Tuesday, 7 September 2021

#### **OVERVIEW AND SCRUTINY BOARD**

A meeting of Overview and Scrutiny Board will be held on

Wednesday, 15 September 2021

commencing at 5.30 pm

The meeting will be held in the Meadfoot Room, Town Hall, Castle Circus, Torquay, TQ1 3DR

#### **Members of the Committee**

Councillor Douglas-Dunbar (Chairwoman)

Councillor Atiya-Alla

Councillor Barrand

Councillor Brown

Councillor Bye (Vice-Chair)

Councillor Mandy Darling

Councillor Foster

Councillor Kennedy

Councillor Loxton

## **Together Torbay will thrive**

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, Town Hall, Castle Circus, Torquay, TQ1 3DR

Email: governance.support@torbay.gov.uk - www.torbay.gov.uk

# OVERVIEW AND SCRUTINY BOARD AGENDA

#### 1. Apologies

To receive apologies for absence, including notifications of any changes to the membership of the Board.

2. Minutes (Pages 4 - 6)

To confirm as a correct record the minutes of the meeting of the Board held on 14 July 2021.

#### 3. Declarations of Interest

 To receive declarations of non pecuniary interests in respect of items on this agenda

**For reference:** Having declared their non pecuniary interest members may remain in the meeting and speak and, vote on the matter in question. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

b) To receive declarations of disclosable pecuniary interests in respect of items on this agenda

For reference: Where a Member has a disclosable pecuniary interest he/she must leave the meeting during consideration of the item. However, the Member may remain in the meeting to make representations, answer questions or give evidence if the public have a right to do so, but having done so the Member must then immediately leave the meeting, may not vote and must not improperly seek to influence the outcome of the matter. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

(**Please Note:** If Members and Officers wish to seek advice on any potential interests they may have, they should contact Governance Support or Legal Services prior to the meeting.)

#### 4. Urgent Items

To consider any other items that the Chairman decides are urgent.

#### 5. Health and Wellbeing Support through GPs

To receive an update to ensure that residents are receiving good services from their GPs to include:

- reviewing the Open Door Service and how this is accessed and the numbers of people being seen;
- accessibility of GP appointments and services, how residents can access services and how this compares to the numbers accessing the service pre-Covid-19; and
- 3. what plans there are for GPs in the future e.g. mergers to become part of larger group surgeries.

(Pages 7 - 17)

Other useful background patient level information can be found at:

- <a href="https://www.healthwatch.co.uk/report/2021-03-22/gp-access-during-covid-19">https://www.healthwatch.co.uk/report/2021-03-22/gp-access-during-covid-19</a>
- <a href="https://devonccg.nhs.uk/news/major-independent-survey-of-devon-patients-provides-massive-vote-of-confidence-for-gp-services">https://devonccg.nhs.uk/news/major-independent-survey-of-devon-patients-provides-massive-vote-of-confidence-for-gp-services</a>

(Note: Jo Turl, Director of Out of Hospital Commissioning, Dr Alex Degan, Primary Care Medical Director, Paul Green, Deputy Director of Primary Care and Pat Harris, Healthwatch have been invited to the meeting for this item.)

## 6. Budget Monitoring Quarter 1

To consider the submitted budget monitoring report for Quarter 1 2021/2022 and make any recommendations to the Cabinet.

7. Update on Review of Planning Service Action Plan - Deferred To monitor the progress of the Cabinet's response to the Overview and Scrutiny Review of the Planning Service Action Plan approved on 20 April 2021.

#### **Meeting Attendance**

Whilst national Covid-19 restrictions were lifted on 19 July 2021, Torbay Council has taken the decision to continue operating in a Covid-19 secure manner in order to protect staff and visitors entering Council buildings and to help reduce the spread of Covid-19 in Torbay. This includes social distancing and other protective measures (e.g. wearing a face covering (unless exempt), signing in and using hand sanitiser). Our public meetings will continue to operate with social distancing measures in place and as such there are limited numbers that can access our meeting rooms. Also, to help prevent the spread of the virus, anyone attending meetings is asked to take Covid lateral flow test the evening before - if you have a positive test result please follow the Government's guidelines and do not attend the meeting.

If you wish to attend a public meeting please contact us to confirm arrangements for your attendance.

## **Minutes of the Overview and Scrutiny Board**

14 July 2021

-: Present :-

Councillor Douglas-Dunbar (Chairwoman)

Councillors Atiya-Alla, Barrand, Brown, Bye (Vice-Chair), Mandy Darling, Foster, Kennedy and Loxton

(Also in attendance: Councillors Cowell, Steve Darling and Long)

#### 9. Minutes

The minutes of the meeting of the Board held on 9 June 2021 were confirmed as a correct record and signed by the Chairwoman.

## 10. Draft Quality Account 2020/21- Torbay and South Devon NHS Foundation Trust - Response to Overview and Scrutiny Board comments

Further to the meeting of the Overview and Scrutiny Board on 9 June 2021, Deborah Kelly, Torbay and South Devon NHS Foundation Trust provided a response to the Board's comments on the Draft Quality Account for 2020/21.

