

Minutes of the Meeting of the Health and Wellbeing Overview and Scrutiny Committee held on 9 March 2023 at 7.00 pm

Present: Councillors Shane Ralph (Chair), Terry Piccolo (Vice-Chair), Georgette Polley, Jane Potheary, Sue Sammons and Deborah Arnold

In attendance: Katie Arnold, Mid and South Essex NHS Foundation Trust
Les Billingham, Interim Director Adult Social Care
Louise Brosnan, Service Manager, Contracts and Brokerage
Tiffany Hemming, NHS Basildon and Brentwood CCG
Catherine Wilson, Strategic Lead Commissioning and Procurement
Rhiannon Whiteley, Senior Democratic Services Officer

Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website. The Chair confirmed that Councillor Fish and Georgina Bonsu were in attendance remotely.

44. Minutes

The minutes of the Health and Wellbeing Overview and Scrutiny Committee meeting held on 12 January 2023 were approved as a correct record.

45. Urgent Items

There were no urgent items.

46. Declarations of Interests

No interests were declared.

47. HealthWatch

No issues were raised by Healthwatch under this item.

48. Integrated Medical Centres Update - PowerPoint

Tiffany Hemming provided the Committee with an update on the IMC's. She confirmed the two updated business cases for Purfleet and Tilbury are still with NHSE. They are still progressing with the development of the Gray's outline business case. They are also working on returning services that were relocated from Basildon hospital to Orsett hospital during the pandemic. Tiffany Hemming further updated the Committee that the Corringham IMC has started its Obesity service. A respiratory hub has also been running over the winter period and she commented that both of these services were good news for the local population. The GP Fellowes continues to successfully recruit

although it is a very slow process. GP's continue to show interest in joining and some have now started. Five GP Practices have been successfully bid for by a provider called Spirit Health and they will be taking them over in the coming months with a view to improving the service provided.

Councillor Potheary expressed disappointment that there is still no feedback on the business cases which have been with NHSE for some time now. She was also disappointed that the GP Fellowes was not moving at the pace she had hoped for. She queried what is being done to ensure interest is actually translating into more GP's in Thurrock. She also questioned which specific services will be moving from Orsett Hospital back to Basildon.

Tiffany Hemming clarified that a huge amount of work is ongoing regarding the GP Fellowes. Purpose built adverts have been created with individual testimonials from GP's working in Thurrock. They are speaking with GP's that are about to finish their training and persuading them to come to Thurrock to work. Some spots that are earmarked are for people who haven't finished their training yet so they cannot progress yet. They have focused on making the job offer as attractive as possible and Fellowes means they come to learn more in their specialist area as well as being a GP. She reassured the Committee that she is of the view that they will secure the 12 GP Fellowes. She also confirmed that the two services returning to Basildon Hospital from Orsett Hospital are Clinical Haematology and Rheumatology Infusions.

Councillor Potheary queried when the 12 GP Fellowes will be in place.

Tiffany Hemming stated that she wouldn't like to speculate.

The Chair asked how many GP Fellowes are working in the Corringham IMC today.

Tiffany Hemming responded that she was unable to answer this question. She clarified that they work out of Corringham IMC as a base and therefore may provide services at different locations. She stated that she will come back to the Chair with exact numbers.

The Director of Adult Social Care and Community Development confirmed that he thought there was 3 in post but that might not be correct.

Councillor Ralph raised that it has been 9 months since the outline business case was put out for the other IMC's, he queried if they are looking at a plan B Tiffany hemming responded that they have started some contingency planning looking at the outcomes they seek to achieve.

The Chair raised the parking situation at Corringham IMC as residents have complained about this.

Tiffany Hemming highlighted that the recommendation to staff is that they park in the two local car parks which are the one behind Morrisons and the one behind the shopping arcade.

49. Develop a single operating model for pathology services in mid and south Essex - PowerPoint

Katie Arnold provided a PowerPoint presentation to the Committee on Pathology Services which can be found on the following link:

[\(Public Pack\)Pathology Services Presentation Agenda Supplement for Health and Wellbeing Overview and Scrutiny Committee, 09/03/2023 19:00 \(thurrock.gov.uk\)](#)

Katie Arnold explained that the Mid and South Essex NHS Trust has made a commitment to establish a single integrated pathology service model. Currently, Basildon and Southend Hospital use Pathology First and there is an in-house service at Broomfield Hospital. External consultants are of the view that an integrated service will provide a better service to patients. It will change and simplify laboratory processes. It will not change access for patients and blood tests can still be obtained from a variety of locations. They are currently engaging with stakeholders. The intention is for a full business case to be taken to the Trust Board for approval by late Spring. If approved, a competitive market engagement process will be launched in June 2023, with the aim of completing this by Spring 2024. The aim will be to move to a new integrated service by the end of 2024. The procurement process aligns with the expiry of the contract with Pathology First which comes to an end in 2024. The presentation was paused to allow for questions on Pathology services.

