

Gloucestershire Health Overview and Scrutiny Committee - 17 May 2022

The agenda and various reports can be viewed on the Gloucestershire County Council website. Reading the ones of particular interest is recommended, as this is a brief overview.

[Browse meetings - Health Overview & Scrutiny Committee \(gloucestershire.gov.uk\)](https://www.gloucestershire.gov.uk)

Scrutiny Items

GP Recruitment and retention in Gloucestershire

The number of GPs in Gloucestershire has declined and a lot of working is being done to provide support and in retention and recruitment. Gloucester City has been more challenging than other areas, with 10-12 vacancies. This is a national problem and Gloucestershire is just above average, but not ideal as the population is growing.

There has been a shift in working and there are more salaried and locum GP's than those wanting to be a partner in a practice. There has been a fall in numbers working and more doing part-time. GP's feel well supported in Gloucestershire and have good working relations with the Clinical Commissioning Group. With GP sessions falling and an increase in the number of appointments, we are seeing new ways to address this. There are 71 practices in Gloucestershire that can have a vacancy at any one time. They can advertise locum shifts and those choosing to work as a locum sign up for the shifts they want to do. The system is becoming more fluid.

Other skilled professionals are taking on some of what used to be the GPs work e.g. physiotherapists, pharmacists, social prescribers, advanced health care professionals. The latter are being used to triage patients for the GPs to send them down an alternative route if appropriate.

Recruitment is being done as an open day this week, to try a different approach to attract people to Gloucester.

The GP role is to have clinical sessions and an educational specialism that will encourage CPD and make the jobs more interesting.

There is a lot going on behind the scenes, at practice level and above.

Digital platforms have changed ways of working. All Practices have a Patient Participation Group to improve communications

Fit for the Future 2

Fit for the Future was initially started as a lot of the NHS services were provided based on where they were historically rather than where they needed to be. It provided a vision for the medium to long-term future of some of our health services.

Phase 1 was initially consulted upon, and the public were listened to. The main aim was to create centres of excellence for particular services and departments, to enable better health outcomes for all, including more specialist staff on site.

One of the main topics had been the A & E service at Cheltenham General Hospital, which has remained a 24 hour, nurse-led service; this was what the public wanted.

Phase two of Fit for the Future is now out for consultation. Its priority is quality of care and health outcomes. Centres of excellence are still the approach for Cheltenham and Gloucester Hospitals and in-patient care. It also is looking at people in their own homes, GP surgeries and care in communities.

The areas being looked at in this document are: - Benign (non-cancerous) Gynaecology, Diabetes and Endocrinology, Frailty and Care of the Elderly, Non- interventional Cardiology, Respiratory and Stroke services.

It is recommended that people read the consultation booklet which can be found on getinvolved.glos.nhs.uk and fill in the survey to get your views heard. This should also be encouraged where possible in your Wards.

There is a lot more information in the reports on the Gloucestershire County Council website.

Performance Reports for Information

NHS Gloucestershire Clinical Commissioning Group (GCCG)

The report provides an overview of GCCG performance against constitutional and other agreed standards. This is reported against local and national standards. Graphs and charts can be seen in full report.

Gloucestershire's performance is in line with national trends; however, A &E and ambulance response times are slightly below the national average position. Cancer and elective services tend to be better than the national average, with waiting and treatment times within standards set.

The report does not reflect the position the GCCG want to be in with more red arrows than Green. Several areas are to receive a 'deep dive' into reasons, with feedback in July. Obviously, the pandemic and recovery have not helped.

One of main issues is that, those who are well enough to be discharged have nowhere to move onto e.g. Cheltenham General Hospital has 300 beds, of which, 170 patients should be placed elsewhere as they no longer need and acute hospital services. Gloucestershire Royal Hospital has 600 beds, of which, 67 should be elsewhere. Teams are working together to try to improve this situation.

Green and red COVID admission pathways still apply in the hospitals.

One Gloucestershire Integrates Care System Report

Work in health and social care continues to focus on building and restoring services in the light of COVID-19, whilst also continuing to work collaboratively across the system to tackle challenges in Urgent and Emergency Care. Work also continues to assimilate all the services to the Integrated Care Board, to start in July 2022.

Key projects at present are:

- Tackling Health inequalities – some of our neighbourhoods are in the top 10% of most deprived areas in UK. Resulting in poorer opportunities to lead a healthy and fulfilled life.
- COVID-19 mobile testing units are in Coronation Square, Cheltenham and Stroud leisure centre, instead of Hempsted Meadows. These will continue until end of July. Booster and vaccination programme is still ongoing.
- Clinical programme approach has been developed to look at new inclusive ways to deliver care, enabling partners to work together and avoid duplication. Services include diabetes, cancer, children's physical health, palliative and end of life care, to name but a few.
- More focus on digital self-management systems of common musculoskeletal conditions. 'Get U Better' is a free recovery app. Advantages and benefits can be seen in full report.
- Prescription ordering line

Diabetes education bus is starting to make the rounds in Gloucestershire.

NHS GCCG Clinical Chair and Accountable Officers Report

The GCCG consists of the following bodies:-

1. NHS Gloucestershire Clinical Commissioning Group (to be replaced by the NHS Gloucestershire Integrated Care Board)
2. Primary Care (GP providers)
3. Gloucestershire Health and Care NHS Foundation Trust
4. Gloucestershire Hospitals NHS Foundation Trust
5. South Western Ambulance Service NHS Foundation Trust

Together they will buy and commission services and provide these in GP surgeries, homes, communities and hospitals.

Working with HOSC will continue and it is felt there is a greatly valued and constructive working relationship.

Appointments to the new ICS are being made and many public involvement events are being run to keep the communication open. Several new strategies for future engagement are in the pipeline and areas that they are prioritising to work e.g. Primary Care, Mental Health.

Care Quality Commission (CQC) is to do a country-wide inspection of A & E departments. These departments continue to be under sustained pressure. CQC will monitor calls and analyse responses as part of this process. The inspection is to understand what is happening and how this can be improved.

Work is being done to speed up handover delays at the hospitals from the ambulance services. At the other end of hospital care, measures are being taken to improve access and support for people going home to ease the hospital pressures. More details in the reports.

Other aspects in the report include Frailty Update, Mental health and Wellbeing, Learning Disabilities including Annual Health Checks, Minute Kidney Test, Digital developments and other services.

The Community Assessment and Treatment Unit (CATU) at Tewkesbury Hospital is operating with its full complement of 10 beds. The unit opened in February 2022 using two beds to provide assessment and treatment to primarily frail older people, whose care can be provided without an Emergency Department visit, and subsequent stay in an acute hospital. This is a pilot site to see if this works and keeps elderly out of the acute hospitals. The average assessment time is three days at Tewkesbury Hospital.

Ambulance Service provided an update and will attend the next meeting of HOSC - three decommissioned ambulances have been donated to Ukraine.

Councillor Jill Smith