HEALTH SCRUTINY PANEL

A meeting of the Health Scrutiny Panel was held on Tuesday 8 February 2022.

PRESENT: Councillors D Coupe (Chair), D Davison (Vice-Chair), R Arundale, C Cooke

(Substitute for A Hellaoui), T Mawston, D Rooney and P Storey

ALSO IN

C Blair (Director Of Commissioning Strategy and Delivery) (TVCCG), E Cooper ATTENDANCE: (TVCCG), K Hawkins (Director Of Commissioning Strategy and Delivery – Prima

(TVCCG), K Hawkins (Director Of Commissioning Strategy and Delivery – Primary Care), M Kesavalu (Prospect Surgery) J Henderson (Prospect Surgery) S Sabir

(Prospect Surgery)

OFFICERS: M Adams, S Bonner, C Breheny, G Nicholson and K Smith

APOLOGIES FOR

Councillors A Bell, A Hellaoui and C McIntyre

ABSENCE:

21/111 DECLARATIONS OF INTEREST

There were no declarations of interest received at this point in the meeting.

21/112 MINUTES- HEALTH SCRUTINY PANEL - 11 JANUARY 2022

The minutes of the Health Scrutiny Panel meeting held on 11th January 2022 were submitted and approved as a correct record.

21/113 PROSPECT SURGERY - CQC INSPECTION UPDATE

The Panel was encouraged by the work being undertaken by the practice to remedy its current rating.

The Chair welcomed representatives of the Tees Valley Clinical Commissioning Group (TVCCG) and Prospect Surgery.

The TVCCG advised Members the update before them was being presented three months after the CQC's initial inspection in June 2021 and that a follow up inspection would be carried out in three months' time to provide a further rating. It was also noted the TVCCG was not the regulator and that they were working with Prospect Surgery to assist in their improvement journey.

While the practice remained in special measures all stakeholders including the Local Medical Committee, Primary Care Network and others were working together to ensure the practice improved on its current position.

The practice itself had worked hard to improve internal processes that would enable any changes to be sustainable. Key staff had also been recruited, including pharmacists, to ensure prescriptions were accurate and appropriate, especially in relation to his risk drug prescribing. To bolster this initiative a great deal of staff development had taken place to equip staff with the necessary skills to ensure patient safety and service quality were maintained.

Members were advised that cervical smear tests had increased from 49% at the time of the previous inspection to 70%, which was a significant improvement. It was also found that traditional methods of contacting patients proved to be ineffective. As such new methods of engaging with patients were now being employed to good effect.

Improved internal processes included full staff meetings every fortnight to ensure there was a holistic view of practice operations. All of these improvements had also led to improved patient reviews especially in terms of prescriptions of Gabapentin and Pregabalin.

A Member queried how many patients were being prescribed those drugs. It was clarified that while this a difficult area, a recent audit showed prescriptions for Pregabalin had decreased

from 147 in quarter one to 117 in quarter three while Gabapentin prescriptions had decreased from 166 in quarter one to 48 in quarter three.

A Member queried if GP surgeries were regularly inspected by the CQC. It was clarified the CQC periodically inspected GP Surgeries and that good ratings reduced inspection frequency.

A Member queried if the changes made by the practice would be beneficial to both the practice and to patients. It was clarified the improvements made should improve the quality of services for all.

It was also clarified that while Covid-19 had an impact on inspections this had been lessened.

Overall, the Panel were encouraged by the work undertaken by the practice and commended everyone involved for their efforts.

The Chair thanked all attendees for their participation. NOTED.

21/114 HEALTH INEQUALITIES - AN EDUCATIONAL PERSPECTIVE

The Chair welcomed representatives of the Council's Achievement and Public Health Teams to the meeting and invited them to present information about how educational outcomes could reduce health inequalities.

Members were advised the Government's *Levelling-Up Agenda* could provide £5 million of investment in education to areas with higher levels of deprivation, such as Middlesbrough.

The Panel was advised the Achievement Service supported 54 schools, 70 nurseries and 42 childminding services. Part of that support was to provide professional development and ensure children and young people were provided with the best possible life chances. It was noted there were several overlaps with the health service in this regard.

There were several initiatives that provided young people with the best possible life chances including the Best Start Pathway. As the first 1001 days of a child's development were seen as crucial, Best Start was intended to support the most vulnerable families. As such, Best Start supported young parents, via the school readiness team, to make sure their young children were school ready. The scheme was piloted in three areas of Middlesbrough last year and was now open to all families across the town.

Other initiatives included the Health Eating and Nutrition for the Really Young (HENRY) and Fussy Eaters. This was an evidence based approach that aimed to support babies and young people gain the best possible start in their lives.

