



### Health and Social Care Scrutiny Board (5)

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**Time and Date**

2.00 pm on Wednesday, 5th March, 2014

**Place**

Committee Rooms 2 and 3, Council House, Coventry

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**Public Business****1. Apologies and Substitutions****2. Declarations of Interest****3. Minutes** (Pages 5 - 10)

(a) To agree the minutes of the meeting held on 5th February, 2014

(b) Matters Arising

**4. Commissioning Landscape for the City** (Pages 11 - 22)

Presentation by Coventry and Rugby Clinical Commissioning Group, who have been invited to the meeting for the consideration of this item

Rugby Borough Council Scrutiny Members have also been invited for this item and item 5 below

**3.00 p.m.****5. Referral by Healthwatch Coventry - Commissioning of Patient Transport Services** (Pages 23 - 30)

Briefing Note of the Scrutiny Co-ordinator

Representatives from Coventry and Rugby Clinical Commissioning Group have been invited to the meeting for the consideration of this item

**3.15 p.m.****6. Physical Healthcare of Learning Disability and Mental Health Patients**

The officers will report at the meeting

Representatives from University Hospitals Coventry and Warwickshire have been invited to the meeting for the consideration of this item

**4.15 p.m.**

**7. Outstanding Issues Report**

Outstanding issues have been picked up in the Work Programme

**8. Work Programme 2013-14 (Pages 31 - 38)**

Report of the Scrutiny Co-ordinator

**9. Any other items of Public Business**

Any other items of public business which the Chair decides to take as matters of urgency because of the special circumstances involved

**10. Meeting Evaluation**

**Private Business**

Nil

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Chris West, Executive Director, Resources, Council House Coventry

Tuesday, 25 February 2014

Notes: 1) The person to contact about the agenda and documents for this meeting is Liz Knight, Governance Services, Council House, Coventry, telephone 7683 3073, alternatively information about this meeting can be obtained from the following web link: <http://moderngov.coventry.gov.uk>

2) Council Members who are not able to attend the meeting should notify Liz Knight as soon as possible and no later than 1.00 p.m. on 5<sup>th</sup> March, 2014 giving their reasons for absence and the name of the Council Member (if any) who will be attending the meeting as their substitute.

3) Scrutiny Board Members who have an interest in any report to this meeting, but who are not Members of this Scrutiny Board, have been invited to notify the Chair by 12 noon on the day before the meeting that they wish to speak on a particular item. The Member must indicate to the Chair their reason for wishing to speak and the issue(s) they wish to raise.

Membership: Councillors M Ali, K Caan (By Invitation), J Clifford, C Fletcher, A Gingell (By Invitation), P Hetheron, J Mutton, H Noonan, H S Sehmi, D Spurgeon (Co-opted Member), S Thomas (Chair) and A Williams

**Please note: a hearing loop is available in the committee rooms**

If you require a British Sign Language interpreter for this meeting  
OR if you would like this information in another format or  
language please contact us.

**Liz Knight**

**Telephone: (024) 7683 3073**

**e-mail: [liz.knight@coventry.gov.uk](mailto:liz.knight@coventry.gov.uk)**

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# Agenda Item 3

**Coventry City Council**  
**Minutes of the Meeting of Health and Social Care Scrutiny Board (5) held at 2.00 pm on Wednesday, 5 February 2014**

Present:

Members: Councillor S Thomas (Chair)  
Councillor J Clifford  
Councillor C Fletcher  
Councillor H Noonan  
Councillor R Sandy (substitute for Councillor Hetherton)  
Councillor K Taylor (substitute for Councillor Williams)  
Councillor S Walsh (substitute for Councillor Ali)  
Councillor D Welsh (substitute for Councillor J Mutton)

Co-Opted Members: Mr J Mason, representing Mr D Spurgeon

Other Members: Councillor A Gingell

Other Representatives: Kerry Beasley, Coventry and Warwickshire Partnership Trust (CWPT)  
Sue Davies, Coventry and Rugby Clinical Commissioning Group  
Barry Day, CWPT  
Roisin Fallon-Williams, CWPT  
Veronica Ford, CWPT

Employees

P Barnett, People Directorate  
S Brake, People Directorate  
L Knight, Resources Directorate  
J Moore, Chief Executive's Directorate

Apologies: Councillors M Ali, P Hetherton, J Mutton, H S Sehmi and A Williams  
Mr D Spurgeon

## **Public Business**

### **46. Declarations of Interest**

There were no disclosable pecuniary or other relevant interests declared.

### **47. Minutes**

The minutes of the meetings held on 4<sup>th</sup> and 18<sup>th</sup> December, 2013 were signed as true records. There were no matters arising.

### **48. Transformational Change Programme - Coventry and Warwickshire Partnership Trust**

Further to Minute 80/12, the Scrutiny Board received a presentation from Roisin Fallon-Williams, Director of Strategy and Business Support, Coventry and

Warwickshire Partnership Trust (CWPT) on the Trust's Transformational Change Programme. Councillor Gingell, Cabinet Member (Health and Adult Services) attended the meeting for the consideration of this item.

