

## Minutes

of the Meeting of

## The Health Overview and Scrutiny Panel

Thursday, 13 July 2023

New Council Chamber - Town Hall

Meeting Commenced: 2.00 pm

Meeting Concluded: 4.10 pm

### Councillors:

Helen Thornton (Chairperson)  
Wendy Griggs  
Ian Parker  
Timothy Snaden  
Joe Tristram  
Georgie Bigg

**Absent:** Councillors Marc Aplin, Jemma Coles and Stuart Davies.

**Health Colleagues in attendance:** Paula Clarke, Executive Director of Strategy and Transformation University Hospitals Bristol and Weston NHS Trust (UHBW); Judith Hernandez, Hospital Director UHBW, Ros Cox, Associate Director, BNSSG Integrated Care Board (ICB); Becky Balloch, Head of Communications & Engagement (ICB)

**Officers in attendance:** Hayley Verrico (Adult Services); Samuel Hayward (Public Health); Leo Taylor and Harriet Isherwood (Corporate Services).

### HEA Election of the Vice-Chairperson for the 2023/24 Municipal Year

1

Resolved: that Councillor Ian Parker be elected as Vice-Chairperson.

### HEA Declaration of Disclosable Pecuniary Interest (Standing Order 37)

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None.

### HEA Minutes (Pages 5 - 8)

3

**Resolved:** that the minutes of the meeting held on 16 February 2023 be approved as a correct record.

### HEA Co-option of the Chairman of Healthwatch

4

**Resolved:** that Georgie Bigg be co-opted to the Panel as the Healthwatch representative.

## **HEA 5 Role, Remit and Work Plan of the Health Overview and Scrutiny Panel**

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The Scrutiny officer provided a brief overview of the health scrutiny process in the context of recent changes to the health and social care system and outlined the Panel's work planning process. The Chair then opened discussion about potential areas of focus.

With a view to informing these discussions and potentially aligning work plans, the Healthwatch representative gave a brief summary of the organisation's priorities, which included dentistry, GP surgeries, communications and best practice.

In discussion about potential areas of Panel work plan focus, topics proposed by Members included the following: -

- improving the accessibility of dentistry;
- enabling more effective hospital discharge;
- potential for re-establishing Weston General Hospital's 24/7 Emergency Department;
- implementation of the Health Trust's Workforce Plan;
- liaison with Locality Partnerships (regular reports to Panel); and
- adoption of the previous HOSP key priorities

Members noted that a first iteration of the Panel's Work Plan would be worked up by the Chair and Scrutiny officer, taking into account the above discussion, and this would be brought to the Panel for consideration at its next formal meeting.

### **Concluded:**

- (1) that the Scrutiny officer liaise with the Director of Public Health to arrange a briefing on evolving health and social care commissioning and delivery structures;
- (2) that the Scrutiny officer liaise with BNSSG ICB to arrange a briefing on plans for dentistry services in the district ICB; and
- (3) that the Chair of Healthwatch share the Healthwatch Work Plan slides with the panel.

## **HEA 6 Integrated Care Strategy**

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The Associate Director of the Integrated Care Board gave a presentation summarising the work done to date by the Integrated Care Partnership (ICP) - made up of the VCSE sector, representatives from the six localities and partners from all Integrated Care System organisations - in the development of a comprehensive strategic approach to improving the overall health and wellbeing of the residents of BNSSG. The overarching aims of this Integrated Care Strategy included tackling inequalities, enhancing service productivity and value for money, and addressing wider social and economic determinants of health and wellbeing.

In the ensuing discussion Members focussed on the importance of reliable metrics by which the strategies progress and success could be measured. For instance, there was comment that previous initiatives to address inequalities in Weston-super-Mare's South Ward had delivered little apparent improvement and emphasised the need for baseline metrics against which progress could be monitored going forward. The Healthwatch representative shared this view but

emphasised the importance of including “qualitative” measures to demonstrate improvement in people’s experience of health services and the value of involving communities and other stakeholders in the design of the strategy and services.

In response, the representative of the ICB gave assurance that the ICS were gathering both qualitative and quantitative measures to track strategy progress and that they were looking at circulating data packs as part of evidencing this work. Executive Director of Strategy and Transformation UHBW referred to the unprecedented commitment across partners to the prevention agenda and exemplary work being undertaken around engaging communities and stakeholders in the process of co-designing strategies and services.

There was further discussion around the challenges around addressing wider wellbeing indicators, including progress on implementing the Real Living Wage (and the need for the Council to lead by example). There was also reference to North Somerset’s smoking cessation programmes with concern raised around an apparent lack of campaign and social media presence. The Public Health Consultant briefly updated Members work undertaken to promote the scheme agreed to provide further details with Members outside of the meeting.

The Panel also discussed the representation of Children and Young People within the development of the ICS and suggested that the Young Director of Children’s Services be invited to attend future meetings.

**Concluded:**

- (1) that the Panel receives regular updates on the progress of the ICS;
- (2) that ICS data packs be requested for circulation to Members; and
- (3) that it be requested that the ICB also circulate reports from all Health and Care improvement groups.

**HEA 7 Update on Weston General Hospital UHBW**

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The representatives from UHBW gave a presentation outlining the main focus areas for improvement in North Somerset’s hospital provision, which covered training and recruitment, performance and culture improvement goals, and the development of community links. The Director of Adult Social Services noted a major improvement over the past two years in relation to the minimisation of recruitment challenges and the avoidance of avoidable hospital admissions, for which she credited the whole-partnership approach with the UHBW officers.

Members sought and received clarification on the following:-

- day care and the hospital’s “front door” initiatives;
- recruitment and retention issues, and Members were informed that these were ongoing but were improving thanks to a workforce; and
- back-door provisions (eg discharge), which Members noted were to be the focus of a later phase of the Healthy Weston work programme.

In closing discussions, the Chair commented on the brevity of UHBW’s report. Although it was acknowledged that the Trusts presentation had been detailed and

extensive, she requested that future written reports to the Panel provide further detail about the subject for discussion in order to comply with Local Government requirements around agenda publication.

**Concluded:**

- (1) that all Members receive a briefing on the HW2 development plan; and
- (2) that a more detailed report be circulated to the Panel.

**HEA 8    Recommissioning of the BNSSG Integrated Sexual Health Service**

The Public Health Consultant gave a presentation describing the commissioning plan for integrated sexual health services that North Somerset is a party to and summarising the Executive's 21<sup>st</sup> June approval for the recommissioning of the of the North Somerset elements of the BNSSG Integrated Sexual Health Service.

Members sought and received clarification on the following aspects of the strategy:

- reproductive help for older people, which was a part of the wider sex & relationships agenda and supported by the WISH clinic; and
- the timescales of the implementation, which was to be discussed further at future HOSP meetings and added to the workplan.

**Concluded:** that the report be received.

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Chairman

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