



# Notice of a public meeting of Health and Adult Social Care Policy and Scrutiny Committee

**To:** Councillors Doughty (Chair), Hook (Vice-Chair), Barnes,

Heaton, Vassie, Cullwick and Wells

**Date:** Tuesday, 22 November 2022

**Time:** 4.30pm

**Venue:** The Snow Room - Ground Floor, West Offices (G035)

### <u>AGENDA</u>

#### 1. Declarations of Interest

At this point in the meeting, Members are asked to declare any disclosable pecuniary interests or other registerable interests they might have in respect of business on this agenda, if they have not already done so in advance on the Register of Interests.

**2. Minutes** (Pages 1 - 10)

To approve and sign the minutes of the meeting held on 28 September 2022.

# 3. Public Participation

At this point in the meeting members of the public who have registered to speak can do so. Members of the public may speak on agenda items or on matters within the remit of the committee.

Please note that our registration deadlines are set as 2 working days before the meeting, in order to facilitate the management of public participation at our meetings. The deadline for registering at this meeting is **5:00pm** on **Friday 18 November 2022.** 

To register to speak please visit <a href="https://www.york.gov.uk/AttendCouncilMeetings">www.york.gov.uk/AttendCouncilMeetings</a> to fill in an online registration form. If you have any questions about the registration form or the meeting, please contact Democratic Services. Contact details can be found at the foot of this agenda.

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During coronavirus, we made some changes to how we ran council meetings, including facilitating remote participation by public speakers. See our updates (<a href="http://www.york.gov.uk/COVIDDemocracy">http://www.york.gov.uk/COVIDDemocracy</a>) for more information on meetings and decisions.

# 4. Recommissioning of Sexual Health and (Pages 11 - 20) Contraception Services

The purpose of this report is to seek feedback and comments from Health and Adult Social Care Policy and Scrutiny Committee ahead of the report to the Executive in February 2023.

# 5. Care Quality Commission (CQC) Inspection (Pages 21 - 26) Update - York and Scarborough Teaching Hospitals NHS Foundation Trust

Members will receive an update on the two inspections undertaken by the CQC in March and October 2022.

# 6. An update regarding Foss Park Hospital Care (Pages 27 - 32) Quality Commission (CQC) Inspection

This paper provides an update on the CQC registration of Foss Park, the 2021 Trust wide inspection of acute wards for adults of working age and psychiatric intensive care units; and subsequent actions taken. It also includes detail of an inspection into Trust wide specialist community mental health services for children and young people which took place 6 - 7 July 2022.

7. Work Plan (Pages 33 - 36)

Members are asked to consider the Committee's work plan for the 2022/23 municipal year.

### 8. Urgent Business

Any other business which the Chair considers urgent under the Local Government Act 1972.

## **Democracy Officer:**

Name – Louise Cook Telephone – 01904 551031 E-mail – louise.cook@york.gov.uk

For more information about any of the following please contact the Democracy Officer responsible for servicing this meeting:

- Registering to speak
- · Business of the meeting
- Any special arrangements
- Copies of reports and
- For receiving reports in other formats

Contact details are set out above.

This information can be provided in your own language.

我們也用您們的語言提供這個信息 (Cantonese)

এই তথ্য আপনার নিজের ভাষায় দেয়া যেতে পারে। (Bengali)

Ta informacja może być dostarczona w twoim własnym języku. (Polish)

Bu bilgiyi kendi dilinizde almanız mümkündür. (Turkish)

**(01904)** 551550



City of York Council	Committee Minutes
Meeting	Health and Adult Social Care Policy and Scrutiny Committee
Date	28 September 2022
Present	Councillors Doughty (Chair), Hook (Vice- Chair), Heaton, Vassie, Cullwick, Webb (Substitute for Cllr Barnes) and Wells
In Attendance	Cllr Runciman, Executive Member for Adult Social Care and Public Health Sharon Stoltz, Director of Public Health Joe Micheli, Head of Communities Jennie Cox, Senior Local Area Coordinator Alison Semmence, CEO, York CVS Christine Marmion, Deputy CEO, York CVS Steve Tait, Finance Manager, Adult Social Care Terry Rudden, Strategic Support Manager, Adults and Public Health Jamaila Hussain, Corporate Director of Adult services and Integration (Remotely) Pauline Stuchfield, Director of Customer and Communities (Remotely)
Apologies	Councillor Barnes

# 11. Declarations of Interest (5:30pm)

Members were asked to declare, at this point in the meeting, any disclosable pecuniary interests or other registerable interests they might have in respect of the business on the agenda, if they had not already done so in advance on the Register of Interests.

Cllr Webb declared a personal non prejudicial interest in agenda item 4 (Local Area Coordination and Social Prescribing update), in that he was a trustee of a community centre that was heavily involved in local area coordination.

#### 12. Minutes (5:31pm)

Resolved: That the minutes of the previous meeting held on 27 July 2022 be approved as a correct record and be signed by the Chair.

### 13. Public Participation (5:31pm)

It was reported that there had been no registrations to speak at the meeting under the Council's Public Participation Scheme.

# 14. Local Area Coordination and Social Prescribing update (5:32pm)

Members considered a report that provided a general update on the Local Area Coordination and Social Prescribing programmes introduced in the city in 2016.

