

Health Scrutiny Sub-Committee

Meeting held 7 September 2023

PRESENT: Councillors Ruth Milsom (Chair), Steve Ayris (Deputy Chair), Talib Hussain, Laura McClean, Sophie Thornton, Ann Whitaker and Maleiki Haybe (Substitute Member)

1. APOLOGIES FOR ABSENCE

1.1 Apologies for absence were received from Councillors Angela Argenzio, Abtisam Mohamed and Martin Phipps.

2. EXCLUSION OF PRESS AND PUBLIC

2.1 There were no items of business identified where the public and press may be excluded from the meeting.

3. DECLARATIONS OF INTEREST

3.1 Councillor Talib Hussain declared that he was a registered patient at one of the GP surgeries under discussion in Item 7.

4. MINUTES OF PREVIOUS MEETING

4.1 The minutes of the previous meeting of the Committee held on 1st June 2023 were agreed as a correct record.

5. PUBLIC QUESTIONS AND PETITIONS

5.1 There were no petitions or questions received from members of the public.

6. MEMBER QUESTIONS

6.1 There were no questions received from Members of the Sub-Committee on matters not on the agenda for the meeting.

7. PRIMARY CARE TRANSFORMATION PLANS - UPDATE

7.1 The report was presented by Abigail Tebbs (Deputy Director of Primary Care, Contracting Digital and Estates, SYICB), Richard Kennedy (Engagement Lead, SYICB and Mike Speakman (Programme Manager -Sheffield). Part A of the report updated the Sub-Committee of arrangements for continuing involvement with local

people following the decision to approve the building of three new health centres in Sheffield and Part B was to inform the Sub-Committee of developments on proposals for a City Centre Health Centre.

- 7.2 Members expressed disappointment that they had not been kept informed throughout the consultation process, particularly given they were being advised that the consultation represented best practice, nationally. Additionally, Members had not been notified of the planning applications.

Given the original programme had been delayed and the cost of materials had risen, Members were concerned that the £37 million funding would not be sufficient for the provision of four Hubs.

- 7.3 Richard Speakman advised that the consultation process had been comprehensive and that this had been confirmed by outside bodies. The sites chosen were the favourite of the majority of respondents. The Hub model was becoming increasingly popular as GPs became less willing to borrow capital to invest in becoming partners in conventional practices. Hubs offered the advantage of larger premises with increased provision for training and the delivery of a variety of services.

Budgets had been managed to ensure that they were aligned to the anticipated level of the tenders for building.

- 7.4 Abigail Tebbs advised that the funding for the project was national capital funding. It could not be used to pay for services, so it was not a case of choosing to spend it on new practices rather than on improving existing practices. The project would enable the recruitment of up to 91 new staff partly by providing space to accommodate them. There would be bookable space which could be accessed by any service.

This was taking place alongside the Plan for Recovery of Access to Primary Care, which focussed on improving patient access, particularly their first contact, though addressing issues such as capacity, telephony and triage.

- 7.5 Members asked what the risk would be if milestones were not achieved, for example if significant redesign was required for the planning applications to be approved.

The NHS representatives advised that there was a clear governance process both locally and via reporting to the Treasury. If Planning necessitated redesigns or if tenders came in at a level higher than expected, this would still have to be achieved within the existing budget.

Mike Speakman added that the project would provide new publicly owned buildings and represented significant inward investment into

Sheffield.

Members requested a detailed breakdown of how the £37 million funding was being allocated and spent as they felt they did not have this detailed information at present.

- 7.6 Members expressed concerns regarding public transport and whether the new Hubs would be sufficiently serviced by buses to make them easily accessible for patients, particularly given some bus funding was due to end in October 2023 which could result in cuts to services.

Mike Speakman advised that conversations were ongoing with South Yorkshire Passenger Transport. The aim of targeting services where they were needed was shared by both parties. The NHS intended to carry the cost of any additional bus stops.

