

## Health Scrutiny Committee

**Tuesday, 08 January 2019 at 10:30**

**County Hall, West Bridgford, Nottingham, NG2 7QP**

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### AGENDA

- |   |  |         |
|---|--|---------|
| 1 | Minutes of the last meeting held on 20 November 2018   | 3 - 10  |
| 2 | Apologies for Absence  |         |
| 3 | Declarations of Interests by Members and Officers:- (see note below)<br>(a) Disclosable Pecuniary Interests<br>(b) Private Interests (pecuniary and non-pecuniary) |         |
| 4 | Defence National Rehabilitation Centre (DNRC)  | 11 - 14 |
| 5 | Bassetlaw Hospital - Children's Ward Update  | 15 - 18 |
| 6 | Work Programme   | 19 - 26 |

### Notes

- (1) Councillors are advised to contact their Research Officer for details of any Group Meetings which are planned for this meeting.
- (2) Members of the public wishing to inspect "Background Papers" referred to in the reports on the agenda or Schedule 12A of the Local Government Act should contact:-

Customer Services Centre 0300 500 80 80

- (3) Persons making a declaration of interest should have regard to the Code of Conduct and the Council's Procedure Rules. Those declaring must indicate the nature of their interest and the reasons for the declaration.

Councillors or Officers requiring clarification on whether to make a declaration of interest are invited to contact Noel McMenamin (Tel. 0115 977 2670) or a colleague in Democratic Services prior to the meeting.

- (4) Councillors are reminded that Committee and Sub-Committee papers, with the exception of those which contain Exempt or Confidential Information, may be recycled.
- (5) This agenda and its associated reports are available to view online via an online calendar - <http://www.nottinghamshire.gov.uk/dms/Meetings.aspx>

## Membership

### Councillors

Keith Girling (Chair)  
Richard Butler  
Dr John Doddy  
Kevin Greaves  
David Martin  
Michael Payne  
Liz Plant  
Kevin Rostance  
Steve Vickers  
Muriel Weisz

### Officers

Martin Gately  
Noel McMenamin

Nottinghamshire County Council  
Nottinghamshire County Council

### Also in attendance

Paul Beckworth  
Katharine Brown  
Sandra Crawford  
Janet Crowe  
Sally Dore  
Kazia Foster  
Wendy Hazard  
Chris Neale  
Catherine Pope  
Scott Purser  
Amanda Sullivan  
Rachel Towler  
Keith Underwood  
Louisa Ward

Sherwood Forest Hospitals  
Nottinghamshire County Council  
Nottinghamshire Healthcare Trust  
NUH  
Mansfield and Ashfield CCG  
Nottinghamshire Healthcare Trust  
EMAS  
NUH  
Nottinghamshire Healthcare Trust  
NUH  
Mansfield and Ashfield CCG  
Nottinghamshire Healthcare Trust  
EMAS  
Sherwood Forest Hospitals

## 1. MINUTES

The minutes of the last meeting held on 9 October 2018, having been circulated to all Members, were taken as read and were signed by the Chair.

## **2. APOLOGIES**

None

## **3. DECLARATIONS OF INTEREST**

None

## **4. ASHFIELD HOMESTART**

Dr Amanda Sullivan, Chief Officer, and Sally Dore, Head of Commissioning at Mansfield and Ashfield CCG provided a briefing on the Commissioning Group's decision to decommission funding for Ashfield Home Start.

The following points were raised within their briefing:-

- The CCG has undertaken a review of the decision to decommission funding for Ashfield Home Start, in line with the Committee's request at its June 2018 meeting;
- Home Start is to receive funding from the Local Infrastructure Fund to support a service in Ashfield for a 3-year period from July 2018, representing 50% of the original offer.
- Commissioners have used MASH referrals, A&E attendances-under 5's and complaints performance metrics to assess where possible the impact of decommissioning the service on residents. There is no evidence from these sources to indicate increasing pressures on other services as a result of the CCG decision;
- The CCG will continue to monitor the situation and to encourage Home Start to work collaboratively with partner organisations where possible.