The Head of Communities, the Senior Local Area Coordinator and the Chief Executive and Deputy Chief Executive of York CVS outlined a summary of the current status and work of both strength-based programmes, including what they were achieving separately and in collaboration. They highlighted how the programmes had evolved and worked together and reported that;

- Local Area Coordination and Social Prescribing were recognised as strength-based programmes that applied person centred approaches and supported people to achieve more healthy, happy and connected lives.
- The teams were primarily funded through the Better Care Fund (BCF).
- Local Area Coordination was an internationally recognised approach to creating networks of support around people to increase independence and reduce dependence on statutory services.
- The cost of living crisis was creating an unprecedented demand on both services, particularly for advice and support.
- The Local Area Coordination Team had supported 4630 people since the programme began in 2016. The programme was currently supporting 2193 people, even though the full caseload capacity for the team was 660.

- Mental health and wellbeing had been prevalent in the reasons for referral to Local Area Coordinators and the Social Prescribing service.
- A mixture of stories, key metrics and reporting data were used to evidence the work that the Local Area Coordinators undertook but the complexity of the work was hard to capture and reflect in the data.
- The stories demonstrated how the model was good at working with people who would otherwise be incredibly marginalized and the strength-based approach allowed Local Area Coordinators to build trust with people to address all the practical issues.
- Poverty and financial issues were becoming more common in referral to Local Area Coordinators and the programme was also seeing an increased demand from statutory services.
- York CVS had grown Social Prescribing in York, identifying gaps in the system where patients required additional holistic support. The team had grown exceptionally to support the most vulnerable across the four city Primary Care Networks and within Foss Park Hospital and York District Teaching Hospital.
- Social Prescribing empowered individuals to take more responsibility for their own health and wellbeing and to identify support networks within their community.
- The Ways to Wellbeing team were also funded through the Better Care Fund, and they were commissioned to deliver Social Prescribing to patients referred through secondary care health professionals.

The Director of Customer and Communities reiterated the key pressures across the teams and the challenging funding cycle.

In answer to various questions raised about the Better Care Fund programme, the workforce, systemic change, sustainability, volunteers, the demand for the service, the resources available within rural villages and the cost of living crisis, Members were informed that:

> A review of the BCF and the move to a multi-year funding agreement set out in the NHS White Paper allowed for the Local Area Coordination team to move to permanent contracts.

- Additional resource would assist both services to help sustain the large caseloads and provide job security, as the current funding programme was a continuing concern.
- The use of volunteers was an outstanding resource and although volunteering numbers had declined, some services were starting up again, such as the buddy role.
- Both teams had built strong strategic partnership relationships across the whole health and adult social care system and York CVS continued to locate funding from various sources. This funding supported York CVS' sustainability and allowed them to offer dedicated support to ensure a robust volunteer and community sector.
- Historically, funding streams had never been provided for core costs, but conversations were underway to reflect the current cost of living crisis.
- The local area coordination model included community building, which addressed areas that had no assets by actively building connected communities through strategic partnership working. York CVS also supported community development and had secured a small community transport fund.

Members commended officers for the service they provided, and they recognised how both teams sought to save costs across the whole health and adult social care system, and not just within the council. They agreed that the funding programme required a whole system solution, and Members welcomed an ambition to provide a whole city-wide local area coordination service. The Director of Public Health agreed to begin discussions with the Integrated Care System and the York Health and Care Partnership.

#### Resolved:

- (i) That the report and latest performance reports be noted.
- (ii) That there be an ambition to provide a city-wide Local Area Coordination service.
- (iii) That Local Area Coordination and Social Prescribing be discussed with the Integrated Care Service and the York Health and Care Partnership.

Reason: To keep the Committee updated on Local Area Coordination and Social Prescribing.

# 15. 2022-23 Finance and Performance Q1 Monitor Report - Health and Adult Social Care (6:45pm)

Members considered a report that provided a detailed view of the outturn position for Public Health (PH) and Adult Social Care for 2022/23.

The Finance Manager supporting Adult Social Care and the Strategic Support Manager supporting Adults and Public Health stated that the projected outturn position for Adult Social Care was an overspend of £1,750k. This assumed that £1.2m of savings and £2.8m of mitigations would be made by the end of the year. It was noted that some of the pressures were not reflected in the current projections and would add to the current overspend. Given the level of savings and mitigations still to be made, it was unlikely that further mitigations against these pressures would be achieved in year.

Public Health was expected to underspend by £117k which would be transferred to the earmarked Public Health reserve to fund future commitments, most notably, the investment in the Public Health Service and the pay award, if this was to be over and above what had already been forecasted.

The Corporate Director of Adult Services and Integration, the Finance Manager, the Director of Public Health and the Strategic Support Manager answered various questions raised by Members regarding mitigations, market prices, inflationary pressures, the workforce, adult safeguarding, dementia and service users. It was noted that:

- Staffing continued to be one of the main pressures on the Adult Social Care budget, as well as the market prices for beds and the need to reduce the price of care, particularly in nursing and residential care for older people.
- Mitigations were RAG (red, amber, green) rated and regularly presented to the Corporate Management Team to deliberate and where mitigations would not be achieved, replacement mitigations and savings would be considered to ensure the position did not deteriorate.