The strategic objectives for this programme were:

- To deliver an exceptional patient experience first time, every time
- To provide excellent care ensuring effective person centred clinical outcomes
- To be an efficient organisation providing excellent services
- To be an employer for whom people choose to work
- To be an active partner, always ready to improve by working with others.

The presentation highlighted the Trust's clinical, enabling, and marketing strategies for the programme along with the delivery vehicles. Planning assumptions were outlined and the Board was shown the plan for the future state service model, which set out the proposal for a single point of entry to the service via the contact centre, a clinical triage to the appropriate unit and then a single trusted assessment.

An update was given on the following programme details:

- Integrated Children's Services
- Improving Access for Patients
- Secondary Care Mental Health
- Specialist Services
- Community Resource Centres
- Clinical System – new programme.

The presentation concluded by highlighting the programme headlines.

Members of the Board questioned the representative and responses were provided, matters raised included:

- The financial implications for the required improvements
- Clarification about the availability of beds for patients with acute mental health needs and why these patients needed to be sent outside of the city away from their families
- What the Partnership Trust was doing to lobby about the consequences of the change in commissioning which had meant patients being sent to specialists units elsewhere
- The benefits for employees from the transformational change programme
- A request for an assurance that the changes proposed had been designed taking account of the views of both patients and carers
- Feedback from the recent Care Quality Commission visit
- The Trust's current position regarding Foundation Trust status.

**RESOLVED that a progress report be submitted to a future meeting of the Board in approximately nine months.**

#### 49. **Changes to Mental Health Day Services (including Dementia Services)**

The Scrutiny Board received a report from Coventry and Warwickshire Partnership Trust (CWPT) which provided an outline and structure of the proposed dementia diagnosis pathway for older adults across Coventry and Warwickshire. Barry Day, Associate Director, Secondary Care Mental Health Services, CWPT, and Sue Davies, Head of Partnerships, Coventry and Rugby Clinical Commissioning Group attended the meeting for the consideration of this item. Councillor Gingell, Cabinet Member (Health and Adult Services) was also in attendance.

The report indicated that the current services for older adults in secondary care mental health services across Coventry and Warwickshire had quite different landscapes. There were a range of services which did not offer equal access for service users or carers. Reference was made to the number of teams operating from different localities. The current diagnostic pathway was predominately delivered by MAC nurses with support from other professionals. Post diagnosis support was sporadic, inconsistent and varied according to who delivered the service. The current services tried to support people in crisis without dedicated resources.

The Trust proposed that future services would become age independent offering an equitable provision of specialist assessment and treatment for service users and carers. With less dependence on in-patient bedded facilities, services would be delivered closer to peoples' homes with flexibility to meet patient and carers demands. In future there would be one single point of entry, which would be the initial point of contact for services, ensuring patients and carers received the right treatment, intervention and service delivered by the right person who had the skills and expertise. A trusted assessment would take place at the Community Integrated Practice Unit 18-21 (IPU).

The Community IPU 18-21 would be based in community resource centres (hubs) across Coventry and Warwickshire and a range of community based venues (spokes). There would also be a Crisis Response and Home Treatment Team to support service users and carers outside of working hours. Within the IPU 18-21 there would be a diagnosis pathway for dementia which would consist of services which would provide assessment, timely diagnosis, treatment and post diagnosis support and monitoring of medication. The pathway also reflected the needs of those with a diagnosis of dementia that required specialist advice or treatment within the community.

The post diagnostic service would be delivered in community settings to support service users and their carers on an individual or group basis.

Members of the Board questioned the representatives present and responses were provided, matters raised included:

- What services were provided for younger people presenting with dementia
- What happens if a GP fails to acknowledge that a patient has dementia
- The support to be given to carers and the importance of engagement
- The benefits of being able to maintain family links
- The need to sometimes place people with complex needs outside of the city
- Potential plans for providers to create new facilities in Coventry
- How will the new diagnosis pathway differ to ensure that people receive an early diagnosis and the appropriate support

- Partnership working to allow for broader pastoral care
- How the system will be able to cope with increasing numbers of patients with dementia
- Diagnosing dementia and depression and problems with suicides.

**RESOLVED that:**

**(i) A joint presentation on the multi-agency dementia strategy for the city be submitted to a future meeting of the Board in July 2014 with the appropriate partner organisations being invited.**

**(ii) Information on the different services available for older and younger sufferers of dementia to be circulated to all members of the Board.**

50. **Sexual Health Services**

The Scrutiny Board considered a report of the Operational Manager, Coventry and Warwickshire Partnership Trust (CWPT) detailing the work of the Integrated Sexual Health Service (ISHS) which formed part of the Primary Care and Wellbeing Directorate within CWPT. Information was provided on the patient groups accessing the service along with proposals for the future. Veronica Ford, Associate Director Primary Care and Prevention and Kerry Beasley, Lead Nurse, CWPT attended the meeting for the consideration of this item. Councillor Gingell, Cabinet Member (Health and Adult Services) also attended for the consideration of this issue.