Again this initiative focusses on the first 1001 days of a child's development whereby face to face interactions were made between practitioners and families to provide nutritional and healthy eating programmes. During 2021 102 families completed the programmes. As with all other initiatives of this kind, they were delivered virtually through the Covid-19 Pandemic.

To prepare children for school the Play and Learn Together initiative encouraged families to learn and play together in order to understand how to better interact with children in order to make them school ready. This was an eight week programme that was delivered jointly with the health service.

During 2021 136 families engaged with the programme, with 94 reporting an increase in their confidence to interact successfully with their children. This resulted in parents being able to verbalise their emotions and have a greater insight into their social and emotional positions.

A recent initiative was the Support to Talk scheme which was created in response to evidence young children's speech and language had been adversely affected by the Covid-19 pandemic. The scheme was designed to work with families to improve this situation, especially for those babies that had been born during the pandemic. It was noted that the practice had been shared across Middlesbrough, Redcar and Cleveland and health and social care agencies.

Members were also advised that an Ethnic Minority Achievement Team worked with international new arrivals to ensure they were signposted to appropriate services so that families became familiar with their surroundings quickly and that children of those families were school ready as soon as possible after their arrival.

Members also received information from the Council's Public Health team about how improvements to educational attainment could help improve health inequalities. The Panel heard that the first 1001 days of a child's development were crucial. As such Public Health were keen to intervene during this period in order to construct important building blocks for children to be school ready, especially in areas such as language and speech.

The Panel heard babies born in Middlesbrough today had a life expectancy 3.6 years less than the England average. Members were also made aware there were significant inequalities in the town itself. For example, average life expectancy in northern wards was 10 years less than those in southern wards. Members were also advised there was a wide range of initiatives carried out by the Public Health Teams including Public Health Literacy Programmes as well as programmes that went beyond school such as the Head Start Programme and offering advice around Covid-19.

A Member queried if individuals identified as Neurodiverse would have access to the Best Start pathway. It was clarified those individuals would be picked up under one of the 10 markers within that pathway.

A Member queried the details of the Boro Breastfeeding initiative and was informed it was created to challenge social norms, especially in South Tees that had a bottle feeding culture. It was also clarified it was in its infancy but would build on existing schemes.

A Member queried if projects begun using the Controlling Migration Fund had been able to continue as this funding stream had stopped. It was clarified lessons from that project were continuing to be implemented, namely though the Ethnic Minority Achievement Team.

A Member queried how many schools had engaged with the Head Start Programme. It was clarified this information would be circulated to members. There was also a Mental Health in Schools project called Inside-Out that ran across Middlesbrough and Redcar and Cleveland.

The Chair commented that programmes like HENRY and Fussy Eaters did not seem entirely new but welcomed their introduction. It was clarified those programmes focussed on parenting techniques and role modelling. It was also clarified that 102 families had completed the HENRY programme in 2021 and that work was continuing.

The Chair also commented that the Support to Talk resources was extremely useful. It was clarified that Support to Talk was a self-help tool that parents could use to develop verbalisation in their children. It was recognised that due to the Covid-19 Pandemic a significant amount of learning did not take place and this programme would help to bridge that gap.

The Chair thanked the officers for their presentation.

ORDERED that:

- Information relating to numbers of schools participating in Head Start be circulated and:
- 2. The information presented be noted.

21/115 **COVID-19 UPDATE**

The Chair welcomed the Director of Public Health (South Tees) to the meeting and invited him to provide his Covid-19 update.

The Panel was advised the latest Covid-19 statistics showed Middlesbrough ranked 90th nationally with the Tees Valley much further down the league tables than it was previously. The Panel appreciated, however, that rates remained high. The Panel was also informed that test numbers were also decreasing, albeit slowly.

In terms of hospital inpatients; these remained relatively high while those in critical care were low which was also reflected in the number of deaths across the Trust.

Vaccination take up rates in Middlesbrough remained below the English and North East averages, but considering challenges such as deprivation in the town this was somewhat understandable.

The Panel were also shown evidence, provided by the Intensive Care National Audit & Research Centre (ICNARC), showing the correlation between individuals without a vaccine being more susceptible to serious effects of COVID-19 and more likely to require hospital treatment.

ORDERED that:

- 1. ICNARC research to be circulated to Members
- 2. The information presented by noted.

21/116 CHAIR'S OSB UPDATE

The Chair advised the Panel that at the last meeting of OSB on the 18th January 2022 the following items were considered:

- The Chief Executive's update;
- The Final Report of Adult Social Care and Services Scrutiny Panel into the recruitment and retention of staff in Adult Social Care;
- The Medium Term Financial Plan/ Budget Consultation and;
- Scrutiny Chairs updates.

NOTED.

21/117 ANY OTHER URGENT ITEMS WHICH IN THE OPINION OF THE CHAIR, MAY BE CONSIDERED.

None.