The Chair raised concern that if there was a problem at the one laboratory this could have problems for the whole of Essex.

Councillor Polley highlighted that she was very grateful that blood testing services had returned to South Ockendon and especially to Stephen Porter for making that happen. Councillor Polley noted that it was quite complicated to make an appointment for a blood test and when she had tried to book an appointment at South Ockendon this doesn't come up as an option via Swift Queue.

Katie Arnold responded that the online booking system for blood tests is swift queue. Feedback has generally been positive about Swift Queue. However, when they started the phlebotomy service at Corringham, residents were finding it hard to find the location. This was fed back to pathology first and they corrected it. Katie Arnold stated that she will feed back to Pathology First the issues surrounding the South Ockendon option not showing on the website. They will also update their information about where you can get a blood test. The Thurrock Community Diagnostic Centre will also be offering phlebotomy services when it opens in Spring 2024. Thurrock Community Hospital does offer walk-in appointments too.

Councillor Sammons echoed Councillor Polley's comments and she highlighted that she also did not find Swift Queue very efficient and the

appointments offered were very delayed. It was easier to just drive to Thurrock Community hospital and use the walk-in service.

Councillor Potheary highlighted that when she used Swift Queue the Thurrock locations seemed to be listed under Basildon which might be causing the problems. A separate Thurrock section would be much easier to use.

Katie Arnold agreed to feed back Councillor Potheary's comments.

Katie Arnold continued with the presentation on Community Diagnostic Centres (CDC's). CDC's are new one-stop shops for checks, tests and scans in the heart of communities to increase capacity and make services more accessible and convenient for patients. Public engagement has taken place and useful feedback has been received. The main themes were around requests for more early and late appointments and weekend appointments. Patients wanted to keep telephone booking as well as online apps, waiting times for diagnostic tests too long and Car parking. The feedback revealed that 75 % of patients travelled to appointments by car. The feedback will now be used in service designs. Katie Arnold thanked Thurrock Healthwatch who have assisted them with the public engagement exercise. Business cases have been developed for 3 CDC's in mid and South Essex. One CDC will be located in Thurrock, one in Braintree and the third will be for the largest CDC which is planned for Pitsea. It is hoped a funding decision for this will be made this Spring. In the Pitsea location there will be endoscopy which will be the closest place to offer endoscopy for Thurrock residents. Appointments will be offered 7 days a week and for some services will run from 8.00am – 8.00pm. Katie Arnold explained that it is planned for the Thurrock CDC to be situated where the Alistair Farquharson building is currently. A planning application has been submitted and a decision is expected in late April. It will be part refurbishment and part new-build extension. The aim is to have the centre open by Spring 2024 and to start construction work in late May.

The Chair commented that this is going to bring so much to Thurrock but he stated that he does worry about the parking and the traffic as it is in the middle of a housing estate.

Katie Arnold responded that they have consulted with the design team and car parking improvements will be made to the site. They have calculated the amount of extra staff and patients on site and are confident there will be sufficient parking on site. There is a plan to widen the internal road on the Thurrock Community Hospital site to accommodate larger vehicles.

Councillor Potheary sought clarification on the location of the Grays IMC as it was understood this would be in the building where covid 19 vaccinations were held and this is the Alistair Farquharson building.

Katie Arnold confirmed that the CDC will be occupying the Alistair Farquharson centre and will take over all of that. The vaccination service has stopped and the building is currently empty. Other services are due to move

over from Orsett and can go into the existing buildings or a new build element which attaches on to the CDC but this is also subject to funding approval and capital being available.

Councillor Polley referred to the planning application and noted that 12 parking spaces will be lost initially and then replaced with 32 car parking spaces. She raised concern that the car parking space area is where the Committee had been told the IMC would be situated.

Councillor Polley raised whether it would be beneficial for elderly patients who fall over to be better attending the CDC rather than Basildon Hospital A & E where they are often waiting in a corridor for a long time.

Katie Arnold confirmed that the plan is for the CDC not to be used for emergencies, it will be a ring-fenced diagnostic capacity for elected patients.

The Chair echoed Councillor Polley's concerns that the CDC seems to be on the same footprint as the IMC.

Councillor Potheary queried where in Pitsea is the CDC going to be located and if it will be near the train station as Grays has good train links to Pitsea. She also queried where the current closest endoscopy service for Thurrock residents is located.