The report indicated that service provision had been rapidly developing over the last few years and the team had been proactively responding to make significant changes to reflect the needs of the Coventry population. The underlying principle of the service was to provide patients with a positive experience when attending any part of the service with the aim of improving the sexual health of the local population. Reference was made to the commitment to work in collaboration with other partner services to achieve better outcomes for patients.

The Genitro-urinary Medicine (GUM) and Contraception and Sexual Health (CASH) services had integrated, supporting the delivery of a holistic model of care by offering a 'one stop' service. A range of care was offered including a full sexual health screening for patients with a full range of contraception methods as well as an appropriate plan of care. The report detailed the screenings undertaken.

The service now saw in the region of 14,000 patients through open access clinics and 14,000 patients through structured clinics.

The Board was informed about the monitoring of patient experiences. Surveys were undertaken on a monthly basis to gain patient feedback and action plans were developed to explore possible adaptation to address patients' views.

Future work included ensuring services continued to deliver excellent patient care at a time that was appropriate for patients but was also financially efficient; using a nurse led model of care; and further developing the integrated practice unit work ensuring more services were available to patients when they needed them, particularly HIV patients.



The Board questioned the representatives present on a number of issues and responses were provided. Matters raised included:

- The opportunities for working with both Coventry and Warwick universities
- The problems faced when attempting to engage with some of the faith schools in the city
- How the service worked with the different communities and which groups were difficult to reach
- How the service engaged with the prostitute population
- How the service was able to consult with young people

It was agreed that officers would pass on any links that might be helpful if the service was having difficulties reaching certain communities or schools/colleges.

**RESOLVED that:**

**(i) A progress report be submitted to a future meeting of the Board in twelve months.**

**(ii) Consideration be given to a possible fact finding visit by the Board.**

#### 51. **Outstanding Issues**

The Board noted that all outstanding issues had been included in the work programme, Minute 52 below refers.

#### 52. **Work Programme 2013-2014**

The Board considered the work programme for 2013-14 and it was agreed that, in order to be able to scrutinise the work of the Health and Well-being Board, a report of the Chair, Councillor Gingell would be submitted to a future Board meeting early in the new municipal year.

The Board also noted a briefing note of the Scrutiny Co-ordinator which advised of developments in the determination of priorities for the 2014/15 Quality Accounts for University Hospitals Coventry and Warwickshire (UHCW) and Coventry and Warwickshire Partnership Trust (CWPT). Task and Finish Groups, made up of Councillors from Coventry City Council and Warwickshire County Council and representatives from both Coventry and Warwickshire Healthwatch, had met with UHCW and CWPT to discuss performance against the 2012/13 Quality Account priorities and to discuss potential priorities for this year's Quality Account. The Chair, Councillor Thomas represented the City Council and the work had been led by Warwickshire County Council. Details of the draft priorities for both organisations were set out in appendices attached to the briefing note. It was anticipated that the work undertaken by the Task and Finish Groups would ensure that the process of Scrutiny engagement in the Quality Accounts would proceed more smoothly. It was intended to submit the Quality Accounts with a draft commentary to a Board meeting early in the new municipal year.

**RESOLVED that a report on the work of the Health and Well-being Board and a commentary on the Quality Accounts 2014/15 for University Hospital Coventry and Warwickshire and Coventry and Warwickshire Partnership Trust be submitted to a future meeting of the Board early in the new municipal year.**

**53. Any other items of Public Business**

There were no additional items of public business

(Meeting closed at 4.35 pm)

# Coventry and Rugby CCG

## Report to Health Overview and Scrutiny Committee March 2014



Working together to improve our local NHS

## Who we are

- 77 practices
- 466,000 population
- Significant health inequalities in Coventry
- Hard to reach communities
- Rugby has a young, growing population
- Key Partners

## History

- 3 CCGs working together to form one Clinical Commissioning Group
- Commissioning and QIPP budgets delegated in Spring 2011
- Clinical commissioning arrangements in place for 12/13 contract round
- Clinical Development Group for collaborative decision-making established for 18 months
- Coventry & Rugby CCG formed in June 2012

## **Our Strengths**

- Patients at the heart of decision making
- Membership engagement
- Our size gives resilience
- Clinical commissioners with a track record of achievement
- Quality & Safety
- Experienced managers supporting clinical leadership
- Partnerships
- Public Involvement

## **Budget Delegation 2012/13**

- 100% of Commissioning budgets delegated
- Acute activity (IP/DC/OP/A&E)
- Diagnostics
- Prescribing
- Mental Health
- Community
- CHC
- Management Allowance
- Total Budget = £556.6m