During discussions, the following issues were raised:-

- The CCG undertook to provide details on Ashfield Home Start resources now in place (staff, buildings, funding);
- The CCG welcomed the suggestion to build the consideration of service impact on adults as well as on children into future commissioning;
- While it was noted that no complaints had been received about decommissioning the service, it was pointed out that service users were typically from harder-to-reach families who might not feel empowered to complain;
- It was confirmed that decommissioning the service had saved over £80,000;

- As the accountable care system became embedded it was anticipated that resources would become more evenly distributed between health and social care functions. The CCG was working very hard to ensure genuine collaboration between partners;
- It was confirmed that the CCG had consulted extensively with service users to inform the initial decision to decommission. The value described by service users was less to do with health, and more to do with social inclusion.

The Chair thanked Amanda Sullivan and Sally Dore for their attendance.

## **5. NOTTINGHAMSHIRE HEALTHCARE TRUST – CHILD AND ADOLESCENT MENTAL HEALTH SERVICES**

Dr Amanda Sullivan, Chief Officer Mansfield and Ashfield CCG, Sally Dore, Head of Commissioning, Mansfield and Ashfield CCG, Catherine Pope, Service Director, Nottinghamshire Healthcare Trust and Rachel Towler, Assistant General Manager, CAMHS, provided a detailed briefing, published with the agenda, on the following:

- implementing the local transformation plan(LTP) for children's mental health,
- performance against the 'must do' areas in children's mental health,
- previous, current and planned expenditure on children's mental health, and
- plans in respect of improving the mental health of looked after children and care leavers.

The following points were raised within their briefing:-

- The LTP has been in place for 3 years, and in that time the primary mental health team has become embedded in Nottinghamshire, working closely with GPs, Healthy Families teams and schools;
- The new role of Peer Support Worker has been effective in engaging with service users, and both CAMHS and the Educational Psychology Service have provided training and guidance on raising awareness around self-harm and suicide;
- Self-referral now allows direct access to services without a GP referral, while there is now a dedicated CAMHS Community Eating Disorder Service and Crisis Resolution and Home Treatment Service in place to address national priority targets;
- Transition arrangements between CAMHS and adult mental health services have been strengthened, specialist inpatient mental health provision for the most vulnerable is now provided locally at the Hopewood facility, and the Healthcare Trust also provides a new Forensic CAMHS Service for the region;
- A series of workforce developments and next steps in 2019/20, including the implementation of speech and language therapy, are detailed in the published report;
- Performance against 'must do' areas in children's mental health was variable. Additional resource is being provided to community eating disorder teams to help address unmet targets, while alternative access to adult

psychiatry liaison is available in lieu of 24/7 access to community crisis resolution teams and home treatment teams. Targets for putting in place care packages for those experiencing a first episode of psychosis are being met;

- An independent review of the CAMHS Looked After and Adoption Service has identified a number of recommendations to remodel the service, and the expectation is that all posts established under the remodelled service will be recruited to within the current financial year.

During discussions, a number of issues were raised:-

- The CCG undertook to provide the following in response to the Committee's questions and points:
  - details of children's mental health expenditure as a percentage of total expenditure;
  - numbers of children accessing mental health provision in Nottinghamshire;
  - average waiting times between initial service contact to receiving an assessment;
  - average waiting times between referrals and treatment for each CCG, noting that the average across Nottinghamshire was 8.3 weeks;
- There was a need for clear and consistent communication in respect of self-referral, given a recent BBC report which wrongly stated that GPs must refer to CAMHS services. In response, it was reported that online self-referral was available via the Healthcare Trust website, while there were hard copy leaflets and guidance also available;
- The point was made that self-referral was not always a preferred route, and that a GP consultation and referral was valuable, particularly in respect of early identification of ADHD and eating disorders;
- Anyone over the age of 16 years with experience as a service user and looking to 'give something back' can be considered for the role of peer support worker. Work is also ongoing to develop a volunteer mentoring programme with young people in mind. The CCG will be happy to work with councillors to promote the scheme;
- The Committee welcomed the establishment of the Hopewood inpatient facility, and the confirmation that no Nottinghamshire-based child has been referred out-of-area since it opened;
- the point was made that not all CAMHS cases transitioned to adult mental health services, as the intention was 'treat to exit' CAMHS service users where appropriate;
- CAMHS teams worked closely with schools in response to incidents such as suicide and attempted suicide to minimise the risk of 'copycat' incidents by children and young people;
- there was no data available in respect of differences in referrals and access to services between academies and maintained schools, or for home-schooled children.

