc.

The following points were discussed:

- How the public would know where to go when they need medical advice.
- The need for the system to work and had to be right first time.
- The significant work burden for GP's
- Winter pressures.
- A County wide flu vaccination initiative.

RESOLVED That the Committee request the following:

- a) Evidence that the STP is letting go of control to the Integrated Care Team localities to deliver services to meet their local need.
- b) That at a future meeting when this item is being considered, a practising GP be invited to attend, to offer their views on the programme
- c) Information on the public awareness campaign and how that will be delivered.

Their next meeting will be held on Monday 17 September 2018.

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**Healthy Staffordshire Select Committee – 17 September 2018
District/Borough Digest**

Under the Health Scrutiny Code of Joint Working with District and Borough Councils, Authorities have undertaken to keep relevant Partners informed of their consideration of health matters having regard to the general working principle of co-operation and the need to ensure a co-ordinated Staffordshire approach.

Therefore, the following is a summary of the business transacted at the meeting of the Healthy Staffordshire Select Committee held on 7 September 2018 - link to Agenda and reports pack:

<http://moderngov.staffordshire.gov.uk/ieListDocuments.aspx?CId=871&MId=8815>

| Agenda Item | District(s)/Borough(s) |
|---|-----------------------------------|
| <p>Staffordshire and Stoke-on-Trent Sustainability and Transformation Partnership (STP) - Planned Care</p> <p>Planned or elective care was defined as; those healthcare services which are provided on a non-urgent basis. These services may be provided by primary care, including those services provided by GP’s and other primary care contractors, community services (Tier 3) and services that are provided by hospitals (Tier 4). The vision for elective care was “To deliver efficient, high quality and effective services safely in the right setting, at the right time and with the right professional”. The plan for implementing the vision was split into four areas; 7 day elective centres; Local outpatient and day case provision; Efficiency-specialty focus; and Consolidate diagnostics.</p> <p>The Committee raised the following questions:</p> <ol style="list-style-type: none"> 1. There was a discussion on the coordination of services and the need to stop duplication of services. There was also a lot of work taking place on commissioning of services in order to give all suppliers a level playing field. It was estimated that £60m each year went out of the NHS to private companies. 2. A question was asked on teaching hospitals and how they would be able to remain as teaching hospitals if they specialised services and couldn’t offer the wide range of experience needed for students. In response, the new way of commissioning would enable sub-contracting which would enable students to work with different providers to experience all types of procedures and care. 3. Cancer Care and how the after care and end of life services were operating given recent changes in provider. The response was that generally the care for cancer patients was much better in the North of the County with 78 targets. 4. A further question was asked on whether the Commissioning contract time line was achievable. The time line was requested. | <p>All Districts and Boroughs</p> |

5. The timescales for the voluntary sector commissioning changes was questioned.
6. There was concern that the recruitment and retention of staff was having an effect on all the services and this could lead to services being unable to deliver.
7. The Chairman expressed concern that the SRO was also the main provider of planned care which was, by and large, the only profit making area of work. There was concern that this was a conflict of interest and wondered what the incentive would there be to collaborate with other providers?
8. A Member felt that improving technology was a vital area of work. The Integrated Care and Technology Strategy being developed was requested.

RESOLVED: That the STP provide the following information to the Committee:

- a) A breakdown of the Cancer treatment targets for the whole of Staffordshire
- b) The Voluntary Sector Commissioning Contract time line and how this would be measured in terms of outcomes.
- c) Results of the Collaboration piece and evidence to substantiate it.
- d) Workforce update which would be looked at through the STP work streams
- e) integrated Care and Technology Strategy

Staffordshire and Stoke-on-Trent Sustainability and Transformation Partnership (STP) - Estates

All Districts and Boroughs

The programme was aimed at rationalising the estate through looking at community need rather than short term location of services. It should also enable self-sufficiency and resilience to grow within communities. The approach was one of prevention and wellness, building on communities, developing resilience and reducing the future costs of care with a focus on housing. This is based on the principles of the Northfields health village in Stafford. Five further schemes had been proposed throughout Staffordshire, each scheme would be bespoke to the needs and geographical circumstances of the area and population.

