

Lancashire County Council

Health Scrutiny Committee - Steering Group

Minutes of the Meeting held on Monday, 16 November, 2015 at 2.00 pm in Room B18b, County Hall - County Hall, Preston

Present:

County Councillors

M Brindle Y Motala
Mrs F Craig-Wilson

1. Apologies

Apologies were received from CC Holgate.

2. Notes of the last meeting

The notes of the meeting held on 26 October were agreed as correct.

3. Rossendale Task Group Report - NWAS

CC Motala welcomed Cllr Barbara Ashworth and Pat Couch, Scrutiny Officer, who attended the meeting to talk members through their scrutiny task group review of the North West Ambulance Service for Rossendale.

Barbara went through the background to the report, methodology, visits etc, and the recommendations. A discussion took place and the main points were:

- Raised wider issues of areas of concern re NWAS – hub & spoke model, availability of ambulances in rural areas.
- Need to find out views of other Districts.
- Report will be reported to Rossendale Scrutiny Committee 1 Feb – it will be published then. Will also have the responses to the recommendations.
- It was agreed that the HSC could pick up any outstanding issues their behalf. – the report can be added to March Committee agenda for information.
- The report had identified a number of Highways issues re signage – it was suggested that CC Oakes write to CC Fillis as Cabinet Member.
- Concerns still outstanding about falls and also emergency planning.
- Can NWAS identify best practice across their patch in terms of handing over patients from ambulances to EDs?

It was agreed that at the next Steering Group meeting members would provide a formal response to the recommendations of the report.

4. Workforce for the Future

Erin Portsmouth, Head of Communications and Engagement and Dr Kumar from Chorley South Ribble CCG attended to talk to members about the work force planning project they are undertaking.

A copy of the report produced can be found at the following link [Workforce for the Future](#)

A discussion took place and the main points were:

- This project is aimed at central Lancashire but it fits in with the wider county and regional context.
- Not just GPs, includes social care, nurses.
- Work force challenges – map and measure the numbers – not just looking at the numbers but what the skills that are needed. Perception that the big cities soak up the working population. New ways of working require new skills and practices.
- Challenge of viewing general practice as a specialism – even though it's very difficult as have a large breadth of conditions.
- Asked stakeholders to state what they felt the gaps were.
- Lot of workforce leave the area.
- Number of vacancies impact on the remaining workforce.
- Number of GPs in Lancashire that are approaching retirement? – Can provide more up to date data on this – Wendy to liaise with Erin – this issue is part of the CCGs forward strategy.
- The role of the 'family doctor' is a thing of the past.
- Need to change the face of primary care practice – not just have more GPs
- The project is long term as it's aimed at getting in to schools, colleges etc. to interest people in the profession in the first place.
- Training for primary care staff – particularly working with receptionists to make sure they make sure patients get to see the best person at the best time.
- Other GPs can often promote negative images to trainees - Need to make the career attractive.
- Some GPs are very good at the art of conversation to get to the bottom of the problem – knowing your patient and also over a period of time.
- The term 'general practitioner' can be seen as derogatory and not as exciting as a specialist.
- They need to get to the bottom of issues not just be satisfied with carrying out lots of tests and telling them it's clear.
- Many doctors have inconsistent career advice – some consultants look down on GPs.
- Not much support to branch out into other things for periods of time – portfolio boundaries – Lancashire needs to offer these opportunities.

- Maybe work on the perception that nurses are female – maybe target men for the profession.
- A teaching scenario model is being developed in Lancashire (with LTHT) for schools to visit and see what the NHS has to offer.
- Need to remember that GPs are independent businesses – need to attract entrepreneurs.
- Many GPs signpost a lot as they've received criticism for over referring.
- Many large practices can provide peer to peer instant support but often you don't get to see the same doctor twice.
- The model that is emerging is a mixture of the best bits of single practice and large practices by bringing together single GPs to share back office functions – needs organisation.
- Need variable access - a mixture of quick appointments with any GP and the continuity of a dedicated GP.
- Need to future proof – need to do something in the immediate future whilst determining what the long term strategy is.
- Many existing contract issues are very rigid and therefore potentially unattractive.
- CCG are looking at 'beacon' training.
- Working with care homes to improve access to GPs, other nursing to enable to connect better with peers in the NHS. Improving access to continual training.
- Another challenge is the negative perceptions of the nursing home sector.
- Need to get the public behind the initiative.
- The amount of money spent on agency should force the conversation to address issues such as 'rural waiting' not just London waiting'.

CC Motala summed up by stating the positive moves in place and acknowledgement of what still needs to be done and the importance of collaboration.

It was agreed that officers be invited back to a future Steering Group meeting to update members.

5. Work plan

Members noted the work plan

6. Date of next meeting

The date of the next Steering Group meeting is Monday 7 December.

I Young
Director of Governance, Finance
and Public Services

County Hall
Preston