## **LHE Strategic Issues**

- Financial sustainability of acute Providers
- Clinical sustainability of some specialities
- Future of George Eliot
- CWPT FT Application



## CCG Achievements(1)

### ➤ Primary Care Quality & Safety

- Support for risk stratification DES
- Quality in prescribing (hypnotics)
- Integrated teams commenced in Rugby, social services roll out in Coventry, ambulance integration next step
- Adults and Children's Safeguarding training
- Telehealth (dermatology pilot and roll out of Florence)

## CCG Achievements(2)

### ➤ Frail Older People

- DNAR policy across Arden & EOL Workstream
- Care Homes quality & safety work
- Rehabilitation review
- Gerontology community support via video conferencing
- QOF QP (responsible prescribing in over 85's)

## CCG Achievements(3)

- Wellbeing in mental health
  - CAMH waits down
  - Psychiatric liaison service in place (under evaluation)
  
- Healthy Living and Lifestyle choices
  - GP leadership for national pilot 'sedentary behaviour change'
  - Infectious disease service review commenced

## CCG Achievements(4)

- Best Practice in Hospital Care
  - Review of integrated discharge team
  - Caesarean rates down
  - Stroke review underway
  - Enhanced recovery pathways implemented
  - Alcohol liaison nurses/frequent fliers work
  - Virtual Clinics – Urology
  - Health economy approach to pressure ulcers and falls
  - Blue tech implemented and used for high cost drugs
  - WET AMD Service expanded for Rugby residents

## Performance Issues

- FFT improving
- Caesarean rates improving
- Noro virus plans in place for winter
- Ambulance turnaround improved
- A&E 4 hour wait being achieved

## PTS Tender

|  | Time Period Allowed (Months) | Original                | Revised Timelines after pause |
|--|------------------------------|-------------------------|-------------------------------|
| Notice of tender issued to WMAS PTS that contract ends on 31 <sup>st</sup> March 2014 and service to be tendered | N/A                          |                         |                               |
| PQQ Advert, responses, evaluation and CCG Board Approval   | 6                            | January to June 2013    | November to December 2013     |
| CCG Board Approval of service specification and ITT questions  | 1                            | July 2013               | October to December 2013      |
| ITT Published and evaluation   | 4                            | August to November 2013 | January to May 2014           |
| CCG Board Approval, award letters and legal standstill period.   | 1                            | December 2013           | June 2014                     |
| New Provider implementation and mobilisation period. Includes TUPE requirements                                  | 3                            | January to March 2014   | July to September 2014        |



Coventry City Council

## Briefing note

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**To:** Health and Social Care Scrutiny Board (5)

**Date:** 5<sup>th</sup> March 2014

**Subject:** Referral by Healthwatch Coventry related to commissioning of Patient Transport Services.

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### **1 Purpose of the Note**

- 1.1 This note is intended to introduce the agenda item stemming from a referral from Healthwatch Coventry related to the commissioning of local Patient Transport Services.

### **2 Recommendations**

- 2.1 The Board are recommended to consider the documents provided with the agenda and any additional information provided by Healthwatch or the Coventry and Rugby Clinical Commissioning Group (CRCCG) and make any appropriate recommendations to commissioners related to future commissioning plans.

### **3 Information/Background**

- 3.1 The Health and Social Care Act 2012 established Healthwatch as a both a local body commissioned by local authorities, and a national body located in the Care Quality Commission. As part of the statutory powers of local healthwatch the Act allows referrals to local authority Health Overview and Scrutiny Committees (HOSCs) such as this Board.
- 3.2 Patient Transport Services for Coventry (and Warwickshire) are provided by West Midlands Ambulance Service under an historic contract negotiated with local Primary Care Trusts. Indeed NHS Coventry began work with colleagues in Warwickshire to re-tender this contract prior to the formation of Clinical Commissioning Groups. Healthwatch Coventry has taken a keen interest in the commissioning of this service, given a high degree of patient interest in the ability of the current contract / provider to meet the needs of the Coventry population.
- 3.3 Late last year following a process of engagement with Healthwatch Coventry regarding the specification for a new tender, a decision was taken by the local Clinical Commissioning Groups for Coventry and Warwickshire to postpone the re-tendering of this contract with a one year contract extension being put in place to maintain the current provider.
- 3.4 The letter from Healthwatch Coventry requesting the Board investigate this matter is appended to this briefing note, as is the response from the CCG.
- 3.5 It is open to the Board to make recommendations to local NHS bodies for further information or a proposed course of action following consideration of this item. Members will be aware that NHS bodies are required to respond after considering any such recommendation's within a specified period and provide any information requested.