The Chair thanked Amanda Sullivan, Sally Dore, Catherine Pope and Rachel Towler for their attendance.

## **6. NOTTINGHAMSHIRE HEALTHCARE TRUST – ADULT SERVICES**

Kazia Foster, Service Improvement and Development Manager and Sandra Crawford, Associate Director of Transformation at Nottinghamshire Healthcare Trust provided an update on its transformation plans.

A number of points were made during their briefing:

- The Mental Health 5 year Forward View sets out standards and targets for mental health services to achieve by 2021/22;
- There is significant pressure on acute and psychiatric intensive care unit inpatient capacity, with demand exceeding supply by an average of 40 beds per day;
- This has resulted in patients being placed in private out-of-area inpatient care. This has adversely impacted patients and their families and given rise to a £10 million pressure forecast for 2018/19;
- There is therefore a particular focus on increasing inpatient provision within the Forward View, and an Outline Business Case for approximately 40 bed places on the Highbury Hospital site is to be considered at the Trust Board meeting on December 2018;
- The Forward View also looks to transform Crisis and Home Treatment services, improve patient flow and to further develop local mental health teams across Nottinghamshire.

During discussions, a number of issues were raised:-

- In response to being asked whether Healthcare Trust decision takers had been held to account for removing over 100 bed spaces between 2013 and 2016, Health Trust representatives advised that a range of additional measures had been put in place to deal with the expected upturn in community-based social care. Unfortunately, a reduction in occupied bed days did not happen, in part because of insufficient reinvestment to meet core fidelity standards for crisis services;
- It was stated that waiting times for home treatment varied significantly between South and North Nottinghamshire;
- It was confirmed that the Healthcare Trust and the Local Authority Mental Teams enjoyed positive working relations;
- In response to a member's question, it was explained that the Farndon Unit was a private secure unit;
- Attendees undertook to provide the following information as part of an update report to the Committee's February 2019 meeting:
  - An explanation of the original rationale for closing bed spaces at the Queen's Medical Centre, the Committee not being convinced that this

arose solely because of its proximity to the new tram service to the hospital;

- Feedback on the outcome of the Healthcare Trust Board's consideration of the outline business case for additional bed spaces on the Highbury Hospital site
- A breakdown of the number, location and cost implications of out-of-area inpatient placements;

The Chair thanked Kazia Foster and Sandra Crawford for their attendance, and invited them to provide an update at the Committee's February 2019 meeting.

## **7. FOOD AND NUTRITION IN HOSPITALS – SHERWOOD FOREST HOSPITALS AND NOTTINGHAM UNIVERSITY HOSPITALS**

Paul Beckworth and Louisa Ward of Sherwood Forest Hospitals and Janet Crowe, Chris Neale and Scott Purser of NUH provided briefing and presentations on the quality of hospital food provided to Nottinghamshire patients. The Committee also received 2 presentations, one from each organisation, and circulated with the agenda.

The following points were raised:-

- The benefits of the 'Steamplicity' system of micro-steaming as used at Sherwood Forest Hospitals were explained in detail. The system involved cooking with fresh ingredients at the point of service, creating a nutritious, versatile and extensive menu for patients. The system enabled prepared food to have a 7 day shelf life, minimising waste;
- NUH colleagues provided an overview of their model for achieving excellence in nutrition and hydration care for patients, delivering high quality and consistent food provision for all patients, optimised nutritional care and patient experience, and providing safe artificial nutrition where appropriate. The Mealtime matters initiative to ensure full understanding of patients' needs and intake, and protect mealtimes from disruptions, was also explained.

