

Membership

Councillors

- A** Keith Girling (Chair)
Richard Butler
- A** Dr John Doddy
Kevin Greaves
David Martin (Items 5 to 8 inclusive)
Michael Payne
Liz Plant
Kevin Rostance
Steve Vickers
Muriel Weisz

Martin Wright (Vice-Chair)

Officers

Martin Gately	Nottinghamshire County Council
Noel McMenamin	Nottinghamshire County Council

Also in attendance

Laura Burns	NHS England
Anne Crompton	NUH
Rachel Eddie	NUH
Neil Ellis	NUH
Dr Keith Girling	NUH
Caroline Nolan	Greater Nottingham CCG
Alan Reid	Public Health England
Dr Saam Sedehizadeh	NUH
Kirstie Spencer	NUH

1. **MINUTES**

Subject to recording Councillor Wright's attendance at the meeting, the minutes of the last meeting held on 8 January 2019, having been circulated to all Members, were taken as read and were signed by the Chair.

2. APOLOGIES

Apologies for absence were received from.

Councillor K Girling (Chair) – Council business

Councillor J Doddy – work-related

In the Chair's absence, the Chair was taken by Councillor Martin Wright, the Vice-Chair.

No temporary change of membership requests were received for this meeting.

An apology for absence was also received from Sarah Collis, Healthwatch Nottingham and Nottinghamshire.

3. DECLARATIONS OF INTEREST

None

4. NOTTINGHAM UNIVERSITY HOSPITALS CARE QUALITY INSPECTION AND IMPROVEMENT PLAN

Dr Keith Girling, Medical Director, and Anne Crompton, Associate Director of Quality Governance, Nottingham University Hospitals NHS Trust (NUH), provided a presentation, circulated with the agenda, on the NUH response to the Care Quality Commission's (CQC) report and findings arising from its Inspection between November 2018 and January 2019.

A number of points were made in the presentation:-

- The CQC inspection lasted from November 2018 to January 2019, covered 7 of the 10 key pathways and services and followed 5 key lines of enquiry, providing ratings for 'Caring', 'Effective', 'Well-led', 'Responsive' and 'Safe';
- Overall, NUH received a 'good' rating, with 'Effective', 'Well-led' and 'Responsive' also rated 'good'. NUH's 'Caring' was rated 'Outstanding', while its 'Safe' rating was 'Requires improvement';
- areas of good or outstanding practice identified by the inspectors included the shared governance model, the supportive approach taken to 'end-of-life' care, the impact of Integrated Discharge Teams, the positive use of digital culture and junior doctor liaison protocols;
- NUH was working hard on addressing the shortcomings highlighted in the 'Safe' domain, which included ensuring appropriate staffing levels in the Maternity Unit, making sure Do Not Attempt Resuscitation (DNAR) decisions were fully and consistently documented, inconsistencies with prescribing recording and storing medicines and protocols around clinical waste;
- NUH had not been able to deliver targets in respect of Emergency Department waiting times for some time;

- A comprehensive Improvement Plan was at an advanced stage of development and would be available publicly at the end of May 2019.

During discussions, a number of issues were raised:-

- Training and development had been delivered to relevant staff to secure 100% compliance with DNAR protocols and this was currently being audited to provide an evidence base going forward;
- It was acknowledged that more could be done outside the critical care environment to educate partners and patients' families about DNAR protocols, and the potential impact on patients if these were not in place nor followed consistently;
- It was further acknowledged that it was fundamental to maintain consistency of prescribing and recording of medicines. Digitising patient records was proceeding at pace and this would help reduce inconsistencies in time. Patients sometimes found it distressing to have medication taken from them on entry to hospital, and for changes in medication and timings take place without proper explanation;
- C-Diff and MRSA levels were currently below target levels, in part as a result of revised cleaning regimes;
- It was stated that NUH recruitment and retention levels were satisfactory, but that there was a number of specialisms where there were national skills shortages;
- The Swan initiative, which added quality of life experiences to end-of-life care, was welcomed and strongly supported by the Committee;

The Chair thanked Dr Girling and Ms Crompton for their attendance for their attendance.

5. NOTTINGHAM UNIVERSITY HOSPITALS – WINTER PLANS

Caroline Nolan, System Delivery Director, Greater Nottingham CCGs and Rachel Eddie, Acting Chief Operating Officer, NUH, provided an update on recent performance, ongoing challenges and future areas of focus relating to NUH system winter plans. The following points were made:-

Increased bed capacity had been put in place in several settings, with 113 extra acute beds provided at NUH, 20 more community-based enhance care beds and 35 community-run beds at City Hospital for those no longer needing acute care;

QMC 'front door' built environment improvements had been finalised, providing increased capacity, the Surgical Triage Model was being expanded to wider specialities and frontline staff flu vaccination levels were at an all-time high;

The target of 95% of patients through Emergency department within 4 hours was not met, with the March 2019 performance at 72%. Demand continued to increase with admissions on 1 April 2019 the highest on record;

Good progress had been made with extended GP appointments, the establishment of a Frailty Hub with integrated pathways, integrated discharge systems and ambulance handover times, which were the best in the region;

Challenges remained in respect of keeping pace with increased demand and maintaining staffing levels. NUH was excited to be one of 14 national pilot sites for the development and roll-out of national standards for urgent and emergency care.

