

**Coventry City Council**  
**Minutes of the Meeting of Health and Social Care Scrutiny Board (5) held at 10.00**  
**am on Wednesday, 21 November 2018**

Present:

Members: Councillor D Gannon (Chair)  
Councillor J Clifford  
Councillor P Hetheron  
Councillor D Kershaw  
Councillor R Lakha  
Councillor R Lancaster  
Councillor T Mayer  
Councillor C Miks

Co-Opted Member: David Spurgeon

Other Member: Councillor F Abbott, Cabinet Member for Adult Services

Other Representatives: Andy Hardy, University Hospitals Coventry and Warwickshire (UHCW)  
Steven Jarman Davies, Coventry and Rugby Clinical Commissioning Group (CCG)  
Fiona McGruer, Coventry and Warwickshire Partnership Trust (CWPT)

Employees:

S Caren, People Directorate  
V Castree, Place Directorate  
P Fahy, People Directorate  
L Knight, Place Directorate

Apologies: Councillor D Skinner

## **Public Business**

### **24. Declarations of Interest**

There were no declarations of interest.

### **25. Minutes**

The minutes of the meeting held on 17<sup>th</sup> October, 2018 were signed as a true record. There were no matters arising.

### **26. A and E Four Hour Performance**

With reference to Minute 27 below headed 'Winter Planning', the Board noted a report of Lisa Kelly, University Hospitals Coventry and Warwickshire (UHCW) which provided a summary of UHCW four hour performance including trend and

winter planning. Andy Hardy, University Hospitals Coventry and Warwickshire (UHCW) attended the meeting for the consideration of this item. Councillor Abbott, Cabinet Member for Adult Services was also in attendance.

The report highlighted that the current performance at Trust level (which comprised Adult Emergency Department (ED), Childrens ED, Emergency Gynaecology Unit, Eye Casualty, Rugby Urgent Care and the Walk-in Centre) was 89.1% year to date. In addition, recent performances had lifted the achievement with monthly recordings of 91% for September, 2018, 90.2% for October and 90.7% to date for November.

The Board noted that the Trust had achieved its four hour trajectory for each of the last six months. For the Adult ED, the four hour achievement had improved by 8.7% for the year to date, despite attendances being up by 4.9%. For October, 2018 the Trust treated or admitted 90.2% of patients within four hours of arrival at A and E compared to the target of 95%. The overall average for England was 89.1%, with performance for UHCW being benchmarked at 47 out of 130 general and acute trusts.

Information was provided on the UHCW winter plan which set out the operational delivery arrangements for winter 2018/19. Work was ongoing through a number of internal work streams which ensured UHCW understood the demand on all areas and their dependency on one another. Effective winter preparedness couldn't be achieved in isolation so UHCW was working in partnership at the Coventry and Warwickshire A and E Delivery Board to ensure plans were aligned and the system provided the necessary capacity to support delivery of the four hour standard. Detailed information was provided on the content of the winter plan.

**RESOLVED that the UHCW four hour performance be noted.**

## 27. **Winter Planning**

The board considered a briefing note and received a joint presentation which provided an update on the preparations for winter 2018/19 in order to manage pressures against health and social care including details on the key issues likely to impact on the system. Andy Hardy, University Hospitals Coventry and Warwickshire (UHCW), Steven Jarman Davies, Coventry and Rugby Clinical Commissioning Group (CCG) and Fiona McGruer, Coventry and Warwickshire Partnership Trust (CWPT) attended the meeting for the consideration of this item. Councillor Abbott, Cabinet Member for Adult Services was also in attendance.

The briefing note referred to the requirement for the Coventry and Warwickshire STP area to submit a winter assurance template to NHS England and the NHS Improvement Board to meet a number of objectives. The template was owned, monitored and managed by the Coventry and Warwickshire A and E Delivery Board. The Board oversaw an area covering over 900,000 residents, working across six NHS providers, two local authorities and three NHS CCGs. The template was submitted to NHS England on 26<sup>th</sup> October 2018.

The Board were informed that in many ways pressures experienced at winter continued to be felt beyond the winter period itself with parts of the system remaining under sustained pressure throughout the year. Details of A and E

attendances, admissions and walk-in centre attendances highlighted this fact. Demand for Adult Social Care measured in respect of referrals for support did not demonstrate any noticeable peaks over the winter period and nor did the number of people supported.

