

## MINUTES OF A MEETING OF THE HEALTH OVERVIEW AND SCRUTINY COMMITTEE HELD ON 6 MARCH 2019 FROM 7.00 PM TO 8.20 PM

### **Committee Members Present**

Councillors: Kate Haines (Vice-Chairman, in the Chair), Jenny Cheng, Andy Croy, John Jarvis, Abdul Loyes, Ken Miall, Rachelle Shepherd-DuBey, Mike Haines (substituting Bill Soane) and Ian Pittock (substituting Clive Jones)

### **Others Present**

Malcolm Richards

Jim Stockley, Healthwatch Wokingham Borough

Madeleine Shopland, Democratic & Electoral Services Specialist

Rhosyn Harris, Public Health

Angela Morris, Director Adult Services

Helen Woodland, Assistant Director Provider Services, Optalis

Rebecca Clegg, Chief Finance Officer, NHS Berkshire West Clinical Commissioning Group

### **39. APOLOGIES**

Apologies for absence were submitted from Councillors Clive Jones and Bill Soane.

### **40. MINUTES OF PREVIOUS MEETING**

The Minutes of the meeting of the Committee held on 21 January 2019 were confirmed as a correct record and signed by the Chairman.

### **41. DECLARATION OF INTEREST**

There were no declarations of interest.

### **42. PUBLIC QUESTION TIME**

There were no public questions.

### **43. MEMBER QUESTION TIME**

There were no Member questions.

### **44. PREPARING FOR BREXIT - HEALTH**

Rhosyn Harris, Public Health and Rebecca Clegg, Chief Finance Officer, NHS Berkshire West Clinical Commissioning Group (CCG), provided an update on preparing for Brexit – health.

During the discussion of this item the following points were made:

- Rhosyn Harris reminded Members that with regards to local authorities it was government policy that specific plans for a possible no deal situation were not shared publicly.
- Under the Civil Contingency Act 2004 local authorities were Category 1 responders and as such they were required to assess the risk of emergencies occurring and use this to inform contingency planning, put in place emergency plans and to put in place business continuity management arrangements.
- Nationally there was approximately 1.6million jobs in the social care sector, the majority of which were with independent providers. Approximately 7% were with local authorities. Nationally, approximately 104,000 social care posts were held by EU

nationals and 71% of these either held British citizenship or were eligible for settled status. Members were informed that the estimated proportion of the adult social care workforce with an EU nationality had not seen a big decrease.

- In the South East there were 3,450 organisations providing care at over 6,900 locations and 181,000 full time equivalent (FTE) jobs of which 12% of post holders were EU Nationals. In the Borough there was 3,700 full time equivalent social care jobs; 3% of these were within the local authority, 89% were in the independent sector and 8% were direct payment recipients. 444 posts (12%) were held by EU Nationals.
- Members were advised that overall it was considered that there was a low risk of disruption to local social care delivery in the short term.
- Mitigations included the EU Settlement Scheme and wider work to address recruitment and retention of the Adult Social Care workforce.
- Rebecca Clegg indicated that she was the nominated lead for Brexit for the CCG. The NHS had been asked to prepare in the context of the possibility of a no deal situation. Preparations could be adapted should other outcomes occur.
- The Committee was informed that the NHS was used to managing risk and system pressures and that Emergency Preparedness, Resilience and Response (EPRR) processes and procedures were in place. Existing command and control protocols and systems that were familiar for information-gathering, assurance, direction and advice, would be used. Additional capacity would be added at both regional and national levels.
- It was noted that NHS Berkshire West CCG was a Category 2 responder (a supporting agency).
- The Department of Health and Social Care had issued EU Exit Operational Guidance in December 2018, which outlined what actions providers and commissioners of health and social care services should take to prepare for, and manage, the risks of a no deal exit scenario. Rebecca Clegg highlighted what action the CCG was required to take including preparing business continuity plans for a no deal EU exit, by the end of January 2019; and carrying out a no deal EU exit exercise to test business continuity plans by the end of February 2019. Members were informed that the business continuity plans of 14 practices had been tested and that a report of findings would be shared with all practices in the area.
- The NHS had been asked to prepare specifically in seven key areas:
  - Supply of medicines and vaccines;
  - Supply of medical devices and clinical consumables;
  - Supply of non-clinical consumables, goods and services;
  - Workforce;
  - Reciprocal healthcare;
  - Research and clinical trials; and
  - Data sharing, processing and access
- Ensuring continuity of medical devices and clinical consumables was discussed. Measures that would be taken included a centralised stock build; preparing suppliers; prioritisation of medical products; dedicated supply channels for products that had a supply centre located within the EU; additional warehouse capacity and the provision of advice to NHS providers.
- With regards to medicines, Rebecca Clegg highlighted issues under consideration including the undertaking of a medicine supply assessment, considering alternative transport routes; vaccine stocks; clinical research including trials; unlicensed medicines and a serious shortage protocol. In addition the Government had advised to have six weeks additional supplies of medicines to avoid disruption potentially caused by a possible no deal EU exit.