#### **Briefing Note Author**

Peter Barnett  
Head of Health Overview and Wellbeing  
Tel: 02476 831145  
**25<sup>th</sup> February 2014.**

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Cllr Thomas  
Chair Scrutiny Board 5  
Coventry City Council  
The Council House  
Earl Street  
Coventry  
CV1 5RR

19 November 2013

Dear Cllr Thomas

### Official referral to Scrutiny Board 5 from Healthwatch Coventry

It is with some regret that I formally ask Scrutiny Board 5 to look into the following issues concerning the re-commissioning of patient transport services and wider concerns about commissioning process.

Healthwatch and Coventry LINK have pressed for improvement to patient transport services since Coventry LINK investigated patient transport for renal patients in 2011. We have been involved in the most recent re-tendering process since December 2012 when we were asked to join the PTS Project Board and take an active role in the tender process, for example at interview stage. We felt that this was an example of good practice in involvement and so began more detailed work which has now stretched over nearly a year.

Unfortunately, we now feel that we have reached the end of our ability to make progress and the Healthwatch Steering Group has significant concerns about the capacity and ability to commission a better service in the context of the new NHS architecture.

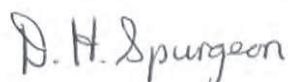
Our specific concerns are:

1. There have been significant delays to the tender process. The tendering was paused in order to improve the specification in June 2013, we supported this at the time as we felt the specification needed further work, however the delay has now been considerable.

2. We have been given different answers about whether the tender ever went out to advert or to the pre-qualification phase. If it did we fear that due to the delay the whole process may have to begin again.
3. There has not been sufficient co-ordination and involvement of different organisations in the process as the PTS Project Board convened last December has met very rarely. Meetings have been cancelled.
4. There does not seem to be adequate leadership of the tender process. When we have raised our concerns with the senior team at Coventry and Rugby CCG we have not had sense that anyone has ownership of the process. The Commissioning Support Unit has the role of carrying out the work but as a commissioned service itself will only do the work that they are asked to do by the CCG(s). There have been changes in the commissioners from the CSU involved in this tender and information did not seem to be passed on. We were informed at our Steering Group meeting on 5 November 2013 that all three Accountable Officers from the 3 CCGs covering Coventry and Warwickshire lead the tender. We have not seen this working. Therefore we have concerns about how successful tendering for such services can and will be managed within the current NHS structures.
5. Existing patient transport contracts have been rolled forward a number of times because of the delays in re-tendering. Therefore the service for patients has not improved. We are aware of issues of effectiveness and patient experience for both patient transport and patient transport for renal patients. Renal patients, for example, still experience the same issues identified by LINK in 2011.

A summary of the work LINK and Healthwatch has done is appended for your information. A copy of our most recent letter to Coventry and Rugby CCG regarding the tender are also attached. Please contact us via the office if you would like any further information.

Yours sincerely



David Spurgeon  
Interim Healthwatch Chair



## Summary of Coventry LINK and Healthwatch Coventry work related to patient transport

|                    |   |
|--------------------|---|
| 2010-2011          | Original LINK project to look at patient transport for renal patients - undertaken due to concerns about journey and waiting times for transport  |
| Aug 2011           | Follow up correspondence sent to commissioners regarding their response to LINK's recommendations   |
| November 2011      | Follow up visit to check on progress against LINK recommendations - identified that new journey cohort method and other changes had not led to an improvement in waiting time for transport   |
| January-March 2012 | Took part in discussions with commissioner regarding draft service specification for proposed re-tendering of patient transport service   |
| July 2012          | LINK provided written comment on draft specification and asked regarding the timescales for the tender  |
| December 2012      | LINK joined PTS Project Board convened by commissioners ( a schedule of regular meetings was timetabled however, a significant number have been cancelled).   |
| May 2013           | 7/5/13 letter sent to commissioner regarding journey time standards   |
| June 2013          | <p>Input into the design of questions to be used for the applications process for the tender - focus on questions about patient experience.</p> <p>Discussion at Healthwatch Steering Group of proposed amendments to journey time standards leading to letter being sent to commissioner (10/6/13) raising concerns regarding journey time and waiting standards. Plus follow up email correspondence.</p> <p>CCG paused the tender.</p> |
| July 2013          | Chair contacted Juliet Hancox to raise concerns about lack of information on progress and there was a chain of email correspondence.  |
| August 2013        | New commissioning lead in place for this tender at CSU. New version of specification sent to Healthwatch. Feedback provided.  |
| September 2013     | Meeting regarding the specification held. Written comments incorporating SG comments sent to lead commissioner.   |
| October 2013       | 18/10/13 Healthwatch letter to CCG raising concerns about the management of the tender process  |
| November 2013      | Discussion at Steering Group meeting on 5 November of what next. Advised by Esther Peapell that CCG would respond to Healthwatch letter soon but that some information was contractually sensitive. Letter of response received the next day.   |

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### PTS Tender Briefing

- The Warwickshire PTS contract covers Warwickshire North CCG, South Warwickshire CCG and Coventry and Rugby CCG as parties to this agreement.
- PTS tender process and service specification inherited from Warwickshire and Coventry PCTs.