Katie Arnold confirmed that the Pitsea location is currently confidential as it has other services in there. It is in a central location in Pitsea and has been chosen because of accessibility. It has good transport links for those local in Pitsea and Basildon too. The current Endoscopy services across Mid and South Essex Trust are in Eastwood, Southend and Braintree. Thurrock residents would go to Basildon hospital currently. It is hoped the extra endoscopy capacity provided by the Pitsea CDC will shorten waiting times.

Tiffany Hemming confirmed that the two projects (CDC and IMWC) are complimentary and allow for both to be on the same footprint. The plan is to re-purpose buildings there and also build some new buildings for the IMWC.

Councillor Polley requested that costings are provided at a future meeting.

Councillor Potheary stated that when the IMWC's were first proposed supposed they were supposed to be purpose built buildings but in reality what Grays is going to get is services flung across an existing site.

Tiffany Hemming responded that internal elements of the buildings will be purpose designed for services going into them. The IMWC will be in multiple buildings adjacent to each other.

The Chair highlighted that the important thing is that the services are being provided. He stated that is not what we were promised but we just need to get these services provided in our community.

Councillor Piccolo queried why there cannot be a terminal in the surgery where the patient can following their GP appointment go out into the reception area and book their blood test straight away in the surgery.

Katie Arnold said she would look into it.

The Chair thanked Katie for the presentation.

50. Domiciliary Care and Unpaid Carer Support - to follow

The Strategic Lead for Commissioning and Procurement presented the report to the Committee. She explained that they are seeking agreement to a contract extension for Domiciliary Care, the Out of Hours Service and the Bridging Service until 31st March 2025.

In relation to Domiciliary care there are 2 reasons for requesting an extension. Firstly, there is a need to maintain a stable care market. Care providers worked exceptionally hard throughout the pandemic, and it has taken its toll. The second reason is to allow time to redesign the service. They want to work on an evaluation of the wellbeing teams and create a holistic response for people. Extending the contract for 2 years will give them time to do that.

The Strategic Lead for Commissioning and Procurement explained that the budget is there for the domiciliary care provision as all services referred to are statutory services and within the base budget there is room for a fee uplift for domiciliary care providers if that is decided. Approval of Commissioners and the S151 officer would be required for any fee uplift.

The Strategic Lead for Commissioning and Procurement highlighted that the number of carers went up significantly during the pandemic nationally and also in Thurrock. They are looking to extend the contract for the unpaid carers information advice service by 20 months so that response can continue for carers. They would also like them to complete carers assessments on behalf of the Local Authority. The extension will maintain the stability of the service.

The Chair noted that the report was very detailed. He stated that he understood the market pressures at the moment and the rationale behind the requested extension.

The Director of Adult Social Care and Community Development added that it should be added to recommendation 1.2 that as a result of advice received at informal cabinet on Monday to include after delegation of the S151 Officer and Commissioners, consultation with the Portfolio holder and Corporate Director for Adult, Housing and Health. That addition has been made to the Cabinet report.

RESOLVED:

- 1.1 That Health and Wellbeing Overview and Scrutiny Committee agree the content and approach within the report.**

1.2 That Health and Well Being Overview and Scrutiny Committee recommend to Cabinet to agree the proposals outlined within the report after delegation of the S151 Officer, Commissioners, consultation with the Portfolio holder and Corporate Director for Adult, Housing and Health.

51. Renewing Contracts with Care Home and Supported Accommodation Providers

The Service Manager for Contract Compliance and Brokerage presented the report to the Committee. She explained that Thurrock historically did not tender residential care contracts. There is a small care market in Thurrock with just 12 homes for elderly residents and 25 for working age adults. In Thurrock they contract with every care provider located within the Borough and have Local authority funded placements in each home. The current contracts expire on 31st August. The Service Manager for Contract Compliance and Brokerage confirmed they are seeking a contract period of 5 years which may, by mutual agreement, be extended for a further 24-month period, up to a maximum of 7 years. There will be a 6 months' notice period to exit this contract, if this contractual approach no longer offers value for money for the local authority the contract can be terminated and reprocedured in a different way.

Councillor Potheary thanked the Service Manager for Contract Compliance and Brokerage for the report and for explaining why tendering isn't necessarily helpful. Councillor Potheary noted 40% were placed outside of the borough and queried if there is a breakdown of that 40% in relation to choose versus necessity.

The Service Manager for Contract Compliance and Brokerage confirmed that very little of that percentage would be down to necessity as they manage vacancies well. Sometimes it's not a good idea for service users to be in Thurrock due to drug misuse and it may hinder their rehabilitation to be based in Thurrock.

