

STAFFORDSHIRE MOORLANDS DISTRICT COUNCIL

HEALTH OVERVIEW & SCRUTINY PANEL MEETING

Minutes

TUESDAY, 22 DECEMBER 2020

PRESENT: Councillor B A Hughes (Chair)

Councillors C J S Atkins, M Bowen, M A Deaville, E Fallows, K Flunder, I Herdman, T Holmes, K Hoptroff, A Hulme, K J Jackson, J T Jones, L A Malyon, T McNicol, I Plant, T Riley, J Salt, L Swindlehurst, R Ward and N Yates

IN ATTENDANCE Dr Richard Harling – SCC Director of Health & Care
Cllr. Johnny McMahon – SCC Cabinet Member
Mr. Neil Carr O.B.E. – Chief Executive, Midlands Partnership NHS Foundation Trust
Ms. Jennie Collier – Managing Director, Midlands Partnership NHS Foundation Trust
Mr. Mark Trillo – Executive Director SMDC
Mr. Linden Vernon – Senior Officer, Governance & Member Support
Mr. Pat Trafford – Democratic Services Officer

APOLOGIES: Councillors B Cawley, D Price and P Wood

88 **NOTIFICATION OF SUBSTITUTE MEMBERS, IF ANY.**

Councillor Yates attended as substitute for Councillor Cawley, Councillor Hoptroff attended as substitute for Councillor Price, Councillor Plant attended as substitute for Councillor Wood.

89 **TO APPROVE THE MINUTES OF THE PREVIOUS MEETING.**

DECIDED – That the minutes of the meeting of the Health Overview and Scrutiny Panel held on 14 October 2020 be **APPROVED** as a correct record and signed by the Chair.

90 **MINUTES OF THE LAST MEETING OF THE HEALTHY STAFFORDSHIRE SELECT COMMITTEE.**

DECIDED – That the minutes of the meeting of the Healthy Staffordshire Select Committee held on 26 October 2020 be **NOTED**.

91 **URGENT ITEMS OF BUSINESS, IF ANY. (24 HOURS NOTICE TO BE PROVIDED TO THE CHAIRMAN).**

There were no urgent items.

92 **DECLARATION OF INTERESTS:**

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Agenda No.	Member Declaring Interest	Nature of Interest
Agenda Item 8 – Temporary closure of Leek Minor Injuries Unit	Cllr. T. Riley	“Other” – A family member is an NHS Employee

93 **COVID-19 UPDATE - DR RICHARD HARLING, DIRECTOR OF HEALTH & CARE SCC AND COUNTY COUNCILLORS MARK DEAVILLE AND JOHNNY MCMAHON. (2:05 P.M.)**

Cllr. Mark Deaville introduced the following visitors:-

Cllr. Johnny McMahon – Staffordshire County Councillor, Cabinet Member for Health, Care and Wellbeing; and
Dr. Richard Harling – Staffordshire County Council Director of Health and Care.

Cllr. Deaville confirmed that the local response to the pandemic was the best response, stressing the importance of communication via the Outbreak Control Board in both directions.

Cllr. McMahon advised that the Staffordshire Moorlands’ virus, virologists rate was currently 243 per 100,000 population, having peaked at 339 in mid November and then dipped to 192 before reaching the current level. Newcastle-under-Lyme was broadly in line, while the current Stoke-on-Trent figure was 319.

The “Hands – Face – Space” message was paramount and thanks went to communities for maintaining the message. A main concern was for the Over 85’s, with Lateral Flow Testing (LFT) being introduced in Care Homes for Patients and Staff, initially at the rate of 1 to 2 times per week increasing to daily in an effort to bring the care home rate down.

With the recent emergence of a new strain of the virus, virologists considered that the vaccine already being administered may only need to be tweaked in order to cope. The NHS had the responsibility to administer the vaccine, but SCC were able to help with locations and personnel where required.

Dr. Richard Harling gave a presentation by way of ‘Shared Screen’ with a summary as follows:-

1. New strain of the virus had emerged and was spreading rapidly in London and the South East of England;
2. Staffordshire case rates were increasing across all districts and boroughs;
3. Hospitals locally remained under pressure, around 350 beds were occupied by Covid-19 patients at UHNM;
4. Around 900 incidents were being managed countywide – these were cases, clusters and outbreaks in a range of settings;
5. Testing demand was rising as Christmas approached;
6. Asymptomatic community testing continued to be rolled out in a range of settings;
7. Vaccination had started in small numbers;
8. Staffordshire was in the ‘Very High Alert’ Tier 3;

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9. Important that everyone continued to follow the rules to minimise the spread of the virus.

Members raised queries which gained the following clarification:-

LFT tests – False negative results were given in between 23% and 50% of cases. This was explained to people at the test site. PPE was needed when visiting Care Homes even if the result was negative, though this was not compulsory. Deaville agreed to raise this point at the Outbreak Control Board meeting later the same day. No actual timescales for vaccination had been seen yet. The estimate was that, if the Astra Zeneca vaccine was approved soon, most high-risk people would be vaccinated by the end of March. However glitches in the supply chain had already been experienced.

Schools had responded magnificently. Regular briefings were held with teachers and support given where cases arose, advising who needed to self-isolate. There were currently 432 incidents being managed.