### Tender Timelines

|  | <b>Time Period Allowed (Months)</b> | <b>Original</b>         | <b>Revised Timelines after pause</b> |
|--|-------------------------------------|-------------------------|--------------------------------------|
| Notice of tender issued to WMAS PTS that contract ends on 31 <sup>st</sup> March 2014 and service to be tendered | N/A                                 |                         |                                      |
| PQQ Advert, responses, evaluation and CCG Board Approval   | 6                                   | January to June 2013    | November to December 2013            |
| CCG Board Approval of service specification and ITT questions  | 1                                   | July 2013               | October to December 2013             |
| ITT Published and evaluation   | 4                                   | August to November 2013 | January to May 2014                  |
| CCG Board Approval, award letters and legal standstill period.   | 1                                   | December 2013           | June 2014                            |
| New Provider implementation and mobilisation period. Includes TUPE requirements                                  | 3                                   | January to March 2014   | July to September 2014               |

### **Reasons for delays in issuing ITT and involvement of Healthwatch Coventry**

- Following a review of the final (draft) tender service specification made available in June 2013, significant issues were identified with the specification by both Arden CSU and the local CCGs. It was identified that the specification was not reflective of changes in latest hospital working practices and meeting newly redesigned care pathways.
- Decision made to pause PTS tender to rewrite the service specifications and supporting KPI's to meet the needs of the acute providers.
- Consultation with interested parties undertaken on revised service specification. On 9<sup>th</sup> August 2013 Healthwatch Coventry requested to comment on revised service specifications
- 16<sup>th</sup> August 2013 Health Watch responded with comments on service specifications

- 17<sup>th</sup> September further comments from Healthwatch Coventry following meeting with Esther Peapell- Coventry & Rugby CCG
- 23<sup>rd</sup> September 2013 Coventry & Rugby CCG agree final changes to service specification.

#### **Implications of delaying in issuing ITT**

- Due to pause in issuing ITT there could be a potential risk from unsuccessful PQQ providers challenging the validation process. To mitigate the risk the tender process would need to restart at the PQQ stage.
- Tender timeline updated and identified a need to extend existing contract for at least 6 months.
- The current provider WMAS would only agree to a 12 months due to the level of investment required from an estates, staffing and vehicle point of view in order that they can continue to provide a service to meet the needs of the patients and service users in a safe way.
- Decision made in October by Co-ordinating Commissioner (South Warwickshire CCG) following consultation with Warwickshire North CCG and Coventry and Rugby CCG to extend the existing PTS Contract for 12 months to March 2015.
- Tender process to start early 2014.

Prepared by:

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Coventry and Rugby CCG

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January 2014.

## Health and Social Care Scrutiny Board (5) Work Programme 2013/14

Date 5<sup>th</sup> March 2014

*For more details on items, please see pages 3 onwards*

### 19 June 2013

- Induction and work planning
- UHCW Quality Account
- CWPT Quality Account
- Communicable Disease Control and Outbreak Management

### 24 July 2013

- Attendances at A and E – University Hospital site
- Amalgamation of two Coventry GP practices

### 25 September 2013

- Francis Report
- Adult Social Care Local Account
- Coventry Safeguarding Adults Board Annual Report
- Caring for Our Future – Consultation Response

### 6 November 2013

- ABCS – A Bolder Community Services
- Director of Public Health – Annual Report
- Local Blood Collection

### 4 December 2013

- Local Blood Collection Services
- Primary Care Plans
- UHCW Winter Plans
- Healthwatch Engagement Charter
- NHS 111

### 18 December 2013

- ABCS – Final Proposals
- Serious Case Review Mrs D

### 5 February 2014

- Sexual health services
- Mental Health Day Services / Dementia services

### 5 March 2014

- Commissioning landscape of the City (Jan / Feb)
- What impact has the CCG had?
- Has it added value? Is it cost effective?
- What is the impact on GPs and their services?
- Referral from Healthwatch re Patient Transport Services
- Physical healthcare of LD & MH patients

### 2 April 2014

- Care Quality Commission (CQC )
- Sexual Health Services – proposed re-commissioning

### 30 April 2014

- Health and Wellbeing Board Work Programme – Chair to attend a Board meeting
- Learning Disability Strategy
- Care Bill

## Date to be determined

- Patient discharge from UHCW
- Complaints UHCW
- Patient Experience in secondary care
- Coventry and Rugby CCG 5 year plan
- Financial position at the hospital
- Complaints at UHCW / wider health economy and how they are used to improve quality?