The objectives and measures put in place were very similar each year and focussed on:

- Ensure that there was enough capacity across health and social care to meet the pressures of winter
- Ensuring the system delivered care at the most appropriate level for the needs of patients and supporting more people within the community
- Ensuring the system was prepared for dealing with common expected winter illnesses and severe weather events
- Having an operational resilience network that enacted action plans at peak times through a robust escalation reporting and management process.

The briefing note set out the key activities to support winter resilience: profiling of elective work and reducing bed occupancy; primary care provision; Community Health Services; Local Authority; UHCW; seasonal flu, winter infections and cold weather; communication; and system escalation and co-ordination. The plans for each of these areas were detailed.

The Board were informed of the key issues which could have a detrimental impact on the ability to sustain a resilient system which included workforce capacity and weather and transport.

The presentation detailed the key priorities to be addressed in winter planning, highlighted the key areas of learning from 2017/18. Reference was made to the winter assurance template submitted to NHS England and NHS Improvement. No official feedback had been received to date.

The presentation provided a focus on whether the system was better placed than the previous year highlighting that at UHCW the position was far better with A and E performance sustaining at around 91% which was in line with the agreed system improvement trajectory. In addition the level of patients occupying a hospital bed with a delayed transfer of care had fallen by over 50% at UHCW. The current standard of 3.5% was being met. The level of patients still in hospital over 21 days had also fallen and was below the target for the Trust. The overall average length of fallen from 7.5 days in 2017/18 to 7.2 days for the same period in the current year.

The measures put in place by UHCW to deal with winter preparedness were detailed. The presentation concluded with an update on the media campaign associated with seasonal pressures and on system escalation and co-ordination.

Members raised a number of issues in response to the presentation and responses were provided, matters raised included:

- Was account taken of best practice from other hospital trusts who managed to achieve above the 95% target for the four hour wait at A and E
- A request for examples of new actions that had contributed to make the system more secure this year

- In light of the fact that the average length of stay for hospital admissions had reduced, was this having an impact on re-admissions and was it impacting on the quality of care received by patients
- As improvements had been achieved in respect of the early discharge of patients, was this causing pressures elsewhere in the system
- Concerns about the difficulties for patients to get a GP appointment which was impacting on A and E attendances
- Concerns about the problems for mental health patients in getting urgent medical support, particularly at weekends, and the problems for patients who had been assessed by the Crises Team and then still had to wait in A and E for a number of hours
- A concern about the significant numbers of young people in the city who were suffering with mental health issues
- The difficulties encountered by mental health patients in getting prescriptions for their medication
- In the light of insufficient funding for mental health, what were the difficult decisions that had to be made and how were priorities determined
- Which recent actions implemented across the system had had the biggest impact on the improvements
- The responsibility for alternative pathways of care
- Support for the successful partnership working
- Concerns about patients being kept on trolleys in A and E at night times
- Further information patients waiting for their prescriptions which could result in bed blocking
- A concern about the expectations and pressures put on family members to make immediate decisions about care homes to free up hospital beds
- Concerns about the level of reporting required to be made by the hospital in respect of performance and system pressures
- Details about the cessation of patient transport by West Midlands Fire Service
- The impact of the night time economy on A and E

**RESOLVED that:**

**(1) The update on the preparations for winter be noted**

**(2) The Chair, Councillor Gannon, to write a letter to The Right Honourable Matt Hancock, MP, Secretary of State for Health and Social Care informing him of the Board's concerns regarding the significant level of daily reporting required by hospital trusts, including UHCW, on performance and system pressures. This relates to daily correspondence with NHS Improvement and NHS England on levels of risk along with the daily regional and national calls to discuss operational issues and concerns.**

**(3) A detailed report on the issues and pressures relating to patients with mental health issues and their impact on the health system to be considered at a future meeting of the Board.**

**(4) Officers to investigate the opportunities for Licensing and Regulatory Committee and the health economy to work closely together to understand**

**the impact and possible mitigations of the night time economy on the health system.**

**(5) The Board's appreciation and thanks for all the work undertaken by UHCW and the health partner organisations to ensure that A and E performance is in a far better position now than in the previous year, despite increases in A and E attendances and emergency admissions, be conveyed to all those concerned.**

**28. Work Programme and Outstanding Issues 2018-19**

The Board noted their work programme for the current municipal year, noting that the programme would be updated to take account of the request for an additional report as detailed in the recommendation to Minute 27 above headed 'Winter Planning'.

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

There were no additional items of public business.

(Meeting closed at 11.20 am)