

## **Lancashire County Council**

### **Health Scrutiny Committee**

**Minutes of the Meeting held on Tuesday, 2nd February 2021 at 10.30am**

#### **Teams Virtual Meeting**

#### **Present:**

County Councillor Peter Britcliffe (Chair)

#### **County Councillors**

L Beavers	J Mein
C Edwards	S C Morris
N Hennessy	E Pope
A Hosker	J Shedwick
M Iqbal MBE	D Whipp
A Kay	

#### **Co-opted members**

Councillor David Borrow, (Preston City Council)  
Councillor Paul Campbell, (Burnley Borough Council)  
Councillor Gina Dowding, (Lancaster City Council)  
Councillor Margaret France, (Chorley Council)  
Councillor Bridget Hilton, (Ribbles Valley Borough Council)  
Councillor G Hodson, (West Lancashire Borough Council)  
Councillor David Howarth, (South Ribbles Borough Council)  
Councillor Jayne Nixon, (Fylde Borough Council)  
Councillor Julie Robinson, (Wyre Borough Council)  
Councillor Tom Whipp, (Pendle Borough Council)  
Councillor Marilyn Procter, (Rossendale Borough Council)

County Councillor Jennifer Mein replaced County Councillor Kim Snape and Councillor Marilyn Procter replaced Councillor Jackie Oakes (Rossendale Council), for this meeting only.

#### **1. Apologies**

None.

#### **2. Disclosure of Pecuniary and Non-Pecuniary Interests**

None.

### **3. Minutes of the Meeting Held on 15 December 2020**

**Resolved:** that the minutes of the meeting held on 15 December 2020 be confirmed as an accurate record.

### **4. Shaping Care Together programme: transforming hospital and community services in West Lancashire, Southport and Formby**

Trish Armstrong-Child, Chief Executive of Southport and Ormskirk Hospital NHS Trust, presented a report which provided an overview of the Shaping Care Together programme, a partnership of NHS organisations aimed at improving health and care services.

During the presentation, the following points were highlighted:

- The programme's vision was to ensure that care would be integrated with other services, that any changes to service delivery would not have unintended consequences across the system, and that services served the community at large.
- Challenges faced by the programme included recruiting staff (a long standing issue which was being resolved through work with higher education institutions); the prevalence of pre-existing health inequalities across the region; increasing life expectancy, which was causing an increased demand for NHS services; and increasing levels of long-term conditions in the area.
- The Covid-19 pandemic had highlighted the need to think differently about delivering services and provided an opportunity to trial new ways of providing care, such as digitally.
- A key consideration for the programme was the region's demographic, which demonstrated that hospitals could not be the only places where elderly patients receive care. As the population would continue to age, services would need to keep up with increasing care demands.
- To give a sense of order to the programme's large and complex work area, seven areas of focus had been determined.
- From Winter 2020, the programme had entered its 'Listening Phase,' which focussed on engagement with the public as the first step to improving care services. Beginning in January 2021, members of the public were asked to get involved with the programme via a dedicated website or telephone line. In the near future, virtual workshops and discussion groups would be organised.

- A team of engagement and communications experts had been advising the programme to ensure that every possible and effective means of communicating with the public, particularly the elderly population, was explored.
- Monthly Board meetings were held to review the programme's progress and assess the feasibility of continuing to engage with the public during the Covid-19 pandemic.

In response to questions from members, the following information was clarified:

- As a result of the Covid-19 pandemic, it was expected that services to treat 'long-Covid' would be both requested and needed, such as cardiovascular and respiratory rehabilitation services.
- Before Christmas 2020, over 200 staff had engaged with the Shaping Care Together programme's focus sessions. Staff had highlighted the importance of keeping services local and of the need for clear direction and vision. Some staff focus groups had continued after the Christmas period, but the risk of engaging with staff at such a busy time for hospital services was recognised. It was expected that onsite sessions would recommence in the future.
- The expertise of an engagement and communications team had been employed particularly to engage elderly residents with the programme, as the team was experienced communicating with this group remotely. Leaflets and posters had been distributed at vaccination hubs and the presenters were keen to work with Healthwatch Lancashire, and other voluntary organisations, to further promote the programme amongst the elderly.
- The programme was also being promoted on social media, particularly through posts shared to Facebook groups relating to the local areas of Southport and Ormskirk. A dedicated staff member was working on the promotion of the programme through social media and could personalise the content.
- The programme started as a specific piece of work dedicated to hospital services but had since expanded to cover a range of issues. The Covid-19 pandemic had provided an opportunity to integrate services and consider all aspects of health and wellness. For example, it was important to work with colleagues providing mental health services, especially in relation loneliness among the elderly and children's mental health.

- It was important to understand that programmes and services in West Lancashire, Southport and Formby were connected to other regional programmes and services. A programme manager was linked informally with programme directors across the North West to share lessons and ideas, and to ensure that programmes in one region would not have a detrimental impact on services elsewhere. For instance, urgent and emergency care services had been crucial to the residents of Central Lancashire following a similar engagement exercise, so urgent care was expected to be raised during the 'Listening Phase' of this programme too.
- It was important to understand where individuals accessed services, so a detailed analysis of how people moved to and between hospital services was being undertaken. Any future decisions about services would consider these factors to ensure equitable access. This would allow the programme's progress to align with that of the Cheshire and Merseyside Local Sustainability and Transformation Partnership, for example, and account for people accessing the services of a different NHS trust or specialist services.
- Local Members of Parliament had been briefed about the programme.

Members suggested that working with Parish Councils would be an effective means of promoting the programme to communities too. It was noted that Parish Councils may have had funds available for a local leaflet drop, and that the county council's Champion for Parishes also had an allocated sum of money for use at their discretion.

**Resolved:** That the report on the progress of the Shaping Care Together programme be noted.

## **5. Overview and Scrutiny Work Programme 2020/21**

Members considered the Overview and Scrutiny Work Programme for 2020/21.

**Resolved:** That the Overview and Scrutiny Work Programme for 2020/21, as presented, be noted.

## **6. Urgent Business**

None.

**7. Date of Next Meeting**

It was noted that the next meeting of the Health Scrutiny Committee will be held virtually on Tuesday 23 March 2021 at 10.30am.

L Sales  
Director of Corporate Services

County Hall  
Preston