- The market prices for beds were currently higher than the City of York Council's (CYC) standard rates. CYC's standard rates were agreed as a fair cost of care exercise with providers.
- Work was underway to stabilize the spot purchase market with health colleagues, as some current prices in the care market had inflated since Covid 19.
- A nationwide exercise from Local Authorities was being undertaken and this would help inform a fair cost of care from April 2023.
- An accounting exercise had been developed for home care agencies asking for increases.
- To help reduce the use of agency staff and recruit more permanent staff, an improved career progression structure for Social Workers had been developed.
- Several of the safeguarding issues reported were of a low concern and were around care being provided in a domestic setting.
- Robust safeguarding processes were now in place and officers worked closely with Public Health to ensure all the care establishments were visited to assess the quality of the service they provided.
- Although York was within the upper quartile of performance amongst England's Local Authorities, it was still a concern that only 40% of York's carers had reported that they were extremely or very satisfied with the care and support they had received from services.

The Executive Member for Adult Social Care and Public Health confirmed that City of York Council's Dementia Strategy was launched on Monday 26 September and one of the priorities being addressed was for better diagnoses.

During discussion, the Finance Manager agreed to seek further clarification on:

- Any provisions that had been made available to individuals and organisations experiencing fuel poverty.
- Whether care homes had been encouraged to retrofit, particularly inefficient heating and insulation systems.
- York's performance in the 2021-22 Carers' Survey compared to the 2018-19 consultation, particularly in relation to how satisfied or dissatisfied carers were with the support.

The Director of Public Health confirmed that the impact of Covid 19 would cause variations within some of the performance data, including within the results of the 2021-22 survey of Adults Carers in England.

Members thanked officers for their report and update.

#### Resolved:

- (i) That the report and update be noted.
- (ii) That further clarification be circulated to Members on the Carers' Survey, retrofitting within care homes and fuel poverty support.

Reason: To update the Committee on the final financial and performance position for 2022-23.

# 16. York Health Trainer Service and NHS Health Checks - update (7:20pm)

Members considered a report that provided an update on the York Health Trainer Service and commissioned NHS Health Checks Service.

The Director of Public Health noted that the Health Trainer Service provided individuals with treatment and support to tackle the things that increased the risk of ill health, such as smoking, unhealthy diet, alcohol and the lack of physical activity. These risk factors all contributed to cardiovascular disease, respiratory disease and cancers. The service also worked closely with the Local Area Coordinators and Social Prescribing teams to support residents to make positive behaviour changes.

The NHS Health Check programme was a mandated programme that aimed to help prevent heart disease, stroke, diabetes and kidney disease. The programme was aimed at people aged between 40 and 74 and following a relaunch of the service and insufficient budgets, a decision was made to restrict the number of people invited for a check each year and to only target the population groups that were at greatest risk.

During discussion and in answer to Members questions, it was noted that:

- The Health Check programme was offered to those living in a more deprived postcode and to those whose cardiovascular disease outcomes were often poorer. The data to support this initiative was provided from various sources including GP practices, population level data and public health.
- The Health Trainers worked with individuals to devise a personalised support package, that would not stigmatise.
- A harm reduction service was also available to those that did not want to fully quit smoking or drinking alcohol.
- The cost of living crisis was predicted to put further increased pressures across all health and care services.
- A whole system partnership approach should ensure those residents eligible for a health check would be contacted, although further communication was required to ensure eligible residents were aware that they could contact their GP direct to request a Health Check.

During discussion of the item, the Executive Member for Adult Social Care and Public Health stated that the use of ecigarettes had become more prevalent with young people and a campaign was to be launched to raise awareness of the risk factors.

The Director of Public Health agreed to meet with Committee Members who represented rural wards to consider rural deprivation and access to information.

[7:35pm Cllr Runciman left the meeting]

#### Resolved:

- (i) That the report be noted.
- (ii) That the Director of Public Health liaise with the Committee Members who represented rural wards.

Reason: To keep the Committee updated on the York Health Trainer Service and NHS Health Checks.

## 17. Work Plan (7:43pm)

Members considered the 2022/23 draft work plan for the Committee.

It was noted that:

- The Commissioned Joint Committee with Children, Education & Communities Policy and Scrutiny Committee, to consider the draft Autism Strategy and healthy child update, had been rescheduled to take place on 9 November 2022.
- The Integrated Care Service would be invited to attend a Health and Adult Social Care Policy and Scrutiny Committee on 14 December and an invite would be extended to representatives from the five Place Boards.
- That the Health and Adult Social Care Policy and Scrutiny Committee on 22 November 2022 be scheduled to begin at 4:30pm.

The Director of Public Health noted that the recommissioning of the sexual health service would be considered by Executive in January 2023, and she suggested that this item could be considered by the Committee on 22 November 2022.

Following discussions on rescheduling the updates on elective care post pandemic, access to GP services, oral health in schools, the Dementia Strategy and children's healthy weight, officers agreed to consult with report authors to finalise the work plan.

#### Resolved:

- (i) That the work plan be considered and finalised.
- (ii) That the recommissioning of the sexual health service be considered at the 22 November 2022 Committee meeting.
- (iii) That the Health and Adult Social Care Policy and Scrutiny Committee be scheduled to begin at 4:30pm on 22 November 2022.

Reason: To keep the Committee's work plan updated.

Cllr Doughty, Chair [The meeting started at 5.30pm and finished at 8.10pm].