During discussions, the following issues were raised:-

- it was explained that a range of 'high energy' meals is included in the options available to patients because such meals help aid recovery and are popular with patients. While it was accepted that obesity is a serious challenge to the nation's health, patients in an acute environment often had repressed appetite and required 'high energy' meals;
- all meals were provided in line with British Dietetic Association standards;
- both organisations operated a 'Red tray' system, where patients identified with functional or other difficulties with eating were given extra support at mealtimes;
- the Committee was reassured by the quality and consistency of approach to nutrition at both Sherwood Forest Hospitals and NUH.



The Chair thanked the representatives from the NUH and Sherwood Forest Hospitals for their attendance.

## **8. EAST MIDLANDS AMBULANCE SERVICE UPDATE**

Keith Underwood and Wendy Hazard, Operations Managers, EMAS provided an update on the organisation's performance and winter planning preparations for 2018/19. Their briefing raised the following points:-

- EMAS, in common with other health partners, faced a number of pressures which impacted on delivering service standards in the winter of 2017/18. Mitigating actions, detailed in the report, are being taken to minimise disruptions in the winter of 2018/19 and discussions are ongoing with partners to provide an improved patient experience;
- Hardwick CCG, which manages the EMAS contract of 22 CCGs across the region, has secured terms which will see an additional £9 million funding for clinical staff, ambulances and related resources. This may rise significantly in subsequent years, subject to meeting performance targets;
- The additional funding will help bridge the funding gap between currently available resource and what is needed to deliver national performance standards;
- EMAS has met 3 of the 6 quarter 2 targets set following its 'demand and capacity' review, 2 of which were in respect Category 1 (the most serious) response times.

During discussions the following points were raised:-

- There were 476 assaults on staff in the year to date, the majority of which being verbal assault. EMAS staff received pastoral and related support to help with their recovery and return to work;
- It was acknowledged that EMAS was behind schedule in respect of recruiting and training new clinical staff, but 49 new fully-trained staff will come 'on-stream' in April 2019;
- Station managers were under instruction to encourage increased uptake of the free winter flu jab, but staff could not be compelled to be vaccinated;
- EMAS operated an awards ceremony to celebrate staff who went 'the extra mile' in their dealings with the public, and staff had created an external space near to EMAS headquarters where they could rest, socialise and recuperate between shifts;
- It was confirmed that EMAS pursued prosecutions for assault rigorously.

The Chair thanked Keith Underwood and Wendy Hazard for their attendance, and invited them back to the March 2019 meeting, to provide updates on recruitment and retentions, winter pressures and prosecutions.

## **9. WORK PROGRAMME**

The Committee agreed the work programme as published, subject to changes being made to reflect outcomes of discussions at minutes 4, 5, 6 and 8 above

The meeting closed at 1.35pm.

**CHAIRMAN**

**8 January 2019****Agenda Item: 4****REPORT OF THE CHAIRMAN OF HEALTH SCRUTINY COMMITTEE****DEFENCE NATIONAL REHABILITATION CENTRE****Purpose of the Report**

1. To allow the Health Scrutiny Committee to receive the latest information regarding the Defence and National Rehabilitation Centre (DNRC).

**Information**

2. The Defence and National Rehabilitation Centre (DNRC) is a new facility for injured military personnel in the South of Nottinghamshire at the Stanford Hall Estate. Construction started in 2015 for the facility and the centre will begin treating its first patients by the end of 2018. The DNRC is a world class centre of clinical excellence that will contribute to the redesign and improvement of rehabilitation services across the region. Patients from across the East Midlands, including from Nottinghamshire, will benefit from this development, as well as injured service personnel.
3. Miriam Duffy, Clinical Pathway Lead for the NHS East Midlands Major Trauma Centre, Adrian Brooks, Clinical Director for the East Midlands Major Trauma Centre and Alison Wynne, Director of Strategy and Transformation for NUH will attend the Health Scrutiny Committee to present information on the DNRC and answer questions as necessary. A written briefing is attached as an appendix to this report.
4. Members have previously indicated an interest in visiting the DNRC, and this is in the process of being arranged.

**RECOMMENDATION**

That the Health Scrutiny Committee:

- 1) Consider and comment on the information provided.
- 2) Schedule further consideration as necessary.

