#### Report to June 2023 Meeting of CBC Overview and Scrutiny Committee

# Summary of May 2023 Meeting of GCC Health Overview and Scrutiny Committee

A full recording of this meeting is available in the "Online meetings" section of the GCC website. The public information pack which includes all presentations is also available on this website. The minutes are not yet available, so this paper is based solely on notes I took at the time.

### 1. Scrutiny Items

# 1.1 Response to Representations made to HOSC re the Out-of-hours GP Service Provided by Practice Plus Group (PPG)

PPG have been running these services in Gloucestershire since 2019. It is the largest provider of such services in England. The latest CQC report published in February 2023 has given an overall rating to the GP OOH service of 'requires improvement', with a similar rating with respect to the safety and governance of the services.

At the time of the CQC visit 26% of shifts it needs to fill to provide the specified service were unfilled and the CQC concluded that there were insufficient numbers of suitably qualified staff deployed to meet the fundamental standards of care and treatment expected and to ensure that care was provided safely.

In liaison with the ICB PPG have developed an extensive action plan to try to improve matters but many GPs are unwilling to work the unsocial hours required to run this service and the problem of adequately staffing such a service is a nationwide one.

However, some success has been achieved and the percentage of unfilled shifts has reduced to 22%.

Greater use is now being made of Advanced Nurse Practitioners and clinical pharmacists with those suitable patients in the queue being dealt with by these staff alone.

The CQC also issued a warning notice with respect to the governance of the OOH service as the 'requires improvement' finding was a repeat of a similar finding from their 2019 visit. This means that the CQC will give a period of between 6 and 12 months to the service to complete the action plan compiled in March. If it fails, it could be declared in breach of the 2008 Health and Social Care Act.

The ICB have now advised PPG that will be formally giving notice against this contract with a view to starting a re-procurement process to award a new contract for 111 and OOH services in Gloucestershire. The reprocurement process will take around 12-15 months to complete, with the new contract commencing in the summer / autumn of 2024. In the meantime, HOSC expects regular updates showing signs of an improved service provision.

# 1.2 Information from SWAST about its Recent Implementation of a New Strategy and its current performance levels

#### 1.3

The Strategy sets out what SWAST will focus on in the next two years. Primarily this will be stabilisation. Delivering more effective patient care, better safety and performance and working more closely with our partner organisations.

SWAST will also carry out a pilot scheme, running a Mental Health Rapid Response Vehicle (MHRRV). The MHRRV will work Monday to Thursday 1400-0000. The scheme utilises a SWASFT rapid response vehicle to allow Blue Light capability to respond to 999 mental health incidents in the area.

Current performance was presented in a spreadsheet providing response times by month for the last year by Local Authority area in Gloucestershire.

Apart from major problems with response times experienced in December performance was better than the previous year, however major challenges in achieving key targets remain, see section 2.1 below.

# 1.4 Maternity Services - Update on Staffing Issues and Extension of Temporary Changes

In summary a shortage of midwives has led GHFT to conclude that the Aveta birthing unit at CGH should remain closed for labour and births along with six post-natal beds at Stroud maternity unit.

A CQC report in 2022 highlighted lack of staff in rating the maternity service as inadequate. Numbers have improved since that report but staffing levels remain a challenge and midwifery staffing is still on the risk register as it is still not possible to meet the required ratio of midwives per birth 100% of the time.

The unit at CGH has been closed for labour and births since April 5th last year and six post-natal beds in Stroud have been closed since October 1st. These closures were reviewed as planned in January but high vacancy and sickness absence rates had persisted so it was concluded that the closure needed to

continue at least until a further review in April when it was hoped that a new staffing model would have been agreed. However, his model has yet to be concluded but is on track to be finalised in time for it to be reported to the July HOSC meeting. At that time, it's also hoped that progress will have been made towards developing new attendance methods that don't rely on 1 to 1 midwife to ratios.

The GHFT spokesperson indicated at the HOSC meeting that despite huge efforts to recruit and retain staff vacancy rates have actually got slightly worse since the March report. The national picture also remains gloomy with newly qualified staff receiving an average of 4 job offers.

However, the spokesperson confirmed that it is still GHFT's intention is to fully reopen the Aveta unit and the beds in Stroud as soon as possible but that at the moment staff need to be concentrated in other areas to ensure all 6000 births p.a. in the County can happen in safe, adequately staffed facilities.

### 2. Information Items – see presentations for full details:

### 2.1 Gloucestershire Integrated Care System (ICS) Performance Report

- Patients waiting for planned care very high at 72,237 and still on an upward trajectory.
- 1795 waiting over 52 weeks but over 18-month (78 week) waiters now eliminated.
- ED & MIIU performance now slightly better than the national average but ambulance response times still poor with an average of 9 min wait for Cat 1 compared with 7 min target and most worryingly Cat 2 patients waiting an average of 58 minutes compared with a target of 18 minutes.
- Waits for mental health services for children and young people remain high across all providers.

## 2.2 NHS Gloucestershire Integrated Care Board (ICB) Update – this report is now divided into 3 sections

- Section 1 an update on national and local commissioning issues
- Section 2 an update on primary care issues from the commissioner perspective
- Section 3 an update from the 3 provider Trusts; Gloucestershire Health and Care NHS Foundation Trust (GHC), Gloucestershire Hospitals NHS Foundation Trust (GHT) and South Western Ambulance Service NHS Foundation Trust (SWAST)
- Of note from the GHT report. The new day surgery unit at CGH is now open and fully functional as is the much-improved radiology department.