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# Health and Adult Social Care Policy and Scrutiny Committee

**22 November 2022** 

Report of the Director of Public Health

Portfolio of the Executive Member for Adult Social Care and Public Health

# Recommissioning of Sexual Health and Contraception Services

### **Summary**

- 1. The purpose of this report is to seek feedback and comments from Health and Adult Social Care Policy and Scrutiny Committee ahead of the report to the Executive in February 2023. The Executive will be asked to make a decision on the options available to the council for the recommissioning of sexual health and contraception services, and to approve that the decision to award the contract be delegated to the Director of Public Health. In line with City of York Council's own Contract Procedure Rules and EU procurement legislation, the Council is required to procure these services through a competitive process.
- 2. Local authorities have a statutory responsibility to commission specialist sexual health services for their population. This includes HIV prevention, sexual health promotion, open access genitourinary medicine and contraception services.
- 3. The proposal is to award a new contract for five years with an option to extend by a further five years, subject to performance, up to a maximum of ten years. Extensions will be based on performance related quality measures and delivery of key health outcomes. This is considered to be the option which will lead to the Council obtaining best value for money whilst meeting its statutory obligations and provide a clinically safe and effective service for its residents.

#### Recommendations

- 4. Health and Adult Social Care Policy and Scrutiny Committee is asked to comment on the report and the recommendations below that will be presented to the Executive for decision:
  - a) Authorise officers within City of York Council to approach the market to inform the commissioning and procurement of a sexual health service to start from 01 July 2024.
  - b) Authorise the Director of Public Health, in discussion with the Executive Member with responsibility for the Public Health portfolio, to accept the highest scoring tender in accordance with evaluation criteria and award a contract.
  - c) Delegate authority to the Director of Public Health to manage this contract including any variations and planned extensions as per City of York Council policy and procedures.

Reason: To meet the council's statutory responsibilities under the Health and Social Care Act 2012 and enable sexual health services to be available to York residents that are clinically safe, value for money and responsive to local need.

## **Background**

- 5. City of York Council became responsible for commissioning sexual health and contraception services when responsibilities for public health functions were transferred to the Council in April 2013.
- 6. Sexual health and contraception services are funded by the local authority ring-fenced Public Health Grant Allocation. The Department of Health sets out a number of conditions for use of the public health grant. Local authorities are required to submit performance monitoring reports on sexual health outcomes as part of the Public Health Outcomes Framework.
- 7. Sexually transmitted infections (STI's) are a recognised issue for any city and York is no exception, all cities need to maintain services to protect the health of residents and prevent disease outbreaks.
- 8. Providing open access, all age services across the city reduces sexual health inequalities and risks to the population. Many of the

- adult population in York will be sexually active and so access to quality sexual health services improves the health and wellbeing of both individuals and communities.
- 9. A sexual health needs assessment is in the process of being completed following customer and stakeholder consultation. However we know that sexual ill-health is not equally distributed within the population. Strong links exist between deprivation sexually transmitted infections, teenage conceptions and abortions with the highest burden borne by women, men who have sex with men, teenagers, young adults and minority ethnic groups. Some groups at higher risk of poor sexual health can face stigma and discrimination, which in turn can affect their ability to access services.
- 10. The impacts of poor sexual health are felt across the population and the evidence base shows that investment in sexual health services results in a strong and substantial return on investment.
- 11. This proposal falls within Key Decisions due to the annual value of the contracts and as such will be presented to Executive for decision.

## **Proposed Procurement Strategy**

- 12. Working alongside our colleagues in commercial procurement, finance and legal we will consider a number of options to commission a sexual health and contraception service including the option of going out to competitive tender working towards a commencement date for the new contract to be implemented from 1 July 2024.
- 13. It should be noted, however, that the last two occasions the council went out to competitive tender for sexual health services in 2016 and 2019, there was no market response and on both occasions the contract was awarded to the existing sexual health services provider which is York and Scarborough Hospitals NHS Foundation Trust (the Trust). Therefore, we are also exploring the option of entering into a Section 75 partnership agreement with the Trust for award of a contract without going out to competitive award. It should be noted that North Yorkshire County Council have already entered into a Section 75 agreement with the Trust for provision of their sexual health service.

14. The tender evaluation will follow an 80% quality and 20% financial assessment model. This is to reflect the complex nature of the submission which cannot be dealt with on a lowest price submission weighting. A waiver will be submitted for approval for this methodology.

#### Service detail

- 15. The service specification will be developed as a result of several influencing factors: National statutory obligations, clinical safety, best practice guidelines, local needs analysis, stakeholder and customer consultation as well as benchmarking against other models in similar local authorities.
- 16. The service specification has not been included as part of this report. It is still being developed subject to feedback as part of the consultation.
- 17. The specification will set out City of York Council's ambition for the transformation of sexual health services in York and will explain the detailed requirements the Council have to provide the specialist expertise that will be vital in leading and achieving the desired outcomes for its residents.
- 18. Any service specification for this type of service must follow a recognised clinically safe framework which is set out at national level.

#### Consultation

- 19. A consultation exercise is being undertaken during the period September to December 2022 involving service users, the public, potential service providers and wider stakeholders. This includes:
  - a. Local Sexual Health Needs Assessment to be completed.
  - b. Equality Impact Assessment to be completed.
  - c. An engagement event took place on 25 October 2022 with potential providers. We are in the process of evaluating their feedback.
  - d. A service user questionnaire has been disseminated with paper copies also being available in the sexual health service.

- e. A wider stakeholder survey is also being disseminated together with face-to-face discussions with NHS partners.
- 20. On completion of these a report will be produced for the Executive outlining the feedback with recommendations for the future provision of sexual health and contraception services and the procurement options for Executive Decision.