A community minibus service for patients who found it difficult to access their practice was also under consideration across the board, not just in relation to the new Hubs.

- 7.7 With regards to the City Centre Health Centre, a discussion took place about the response rate to the consultation. It was agreed that this had been lower than desired and that it would be revisited and would be reported back to a future meeting of the Sub-Committee. Members suggested involving organisations who were already working with the communities that needed to be targeted, such as Asylum Seekers.

The NHS representatives advised that this project was being progressed rapidly now that premises had been secured in order to make sure that no funding was lost. As the proposal was for conversion of an existing building rather than a new build it was likely to catch up with the other schemes.

Members asked whether there were plans for disabled parking provision and were advised that options in City Centre sites tended to be limited, however this would be explored further in the Planning process. Members also requested further information about how net zero targets would be met.

It was agreed that as there was no meeting of the Sub-Committee in December, rather than wait until January for an update, an informal workshop could potentially be held in December.

- 7.8 **RESOLVED:** That the Sub-Committee notes:

- (a) The plans South Yorkshire Integrated Care Board has put in place to continue involving local people in the development of the three new health centres already approved; and
- (b) The consultation underway on the proposal to develop a City

Centre Health Centre and relocate PCS (Primary Care Sheffield) City and PCS Mulberry practices to the new site.

8. MATERNITY SERVICES IMPROVEMENT - UPDATE

8.1 A presentation, a presentation (subsequently published with the agenda on the Council's website) entitled "Jessop Wing Maternity Services" was delivered by, from Sheffield Teaching Hospitals Trust, Chris Morley (Chief Nurse), Angie Legge (Quality Director) and Laura Rumsey (Midwifery Director). The presentation updated Members on the Jessop Wing Maternity Improvement Programme and in particular how the Trust had addressed the previous "Inadequate" rating from the Care Quality Commission (CQC) inspection.

8.2 Members asked whether given the CQC inspection had highlighted that inadequate staffing levels had led to women being unsafe, whether it was ideal to be relying on Registered Nurses rather than midwives. They also asked how workforce improvements could be secured and sustained.

Laura Rumsey confirmed that Registered Nurses do not provide Midwifery care. They complement the service and can only be up to 10% of cover in the post-natal area (one per shift), and they work under the supervision of a midwife. This is a safe model of care.

Chris Morley added that workforce sustainability was challenging due to the national shortage of midwives, however recruitment into universities had been good this year, and there were national plans to train more midwives. Additionally, some international recruitment had taken place. Laura Rumsey advised that there was currently a shortage of 50, but 28 were joining the service in October and recruitment was ongoing. Fewer agency workers were being used.

8.3 Members asked whether an improvement had been made in the number of complaints responded to within the agreed timescale. Angie Legge advised that this had been brought down in line with the rest of the Trust.

8.4 Members also asked what proportion of staff were from BAME backgrounds and how many of these were in leadership positions. Laura Rumsey advised that widening midwifery training was something that was being worked on. They did not have precise figures but could confirm that at present there was nobody in senior position who was from a BAME background. A mentoring programme across all protected characteristics had been put in place to help to improve this situation.

8.5 Members thanked the NHS representatives for the update and wished them luck with their continuing improvement work.

8.6 **RESOLVED:** That the Sub-Committee:-
(a) notes the Maternity Service Update; and
(b) requests further figures regarding the proportion of complaints dealt with within the agreed timeline.

- 8.7 It was agreed by Members of the Health Scrutiny Sub Committee to extend the meeting by 30 minutes

9. WORK PROGRAMME

- 9.1 The Work Programme was presented by Deborah Glen, Policy and Improvement Officer.

Members requested that a previously agreed workshop regarding Bereavement Services be included in the forward plan.

It was also agreed that a further update from Maternity Services should be requested after a further CQC inspection had taken place.

- 9.2 **RESOLVED:** That the Sub-Committee agrees the work programme, including the additions and amendments identified.

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