MINUTES

HEALTH IN DACORUM

29 JANUARY 2020

Councillors: Beauchamp

Bhinder (Vice-Chairman) Durrant

Guest (Chairman) Hollinghurst Johnson Sinha Tindall

Officers: Marie Sells PA to the Leader and Conservative Group

Also in Attendance:

David Evans Director of Commissioning HVCCG
Michelle Campbell Assistant Director of Primary Care CCG

Avni Shah Director of Commissioning Kevin Minier Chair, Dacorum Patients Group

Edie Glatter Dacorum Patients Group

Dr T Fernandes Herts Valley Clinical Commissioning Group

The meeting began at 7.30 pm

1 MINUTES

The minutes of the previous meeting from 03 September 2019 were agreed by the Members present and signed off by the Chair.

2 APOLOGIES FOR ABSENCE

Apologies for absence were submitted on behalf of Councillor England and Councillor Maddern.

3 DECLARATIONS OF INTEREST

Councillor Bhinder is currently working with The Hospital Group regarding some marketing material and will therefore withdraw from item 7.

4 PUBLIC PARTICIPATION

There was no public participation

5 PRIMARY CARE UPDATE

Michelle Campbell Presented an update to the group.

Since the last update in September there has been one practice merger in Berkhamsted, the Rothchild House Surgery have now merged with the Berkhamsted Group effective form January 1st, they are now the largest GP practice within Dacorum and Across the CCG.

The benefits of the merger has enabled the Berkhamsted practice to become more resilient, patients have a wider selection of services to access at different sites.

In-hours additional capacity appointments have been commissioned, these can be accessed with either A GP or a Blended workforce (an advanced nurse practitioner / a paramedic / a pharmacist). The scheme started on October 1st and will run right through until March 31st to cover the entire winter period. To date an additional 16.5 thousand appointments have been offered across the CCG.

From December there were also some additional protected appointments specifically for paediatrics, these are mainly before / after school and some lunchtime and weekend appointments.

For 19/20 there is additional funding or reimbursement if a Primary Care Network employs a Clinical Pharmacist and a Social Prescribing Link Worker. 15 out of the 16 PCNs took up the offer from the voluntary sector around employing a social prescribing link worker and to date 10 have now successfully recruited, in addition there have been 10 appointments for Pharmacist with the other 5 going through the recruitment process.

Population Health Management is a programme of work which looks at the individual population Health Data to identify areas of priority within PCNs. A support unit / Data warehouse has recently been commissioned, this will enable PCN data to be uploaded, this will enable the CCG to triangulate primary care data with acute and community services date, this will provide a clear overall picture of what is happening with the registered population and enable care providers to plan how they provided services going forward to meet the needs of their population.

A Locality transformation plan was implemented in October, the initial period has gone will and things are moving forward as expected.

Councillor Hollinghurst would like to know how the changes have effected the number of GPs over the last year and how the mergers will effect patients trying to book appointments in Tring.

Michelle Campbell explained that inevitably with mergers there potentially is a reduction in the number of partners on the contract, however in relation to the number of GPs actually working this information is outside of the CCGs remit and they do not hold this kind of data.

Dr T Fernandes is a working GP in the area and explained that it is becoming harder to recruit GPs into practice especially as partners, this is mainly due to the work load and the hours, people don't want to committee to being in one place for the entirety of their career or take on extra financial responsibility. All of these factors impact the

number of GPs available, with the use of locums and the high turnover of staff it makes it very difficult to estimate the actual number currently working.

Councillor Bhinder would like to know what effect the 111 service has had on reducing the stress on GPs. Dr Fernandes explained that it is very difficult to assess, he doesn't have the exact figures however the 111 services does absorb a lot of the initial enquiries but he isn't aware of the percentages of those that then don't seek further advice form GPs. His personal opinion is that it works well with the out of hours services and is doing a very good job.

David Evans confirms there has been a huge increase in the number of calls to 111 and the amount of A&E traffic has been reduced. The appointment service is being well used and is working well.

Councillor Tindall would like a clear list of the surgery names as the abbreviations give no clear indication. Michelle Campbell will produce and circulate the list.

Kevin Minier enquires if Dacorum are prepared to deal with any cases of the corona virus and what steps are currently being taken.

Dr Fernandes assures the committee that measures are in place and he is confident that if any cases do arise Dacorum is prepared.

The Report was noted by the Group.

6 <u>SUSTAINABILITY AND TRANSFORMATION PARTNERSHIP</u> UPDATE

David Evans explained that this is the first time this item has been brought to the Health Committee, the STP have been established for around 2.5 years, the idea was to bring together a system across a geographical area. For the past 2 years the partnership has been focused on creating a clinical strategy, and ensuring the system is brought together so it can work collaboratively and provide the best possible service for the patient's whist adhering to the budgets and other financial constraint.

The focus has now shifted to the long term plan integrated care partnerships and an integrated care system. The CCGs will need to work closely together with a view to possibly merging 3 CCGs next year.

The three key areas which are being looked at this year are Frailty, Children and Young People and Prevention, these are deemed to be the most challenging for the system and the ones which need the biggest transformation.

The Report was noted by the Group.

7 <u>WEST HERTS HOSPITAL ESTATES UPDATE</u>

David Evans informed the group that there is currently a judicial review taking place therefore there is limited information that can be provided.

8 COUNTY COUNCIL HEALTH SCRUTINY COMMITTEE REPORT

Councillor Bhinder has attended 3 meetings so far and will ensure the minutes of the County Council Health Scrutiny Meetings are circulated to the Group.

Councillor Beauchamp would like to know what provisions are in places for patient transport if they are allocated an appointment outside of their immediate area. Councillor Tindall informed the group that Community Action Dacorum do provide such a service and they should be contacted directly. Patient transport will be added to the next agenda for further discussion with the CCG.

9 THE COUNTY COUNCIL ADULT CARE SERVICES REPORT

The County Council Adult Care Services report was circulated to the Group.

The Report was noted

10 WARD ISSUES

The following questions were raised by Councillors and forwarded to the CCG, answers to be provided at the next meeting.

- Why the urgent care centre being used inappropriately (for minor aliment / coughs / colds) and are people aware of the alternatives.
- Who is responsible for the issuing of Hearing aid batteries and can a plan be put in place for multiple distributions.

11 <u>WORK PROGRAMME</u>

The following items were added to the work programme for the next meeting to be held on March 11th 2020.

Patient transport Financial Report of WHHT WHHT CQC Inspection

It was agreed that the Work Programme will become a standing item on the agenda with additional items to be agreed at the prior meeting.

The Meeting ended at 9.15 pm