Councillor Polley commended the service satisfaction levels and queried if there is any concern one provider may apply for all the care homes.

The Service Manager for Contract Compliance and Brokerage responded that it was very unlikely as almost all the care homes were individually owned. The likelihood of them all selling to one organisation would be low.

The Director of Adult Social Care and Community Development highlighted that the relationship with providers is really good, and they are trusted and trust the care homes in equal measure.

The Service Manager for Contract Compliance and Brokerage thanked Councillor Polley for her comments complimenting the carer's care towards residents and stated that she will feed this back.

Councillor Sammons queried if homes didn't win the tender would residents be expected to move.

The Service Manager for Contract Compliance and Brokerage explained that the Local Authority could only give them the rate agreed in the tender process but they couldn't restrict the choice. The Service Manager for Contract Compliance and Brokerage was of the view they would be unlikely to move residents but the rate may change for new residents.

Councillor Polley highlighted that because of the position the council is in, she wants it to be clear that they are not selling off care homes.

The Director of Adult Social Care and Community Development responded that this is about maintaining the market we have without having to involve smaller providers in a lengthy tender process.

Councillor Potheary queried recommendation 1.3.

The Service Manager for Contract Compliance and Brokerage stated that she was on leave and someone else amended the report whilst she was away and paragraph 1.3 shouldn't be in the report.

The Director of Adult Social Care and Community Development clarified that recommendation 1.3 is about agreeing an annual uplift which hasn't been published yet. It can be removed so only 1.1 and 1.2 are relevant tonight and it will be brought back to committee at a later date once the uplift is known.

RESOLVED:

- 1.1 That HOSC endorse a waiver from the constitutional requirement for competitive tendering for the provision of care home services for older people, working age adults, and supported accommodation, and approve a single sourcing arrangement for new contracts for care home and supported accommodation placements commissioned by the Council.**
- 1.2 That HOSC endorse the delegation to the S151 officer and Commissioners, in consultation with the Portfolio Holder, the authority to award contracts for care home and supported accommodation services to meet the assessed needs and preferences of older people and working age adults.**

52. Report of the Cabinet Member for Adults and Health

Councillor D Arnold explained that Thurrock has the second lowest spend on adult social care in the region. However, one third of the overall budget is spent on adult social care. 85 % of the budget is spent on just 7 % of the people living in Thurrock and that means only 15% can be spent on the remaining 93% of the population. Acute care packages are very expensive

and any reduction in service level would carry enormous risk. Thurrock transformation programme is vital to support people from developing more complex illnesses and helping people stay healthier for longer. Transformation is needed now more than ever. The development of Wellbeing teams will allow for a team of professionals to talk to each other and work off the same assessment benefitting residents from having to have assessment after assessment. Transformation will also benefit staff too, Thurrock has an ageing working population in this area and it is not necessarily a popular career route for young people. Social Work apprenticeships are being offered. Councillor D Arnold highlighted that Thurrock positively has one of the lowest staff turnover rates in Thurrock for social workers.

The Chair raised that Thurrock First can help those with mental health problems where this impacts on them in other ways such as effecting their tenancy.

Councillor D Arnold agreed they could improve the communications around Thurrock First. They can give people that immediate link into help with the wellbeing team and urgent community response teams.

The Director for Adult Social Care and Community Development explained that Thurrock first primarily is a first point of contact for those who require community care or help with mental health. GP's would probably refer those with mental health concerns into Gray's Hall in the first instance. There is nothing to stop the Council increasing the accessibility to Thurrock First. A lot of mental health condition referrals come to their attention through community work. He further explained that a multi-disciplinary approach is required and they are looking to pull together services that can deal with the complexities involved where it is not uniquely mental health or substance misuse that leads to people leading a chaotic lifestyle. Good solutions need to be found and where you live and having a stable accommodation are so important.

The Chair commented that Thurrock carers service appeared to be centralised in Grays and queried if it could be rolled out in Corringham or Tilbury.

Councillor D Arnold confirmed it is an online service too. The Local Area Coordinators pick up carers in the community. They ask people if they know anyone caring for anyone at home.

The Chair raised whether anything more could have been done by the council regarding the IMC's.

Councillor D Arnold said she had not been involved from the start and had been going round in circles trying to unpick what had happened. They need to draw a line under this and move forward. Once it is known what NHS England have got to say about the business cases, we will know more about how we can take the IMWC's forward. Councillor D Arnold highlighted that the Borough has an ageing hospital that will eventually close and services need to be relocated.

Councillor Potheary commented that this seemed like a shuffle away from the Council pushing for purpose-built buildings which is what we were promised - 4 IMWC's in the borough.