**Councillor Keith Girling**  
**Chairman of Health Scrutiny Committee**

**For any enquiries about this report please contact: Martin Gately – 0115 977 2826**

**Background Papers**

Nil

**Electoral Division(s) and Member(s) Affected**

All

## **Defence and National Rehabilitation Centre (DNRC)**

### **Briefing for the County Health Scrutiny Committee – December 2018**

#### **Background**

The DNRC Programme began in 2010 with a year-long cross-Government feasibility study. Following Government acceptance of its recommendations (embracing both the Defence and National propositions), the Black Stork Charity was created in 2011 and the DNRC Programme became its delivery means.

The Defence rehabilitation centre is now operational on the Stanford Hall Rehabilitation Estate near Loughborough in the East Midlands with all patients from Headley Court now being treated in the new facility.

The opportunity now is, therefore, to create the first collaborative civilian and military specialist clinical rehabilitation capability in the UK with the National facility comprising:

- East Midlands regional inpatient rehabilitation unit
- National training and education centre
- National /international research and innovation centre

In November 2018, in the Budget announcement, the Chancellor announced £70million towards the capital cost of the National facility. Work is underway in the NHS, led by Nottingham University Hospitals NHS Trust (NUH), to establish appropriate sponsorship and project management of the National facility.

It has been agreed and supported by our regulator, NHS Improvement, that NUH will take the lead on establishing a Programme Board to focus on delivery of this project over the next two to three years.

#### **Scope and potential**

As the East Midlands Major Trauma Centre, NUH took on the lead role for the clinical work stream in 2016 when it was asked to complete a Strategic Outline Case (SOC) for an East Midlands regional inpatient rehabilitation facility. The SOC demonstrated the clinical case of need for a regional rehabilitation facility for patients from Major Trauma, Neurological, Musculoskeletal and traumatic amputation cohorts. Most activity would be transferred and the proposal does not include closure of services. This case was subsequently confirmed by an internal NUH Outline Business Case, which was completed in August 2018.

Potential benefits include:

1. Sharing facilities with the defence rehabilitation centre including advanced diagnostic equipment, hydrotherapy pool and conference facilities.
2. Improved rehabilitation services in the East Midlands region. There is currently an average wait in an acute bed of 24 days for a rehabilitation bed. This proposal would eliminate wait times

3. Improved clinical outcomes as a result of the above
4. Overall reduction in length of stay
5. Improving return to work rates for major trauma patients (currently at 35% after six months, compared to 85% in the military)

The wider opportunities in addition to the clinical elements include:

1. NUH leading a programme to develop a new clinical model that could be rolled-out across all major trauma networks
2. Opportunity to share knowledge and expertise with Defence rehabilitation medicine for the first time in the UK
3. National opportunity for training and research with local benefits for recruitment to NUH
4. Research and Innovation benefits to regional economy

### Next steps

Item	Action
1.	NRC Programme Board to be established
2.	Gap analysis to be completed on exiting documentation
3.	Strategic Outline Case to be completed for the three elements of the N – led by the Programme Board
4.	Outline Business Case and Full Business Case to be developed

**8 January 2019****Agenda Item: 5**

## **REPORT OF THE CHAIRMAN OF HEALTH SCRUTINY COMMITTEE**

### **BASSETLAW HOSPITAL – CHILDREN’S WARD UPDATE**

#### **Purpose of the Report**

1. To provide the latest information regarding admissions to Bassetlaw’s A3 Ward.

#### **Information**

2. Following the closure of the ward to night time admissions in January 2017, an update on paediatric admissions was last brought to the Health Scrutiny Committee in May 2018, when Members heard that on average 11 children were being transferred from Bassetlaw to Doncaster each week. While weekly figures do show some seasonal variation, the numbers are fairly consistent over the last 12 months. Overall, attendances on the unit have dropped slightly.
3. The closure of the ward was for safety reasons due to staff shortages, and the Trust continues to advertise for additional nursing staff. Since 2017 a number of recruitment campaigns have taken place, including hosting open events for newly qualified nurses and midwives.
4. Senior representatives of the Trust will attend the Health Scrutiny Committee to present information and answer questions as necessary. A written briefing is attached as an appendix to this report.