#### **Options**

21. There are no options to consider in this report.

### **Analysis**

22. This is a report for information so that members of Health and Adult Scrutiny Policy and Scrutiny Committee are able to discuss any issues and make recommendations for consideration by the Executive when making their decision

#### **Council Plan**

23. The proposal directly relates to the Council Plan priority for Good Health and Wellbeing.

# **Specialist Implications**

#### **Financial**

- 24. York is one of the lowest funded local authorities in the country (£37 per head compared to £55 per head average) and, like other authorities, the Public Health Grant received from the Government reduced by approximately 2.6% each year from 2016/17 through to 2019/20 and these budget reductions have not been restored. In these circumstances, the Council is facing difficult decisions when service contracts are renewed.
- 25. A benchmarking exercise has shown that York spends just under 24% of our local authority public health grant allocation on sexual health services compared with the England average of 16.44%. It should be recognised, however, that York has one of the largest proportions of 15 to 24 year olds in its population who are the highest users of sexual health services and so it is reasonable that York spends a higher proportion than the national average.

- 26. Total spend on sexual health services in 2022/23 was £1,89 million which includes £330,000 for Long Acting Reversible Contraception delivered in GP surgeries.
- 27. There are no savings agreed for sexual health and contraceptive services as part of budget proposals. However, it is not anticipated that the local authority public health grant allocation will be increased and so efficiencies will need to be found against the sexual health services budget because of inflationary pressures on other areas of public health services.
- 28. Most importantly it is a recommendation from the Director of Public Health that we increase investment in child public health services provision to respond to the impacts of the Covid-19 pandemic. Overall, following a reallocation of funds for child public health services, the proposed budget available to commission sexual health and contraception services and award a contract from 2024 onwards will be in the region of £1.8 million per annum.
- 29. Given the importance of sexual health services provision within Public Health it is not currently proposed to seek further service reductions to be made over the length of the contract term.

# **Human Resources (HR)**

30. There are no Human Resources implications from this report.

# **Equalities**

- 31. The Council must, in the exercise of its functions have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it. The Council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons disabilities, and encourage people to participate in public life. The Council must have due regard to the need to tackle prejudice and promote understanding.
- 32. An Equality Impact Assessment is currently in progress and will be published along with the Executive report.

## Legal

- 33. Section 12 of the Health and Social Care Act 2012 imposes a statutory duty on local authorities to take such steps as it considers appropriate for improving the health of the people in its area and addressing behaviour that is detrimental to health. The provision of the services discussed within this report should therefore fall within this section.
- 34. The procurement of these services will be undertaken in accordance with the Public Contracts Regulations 2015 (PCRs) as well as in compliance with the Contract Procedure Rules of the Council. The legal and procurement team will advise and guide accordingly.
- 35. For the purposes of the PCRs, sexual health and contraception services would be subject to the PCR Light Touch Regime (LTR). LTR services are subject to a threshold of £663, 540 (as at October 2022) and it is understood that sexual health and contraception services will fall above this threshold.
- 36. Any potential Section 75 agreement with the York and Scarborough Hospitals NHS Trust for the provision of sexual health and contraception services would be subject to the requirements of the NHS Act 2006, the NHS Bodies and Local Authorities Partnership Arrangements Regulations 2000 and related law.
- 37. City of York Council currently has a Section 75 agreement with the NHS Humber and North Yorkshire Integrated Care Board for the provision of Long Acting Reversible Contraception (LARC) in primary care. Under this Section 75 agreement, the council has an obligation to commission a LARC service that covers both NHS gynaecological LARC and the council's contraceptive LARC services until 2026. The LARC element therefore will need to be dealt with separately. The legal options for this will be explored more fully in the Executive decision report.

#### **Crime and Disorder**

38. There are some shared links to crime and disorder, the service offer will include occasional contact with victims of sex crime,

domestic violence as well as illegal sex working, modern slavery and child sexual exploitation cases.

### Information Technology (IT)

39. There are no IT implications.

#### **Property**

40. There are no property implications.

### **Risk Management**

- 41. There are risks associated with securing a safe and effective service with the budget available. These key risks and mitigations are set out below:
  - Failed tender procedure
  - Inability to provide mandated sexual health service
  - Poor sexual health outcomes for the population of York including -
    - Reduced clinical safety leading to an increased risk of uncontrolled sexually transmitted infection outbreaks.
    - Negative social impact on the population of York e.g. a rise in under 18 conception rates leading to an increased demand on children's services
    - Increase in morbidity and premature mortality rates
  - Reputational damage to the Council for not meetings its statutory duty to ensure free and open access to sexual health services for its residents
- 42. These risks are being mitigated through partnership working and system wide public health leadership and ongoing clinical engagement with the York Health and Care Partnership and seeking to establish shared care pathways.
- 43. The risk of a failed tender procedure is being mitigated through market appraisal and soft market testing and by consideration of entering into a Section 75 partnership agreement with the current sexual health services provider if there is no market response.

