

Overview and Scrutiny Committee

Thursday, 30th September 2021, 6.30 pm

Council Chamber, Town Hall, Chorley and YouTube

I am now able to enclose, for consideration at the above meeting of the Overview and Scrutiny Committee, the following reports that were unavailable when the agenda was published.

Agenda No	Item	
7	Health Scrutiny	(Pages 113 - 116)
	To consider the Work Plan of Lancashire County Council's Health Scrutiny Committee and to note the written update from the Council's representative on the Committee, Councillor Alex Hilton.	

Gary Hall
Chief Executive

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Lancashire Health scrutiny update.

Dear members, Firstly please accept my apologies for not attending the committee, I have a pre-existing appointment I was not able to change

A meeting of the Lancashire Health Scrutiny Committee was held on 14 September 2021, which I attended. There were two major topics for discussion: 1) Mental health integrated Community transformation. 2) Reconfiguration of Lancashire and South Cumbria pathology service.

Mental health integrated Community transformation

The committee received a presentation on the project which is based on the community mental health framework for adults. The aim of the process is to focus on individuals that require treatment for significant and chronic mental health treatments but not conditions deemed severe enough for hospital admission. There has been an investment of £11.6 m from NHS transformation funding to develop a new model of care that enhances community support for mental health conditions. Lancashire and South Cumbria NHS Foundation Trust aims to deliver the transformation through local partnerships including community groups and the voluntary sector.

Principles for the new model is based on evidence and best practice from reviewing cases and complaints and will include the following:

- Single individual assessment and removing thresholds for types of care and multiple assessments. Tailored and inclusive support for underrepresented groups.
- Personalised health and social care support.
- Single point of contact (GP, 111 etc) then feeding the individual into the most appropriate level of service whether this is primary care or local community services. Individuals can be discussed at multidisciplinary team meetings to determine how to proceed and which support services need to be involved.
- A new 24/7 urgent service access is suggested which will integrate with the 111 service.
- By April 2022, each locality would have its own Initial Response Service to provide a single point of access for care and requests for help;
- Leadership and governance of the programme was provided in part by the Community Mental Health Transformation Steering Group, which was cochaired by the mental health and voluntary sectors;

The committee were presented with a timeline of proposed development which commenced in June 2021 and is planned to end with full implementation by April 2022. Members asked whether this was actually deliverable, particularly as inpatient services are struggling. Assurances were made that it was a deliverable timescale and the only potential concern was staffing. Work is ongoing to utilise the voluntary sector and existing staff are also upskilling and additional recruitment was ongoing and phased delivery would allow for phased recruitment

The committee were concerned that there had not been sufficient engagement with service users but were assured that better engagement was planned for current and future stages of the proposed timeline.

The committee were concerned about the potential risk of overwhelming services with sudden change but were assured that the project would be rolled out incrementally, based on the recommendations of stakeholders in the primary care networks.

The committee raised concerns that housing needs of service users and vulnerable individuals were often insufficient and needed to be looked into. The trust agreed this would need further exploration, but no plans were available at the time.

Members were assured that the promotion of the new service model would be led by NHS England. The Lancashire and South Cumbria crisis line was also staffed 24/7, which continued to be promoted at a community level and through social media. It was recognised that the project's communication and engagement strategy was essential to its effective delivery.

Members raised questions about how the success of the programme could be measured and were assured that feedback was currently collected through patient surveys and work with Healthwatch Lancashire.

The committee noted the report and feedback to members' concerns and requested representatives from the Lancashire and South Cumbria NHS Foundation Trust be asked to provide another update to the committee at a later date.

Lancashire & South Cumbria Pathology Collaboration Update

Mark Hindle, Managing Director at Lancashire and South Cumbria Pathology Services and Conservative Councillor at Ribble Valley Borough Council presented a report to update the committee on the planned formation of a single pathology service for Lancashire and South Cumbria. The proposal is to centralise a large portion of pathology services into a new state of the art pathology lab in Salmesbury. The presentation suggested that many local pathology services were out of date and inefficient and centralisation of the sub-acute services would be cost effective, more efficient and allow investment into modern equipment that could be shared by all NHS service providers. Urgent testing would continue at all local sites. The majority of pathology staff would be moved from their current roles to the new pathology hub. To enable this change, all staff and budgets would be combined by the end of the 2021-22 financial year under the new pathology service, in advance of the new hub's opening in Autumn 2023.

Members raised concerns about consultation but the report presented stated public consultation was not necessary as this is not a patient facing service but stakeholder consultation was important to the success of the service.

As up to 550 staff would be relocated to the new hub members raised concerns about industrial relations issues and staff consultation and whether there was a risk associated with this. The director stated staff needed to be informed of changes but acknowledged views of staff had not been formally sought and he felt that information sharing and discussions with consultants would lead to general consensus in favour of the service changes. Members remained concerned about disruption and consultation with staff. The committee were however reassured that No staff would be made redundant as a result of the changes and the NHS terms and conditions of employment would remain in place under the new service, which staff had communicated was important to them.

It was revealed that the pathology services did not meet quality targets for transported samples and, as a result, samples frequently had to be retaken. The committee were assured that with additional transportation a number of measures would be introduced under the new service to overcome and prevent these problems, such as the use of drones to transport samples across the region, the preparation of samples at GP and hospital sites to reduce the likelihood of deterioration, and the use of refrigerated vans, which are currently not used.

The committee were assured that new IT infrastructure would result in standardisation of test results and would be compatible with GP and hospital computer systems as concerns were raised about IT infrastructure compatibility.

Members questioned the impact additional transportation of samples would have on the environment and climate change. The response was that the NHS was committed to producing a carbon neutral service by 2023. In line with this, the new pathology hub would provide electric car charging points; have solar panels installed on its roof; and all transport vehicles could be electric. Ensuring the hub's construction was carbon neutral had also increased building costs by £2.5m, but this was considered a worthwhile investment.

The committee noted the report and felt the changes to pathology services were not considered to cause substantial variation to services for Lancashire's residents. A further report would be received by the Health Scrutiny Steering Group in 12 months' time to provide an update on progress and assurance that the programme of work remained on track.

Councillor Alex Hilton
Lead Member Health Services
Chorley Borough Council.

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