Patients with allergies were able to be vaccinated, though a longer period of observation was necessary to monitor any potential adverse reaction.

If bad weather etc prevented a patient from attending their 2nd appointment, a 2 to 3 day delay was ok. If the delay was any longer than that the patient may have to start again.

In the event of this area moving into Tier 4, travel was to be limited as much as possible. The journey itself was not the problem, but any ‘mingling’ at the destination most certainly was.

It was seen as very likely that we would go into national lockdown in the very near future.

Data collected from the testing process was improved recently over earlier in the pandemic, though no occupation information was collected.

Anecdotal evidence had been collected that people were travelling to test centres from other areas. This situation would be monitored to see if it happened at scale. The alternative was to have further I.D. checks at test centres which may deter people from attending.

Weekend test sessions were planned over the Christmas / New Year and attempts were being made to staff sessions in the evenings.

Mobile Testing Unit (MTU) locations were a closely guarded secret.

Parish Clerks would be contacted where possible when MTU's were being set up.

GP's held the clearest, most accurate information to establish who should be prioritized for vaccination.

The Chair thanked Cllr. McMahon and Dr. Harling for their attendance and for the information they had given.

94 **TEMPORARY CLOSURE OF THE LEEK MINOR INJURIES UNIT - NEIL CARR, CHIEF EXECUTIVE & JENNIE COLLIER, MANAGING DIRECTOR, MIDLANDS PARTNERSHIP NHS FOUNDATION TRUST. (2:45 P.M)**

The Chair opened the item by stating that SMDC Health Overview & Scrutiny Panel was taking the lead on scrutiny of the temporary closure of the Leek Minor Injuries Unit (MIU) only. Scrutiny on all other aspects, including anything permanent, remained under the Staffordshire County Council's Healthy Staffordshire Select Committee.

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Neil Carr O.B.E. – Chief Executive, and Jennie Collier – Managing Director of the Staffordshire and Stoke on Trent Care Group, attended the meeting from the Midlands Partnership Foundation Trust.

Neil Carr confirmed that he had the lead for Staffordshire's Covid-19 vaccination programme, with 1 box of vaccines (975) already used in the Werrington and Cheadle areas. Vaccinations in Leek and Biddulph were due to start on 13 January 2021 providing that the vaccines were available. 260 volunteer vaccinators and marshals had been recruited.

Jennie Collier clarified that the closure of Leek MIU was most definitely temporary and was entirely due to the Covid effect. A number of staff had been self-isolating at different dates, meaning that it was impossible to re-open in a safe manner. Cover was therefore consolidated to the Heywood Hospital in Burslem. There were very positive discussions taking place regarding the release of funding to re-develop the Leek Moorlands Hospital including a walk-in facility, with work due to commence in 2022.

During Member discussion, the following clarifications were given:-

1. There were no plans to change urgent care provision;
2. This was an opportunity to think about what was required in the 'Integrated Care Hub' (ICH), for which a business case would need to be developed as soon as possible, currently standing at between £12 - £15m;
3. The ICH was all about bringing physical and mental health together. Whatever services were provided would need to be done at scale;
4. The fact that moorlands residents had to travel a considerable distance was appreciated. Time and expense involved, particularly in the case of injuries, meant extra strain. However the 111 service had very experienced staff and if there was ever any doubt how to deal with a situation, always call 999;

Discussion then took place around whether there was a need for extra consultation involving district councillors and the MPFT. Cllr. Flunder proposed this but following discussion agreed to withdraw the proposal. Members agreed that this subject should be discussed again at the next meeting of the Panel.

AGREED – That the Panel write to Neil Carr requesting further clarification on what input was required from SMDC in the consideration of what was required in the Integrated Care Hub at Leek Moorlands Hospital.

95 QUESTIONS TO PORTFOLIO HOLDERS, IF ANY. (3:20 P.M)

Question received from Councillor Atkins:

1. *“What assessment has the SMDC made of the services available in Leek for those who use hearing aids in terms of regular appointments for hearing loss, essential maintenance of hearing aids and the local provision of batteries?”*

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Response:

As Staffordshire Moorlands District Council is not responsible for the delivery or oversight of this service the Council has not made such an assessment for this service. Scrutiny of this aspect of the service rests with the Healthy Staffordshire Select Committee at Staffordshire County Council. Following enquiries made with the North Staffordshire Clinical Commissioning Group I understand that, although face to face contact is being reduced where possible due to Covid-19, if people do require a face to face appointment they should get one.

Cllr. Atkins requested that a more pro-active approach should be taken by SMDC and requested that a letter be issued to the Clinical Commissioning Group.

AGREED – That the Panel write to Marcus Warnes, Accountable Officer for the North Staffordshire Clinical Commissioning Group and also Cllr. Jeremy Pert, Chair of Staffordshire County Council's Healthy Staffordshire Select Committee, asking that the free service be re-instated in Leek for hearing loss, essential hearing aid maintenance and the provision of hearing aid batteries.

96 **WORK PROGRAMME. (3:30P.M)**

DECIDED:- That the Panel's Work Programme be agreed, subject to the addition of the following item:-

Discharge from hospital late at night of vulnerable patients and those unable to self-medicate, resulting in a lack of care.

The Chair wished everyone present a merry Christmas.

The meeting closed at 4.25 pm

_____ Chairman _____ Date