#### **Contact Details**

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**Chief Officer Responsible for the report:** 

**Sharon Stoltz** 

Director of Public Health Sharon.stoltz@york.gov.uk

Report Date 14/11/2022

**Specialist Implications Officer(s)** 

Finance – Steve Tait, Finance Manager Legal – Ryan Bell Procurement – Mark Woolford, Category Manager

Wards Affected: List wards or tick box to indicate all

All 🗸

For further information please contact the authors of the report





# York and Scarborough Teaching Hospitals

**NHS Foundation Trust** 

Report to:	Health and Adult Committee	Social Care Policy and Scrutiny			
Date of Meeting:	22 November 20	22			
Subject:	CQC Inspection Update – York and Scarborough Teaching Hospitals NHS Foundation Trust				
<b>Director Sponsor:</b>	Simon Morritt – (	Chief Executive			
Author:	Caroline Johnson Governance	n – Deputy Director of Quality			
Status of the Report (please click on the appropriate box)  Approve ☐ Discuss ☐ Assurance ☒ Information ☒ A Regulatory Requirement ☐					
Trust Priorities Board Assurance Framework					
☐ Our People ☐ Quality and Safety ☐ Elective Recovery ☐ Acute Flow		Quality Standards Workforce Safety Standards Financial Performance Targets DIS Service Standards Integrated Care System			

# **Summary of Report and Key Points to highlight:**

The Trust have received two inspections by the CQC in March and October 2022. Following the inspection, the Trust was issued with a section 29A warning notice due to concern the trust did not have effective systems to ensure patient risk assessments were completed contemporaneously and the care provided to mitigate risk was in line with the assessment in relation to nutrition and hydration, pressure area care and falls prevention.

A further unannounced inspection from the CQC took place from 11 October 2022. The inspection focussed on Urgent & Emergency Care, Medical Services, and Maternity Services across York Hospital and Scarborough Hospital. The inspection lasted 2.5 days with inspection

activity ongoing throughout October and November, followed by well led interviews between 22-24 November 2022.

Positive feedback was received as follows:

**Nutrition & Hydration:** Improvement in systems to ensure patients received nutrition and hydration on medical wards were noted.

**NEWS2 and Risk Assessments:** Improvements in scoring, observations, and escalation of NEWS2 and risk assessments on medical wards were noted. A positive impact had been seen with the roll out of Nucleus, thus freeing up time to care for patients.

**Emergency Care (Scarborough):** Robust systems for managing demand within Scarborough Emergency Department was noted with clear systems for managing the ambulance waiting queue.

Areas for improvement were noted during the inspection, some of which required immediate attention from the Trust. As a result of the areas noted for improvement, immediate safety actions were implemented which have been further strengthened since the inspection. The immediate safety actions taken by the Trust have been communicated to the CQC to demonstrate safety and responsiveness.

The draft report for core services is expected to be received during November 2022. The well led inspection should be completed by the end of November 2022 with the draft report release date unknown at this time.

#### **Recommendation:**

- Note the positive findings highlighted during the CQC inspection.
- Note the areas assurance from the immediate safety actions implemented within the Trust following the identification of areas for improvement.

### **CQC Inspection Activity Report**

### 1. Introduction and Background

On 30 March 2022, the CQC had undertaken an unannounced focussed inspection at York Hospital. The inspection focussed on Medical wards and the fundamental basics of care delivery. The inspection lasted 1.5 days, spanning across seven wards.

Since this inspection the CQC have undertaken a further unannounced inspection 11-13 October 2022. The inspection focussed on Urgent & Emergency Care, Medical Services, and Maternity Services across York Hospital and Scarborough Hospitals. The inspection lasted 2.5 days with inspection activity ongoing throughout October and November, followed by well led interviews between 22-24 November 2022

The purpose of this report is to provide the Health and Adult Social Care Policy and Scrutiny Committee with the findings of the March inspection and assurance in relation to actions taken to address concerns raised. The formal report from the October inspection is not yet available, however, the preliminary feedback will be included in this report.

### 2. March 2022 Inspection Findings

On the 3 May 2022 the CQC issued the Trust with a section 29A warning notice due to concern the trust did not have effective systems to ensure patient risk assessments were completed contemporaneously and the care provided to mitigate risk was in line with the assessment in relation to nutrition and hydration, pressure area care and falls prevention.

The warning notice required the Trust to demonstrate improvements by the end of August 2022 and a full inspection was scheduled to take place within three months of August 2022. An unannounced inspection has since occurred on 11 -13 October 2022 and the Trust remains in the inspection phase until completion of the well-led review 22-24 November.

A comprehensive action plan has been implemented to address concerns, and delivery is overseen via a twice monthly Quality and Regulatory Assurance Group which reports through the governance structures to the Board.

Audits of the fundamentals of care delivery have been undertaken and positive improvements have been seen between audits. A key aspect of the improvement work has been the implementation of our electronic clinical record system Nucleus across all wards. This has replaced the paper record

system and provides greater oversight and assurance of the fundamentals of care delivery.

In their feedback letter following the recent unannounced inspection the CQC noted the following improvements:

- Nutrition and hydration on medical wards: We have seen improvements in systems to ensure patients receive nutrition and hydration on the medical wards at York and Scarborough.
- NEWS and risk assessments on medical wards at York: We have seen improvements in scoring, observation and escalation of NEWS and risk assessments on medical wards and noted the positive impact the introduction of the 'nucleus' system has had on releasing nurses time to care for patients.
- Management of demand within the Emergency Care Department at Scarborough. We have seen robust systems in place to manage demand within the department including clear systems of managing the ambulance waiting queue.

#### 3. Initial Feedback Received from the October 2022 Inspection

The Trust remains in the inspection phase pending the well-led review which takes place between 22-24 November, however the CQC have provided some initial feedback.

They have raised concerns regarding the following:

- The observation and management and documentation of the care of patients within the emergency department at York. This was particularly within the majors waiting room, ambulance queue and ready for transfer corridors.
- The use of midwives as scrub nurses in theatres which impacts upon staffing on the labour ward.
- Processes in relation to the closure of the maternity unit due to staffing pressures and the impact this has upon service users not being able to access the service.
- Environmental issues in the Emergency department at York and the maternity theatres in York
- Medicines management both in maternity and with the emergency department at York including the management of controlled drugs.