## Date to be determined

- NHS England Local Area Team
- Nutritional standards in inpatient care
- Public and Patient Engagement
- Private companies running GP practices
- Commissioning for Quality
- Commissioning of third sector organisations – particularly around support for LTC



| <b>Meeting Date</b> | <b>Work programme item</b>                           | <b>Lead officer</b>                     | <b>Brief Summary of the issue</b>   | <b>Source</b>   | <b>Format</b>             |
|---------------------|--|---|---|-----------------|---------------------------|
| <b>19 June 2013</b> | Induction and work planning                          | Simon Brake / Peter Barnett             | Short briefings on the remit of the Board and introduction to NHS organisations. First thoughts on the work programme.  |                 | Informal meeting / report |
|                     | UHCW Quality Account                                 | Andy Hardy (Chief Exec UHCW)            | NHS provider Trusts are required to produce annual statements of quality priorities and outcomes. The Board has a role in providing a short commentary on progress.   | Legislation     | Report / presentation     |
|                     | CWPT Quality Account                                 | Tracy Wrench (Director of Nursing CWPT) | As above  | Legislation     | Report / presentation     |
|                     | Communicable Disease Control and Outbreak Management | Jane Moore                              | CCC Public Health / Public Health England / LAT – discussion on MMR / Measles – prevention of communicable disease, local resilience.   | Chair's Request | Report / presentation     |
| <b>24 July 2013</b> | Attendances at A and E – University Hospital site    | UHCW / CCG / LAT / Local GPs            | Recently hospital chief executives across the region have expressed concerns about the continued growth in A&E Attendances. The Board has been advised of significant failures in meeting the 95% target for people being seen within 4 hours. Issues to discuss:<br>A&E Safety and Performance overall<br>What are the numbers? 24 hour admission rate, staffing levels<br>Breaches? What happens?<br>What are we doing about it<br>Trolley waits?<br>A&E links to other problems at the hospital / quality. | Work programme  | Report / presentation     |

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|--------------------------|--|-----------------------------|--|------------------------------|--|
|                          | Amalgamation of two Coventry GP practices        | NHS England                 | Two Coventry GP practices are proposed to be amalgamated into one practice and the local primary care commissioners (NHS England) are seeking the support of the Scrutiny Board for this proposal.   | Statutory request            | Report                                   |
| <b>25 September 2013</b> | Francis Report                                   | Simon Brake / Peter Barnett | <ul style="list-style-type: none"> <li>- What Francis means to local Trusts</li> <li>- How propose to implement duty of candour</li> <li>- Impact on patients in Trust premises and / or at home</li> <li>- What are implications for the CCG</li> <li>- What are the implications for the City Council</li> </ul> | HWB / Cabinet Member request | Briefing / attendance by NHS executives. |
|                          | Adult Social Care Local Account                  | Brian Walsh / Mark Godfrey  | This is the annual report of the Council related to services provided to Adult Social Care clients. The report summarises performance, provides commentaries from key partners and representatives of users and sets strategic service objectives for the future.  | Annual agenda item           | Annual Report                            |
|                          | Coventry Safeguarding Adults Board Annual Report | Brian Walsh / Sara Roach    | This multi-agency Board is responsible for co-ordinating arrangements to safeguard vulnerable adults in the City. The Annual Report sets out progress over the 2012/13 municipal year and provides members with some data to monitor activity.   | Annual Report                | Annual Report                            |
|                          | Caring for Our Future – Consultation Response    | Simon Brake                 | The Government is proposing to refresh the mandate to NHS England. This report summarises the Council's draft response.  | Consultation response        | Report.                                  |
|                          |  |                             |  |                              |  |

Health and Social Care Scrutiny Board (5) Work Programme 2013/14

|                         |   |                                  |   |                              |                                      |
|-------------------------|---|----------------------------------|---|------------------------------|--------------------------------------|
| <b>6 November 2013</b>  | ABCS – A Bolder Community Services        |                                  | Major programme of service re-design and change intended to reflect budget challenges for Adult Social Care services, part of wider Citywide consultation.  | Cabinet Member request       | Consultation document / presentation |
|                         | Director of Public Health – Annual Report | Jane Moore / Ruth Tennant        | The DPH has a statutory opportunity to issue Annual Reports which provide a commentary of local public health profiles and priorities.  | Annual agenda item           | Executive summary / presentation     |
|                         | Local Blood Collection                    |                                  | Deferred to December meeting  |                              |                                      |
|                         |   |                                  |   |                              |                                      |
| <b>4 December 2013</b>  | Local Blood Collection Services           | NHS Blood and Transplant Service | NHSBT are proposing changes to the local arrangements for collecting blood from local businesses. Officers of this Special Health Authority have been invited to attend to explain these and place them in the wider context of their work in collecting appropriate levels of blood from the local population. | Chair request                | Report/ presentation                 |
|                         | Primary Care Plans                        | Sue Price / Martina Ellery       | NHS England's Local Area Team has been invited to provide an update on recent developments in primary care in the City.   | Board request (July)         | Briefing Note                        |
|                         | UHCW Winter Plans                         | Andy Hardy / Meghan Pandit       | The Board has invited UHCW to provide it with an update on preparedness for expected Winter pressures at the University Hospitals site.   | Board request                | Briefing note / presentation         |
|                         | Healthwatch Engagement Charter            | Ruth Light / David Spurgeon      | Healthwatch Coventry has worked with Healthwatch Watrickshire to provide an engagement charter intended to support and enhance patient and service user engagement in local service development. It is submitted for the Board's endorsement.   | Request by Local Healthwatch | Briefing Note                        |
|                         | NHS 111                                   |                                  | Request current position and revised plans<br>Impact of this on UHCW A&E pressures  | Work programme               |                                      |
| <b>18 December 2013</b> | ABCS – Final Proposals                    | Brian Walsh / Pete Fahy          | The Board has requested that the Cabinet Report outlining final proposals following the consultation exercise are included in the work programme.   | Board request                | Cabinet Report                       |
|                         | Serious Case Review Mrs D                 | Brian Walsh / Simon Brake        | The Board has been advised that the Coventry Safeguarding Adults Board will shortly be ready to publish an Executive Summary of a Serious Case Review into the death of a vulnerable adult, Mrs D.  | Chair's agreement            | Report and Executive Summary         |

