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# **OVERVIEW SELECT COMMITTEE**

### 14 January 2020 at 6.00 pm

Present:

Councillors Coster (Chairman), Clayden (Vice-Chair), Bicknell, B Blanchard-Cooper, Mrs Catterson, English, Miss Rhodes, Miss Seex, Mrs Staniforth (Substitute for Bennett), Tilbrook and Mrs Worne

Councillors Mrs Cooper, Lury and Yeates were also in attendance for all or part of the meeting.

### 373. APOLOGIES

Apologies were received from Councillors, Bennett, Gregory, Huntley and Oppler

# 374. <u>DECLARATIONS OF INTEREST</u>

No declarations of interest were made.

## 375. <u>MINUTES</u>

The minutes of the Overview Select meeting held on 22 October 2019, as previously circulated, were approved by the Committee as a correct record and were signed by the Chairman.

#### 376. NHS COASTAL WEST SUSSEX CLINICAL COMMISSIONING GROUP

The Chairman welcomed the Committee, the press, members of the public and representatives from Coastal West Sussex Clinical Commissioning Group (CCG), Pennie Ford – Executive Managing Director, Sarah Henley – Director of Primary Care and Simon Clavell-Bate – Head of Estates. He reminded Committee Members that the purpose of the meeting was not to focus on individual issues, but the strategic approach and direction of the CCG.

The Executive Managing Director gave an overview of commissioning responsibilities, advising that its healthcare services were to meet the reasonable needs of the persons for whom they are responsible. She explained that from 1 April 2020 the current 3 (Coastal West Sussex, Crawley and Horsham & Mid Sussex) CCG's would merge into a single West Sussex CCG. She assured Members that this was not an unusual practice and that they would continue to work in a local way, however it was an opportunity to refresh some of their approaches. She then moved on to the Sussex Health and Care Strategic Plan that was the CCG's response to the NHS Long-Term Plan (LTP). This is a joint response and details their focus on prevention. They had worked and continue to work collaboratively with West Sussex County Council (WSCC) and Arun District Council (ADC) on how they would shape their delivery plans, she placed emphasis on the fact that this was the first stage of a 5-year journey.

The Director of Primary Care advised the Committee that several steps had been taken in response to the national shortage of GP's:

- Individual Practices have been focused on diversifying their workforce in order to meet patient clinical need
- From July 2019 new national contracts were offered to GP Practices, 100% of whom signed up
- Funding was secured to support further additional skill mixes, such as Clinical Practitioners and Social Prescribers

The Head of Estates outlined to the Committee how the CCG intended to provide for the increasing population within the Arun District, and confirmed that the CCG had supported a number of minor improvement grants at Park Surgery in Littlehampton, including two extensions that were completed in October 2016 and June 2019, that had enabled the practice to provide additional NHS services. He also advised that there would be no new provision for the development in North Littlehampton, as the combined new population was not sufficient to justify either full or part time facilities for primary care. Focus would therefore be put into a new 'one public estate' project, co-ordinated by WSCC, which it was intended would be part of the wider development at the old Hospital site. He then advised Members of proposals for the new facility at the Croft in Eastergate and following on from this development either to extend it further or review the Avisford Practice for Ford/Yapton. There are also proposals to extend Grove House for Pagham/Bersted and for the new Health Centre at Littlehampton to have Primary Care at its core, but also to include other Community and Mental Health services transferred from elsewhere. Angmering, Willow Green and Coppice surgeries are working on a project to facilitate health care for the planned homes in the area.

The Director of Primary Care then turned to the questions that had been asked of the CCG by the Committee prior to the meeting:

- (Q1) I understand that in previous years there have been substantial cuts to Mental Health services, especially in the more rural locations such as my ward of Arundel and Walberton. Are there any planned improvements to services in these and similar areas?
- (A1) To confirm there has been an investment in mental health care, in particular through Time To Talk. Another really good service is 'Path Finder' which facilitates those with mental health needs, helping them to find work, or make life adjustments, in addition to this there will soon be mental health liaison staff at Bognor Regis and Worthing A&E's, this role will look at both mental health issues and the wider physical wellbeing of patients. It will eventually move to a 24-hour role.
- (Q2) I know that Pepperville House has done an amazing job in the past and I hope it continues to do so. Are there plans for similar services being available to residents who live outside Littlehampton? Group therapies can have a very positive effect on people affected with some mental health illnesses but due to

location I understand that some people may miss out on that opportunity, are there plans to rectify this problem?

- (A2) We have been assured that these services will remain within the District, and this will be incorporated on any new building plans.
- (Q3) We are reminded of our ageing population and high numbers of elderly residents choosing to retire to our district. I understand that services offering support to residents who are experiencing a change in their ability to communicate, such as Aphasia (following a stroke) are very limited. Residents in our District need to travel to neighbouring Worthing to access such services. Are there any plans for offering such vital support to our residents with in our own District?
- (A3) There are two access points one operating from Worthing and one from St Richards, if a patient lives in the Arun District they will be offered one of these sites. In terms of community services, patients have a 12 month follow up process, after this period of support and review if there is a need for further therapy based on observations of the individual then this would be offered. There is currently one community speech and language centre based in Chichester, however in the future this service will also be running out of Bognor Regis.