#### **RECOMMENDATION**

That the Health Scrutiny Committee:

- 1) Considers and comments on the information provided.
- 2) Schedules further consideration, as necessary.

**Councillor Keith Girling**  
**Chairman of Health Scrutiny Committee**

**For any enquiries about this report please contact: Martin Gately – 0115 977 2826**

**Background Papers**

Nil

**Electoral Division(s) and Member(s) Affected**

All



## **Bassetlaw Hospital's Children's Ward update (December 2018)**



**Doncaster and Bassetlaw  
Teaching Hospitals**  
NHS Foundation Trust

In January 2017, Ward A3 (Paediatrics) at Bassetlaw Hospital closed to inpatient admissions from 7pm each day. This came as a result of gaps in nursing and junior doctor rotas.

In October 2017, following a period of review and actions to try to reduce vacancies, the decision was taken to extend this action for the foreseeable future whilst further work is undertaken by partners in the South Yorkshire and Bassetlaw Integrated Care System (ICS) to identify possible regional solutions for issues such as recruitment.

As a result of this change, an enhanced daytime service was introduced and a paediatric consultant remains on site until 6pm, with paediatric medical staff available 24 hours a day to support the Emergency Department and the Maternity Service. This means that any children presenting at the Emergency Department continue to be able to be seen by a paediatric doctor and offered the necessary treatment at Bassetlaw Hospital. If additional observation is required, children are transferred to Doncaster Royal Infirmary.

In 2018, we have undertaken the following Registered Nurse recruitment exercises:

### **March**

A recruitment fayre was held on both Bassetlaw Hospital and Doncaster Royal Infirmary sites for newly qualified nurses in all areas of the Trust, including Paediatrics.

### **April and May**

An advert on NHS Jobs for both Bassetlaw and Doncaster sites for all areas within Paediatrics.

Although all vacancies were initially appointed to, several applicants subsequently withdrew. As a result of this, those initially unsuccessful candidates were contacted, re-interviewed and offered jobs. Two candidates accepted posts: One appointed to Doncaster and the other to Bassetlaw (as per preference).

### **July**

A Band Five Registered Children's Nurse post was advertised for the Children's Assessment Unit within Bassetlaw Hospital.

In addition to this, an internal Band Six Respiratory Nurse post became available. Two candidates were appointed, however one was the Band Six Sister on the Children's Assessment Unit at Bassetlaw Hospital.

In this month, we also advertised for a Band Six post for Children's Assessment Unit. One person was successfully appointed.

### **September**

A recruitment fayre was held on both Bassetlaw Hospital and Doncaster Royal Infirmary sites for newly qualified nurses in all areas of the Trust, including Paediatrics.

## **October**

A Band Five Registered Children's Nurse post was advertised for the Children's Assessment Unit at Bassetlaw Hospital. Two candidates were interviewed, one of whom was not appointable, the other successful candidate wanted to work at Doncaster Royal Infirmary and not Bassetlaw Hospital.

## **November 2018**

A Band Five Registered Children's Nurse post went to advert for all areas in Paediatrics.

All four candidates were offered posts, however since this process two existing members of staff have given notice to take up opportunities in other providers.

Also in this month, a Band Six Sister post was advertised for Bassetlaw Hospital. All external candidates were not appointable, however internal candidate appointed.

## **December 2018**

Currently, a Band Five Registered Children's Nurse post is being advertised for the Children's Assessment Unit at Bassetlaw Hospital. Currently, there are two applicants and interviews will take place 12 December 2018.

If both are successful this will fill current rota gaps, which are due to one staff nurse permanently transferring to Bassetlaw Emergency Department and one leaving the Trust. This will not result in any over establishment of staffing on the Children's Assessment Unit.

**8 January 2019****Agenda Item: 6**

## **REPORT OF THE CHAIRMAN OF HEALTH SCRUTINY COMMITTEE WORK PROGRAMME**

### **Purpose of the Report**

1. To consider the Health Scrutiny Committee's work programme.

### **Information**

2. The Health Scrutiny Committee is responsible for scrutinising substantial variations and developments of service made by NHS organisations, and reviewing other issues impacting on services provided by trusts which are accessed by County residents.
3. The work programme is attached at Appendix 1 for the Committee to consider, amend if necessary, and agree.
4. The work programme of the Committee continues to be developed. Emerging health service changes (such as substantial variations and developments of service) will be included as they arise.
5. Members may also wish to suggest and consider subjects which might be appropriate for scrutiny review by way of a study group or for inclusion on the agenda of the committee.