The Committee asked the following questions:

1. How do residents fund the social housing on the Northfields Village. The response was that each of the sites would have different housing options which could include renting, buying or social housing. The cost of the services depended on the needs of each individual and funding would depend on their personal circumstances and their health needs, with the possibility of various partners contributing.
2. How the Community is brought together and developed. They were informed that every project has a set of outcomes which it has to meet and can include things such as local transport into the hub, which can encourage wider community buy in.
3. The Committee asked if there were any figures to demonstrate a saving in the extra care budget. The PD

agreed to look into the availability of such information.

4. A Member of the Committee felt that the hub in the South Staffordshire area of the County was difficult to access as there were no public transport and relatives can't get there to visit relatives. It was felt that future developments must be in better locations. In response, the PD informed Members that work with the Local Council had taken place and the transport options would have been taken into account when a sight was taken.
5. The Chairman emphasised that in his opinion, the STP programme is a 'left ward shift' and that collaboration was essential. He felt that there was an element of the first five developments that could be seen as a distraction to the main STP business and main plan. In order to deliver what the STP is really about, it may be better to concentrate on its core business. With regard to the other 20 estate projects proposed, they were be an opportunity to embed social prescribing into the buildings, resulting in enhanced public health benefits. The time scales for the 20 was requested.
6. A question was asked about the possible resistance from GP's to moving into larger hubs. In response, work was taking place with NHS England on a solution.
7. A Member of the Committee asked, if the Voluntary sector were to pull out of the Community Care programmes, would this potentially mean the projects would fail? In response the EPL agreed that potentially they could, but the aim was to build community facilities that were resilient and supported by local people.

RESOLVED: That the STP provide the following information to the Committee:

- a) The savings to the Extra Care budget.
- b) Information requested on transport analysis for the Codsall site requested by the local member be sent directly.
- c) The timescales for the next proposed 20 estates projects.

Their next meeting will be held on Monday 29 October 2018.

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**Healthy Staffordshire Select Committee – 29 October 2018
District/Borough Digest**

Under the Health Scrutiny Code of Joint Working with District and Borough Councils, Authorities have undertaken to keep relevant Partners informed of their consideration of health matters having regard to the general working principle of co-operation and the need to ensure a co-ordinated Staffordshire approach. Therefore, the following is a summary of the business transacted at the meeting of the Healthy Staffordshire Select Committee held on 29 October 2018 - link to Agenda and reports pack:

<http://moderngov.staffordshire.gov.uk/ieListDocuments.aspx?CId=871&MId=8816>

| Agenda Item | District(s)/Borough(s) |
|---|-----------------------------------|
| <p><u>Staffordshire and Stoke on Trent Sustainability and Transformation Partnership (STP) – update on issues that have arisen from the Select Committee</u></p> <p>The Committee considered a report of the STP which summarised the work that had been conducted by the Committee whilst scrutinising the STP workstreams. The report set out the outstanding issues raised and the STPs response to questions raised which were not answered at the related meetings.</p> <p>Simon Whitehouse, STP Chief Executive and Programme Director, Sir Neil McKay, STP Chairman and Roger Wade, Medical Director attended the meeting to present the report and answer questions. They felt that the scrutiny process had helped the STP to focus on the challenges ahead in implementing the programmes.</p> <p>The following comments and questions were asked:</p> <ol style="list-style-type: none"> 1. Concern that not all GP practices accommodated Mental Health practitioners. 2. The interdependency between the different work streams is vital for the STP to achieve its objectives. 3. A Member asked a question on the STP deficit and if officers were confident that the changes and workstreams would reduce the overall deficit as originally intended. They also asked about the funding for the extra emergency beds at Royal Stoke. A workshop had been scheduled on 14 November for more detail on the budget. 4. Another member asked about the Workforce stream and what specifically were they doing to attract and retain staff. The national and local approaches where outlined. 5. A question was asked about the working relationship with other areas such as Derbyshire and Cheshire and the Committee was informed that the STP had to continually look at neighbouring partners as their services were frequently used. 6. The greatest risk under the Digital workstream was that staff feared getting it wrong and others gaining access to information they were not entitled to. | <p>All Districts and Boroughs</p> |

7. Clinical leadership is now strong enough to carry through the changes needed and relationships are now very positive.
8. The Committee felt that the Prevention agenda was not as strong as they had expected. The STP believed that the prevention workstream contained many long-term objectives which needed partnership working. However, it was important not to lose sight of the quick wins around smoking cessation, screening and reduction in the number of diabetics. Both needed to be pursued.
9. With regard to the Estates workstream, it was reported that the development of the next 20 estate projects were critical and could not be delayed. The implementation timeline would be available soon and would be shared with the Committee.

