

JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE

10 MARCH 2022

CHAIR'S REPORT

REPORT BY CLLR JANE HANNA, COMMITTEE CHAIR

RECOMMENDATION

The Committee is RECOMMENDED to

- a) Note the report;
- b) Agree the actions within.

Cancellation of 3 February (& Cancellation of 7 April) and Creation of 10 March and 10th May Meeting

The Committee is aware our meeting on 3 Feb was cancelled following me receiving reports of unprecedented pressures on NHS and OCC colleagues since the Omicron, having received a request for cancellation and after consultation with the Vice-Chair. We have our meetings scheduled for 10 March, 10 May, and June.

Scrutiny between meetings on the system response: Omicron

Partner organisations were invited to share details of these unprecedented pressures in their papers to the committee in relevant items but were already briefed on 22nd January following an information request I made on 13th December about emergency planning in Oxfordshire due to NHS partners working under a Level 4 direction. This meant that NHS partners are not able to support provision of information on emergency planning decisions; risk assessment including workforce resilience. Communications were under an NHS England National Command and Control response to support the NHS.

We were informed that national decisions to prioritise vaccination over routine work required the pausing of all non-priority work and redeployment of staff (clinical and non-clinical) into the vaccine programme. There were a series of national directives which included requirements for expedited numbers of people discharged from hospitals and some changes to reporting of performance measures.

In response to a request for an update on the workforce issue highlighted in previous meetings including November HOSC in particular funding for social care to be enabled to support reducing NHS pressures the committee was informed that Oxfordshire County Council was in discussion with central government regarding additional Local Authority funding.

In response to an inquiry about outbreaks at schools we were informed that school attendance in Oxfordshire had been above the national average for all groups through

the pandemic. Weekly meetings were held with head teachers with the meeting on 14th December attended by 185 heads. The Department of Education provided CO2 monitors (one for every two classrooms) and has a national procurement programme for air particle filtration with guidance on how to use and how to purchase an air cleaning kit. Opening windows and doors remained the key mitigation during this phase of the pandemic. A question relating to the planning of builds to consider ventilation for public health (similar in the 1960's for TB) was to be taken up by Oxfordshire County Council with the next meeting with the Department of Education. Guidance and policies to schools remained a national decision. The role of the Council has been to feedback daily on the pressures and challenges in schools in managing the pandemic.

I corresponded with and met twice with the Director of Public Health and once with the Director of Public Health and the Director of Oxfordshire County Council Communications. Whilst through the pandemic national decisions and messaging have guided all communications with stakeholders and the public, we discussed local communications in Oxfordshire going forward.

Members will be aware that the Director of Public Health launched a public health campaign – Be Considerate; Be Aware; Be Cautious. Information is on the website and the Director of Public Health has promoted this campaign so far with a strong video on social media.

I have been contacted by many residents including young people on transplant waiting lists and with cancer and other conditions as well as those with long COVID who are relying on this campaign influencing public behaviour and mitigating risks in the absence of any national support to those who are asked not to spread the virus in multiple community settings. They remain very concerned that numbers of people in hospital with COVID remains high (75 people – 22nd February 2022) especially when they have not been able to view data on hospital admissions and deaths in relation to people who have been vaccinated.

Action: Members are invited to consider how best this campaign can be supported by the committee as all restrictions are lifted.

Meeting with system partners - 13th December Briefing

Members of the Committee met for a briefing on the ICS and requested a copy of the draft constitution. We were assured this would be placed in the public domain. I subsequently requested that there can be clarity on which parts of the constitution are nationally mandated and which are open to requests for amendment. I have highlighted areas for example concerning access to meetings for the public (virtual participation) and clarification of public interest reasons for meetings held in private.

Action: I encourage members to read the constitution and consider any recommendations from HOSC.

Officer Support

We welcomed Helen Mitchell as the interim Health Scrutiny Officer from 11 Jan. Whilst this was later than I hoped for, the recruitment of a dedicated health scrutiny officer is significant progress for the reasons outlined in my November report and achieved

before the administration's first budget. I met with Anita Bradley who has confirmed plans for the recruitment of a permanent scrutiny officer for JHOSC. From w/c 21 February has also shared her time across the People Scrutiny Committee because of needs across the democratic scrutiny function.

SCAS

[South Central Ambulance Service NHS Foundation Trust NewApproachFocused Report \(CommunityHealth Provider Oct 2017\)_INS2-11990124241 \(cqc.org.uk\)](#)

I was advised by the Interim CEO of Oxfordshire County Council of a recent, targeted inspection into Safeguarding at South Central Ambulance Service NHS FT. Members will know that the Trust covers a large geographical area (Bucks, Berks, Hampshire, and Oxfordshire) and has its corporate HQ in Bicester. I followed this up with a conversation with the CQC inspector who shared with me that they had issued the Trust with a 'letter of intent' to make improvements. The response from SCAS is appended to this report at **Appendix 1**.

Action - I encourage Members to review the report and the response.

Healthwatch

I met with Rosalind Pearce on 3 February to have an informal catch up on health issues. We discussed the Health and Care Bill and its implications for Oxfordshire, the promotion of a short video on the experiences of Black women in maternity care and the pressures on accessing NHS dentistry.

Those issues are incorporated into the agenda today and to place dentistry into the Committee's long list for work programme items for next municipal year.

Oxfordshire CCG

I met with Diane Hedges in respect of preparing for this Committee, with specific reference to the paper on ICS/ICB, access and waiting times and CAMHS/emotional health and wellbeing of young people and engagement on the ICS draft constitution.