### **RECOMMENDATION**

That the Health Scrutiny Committee:

- 1) Considers and agrees the content of the draft work programme.
- 2) Suggests and considers possible subjects for review.

**Councillor Keith Girling**  
**Chairman of Health Scrutiny Committee**

**For any enquiries about this report please contact: Martin Gately – 0115 977 2826**

**Background Papers**

Nil

**Electoral Division(s) and Member(s) Affected**

All

## HEALTH SCRUTINY COMMITTEE DRAFT WORK PROGRAMME 2018/19

Subject Title	Brief Summary of agenda item	Scrutiny/Briefing/Update	Lead Officer	External Contact/Organisation
<b>08 May 2018</b>				
Bassetlaw Children's Ward	Further consideration.	Scrutiny	Martin Gately	Richard Parker, Chief Executive DBH
Suicide and Self-Harm prevention – Rampton Hospital	An initial briefing on suicide and self-harm prevention at Rampton Hospital as part of the committee's ongoing look at suicide prevention.	Scrutiny	Martin Gately	Dr John Wallace, Clinical Director, Rampton Hospital (Nottinghamshire Healthcare Trust)
<b>19 June 2018</b>				
Ashfield Homestart	Examination of the decommissioning of the Ashfield Homestart Service	Scrutiny	Martin Gately	Dr Amanda Sullivan, Chief Officer, Mansfield and Ashfield CCG
Shortage of capacity – Head and Neck Cancer Service	Examination of the decision to direct Nottinghamshire patients to out of county services due to the shortage of capacity	Scrutiny	Martin Gately	Dr Keith Girling, NUH Medical Director
Circle	Briefing on the services provided by Circle and how Circle fits within the wider health service (and STP governance structure)	Scrutiny	Martin Gately	Claire Probert, Service Transformation Manager
<b>24 July 2018</b>				
Chatsworth Neuro-rehab Ward	Consideration of final proposals	Scrutiny	Martin Gately	Dr Amanda Sullivan, Sherwood Forest CCG
Gluten Free prescribing consultation and other	Consideration of consultation and initial evidence gathering on	Scrutiny	Martin Gately	Greater Notts CCG (TBC)

prescribing restrictions	prescribing restriction issues.			
East Midlands Ambulance Service Transformation Plans	Continuing examination of EMAS improvement plans.	Scrutiny	Martin Gately	EMAS
Treatment Centre Procurement Update	An update on the latest position with commissioning/procurement of Nottingham Treatment Centre	Scrutiny	Martin Gately	Greater Nottingham CCG representatives
<b>09 October 2018</b>				
Dementia in Hospital	Initial briefing/commencement of a review	Scrutiny	Martin Gately	TBC
Rampton Hospital – Improvement Plan following CQC inspection	Further to the recent CQC inspection, an examination of progress against the improvement plan.	Scrutiny	Martin Gately	Dr John Wallace, Clinical Director, Rampton Hospital
Gluten Free Proposals	Consideration of the proposals for gluten free prescribing	Scrutiny	Martin Gately	Hazel Buchanan, Cheryl Gresham/Toni Smith
NUH Winter Plans & A&E Modernisation	An examination of winter plans and changes to the ‘front door’ of A&E.	Scrutiny	Martin Gately	Dr Keith Girling TBC
Review of Health Scrutiny Work Programme 2017/18	A summary of the issues examined by the Health Scrutiny Committee in the last municipal year.	Scrutiny	Martin Gately	None
<b>20 November 2018</b>				
Food and Nutrition in Hospitals (Sherwood Forest Hospital and NUH)	An initial briefing on nutritional standards, including hydration.	Scrutiny	Martin Gately	Sherwood Forest Hospitals/NUH TBC
Ashfield Homestart	Update on the review by stakeholders on the decommissioning of the Ashfield Homestart service.	Scrutiny	Martin Gately	Newark and Sherwood CCG/Mansfield and Ashfield CCG
Nottinghamshire Healthcare Trust Services	An initial briefing on mental health services within Nottinghamshire with a	Scrutiny	Martin Gately	Kazia Foster Nottinghamshire