A Stoke on Trent and Staffordshire Approach to Childrens and Young Peoples Emotional Wellbeing and Mental Health 2018-2023

All Districts and Boroughs

The Committee considered the report of the Cabinet Member for Children and Young People covering the “Starting Well, Living Well, Supporting Well 2018 - 2023” Children and Adolescent Mental Health (CAMH) strategy covering Staffordshire and Stoke on Trent.

The Strategy is an Integrated approach designed to make best use of the resources available and the changes will start with the new Commissioning of low to moderate needs with one lead provider in place of the current five.

Members raised the following points:

- why was the strategy so medically based and not school or prevention based? In response to the questions it was explained that the strategy was written with all partners and that it wasn’t intended to be a medical model, but this will be looked at. The focus of the strategy was a whole systems approach which included schools and other children based service providers.
- Delivery plans would be in place to support the strategy and would be refreshed each year and were required by the CCG’s who wanted them to be specific and meet local need.
- There was a question on how waiting times could be reduced. Officers explained that the strategy would not be able to address these issues and the CCG would have to explain how this could be achieved. The strategy was about developing early intervention services which reduce demand for services later on and therefore demand for services.


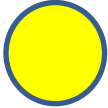


It was agreed that the strategy and direction of travel as outlined in the report be agreed in principle subject to more work taking place on the prevention agenda. The Committee noted the challenges faced in delivering the plan with partners; and the Committee asked for the following information:

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| <ul style="list-style-type: none">i. MAC budget provision.ii. Had the strategy gone through a similar process to the Joint Strategic Needs Assessment (JSNA). The figures for Tier 3 services in the report showed significant increase in 2017/18 and Members questioned these numbers. | |
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Their next meeting will be held on Monday 3 December 2018.







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**Improving Community Wellbeing PDP 2018-19 – Health and Culture and Sport
(Quarter Two - 1 July- 30 September 2018)**

| Overall Performance | | | | |
|---|---|---|---|---------------------|
|  |  |  |  | Not rated |
| Milestone completed | Milestone on target | Milestone/timeline/scope/target date requires attention. | Project aborted/closed. | Milestone not rated |
| 6 66.7% | 0 0% | 3 33.3% | 0 0% | 0 0% |

| Performance Indicators | | | | | | | |
|--|--|---------------------------|---------------|-----------|--|-----------|-----------|
| Performance Indicator | Frequency of reporting (Q or A) | Last years outturn | Target | Q1 | Q2 | Q3 | Q4 |
| Total number of people using all of our facilities | Q | 952,884 | 959,754 | 266,298 | 262,150 | | |
| Take up for the inclusive cycling pilot scheme | Q | N/A | TBC | | Scheme only started in September – no data yet available | | |

Projects and Actions

| Opportunities for healthy and active lifestyles | | | | | | | | |
|--|--|---|--|---|---|---|----|--|
| Approach | Key Project | Milestone(s) | Progress | Q1 | Q2 | Q3 | Q4 | |
| To provide a range of culture and leisure facilities that are accessible for everyone (all ages and abilities) | Development of new facilities at Chase Leisure Centre | Design Development Procurement | Outline designs and procurement approach determined. Legal documentation on track to be signed during Quarter 2 |  | | | | |
| | | Contract Award and mobilisation | Report drafted in Q2 and on track for Cabinet on 4 th October revising guarantor arrangements with IHL | |  | X | | |
| | | Phase 1 – Bowling Green conversion to studio | Phase 1 deferred until Cabinet decision in October | |  | X | | |
| | | Phase 2 – Temporary gym formation | | | | X | | |
| | | Phase 3 – Gym Refurbishment | | | | X | | |
| | | Phase 4 – Studio refurbishment | | | | | X | |
| | Continue with development of facilities at the Community Sport and Recreation Hub at the Stadium | Complete Phase 1 Works | The majority of works within Phase 1 have been completed with the exception of the entrance and fencing and CCTV connections | | |  | | |
| | | Complete Gates and Fencing | Entrance gates and Fencing Completed in September | | |  | | |
| | | Official Opening | Opening held on 19 th September | | |  | | |
| | Develop the ATP at Rugeley Leisure centre to full size | Investigate funding opportunities to support the development of the ATP | | | | | X | |