Immediate action has been taken to address concerns raised and assurances were provided to the CQC. The Trust has produced two improvement plans in relation to Emergency Care at York Hospital and Maternity Services, both of which have been shared with the CQC.

#### 4. Next Steps

The draft report for core services is expected to be received during November 2022. The well led inspection should be completed by the end of November 2022 with the draft report release date is currently unknown. There has been no further enforcement activity to date, although inspection activity is still ongoing. Upon receipt of the draft report, further improvement plans will be created and monitored through the pre-existing governance structures.

Date: 6 November 2022





# Health and Adult Social Care Policy and Scrutiny Committee

**22 November 2022** 

Report of Zoe Campbell, Managing Director, North Yorkshire, York, Selby Care Group, Tees Esk and Wear Valleys Trust

# An update regarding Foss Park Hospital CQC inspection Summary

1. This paper provides an update on the 2 November 2021 report to the Committee regarding the Care Quality Commission (CQC) registration of Foss Park, the 2021 Trust wide inspection of acute wards for adults of working age and psychiatric intensive care units; and subsequent actions taken. It also includes detail of an inspection into Trust wide specialist community mental health services for children and young people which took place 6 - 7 July 2022.

# **Background**

2. A previous report detailing the development and completion of Foss Park hospital in York, the CQC inspection of inpatient services on site, and the Trust wide inspection of acute wards for adults of working age and psychiatric intensive care units, (including subsequent actions), was presented to the Committee in November 2021. This paper aims to update the Committee on on-going improvement actions and progress and to advise of subsequent CQC inspections in 2022.

#### **Overview**

3. Foss Park Hospital was required to be registered with the CQC prior to operational opening. The inspection team were hugely impressed with our design, our knowledge and understanding of how we would use the new facilities to deliver high quality care. As a result, we received formal registration on the day of the inspection.

- 4. In January and March 2021 CQC inspected our acute wards for adults of working age and psychiatric intensive care units across the whole Trust. This included:
  - Ebor ward 18 bed female acute admission ward at Foss Park Hospital, York.
  - Minster ward 18 bed male acute admission ward at Foss Park Hospital, York
- 5. CQC noted that improvements had been made in the time between January and March 2021 however, overall, the Trust received a rating of 'requires improvement'
- 6. The report presented to the Health and Adult Social Care Policy and Scrutiny Committee in November 2021, noted the actions that had been taken following the inspection and up until November 2021.
- 7. Since then, the Trust has continued to make improvements and has taken further actions to improve care on acute working age adult wards. We can report to the Committee that:
  - The Trust has continued to invest in anti-ligature work and has spent circa £5m to date on transforming our sites.
  - Personal safes are now in use at Foss Park as the risk of not having somewhere to hold valuables and the possibility of related falls were a greater risk than the ligature risk, especially on organic wards.
  - Staffing skill mix, multidisciplinary teams (MDT) complement, and staffing gender ratios have been reviewed and developed for each ward.
  - We have invested financially in staffing establishments on the wards and have new levels of rostered staffing.
  - MDT roles and responsibilities have been reviewed to enhance clinical leadership and management oversight.
  - The SafeCare staffing module is now fully embedded.
  - Daily 'report out' meetings take place on each ward in a handover from night to day shift.
  - Targeted work has been undertaken with agency staff around induction and training and will continue.
  - A new Integrated Performance Report brings together and triangulates data from a range of sources. This is examined

- monthly by the Executive, the Trust Board, and the North Yorkshire, York and Selby Care Group Board.
- A new governance structure has been implemented that ensures operations/services benefit from dedicated, multi-disciplinary focus via groups that meet monthly to discuss and agree/monitor actions and improvement relating: risk management, quality assurance and improvement, people and culture; and use of resources.
- A Head of Risk has been appointed and a new risk policy and process has been implemented. This is already delivered more robust identification, monitoring and reviewing of risks and mitigating actions.
- We have invested in ethical international recruitment to fill gaps in staffing. Working with a number of other Trusts, we are currently looking to recruit circa 150 nurses and medics from India and are developing an invest to save business case in international recruitment.

(The above is an example of some of the actions that have been taken and is not an exhaustive list.)

## **Recent inspections**

- 8. An inspection of Trust wide specialist community mental health services for children and young people, (including our Children and Adolescent Mental Health Service (CAMHS) York East and West teams), took place 6 7 July 2022.
- CQC noted that improvements had been made since the last inspection. However the services overall were rated 'requires improvement'.

# 10. CQC reported that:

- There were still not enough staff in every team to meet the demands of the service. Some teams still had a high number of vacancies and high caseloads.
- Not all staff were appropriately trained in the mandatory skills required to fulfil their roles.
- Despite improvements made, some children and young people were still waiting a long time for treatment.

- The majority of children and young people had safety plans in place but where safety plans hadn't been created, there wasn't always justification recorded for this.
- Staff did not have access to personal alarms at North Durham and not all rooms at Middlesbrough and York were sound proofed.