	focus on adult services			Healthcare Trust
Child and Adolescent Mental Health Service (CAMHS)	An initial briefing on mental health services for children and young people	Scrutiny	Martin Gately	Nottinghamshire Healthcare Trust/Nottinghamshire Commissioners
East Midlands Ambulance Service Transformation Plans and Performance	Further consideration	Scrutiny	Martin Gately	TBC
<b>08 January 2019</b>				
Defence National Rehabilitation Centre	A further briefing on the new facility for injured service men and Nottinghamshire residents.	Scrutiny	Martin Gately	Nottingham University Hospitals/DNRC senior officers TBC
Bassetlaw Children's Ward – Update	Update on the current position regarding overnight closure of the Children's Ward at Bassetlaw Hospital.	Scrutiny	Martin Gately	Doncaster & Bassetlaw Hospital
<b>12 February 2019</b>				
CCG Finances	An initial briefing on CCG finances.	Scrutiny	Martin Gately	Hazel Buchanan, Greater Notts CCGs
Long-Term Clinical Service Strategy (NUH)	Briefing on initial progress linked to the Integrated Care System long-term clinical strategy.	Scrutiny	Martin Gately	Senior NUH officers TBC
Nottinghamshire Healthcare Trust – Adult Services Update	An update on a range of issues in Adult Mental Services, including feedback on additional bed spaces at the Highbury Hospital site.	Scrutiny	Martin Gately	Kazia Foster/Sandra Crawford, Healthcare Trust
<b>26 March 2019</b>				
East Midlands Ambulance Service – Recruitment Update	An update on the progress by EMAS in filling vacant posts.	Scrutiny	Martin Gately	Annie Palmer, EMAS Other senior EMAS officers TBC
Patient Transport Service	The latest performance information on	Scrutiny	Martin	Neil Moore

	patient transport from the commissioners [and Arriva].		Gately	
Whyburn Medical Practice – Hucknall (or February TBC)	Following the GP Practice's decision to hand back the contract to the commissioner, the CCG will brief the committee on progress to ensure continuation of service.	Scrutiny	Martin Gately	Greater Nottingham Commissioners
Healthwatch (TBC)	A briefing on recent Healthwatch reviews	Scrutiny	Martin Gately	Sarah Collis, Chair, Healthwatch (TBC)
<b>07 May 2019</b>				
Car Parking (TBC)	Initial briefing on car parking issues (NUH/Sherwood Forest Hospitals)	Scrutiny	Martin Gately	NUH/SFH (TBC)
Muscular Dystrophy Pathway TBC	Initial briefing on patient experience in the muscular dystrophy pathway, including the physiotherapy service	Scrutiny	Martin Gately	NUH TBC
Dentistry in Nottinghamshire	An initial briefing on the commissioning of dental services in Nottinghamshire.	Scrutiny	Martin Gately	Laura Burns, NHS England (Liz Gundel and Julie Ryan TBC)
<b>18 June 2019</b>				
<b>23 July 2019</b>				
<b>To be scheduled</b>				
Hospital Transport/Arriva				
Hospital Car Park Charging				
Social Prescribing				
Healthwatch				



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### **Potential Topics for Scrutiny:**

CCG Finances

Recruitment (especially GPs)

The pathway for Muscular Dystrophy

Allergies and epi-pens

Diabetes services

Air Quality (NCC Public Health Dept)

### **Overview Sessions** (To be confirmed)

Nottinghamshire Healthcare Trust – 16 October 2018 (Completed)

Urgent Care Pathway (QMC visit) – New Year/Spring 2019 (11 December (AM) -

Nottingham University Hospitals (NUH) – January/February 2019

Public Health – March/April 2019

### **VISITS**

DNRC – Spring 2019

Sherwood Forest Hospitals Trust (Hospital meals tasting) Spring 2019

Medium secure mental hospitals – TBC