During discussions, a number of issues were raised:-

- It was confirmed that work was ongoing to secure long-term funding for the additional acute bed capacity at NUH;
- It was acknowledged that increased numbers of bariatric patients presented a number of additional practical issues to contend with in the hospital environment;
- It was confirmed that Emergency Department (ED) visits were not recorded as 'unnecessary', but treatment was given to those who turned up, irrespective of the severity of illness or injury. New standards will help the provision of treatment in line with priority of illness, while having a primary care stream at ED would also help;
- It was unclear what caused the spike in admissions on 1 April 2019, but it noted that respiratory conditions were often exacerbated as seasons changed;
- It was planned to use the retained acute bed capacity more flexibly next winter;
- A Committee member spoke very positively of her recent experience as an NUH patient during the peak patient intake period.

The Chair thanked Ms Eddie and Ms Nolan for their attendance.

6. NOTTINGHAM UNIVERSITY HOSPITALS – MUSCULAR DYSTROPHY PATHWAY

Dr Saam Sedehizadeh, Consultant Neurologist, Neil Ellis, Pathway General Manager and Kirstie Spencer, Muscular Dystrophy Care Advisor at Nottingham University Hospitals NHS Trust (NUH) introduced a briefing paper on the Muscular Dystrophy pathway, including the physiotherapy service at NUH, making the following points:-

- the Neuromuscular Service at NUH was the only specialist provider of neuro-muscular services in the East Midlands, and was the only hospital in the region providing a diagnostic service;
- the adult neurology service provided a service to 485 adult patients across Nottinghamshire, Lincolnshire, Leicestershire and Derbyshire. While there were some emerging treatments for the condition, the primary focus of the service was on disease management;
- there was no neuro-muscular therapist available to join the specialist neurology clinic, and currently had access to the community neuro team (Nottingham City residents only) and the therapy services based at Linden Lodge. Neither service was available to residents outside the Nottinghamshire area;
- NUH had made funding available to fund a 0.4 full time equivalent physiotherapist post, and the recruitment process for this post was ongoing, with interviews scheduled for end May 2019. NUH had lobbied the NHS

Greater Nottingham Clinical Commissioning Partnership for a full-time post based in both primary and secondary care, but had been unsuccessful.

During discussion, the following points were made:-

- Multi-CCG funding for the service had been attempted but not secured, in part because of the relatively small cohort spread across a wide geographic area;
- It was confirmed that the 0.4 physiotherapist post would be primarily involved in delivering therapeutic rather than diagnostic services;
- The Committee noted that there was a muscular dystrophy Support Centre based in Coventry, with a satellite service based in Loughborough;
- In response to comments that that was unclear whether a physiotherapy treatment 'pathway' was in place, Dr Sedehizadeh expressed the view that he was not convinced that a single pathway could be achieved, given the very heterogeneous nature of the cohort and the difficulty in getting a diagnosis;
- The Committee asked that the Chair of Nottinghamshire Health and Wellbeing Board be requested to write to the NHS Greater Nottingham Clinical Commissioning Group, requesting an explanation for not funding the full-time physiotherapy post, to ask why other CCGs in the region were not requested to support the service and to respond to the view expressed by the Committee that the current service did not appear to be 'joined-up', but was 'patchwork' in nature;
- The Committee request an update on the Muscular Dystrophy Pathway in six months.

The Chair thanked Dr Sedehizadeh, Mr Ellis and Ms Spencer for their attendance.

7. DENTISTRY IN NOTTINGHAMSHIRE

Laura Burns, Contracts Manager Dental and Optometry at NHS England and Alan Reid, Public Health England introduced a briefing paper, circulated with the agenda, on NHS Dental Services in Nottinghamshire.

The following points were made:-

- Dental contract arrangements underwent major reform in 2006, using a reference point in 2005 under which 'units of dental activity' were allocated;
- Since 2006, new schools, business and housing have been established and dentistry provision has not always kept pace with these changes. Nottinghamshire currently has 78 NHS dental practices;
- Nottinghamshire has levels of tooth decay that are lower than the average for England. However, within Nottinghamshire, there are marked levels of inequality in respect of tooth decay in Mansfield and Ashfield;

- The Joint Strategic Needs Assessment in respect of oral health should be published by the end of 2018, on the basis of which targeted intervention would be commissioned.

During discussion the following points were raised:-

- It was explained that information was not available on the number of people on waiting lists for NHS practices. Information on NHS practices was available on the NHS Choices website;
- The NHS England initiative Starting Well was to be rolled out. This would engage with schools and young families to encourage good oral health habits from an early age. Health visitors carried out oral health checks on babies and young children from age 1. The view was also expressed that young families may not be aware that dental treatment for children was free;
- Healthwatch was the appropriate forum to raise complaints about access to dentistry services in the first instance;
- Mr Reid expressed the view that fluoridation of water did not foster complacency about oral health among the general population, on the basis that very few people were aware of fluoridation levels in their water supply;
- It was accepted that prevention activity, such as gum disease prevent initiatives, could have a positive impact on oral health. However, there were limited resources available, and these needed targeting in areas of greatest need.

The Chair thanked Ms Burns and Mr Reid for their attendance.

8 WORK PROGRAMME

The Committee agreed the following amendments to the work programme:-

NUH Improvement Plan Update

Add to November 2019 meeting

NUH Winter Plans

Add to May 2020 meeting

Muscular Dystrophy Pathway Update

Add to November 2019 meeting

Dentistry in Nottingham Update

Add to November 2019 meeting

Access to School Nurses

Add to a future meeting.

Allergies in Children

Add to a future meeting

The meeting closed at 12.58pm.

CHAIRMAN