#### 11. However:

- The service was achieving its targets of maintaining contact with children and young people on waiting lists.
- The premises were clean, well maintained and well furnished.
- We found the trust senior management team had responded promptly to address issues identified at the previous inspection and in the section 29A warning notice. However, this work was ongoing and had not been fully embedded in the service.
- 12. At the time of writing this report, an action plan is in place and has been submitted to CQC. We can advise the Committee of the following actions which have been undertaken to date:
  - A robust recruitment and retention programme has been developed and is in the process of being implemented.
  - iThrive is now the framework which has been adopted across the CAMHS service. Multi-agency transformation will be informed by this framework.
  - Conversations with partners are taking place around how demand can be addressed as a system (ICS) to understand how patients' needs are best met (including staffing skill mix and getting it right first time).
  - A caseload deep dive has been undertaken to reduce team's overall caseload size and to allow for more timely appointments.
  - Conversations have started around a whole system transformation with partner agencies to provide alternative offers to families experiencing mild to moderate mental health need in order to reduce the demands on CAMHS teams.
  - Sound proofing is being fitted in Orca House, York.

(The above is an example of some of the actions that have been taken and is not an exhaustive list.)

- 13. On 4 July 2 August 2022 an inspection of forensic inpatient and secure wards was undertaken. The resulting report noted that improvements had been made since last inspection. Overall the Trust was rated as 'requires improvement' for forensic inpatient and secure services. An action plan is in place and has been submitted to CQC.
- 14. CQC inspected wards for people with a learning disability or autism in 29-30 May 2022, 7-8 June 2022 and 22-23 June 2022. These services were rated' inadequate'. An action is being developed and is due for submission to CQC on 23 November 2022.
- 15. Although we do not deliver forensic inpatients, or have secure wards or wards for people with a learning disability or autism in York; the reports, learning and actions are still disseminated and used to ensure that the York, Yorkshire and Selby Care Group learns from issues, takes on good practice and makes improvements in its own practice. This is managed via weekly Patient Safety & Learning meetings (which also consider complaints and PALs data) and a monthly Fundamental Standards workshop which bring together a range of staff including Managing Directors, Modern Matrons, Therapies staff, Directors of Nursing, Medics and members of the Quality Improvement and People and Culture teams.

#### Recommendations

16. The Committee is asked to receive and note this briefing.

#### **Contact Details**

#### **Authors**

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# DRAFT - Health and Adult Social Care Policy and Scrutiny Committee Work Plan 2022/23

27 June 2022, 5:30pm (Informal Forum)	<ol> <li>Annual outline of aims and objectives for the coming Municipal year by Leader and/or relevant Portfolio Holders, including any significant issues likely to be in the Forward Plan.</li> </ol>
5 July 2022, 5:30pm Commissioned Slot	1. Dementia Strategy
13 July 2022, 1:00pm Joint CSMC / HASC Commissioned Slot - Deferred, date TBC	1. 10 Year Strategy - Health & Wellbeing
27 July 2022, 5:30pm	<ol> <li>An Integrated Care System (ICS) update (Jamaila Hussain)</li> <li>Health and ASC Finance and Monitoring Report (Q4) (Steve Tait)</li> <li>Work Plan</li> </ol>

28 September 2022, 5:30pm	<ol> <li>Local Area Coordination/Social Prescribing – Update on the various provisions (Joe Micheli/Jennie Cox/Christine Marmion)</li> <li>Health and ASC Finance and Monitoring Report (Q1) (Steve Tait/Terry Rudden)</li> <li>York Health Trainer Update and NHS Healthchecks (Peter Roderick)</li> <li>Work Plan</li> </ol>
Informal Meeting, 1 November 2022, 5:30pm	<ol> <li>Children's healthy weight update (Fiona Philips/Leigh Bell)</li> <li>Health and Social Care, Reablement Pathway update (Michael Melvin)</li> <li>Work Plan</li> </ol>
9 November 2022, 5:30pm (postponed from 27 September 2022) Commissioned Joint Committee with Children, Education and Communities Policy & Scrutiny Committee	<ol> <li>Draft Autism Strategy (Jamaila Hussain/Abby Hands)</li> <li>Healthy child service update (Fiona Phillips/Jodie Farquharson)</li> </ol>

	Recommissioning of Sexual Health and Contraception Services (Sharon Stoltz/Anita Dobson)
22 November 2022,	<ol> <li>CQC Inspection Update – York and Scarborough Teaching Hopsitals NHS         Foundation Trust. (Simon Morritt, Chief Executive and Caroline Johnson, Deputy         Director of Quality Governance)</li> </ol>
4:30pm	<ol> <li>An update regarding Foss Park Hospital Care Quality Commission (CQC)         Inspection (Zoe Campbell, Managing Director, North Yorkshire, York, Selby Care Group, Tees Esk and Wear Valleys Trust)     </li> </ol>
	4. Work Plan
14 December 2022, 5:30pm – Commissioned Slot	<ol> <li>Integrated Care System Overview — Including Elective Care Post Pandemic,         Access to GP practices and engagement with Scrutiny (Chief Executive of         Humber and North Yorkshire Health and Care Partnership)</li> <li>Work Plan</li> </ol>
	Health and ASC Finance and Monitoring Report (Q2/3) (Steve Tait/Terry Rudden)
21 February 2023,	2. Cost of Care Review – Cap of Care (Jamaila Hussain)
5:30pm	3. York Drug and Alcohol Strategy – (Peter Roderick/Ruth Hine)
Drangood items for	4. Work Plan

# Proposed items for consideration in the municipal year 2023/24:

• Update on children's healthy weight (Fiona Philips/Leigh Bell)

- Update on the Dementia Strategy (Jamaila Hussain)
- Children and Young People Plan / CAMHS Provision in York
- To receive the draft Market Position Statement (Jamaila Hussain)
- Update on oral health in schools, toothbrushing programme (Anita Dobson/Philippa Press)