Nottinghamshire County Council

minutes

HEALTH SCRUTINY COMMITTEE

Tuesday 9 March 2021 at 10.30am

COUNCILLORS

Keith Girling (Chairman)
Martin Wright (Vice-Chairman)

Richard Butler	Kevin Rostance
John Doddy	Stuart Wallace
Kevin Greaves	Muriel Weisz
David Martin	Yvonne Woodhead
Liz Plant	

SUBSTITUTE MEMBERS

None.

Officers

Martin Gately	Nottinghamshire County Council
Noel McMenamin	Nottinghamshire County Council

Also in attendance

Ajanta Biswas	-	Healthwatch Nottingham & Nottinghamshire
Leon Blackwell	-	Nottingham & Nottinghamshire CCG
Shaun Deasy	-	NHS Arden/Greater East Midlands
Dr Keith Girling	-	Nottingham University Hospitals Trust
Mark Merriman	-	ERS Medical Ltd
Sarah Moppett	-	Nottingham University Hospitals Trust
Mark Sheppard	-	Nottingham & Nottinghamshire CCG
Simon Smith	-	ERS Medical Ltd
Kelly Stoneman	-	ERS Medical Ltd

1. MINUTES OF MEETING HELD ON 12 JANUARY 2021

The minutes of the meetings held on 12 January 2021, having been circulated to all Members, were taken as read and were signed by the Chair.

2. MINUTES OF MEETING HELD ON 26 JANUARY 2021

The minutes of the meetings held on 26 January 2021, having been circulated to all Members, were taken as read and were signed by the Chair.

3. APOLOGIES

None.

4. DECLARATIONS OF INTEREST

None.

5. NOTTINGHAMSHIRE NON-EMERGENCY PATIENT TRANSPORT SERVICES

Following an introduction by Nottingham and Nottinghamshire CCG representatives Mark Sheppard and Leon Blackman, the Committee received a brief presentation from Kelly Stoneman of ERS Medical Ltd, with contributions from Simon Smith and Mark Merriman, also of ERS Medical Ltd.

The presentation covered performance during the first full year of operating the non-emergency patient transport service in Nottinghamshire and Bassetlaw, and how the service had been impacted by the pandemic. Ms Stoneman made the following points:

- the number of complaints received (121) equated to 0.06% of all regulated activity delivered in the period December 2019 to January 2020;

- ERS Medical acknowledged initial transitional issues in respect of communication with service users, but had adopted a rigorous and consistent approach to service user engagement, taking forward learning and improving patient understanding of the service being provided;

- Commissioners and providers had worked closely and constructively throughout the pandemic. Key performance indicators were put on hold, and additional resource had been provided to ensure social distancing was in place, without detriment to service;

- Some delays had been experienced by service users where priority needed to be given to discharges from hospital in order to free up bed capacity. However, this was outside ERS Medical's immediate control, and the provider had been proactive in communicating both with service users and with specific NHS services to explain and minimise inconvenience;

- Almost 85% of ERS Medical staff had been vaccinated, with 8% having currently declined and the remainder been unable to date to be vaccinated.

The Committee welcomed the update, and there was consensus that performance of patient transport services had improved under ERS Medical's stewardship. During discussion, a number of issues were raised and points made:

- It was confirmed that staff had received additional training identify where patients might have issues about remembering to be ready for pick-ups, and

that ERS Medical was committed to actively managing situations, such as difficulties with mobility equipment as they arose;

- There had been instances where services had been booked without full disclosure of patient needs – again, work had been carried out to communicate with all parties to avoid a repetition. Significant work had gone into ensuring acute patients were identified and treated accordingly, and no patient was left without it being confirmed that they had access to their end destination;

- It was confirmed that reticence among staff was mainly around concerns about the possible effect on female fertility. ERS Medical encouraged its staff to have discussions with their GPs to address concerns and queries about vaccination, but acknowledged that there were genuine concerns that needed to be handled sensitively;

- CCG representatives advised that additional transport services might be needed as England moved out of lockdown, and it was hoped that funding would be made available to address any additional pressures that arose

The Chair thanked ERS Medical, CCG and NHS representatives for their attendance during consideration of this item and requested a further update in March 2022.