|                      |   |                                       |  |                     |                |
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| <b>February 2014</b> | Sexual health services  |                                       |  |                     |                |
|                      | Mental Health Day Services / Dementia services  |                                       |  |                     |                |
| <b>5 March 2014</b>  | Commissioning landscape of the City (Jan / Feb)<br>What impact has the CCG had?<br>Has it added value? Is it cost effective?<br>What is the impact on GPs and their services? | Juliet Hancox, Coventry and Rugby CCG | Rugby Borough Council Scrutiny Members invited.  | Work programme item | Briefing Note  |
|                      | Referral from Healthwatch re Patient Transport Services   | CCG                                   | Healthwatch Coventry has exercised its statutory power to request that the Scrutiny Board request further information from the CCG regarding the delayed plans to re-commission Patient Transport Services in Coventry and Warwickshire. The CCG has been invited to provide their response to Healthwatch concerns. | Statutory referral  | Briefing note. |
|                      | Physical healthcare of LD & MH patients   | UHCW                                  | UHCW has been invited to brief Members on the different ways the hospital manage the additional needs of patients attending medical wards with either mental health needs or learning difficulties.  | Work programme      | tbc            |
| <b>2 April 2014</b>  | Care Quality Commission (CQC )  | Lesley Ward (CQC)                     | Follow up to April meeting and developing role of CQC in particular re care homes/ social care settings. Linked to above   | Work programme      |                |
|                      | Sexual Health Services – proposed re-commissioning  | Dr Jane Moore / Nadia Inglis          | The Council's Public Health department are planning to re-commission sexual health services for the City in partnership with colleagues in Warwickshire  | Policy development  | Briefing Note  |
| <b>30 April 2014</b> | Health and Wellbeing Board Work Programme – Chair to attend a Board meeting   |                                       | Chair to be invited, examine Health and Wellbeing Strategy and progress  |                     |                |

|                              |   |                             |  |                    |                           |
|------------------------------|---|-----------------------------|--|--------------------|---------------------------|
|                              | Learning Disability Strategy  | Mark Godfrey                |  | Policy development | Report                    |
|                              | Care Bill   | Brian Walsh / Simon Brake   | The Government has published a draft Care Bill which will have a significant impact on adult social care services. | Policy development | Cabinet Report / Briefing |
| <b>Date to be determined</b> | Patient discharge from UHCW   |                             |  |                    |                           |
|                              | Complaints UHCW   |                             |  |                    |                           |
|                              | Patient Experience in secondary care  |                             |  |                    |                           |
|                              | Coventry and Rugby CCG 5 year plan  | Steve Allen / Juliet Hancox |  |                    |                           |
|                              | Financial position at the hospital  |                             |  |                    |                           |
|                              | Complaints at UHCW / wider health economy and how they are used to improve quality? |                             |  |                    |                           |
| <b>Date to be determined</b> | NHS England Local Area Team   |                             | what is their role? Role in A&E planning / primary care conversation / NHS front-door                              |                    |                           |
|                              | Nutritional standards in inpatient care   |                             | policies / procedures for inpatient providers<br>- Councillors visit / trial?                                      |                    |                           |
|                              | Public and Patient Engagement   |                             | By local Trusts / CCG role / Healthwatch's role and how the public interact with and influence Health Services.    | Work programme     |                           |
|                              | Private companies running GP practices  |                             | Progress report and examination of outcomes  |                    |                           |
|                              |   |                             |  |                    |                           |

|  |   |           |   |               |               |
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|  | Commissioning for Quality   | Pete Fahy | Following consideration of the ABCS consultation proposals the Board requested a paper on commissioning for quality in Adult Social Care. | Board request | Briefing Note |
|  | Commissioning of third sector organisations – particularly around support for LTC |           |   |               |               |
|  |   |           |   |               |               |
|  |   |           |   |               |               |