- With regards to data, guidance had been issued on the actions that organisations needed to take in order to ensure continuity of access to, processing and sharing of personal data. An early review of data flows and contracts to understand what data was sent and received from overseas, had been undertaken.
- With regards to workforce, the overall assessment was that there was a low risk of disruption to local service delivery in the short term.
- Councillor Miall commented that many paramedics, volunteer drivers and delivery drivers may currently be driving in the UK using EU drivers licences and that should there be a no deal EU exit these may no longer be accepted. He questioned whether consideration had been given to this and whether these drivers would be required to gain UK drivers licences. Rebecca Clegg indicated that she would follow this up with South Central Ambulance Service.
- Councillor Miall went on to ask about the preparedness of private companies. Rebecca Clegg indicated that all providers were required to have business continuity plans in place.
- Councillor Loyes questioned whether 6 weeks additional supply of medicines would be sufficient and was informed that this was what had been recommended by central Government.
- Councillor Shepherd-DuBey commented that if there was a £30,000 salary threshold for skilled workers moving to the UK there would be a detrimental effect on the social care sector. She commented that the number of staff coming from the EU was reducing and questioned how they would be replaced. Rhosyn Harris commented recruitment was an issue locally due to the high cost of living in the area.
- Councillor Richards asked about the supply and transportation of medicine.
- Councillor Croy stated that he believed that workforce should be considered a greater risk than 'low' and asked that this be fed back. Recruitment and retention was already an issue locally.
- Councillor Croy went on to ask about a potential shortage of radioisotopes in the event of a no deal EU exit.
- In response to questions from Councillor Mike Haines, Rebecca Clegg indicated that the CCG's data was based in the UK. Greater awareness was sought in relation to cloud based storage.
- Councillor Mike Haines also asked whether staff qualifications would still be recognised in the EU and vice versa.

**RESOLVED:** That

- 1) the update on preparing for Brexit – health be noted.
- 2) Rhosyn Harris and Rebecca Clegg be thanked for their presentation.

#### **45. WOKINGHAM BOROUGH COUNCIL AND OPTALIS RESPONSE TO A RECENT HEALTHWATCH REPORT**

At the previous Health Overview and Scrutiny Committee meeting Members had viewed a video interview between Healthwatch Wokingham Borough and a member of the public regarding their experience with the START team. Angela Morris, Director Adult Services and Helen Woodland, Assistant Director Provider Services, Optalis provided an update on the case. Officers had met with the family.

Angela Morris explained the assessment process. In the first instance a social worker undertook an assessment of the customer's needs. In the particular case a referral had been made to the START team and an assessment made on how a particular identified

need could be met. Helen Woodland indicated that the role of Optalis was to help the customer to become more independent.

**RESOLVED:** That

- 1) the update be noted.
- 2) Angela Morris and Helen Woodland be thanked for their update.

#### **46. IMPACT OF FUNDING CUT ON HEALTHWATCH WOKINGHAM**

The Committee received a report regarding the impact of funding cuts on Healthwatch Wokingham Borough.

During the discussion of this item the following points were made:

- Jim Stockley commented that the report had been prepared in response to questions from the Committee regarding the impact of a cut in the Healthwatch budget.
- Healthwatch Wokingham Borough had been established in April 2013 as a Community Interest Company to deliver the Healthwatch remit. At that time the budget had been £107,000. The budget had remained the same until competitive rebidding of contract in September 2018, when this was reduced to £98,000, although the true budget was less once inflation was factored in. It was acknowledged that the Council had maintained the funding for a number of years and not reduced it until the 2019 Financial Year.
- Much of Healthwatch Wokingham's Borough's costs were operational.
- It was noted that there was no longer a volunteer co-ordinator.
- Angela Morris commented that officers valued the service provided by Healthwatch Wokingham Borough and the contribution that they made. She highlighted the national picture for the funding of Healthwatches.
- In 2018 in Wokingham Borough, funding had been reduced by approximately 7%. The new contract had been advertised at £100,000 and Healthwatch Wokingham Borough had bid £98,000. The tender bid had been assessed at that price. Councillor Miall asked how it had been decided that the contract would be £100,000.
- Contract review meetings between Healthwatch Wokingham Borough and Officers were held every 3 months.
- Councillor Richards asked what Healthwatch Wokingham Borough could not provide following the reduction in its funding. Jim Stockley confirmed that Healthwatch Wokingham Borough were able to meet the contract but were now less able to undertake specific additional projects on matters of concern to residents.
- Members questioned whether additional funding could be identified to fund Healthwatch Wokingham Borough to undertake specific projects in the public interest, if required. Officers agreed to follow this up.
- Councillor Croy thanked Healthwatch Wokingham Borough for the work it and its volunteers carried out. He expressed concern that historically inflation had not been applied to the contract.
- In response to a question from Councillor Croy regarding the impact of focusing only on adult mental health as a priority, Angela Morris commented that there was no expectation for Healthwatch Wokingham Borough to deliver over the contract.
- The Committee was invited to an event on 25 March at Wokingham Town Hall 6.30pm at which groups would be presenting on small projects funded by Healthwatch Wokingham Borough to further engagement with hard to reach groups.

- Councillor Kate Haines emphasised that the Committee wanted to see the continuation of conversations between Officers and Healthwatch Wokingham Borough.

**RESOLVED:** That

- 1) the report on the impact of funding cuts on Healthwatch Wokingham Borough be noted;
- 2) Healthwatch Wokingham Borough be thanked for their report.

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