6. NOTTINGHAM UNIVERSITY HOSPITAL MATERNITY SERVICES IMPROVEMENT PLAN

Nottingham University Hospitals Trust representatives Dr Keith Girling, Medical Director, and Sarah Moppett, Interim Chief Nurse, introduced a report, updating the Committee on the Trust's improvement plan for maternity services in the wake of the Care Quality Commission 'Inadequate' rating in December 2020.

Dr Girling and Ms Moppett made the following points:

- The Trust accepted that there was evidence of longstanding concerns about maternity services within the Trust. It had been taking a range of actions to improve oversight of maternity services even before the 'Inadequate' rating had been issued, given the Prevention of Further Deaths Report issued in September 2020;

- Moreover, a range of actions had been identified for all Trusts following the review of maternity services at Shrewsbury and Telford Hospital NHS Trust. The Trust's Improvement Plan had the ambition to address issues, concerns and recommendation arising from all these reviews, and to move to a 'Good' rating by the end of 2021. While very much a 'stretch target', the Trust and its staff were very committed to delivering the improved rating within this timeframe;

- The focus of the Trust's Maternity Oversight Committee was on improving a range of areas including leadership, safety, governance, communications and engagement, as detailed in the report, with work streams led by Executive Directors. An Interim Director of Midwifery had also been appointed;

- It was also explained that the Trust had the ambition to build a new maternity unit and to combine City and QMC maternity services, but this was by way of additional context as part of the Tomorrow's NUH agenda, and was considered outside the remit of this discussion.

During discussion, a number of issues were raised and points made:

- It was explained that there had been a national midwifery shortage for a number of years. Student Bursaries, which had been withdrawn, had now been reinstated, and capacity/supply of midwives was gradually improving;

- Changing demographics meant that although birth rates had fallen, the number of interventions needed was increasing, while the Trust handled more complex cases from further afield;

- It was acknowledged that while staff training and development interventions to address maternity services' shortcomings had been carried out previously, not enough had been done at the time to embed the learning within the workforce;

- It was confirmed that the delivering postnatal care had been very difficult during the pandemic, but that face to face postnatal visits were recommencing in mid-March 2021;

- While the need for significant and sustained improvement was clear, the point was made that the Trust's data set for still births was better than the national average;

- There was consensus that it was vital that staff at all levels had the confidence to raise issues and concerns. The Chair of the Maternity Oversight Committee was the Maternity Safety Champion, and was very active in in engaging with staff in terms of checking and challenging practices, as well as being clear about accountability at all levels;

- There was a need to improve capacity in Obstetrics as the service moved towards 24/7 coverage, but the Trust's current shortfall in capacity reflected the national picture;

- It was acknowledged that holding meetings with the Maternity Voices Partnership was not in itself sufficient – issues and concerns arising from those meetings needed to inform actions being taken to improve and sustain the quality of maternity services;

- The view was expressed that nobody within the Trust felt untouched by recent outcomes of inquests and reviews, and Trust representatives regretted if the impression had been given in public pronouncements that it was less than fully empathetic to the issues and concerns that had arisen.

The Chair thanked Dr Girling and Ms Moppet for their attendance. In view of the Committee's comments and concerns, the Chair requested an update at its June 2021 Committee meeting, and that the Interim Director of Midwifery attend that meeting.

6. WORK PROGRAMME

During discussion, it was agreed to defer items originally scheduled for the Committee's June 2021 meeting –' NHS Property Services and Contracts' and 'Allergies in Children' – in order to consider NUH Maternity Services, as well as 'Diabetes and Pre-Diabetes', in view of comments made about a significant increase in prevalence being reported, in part as a result of lifestyle changes from the pandemic lockdown.

Subject to these amendments, the Committee work programme was approved.

The meeting closed at 12:30pm.

CHAIRMAN