| Opportunities for healthy and active lifestyles | | | | | | | | |
|---|--|--|--|---|---|---|----|---|
| Approach | Key Project | Milestone(s) | Progress | Q1 | Q2 | Q3 | Q4 | |
| Work with out leisure partners to facilitate initiatives and projects to encourage people to participate in healthy activities | Deliver Inclusive cycling scheme pilot at the Stadium with IHL | Set up Infrastructure and container on site | Container delivered to site in September. | |  | | | |
| | | Commence cycling programmes | | | | X | | |
| | Commission a review to understand why people don't participate in healthy activities and how we can encourage them to do so | Explore the options to undertake this review | | | | | | X |
| | | Produce Playing Pitch, Indoor and Outdoor facilities strategy and Open Space Strategy | Gather supply and demand information for Winter and Summer sports | Information gathered for winter and Summer Sports | |  | | |
| | Assess Information and Finalise Assessment Report | Finalise Assessment Report | Draft information produced and final assessments being validated | |  | | | |
| | | Develop and Finalise Strategy | | | | | X | |
| With partners we will encourage and support residents in taking responsibility for their food choices and dietary behaviours | Develop a strategy to make it easier for residents to make healthy food choices when eating out and when buying, cooking and eating food at home | Identify Project Team, key partners and Produce PID for sign off; | Project team meeting scheduled 8 October. PID to be produced by end of Q3. | |  | X | | |
| | | Using current research, best practice and local insight, identify key settings and potential areas of influence; | | | | | | X |



WELLBEING SCRUTINY COMMITTEE REVIEW

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| REVIEW TITLE |
| Obesity in the District and actions taken to address it |
| SCOPE OF THE REVIEW / TERMS OF REFERENCE |
| <p>Members of the Wellbeing Scrutiny Committee wish to examine the following questions in the 2018/19 Municipal Year:</p> <ol style="list-style-type: none"> 1. What is the scale of obesity in Cannock Chase? 2. What actions are partners taking in Cannock Chase to address this issue and how are they monitored and how effective are they? 3. Are there any issues that the District Council need to consider to support existing and future action on obesity in the District? |
| REASON FOR SCRUTINY |
| <p>Members of the Committee debated the issue at the meeting on 3 July 2018 and determined that this is an important issue for the District. The Committee requested that a scope be drafted for consideration at the November meeting. The Committee can ask questions, ask partner organisations for evidence and views and can make recommendations.</p> |
| MEMBERSHIP OF THE REVIEW GROUP |
| <p>The whole Committee will be involved but there may be a need to establish a smaller sub group of the Committee as necessary.</p> |
| KEY TASKS / REVIEW PLAN |
| <p>The initial key task is to understand the scale of the issue in Cannock Chase District and a presentation will be provided to the Committee on the levels of obesity in the District. At future meetings representatives from Public Health and other partners will be invited to present and to answer any questions on what actions or initiatives are being undertaken to address it. Once the scale of the issue is understood, the Committee will make further decisions about the Review Plan.</p> |
| SOURCES OF EVIDENCE |
| <ul style="list-style-type: none"> - Key literature on obesity will be identified and circulated to all Committee Members to read as background. - District Needs Analysis 2018 - National and local statistics - National and local Action Plans |
| TIMESCALE |
| <p>The 2018/19 municipal year – review to be completed by May 2019. The review will form the Annual Report of the Wellbeing Scrutiny Committee to Council.</p> |