The Chairman thanked the CCG for their presentation and opened up questions from Members of the Committee. Members asked a range of questions and answers which have been summarised below:

- Would the provision of key worker housing for NHS staff aid recruitment? Yes.
- Does the CCG have treatment restrictions that go above the National Institute for Health and Care Excellence (NICE) guidelines? We have a programme across Sussex that makes sure the services that people get are the most clinically effective, sometimes it's important that individuals are offered non-invasive options prior to moving straight to more invasive options first time round.
- GP services have been talked about in detail, however in the Arun District the average wait time is a month in comparison to the national average of 2 weeks. Are there plans to change the way the GP services are run? The GP workforce is the biggest issue and worry, not only for patients and GP's but for us also. We have to get GP practices to work together to share skills. We are listening to various groups of GPs' including our trainees who are telling us a number of reasons that they don't want to become partners at practices. We are looking into what other options there are to resolve these concerns. We can't solve GP recruitment immediately, but we can impact the skills networking which will help alleviate some of the pressure.
- Littlehampton Health Care Centre is this ever going to come to fruition or is it too large a problem? Whilst this has been an ongoing issue for 20 years and I appreciate where you are coming from, this will be

happening, we know what the GP's want to put in to the new Health Care Centre, ADC have commissioned a plan which has been reviewed and now we have a project manager in place and driving these plans forward. We are still approximately 3 years away from completion, however this is all dependant on the next stages of development taking place in a timely manner. The next stage is the development of the Business Plan.

- Social Prescribing what is this? This is where someone may be presenting themselves to a GP with non-clinical issues, however once the GP has assessed them, they would refer them to the Social Prescriber who will provide help, support and guidance to individuals until such time that the individual is no longer in need of support. This service is new and has only been running for about 9 months, but it has been very well received.
- Will Occupational Therapy (OT) in Children Services be going into GP practices in the future? OT is not part of the 5-year LTP, but it has been included as part of the preventative support that we will be focusing on in the future. One of the areas we will also be focusing on is helping people within their own home (Physio and OT), this will be through our integrated teams across our networks.
- Bognor Regis Health Centre, you say you can't do any building yourself, does this mean the builder has to do the work within the S106 agreement and what is the life-span of the building? As a commissioner we are not allowed to own or build any assets. The Bognor Regis Health Centre is not in scope for any building work, however the practice is stable and running well and the GP's like its location in particular. The Health Centre can be improved, and we will be looking to complete improvements that future proof the building. In terms of the life-span of the building, I would need to come back to you on that answer as we only lease the property.
- Medical Wastage, what are the CCG doing to reduce medical wastage for medicines, rather than just throwing them away when tablets are not used? Legally this waste has to be destroyed, what we can do is focus on stopping people stockpiling, however this process does rely on not just pharmacies and GPs but also heavily on individuals.
- The new Health Centre is it proposed to be put on the old hospital site? It is proposed to be situated within that plot of land, the exact location is currently being reviewed by the project lead. Drop in clinics will form part of the services from this location. There will be no A&E facilities returning to Littlehampton, the key driver for this is Health & Safety. A&E services should be centralised to provide better access for a larger number of injuries/medical issues and for medical staff to develop a wider range of skills. We also have a number of urgent treatment centres outside of A&E departments, these have bookable appointments via 111 services. Although this is a relatively new service that is under review, we are seeing positive results from this including improved access to GP's.
- Better consideration to be given to physical accessibility to all new builds or extensions

With permission of the Committee the Chairman then invited Leader of the Council, Councillor Dr Walsh to speak, who then made a statement a summary of the points he raised are below:

- Over the last 20 years he had seen 3 different sets of plans for replacement buildings at the old Hospital site, however nothing has ever moved forward, he requested a timeline for delivery on this site
- The increase in population for the District requires new medical facilities quickly, these have been promised multiple times, and nothing has materialised
- What is the timeline for delivery on the new primary care centre in Littlehampton?
- Is Pepperville House going to be replaced?
- The need to know the planned delivery of new services are vital prior to further large developments being built in Angmering, Bognor and Yapton. A review on development plans for these services every 6 months was requested.

The Head of Estates responded to the points raised by Councillor Dr Walsh, he clarified that the services run from Pepperville House will continue, however they would not be run from Pepperville House due to the short time left on the lease. He advised the Committee that he understood the frustration at the lack of progress on past promises, there had been a lot of different components that had not been able to be executed for various reasons He assured the Committee that a number of issues were now coming together at the same time which would allow the project to move forward and that this was being managed well by the Project Lead at WSCC.. He also advised that 6 monthly updates were given to WSCC which Dr Walsh was privy to as a County Councillor.

The Chairman requested that Arun District Council also be kept informed of these updates.

The Chairman then invited questions from the public gallery a summary of points raised is below:

- The availability of services for people with dementia and Alzheimer's and their Carers and support for disabled children
- What provisions are being put in place to ensure that given the planned housing in the District that all new residents will be able to register with a GP

The Chairman thanked the representatives from the CCG, members and the public for their attendance and closed the meeting.