Councillor D Arnold stressed that it is her focus to get those IMWC's into the borough and to attract GP's. She explained that the most important thing over bricks in a building is improving healthcare and outcomes for residents and protecting services. She stated that she cannot see it coming in within the original timescales set out.

Councillor Potheary queried proposed cuts to voluntary sector grants for Thurrock MIND and SERRIC.

Councillor D Arnold responded that it is vital that we support the right services and those that fit within our strategy. She commented that she recognises the importance of community and voluntary organisations. The situation financially may mean a shortfall financially, but they are looking at how they can support in alternative ways such as free space, or help them to find other ways to fund or jointly fund them with the NHS.

Councillor Potheary stated that it was encouraging to hear those conversations are already happening.

The meeting discussed delays in discharging people from hospital. The Director of Adult Social Care and Community Development confirmed that they previously were fined for delayed transfers of care if they didn't reach performance indicators and this was reported nationally. Since the Pandemic this has not happened. He confirmed that they are aware of how well they perform and they know how many people are delayed in hospital and share this information regionally. This could be captured in the Portfolio holder report. The medically well has shifted to medically optimised and instead of the test being, is this person fit enough to go home? It is now, does this person need to be in an acute setting? If the answer is no, they are put forward for discharge. A new performance framework will probably be brought out later this year.

Councillor Polley queried if the system is now being supported by virtual wards.

The Director of Adult Social Care and Community Development confirmed that they have kept the hospital team in place which a lot of Local Authorities haven't. They therefore have a dialogue with wards and clinicians and try and ensure for people who are ready for discharge that we are aware of what they need and that we can meet those requirements. We do get some who come out and go back in because not ready for discharge. However, it is better for everyone if they can stop people going into the hospital in the first place.

At 21.14 standing orders were raised so the meeting could continue beyond 9.30pm

Councillor Polley discussed a new project at St Luke's called WISH which is a wellbeing information and support hub when people first get diagnosed. She suggested that they should invite St Lukes into the Committee to talk about this.

Kim James confirmed that there is a commissioned service paid for by the better care fund that supports discharge from hospital. She explained that everyone 65 and over and frail will get a welfare call and 6 weeks of visits. They have got a handy man who can move beds downstairs if required. They can install key safes for carers and get equipment. They also collect food bank food for them and help get electricity and gas on. They take on over 250 referrals a month.

The Chair asked Councillor D Arnold if there is anything she could do better or focus on more.

Councillor D Arnold responded that an area she wants to gain more information on is mental health as she hasn't focussed on it much this year and she will be taking this forward next year.

53. Work Programme

The Chair commented that he would like to bring back Basildon hospital to provide an update on the CQC reports for the next meeting. He would also like to schedule an overview on Mental Health.

54. Final Market Sustainability Plan

The Strategic lead for Commissioning and Procurement presented the report. She outlined that in December 2021, the Government published a white paper, 'People at the Heart of Care' that outlined a 10-year vision for adult social care. As part of these reforms the Market Sustainability and Fair Cost of Care Fund was announced. She explained that by having such a low self-funder market and by also allowing people with capital in excess of the existing cap to access our contracts (this is not usual practice in other local authorities that have a larger self-funding population) we are not exposed to the same risks as many other local authorities.

The Local Authority need to complete a market sustainability plan (MSP). The purpose of this is to demonstrate how local markets are sustainable as we move forward with the reforms. The exercise identified positives eg quality of care provided and quality of relationship with providers. The main risk identified is the retention and recruitment of the workforce and being able to maintain a mixed size of homes. Although the reforms have been delayed until 2025, it is still a requirement to submit the final MSP to government. At the time of preparing this report the submission date has not been formally confirmed but is believed to be 31 March 2023.

Councillor Potheary just wanted an update on feedback as in the report at para 2.5 it states *'we were advised that we would receive feedback on the draft to help shape our final submission – no feedback has been received from government'*.

The Strategic lead for Commissioning and Procurement confirmed no feedback has been received as yet. The deadline also hasn't been confirmed but we are working to the 31 March 2023 deadline. They have shared the document with the eastern region and feedback from peers has been good.

The Committee went into exempt session.

RESOLVED:

- 1.1 To agree the attached Market Sustainability Plan prior to Cabinet and subsequent submission to the Department of Health and Social Care (DHSC) minus the two bullet points on page 84 of Appendix 1 as the fee has not been agreed yet.**

The meeting finished at 10.01 pm

Approved as a true and correct record

CHAIR

DATE

Any queries regarding these Minutes, please contact Democratic Services at Direct.Democracy@thurrock.gov.uk