CEO of Oxfordshire MIND

I met with Dan Knowles in preparation for the Committee with specific reference to the mental health service offer and the role of the VCS in mental health service delivery.

Chair of the Local Medical Committee

Introductory meeting with Dr Nijjer and opportunity to share perspective on the access and waiting times item at the March meeting.

Visit to Wantage Hospital - 4 May 2022

Members will have received an email on 22 February asking for their availability to undertake a site visit and Q&A with colleagues at Oxford Health NHS FT. Members of

the Committee should get in touch with Helen to confirm their attendance and to expect information on the visit's objectives and any infection control measures in advance.

Members must note that this visit will take place in the pre-election period and will comply with the spirit of relevant guidance in that regard.

Co-opted Members

It's been brought to my attention that the terms of some of our existing co-opted members require renewal (in the case of Mrs Shaw) and in the case of Dr Cohen, who will come to the end of his term in August, we need to move to external advertisement. Given the length of today's agenda I have deferred a substantive item on this until the next meeting and will have conversations with co-opted members in due course.

Update on BOB HOSC

It is understood that all relevant authorities across the BOB area are at different stages in respect of appointing to the Joint Committee – Oxfordshire is yet to appoint but the planning assumption is that this will be undertaken at the Council's AGM.

To remind Members, the Terms of Reference clearly state that the Committee should be used during the substantial development /substantial variation stage of any changes proposed at **system** level.

Changes at place and neighbourhood level will be, and continue to be, scrutinised at Oxfordshire level.

I have discussed a variety of risks with Helen including the risk of lack of readiness of a BOB HOSC and also the lack of clarity on the 80/20 split between place and system that was first briefed to the JHOSC in 2020/2021. Helen will be leading on an early draft of guidance on this with BOB NHS and LA scrutiny partners (of which Oxfordshire is a partner). We have also discussed that it is essential that changes that significantly impact Oxfordshire residents are scrutinised by JHOSC especially if there are barriers in operationalising BOB HOSC to be ready for scrutiny in a timely way.

I am confident that Committee Members will support this approach wholeheartedly.

The backdrop is that our local NHS is in a challenged position - CCGs are being dissolved and staff moves are taking place, the relevant Act is yet to be commenced, we may see a shift to the O&S regulations in respect of service change and a programme of change at system level is yet to be established (if it is needed at all). To that end, I am working on the planning assumption that this Committee will not need to meet until the new municipal year. Helen Mitchell has emailed Dr James Kent, the BOB ICS CEO Designate for further information that will either confirm that assumption or dispel it and require us to appoint at Council in April.

I would like to however place on record that I think it essential that within the first few weeks of the new municipal year, the appointed members to that Committee should meet to receive some initial health landscape training and to understand the plans for any system change over the course of the year to inform proper planning and the provision and coordination of officer support.

Pharmacy Provision in Oxford City

The Committee discussed this at our last meeting and I asked Helen Mitchell to follow up with contacts provided by the CCG following the action from the last meeting. A letter from Oxfordshire CCG is enclosed at **Appendix 2** to add explanation and Helen met with NHS England and Improvement Pharmacy colleagues on 23 February to understand additional detail. In summary, I understand that an unfortunate collection of issues has come together to create a situation in which a pharmacy has closed and no immediate plans appeared to be in place to resolve this. I have received assurances that the Pharmaceutical Needs Assessment (PNA) will be considered at Health and Wellbeing Board in March (this has been delayed for a year owing to Covid) and that it is to be recommended that 'improvement and better access' to pharmacy services in Oxford City is needed. Once published, this will trigger the formal application process for persons to offer pharmacy services in line with the need expressed in the PNA. I trust that closes the matter for the Committee and we look forward to seeing proper provision in Oxford City.

Audiology Update

The Committee discussed this, also known as the Ear Wax Service, at its last meeting. A paper is enclosed by way of background at **Appendix 3**. We have received the update enclosed which shares the decision making around the audiology contract which shows that a clinically improved and clearly commissioned service has now been arrived at and has been in operation since December 2021. The Chair understands that there was a meeting with stakeholders and that there is an intention for a review meeting during 2022.

Horton HOSC

I was advised that officers have worked to schedule a meeting date that would work in principal for the two, non-Oxfordshire County Councils (West Northants and Warwickshire CC) who are required to secure a quorum (as this prevented a meeting going ahead in October) but that a date that was available in March which the County Council could support is not an available date for OUH.

Future Agendas and Work Programme

To remind Members, we had an extensive process which informed selected topics for the Work programming agenda item in November.

I have discussed with Helen Mitchell and for our next meeting in May, the draft agenda will feature: -

- Waiting lists and access to services (with a specific focus on primary care);
- Women's Health and Maternity Services;
- Covid recovery, inc. lessons learned
- Updates on the development of the ICS and a legislative/policy update and impact assessment on the Health and Care Bill and any other relevant reports.

In line with the paper submitted on Community Strategy, and subject to the Committee's discussions on 10 March, I wish to propose that the Committee receive an update on Community Strategy at its June meeting, in line with engagement phase

1. Members will note the tour of Wantage Hospital will be of significant value to our collective understanding of the emerging Community Strategy.

Regarding the full year schedule of meetings, I would suggest an online virtual meeting before the May meeting so we can consider scheduling of other priorities including palliative care and dentistry for scrutiny during 2022/2023. I would wish for NHS colleagues to provide feedback before our virtual meeting to see whether there are opportunities to time any particular reviews or suggest other topics that the Committee may wish to consider so to add value.

Action:

The committee agree the May agenda;

The Committee recognises the phasing of engagement for the Community Strategy;

The Committee meet virtually before the next meeting to consider proposals in May for the full work programme for 2022/23.