The Board thanked Ms Kelly for her response and requested a full written submission be provided.

#### 11. Review of Prioritised Council Business Plan

The Board considered the Prioritised Council Business Plan for 2021/22, which was approved by the Cabinet at their meeting on 13 July 2021. Members reviewed the priority actions and discussed areas where overview and scrutiny could add value through undertaking policy development or reviews.

#### Resolved:

That the Overview and Scrutiny Board conducts a review to focus on Torbay's housing crisis and explore what action is being taken to address the following key areas:

- 1. shortage of temporary accommodation;
- implications of short term leases;
- 3. social and affordable housing and the work of TORVISTA;
- 4. empty properties:
- 5. general housing supply; and

6. the work of the Strategic Housing Board.

This links to the following Thriving People Priority Actions:

- 1. Deliver and update our Housing Strategy Action Plan, including working with developers to encourage sites to be brought forward, to ensure a five-year housing land supply, thereby protecting our green spaces.
- 2. Continue to work to enable work to start on stalled development sites across Torbay.
- 3. Develop a sufficiency strategy approach to reduce the need for temporary accommodation.
- Working with Registered Providers across Torbay, facilitate the availability of social and affordable accommodation to enable people to move on from temporary accommodation including 'next steps' accommodation.

## 12. Budget Monitoring Outturn 2020/2021

The Board considered the budget monitoring outturn report for 2020/2021 which provided a high-level budget summary of the Council's revenue and capital position, based on figures on 31 March 2021. The report was discussed at the Cabinet meeting held on 13 July 2021 and would be presented to the Council meeting on 29 July 2021.

The Overview and Scrutiny Board made the following recommendations:

- That the Cabinet be recommended to request that the Director of Place in consultation with the Chairwoman of the Harbour Committee works with the Section 151 Officer and the Cabinet Member for Finance to take the necessary steps to increase the Harbour Reserve Fund to a level that is financially acceptable; and
- 2) That the Audit Committee be requested to consider a report on the detailed financial reporting and monitoring of the Council's wholly owned companies.

#### 13. Review of the Children and Young People's Overview and Scrutiny Board

The Chief Executive, Anne-Marie Bond, outlined the submitted report on a sixmonth review of the activity of the Children and Young People's Overview and Scrutiny Board, established as a sub-committee of the Overview and Scrutiny Board on 13 January 2021 to enable greater focus and time to be spent on overview and scrutiny of children and young people, working with key expert advisers to improve outcomes. The report sought approval for the continuation of the Board and a minor change to allow non-voting parent co-opted members to be appointed where the Council was unable to fill the statutory education parent governor co-opted member positions to help represent the voice of the child or young person.

#### Resolved:

- 1. that the Children and Young People's Overview and Scrutiny Board remains in operation to fulfil the Council's overview and scrutiny functions in respect of children and young people; and
- that, in the absence of the appointment of suitable parent governors to fill the Statutory Education Co-opted Parent Governor Representative places, the membership of the Children and Young People's Overview and Scrutiny Board be expanded to enable parents who are not parent governors but have children at either a primary, secondary or an academy school in Torbay to become non-voting co-opted members on the Board, following an interview with the Chairman of the Children and Young People's Overview and Scrutiny Board and Democratic Services Team Leader, to assist in ensuring that the voice of the child is represented on the Board.

#### 14. Review of Climate Change Emergency

Members considered the submitted report which provided an update on the Cabinet's response to the Board's recommendations following the review of Climate Change Emergency.

#### Resolved:

That the Overview and Scrutiny Board continue to monitor the climate change agenda and make recommendations when appropriate.

Chairwoman



## Access to General Practice

#### **Torbay Overview and Scrutiny Board**

September 2021

#### 1. Context

- 1.1. Devon's GPs practices have been working tirelessly over the last year, managing the pandemic response and delivery of the NHS COVID-19 vaccination programme.
- 1.2. Over the last 12 months in Devon, Plymouth and Torbay there have been:
  - More than 4 million face to face appointments in general practice over the last year
  - More than 2 million telephone consultations
  - More than **500,000** online consultations
- 1.3. While the number reduced last year, almost 60% of the appointments with GP practices are now face to face in the county.
- 1.4. General practice has quickly and successfully rolled out the COVID-19 vaccination campaign on top of increasing demand. Over 700,000 doses of the vaccine have been given by general practice locally, in just five months since the launch of the programme.
- 1.5. Over recent months, the CCG has received anecdotal reports of patients struggling to access their GP, this has been reflected in the mainstream and social media.
- 1.6. Emergency departments in the system have reported inappropriate presentations as services are restored, citing inability to access primary care services as the suspected driver of the increased activity.

#### 2. Current Access to General Practice

- 2.1. Devon has led the way nationally on embracing new technology and prior to the COVID-19 pandemic our GP practices were already well advanced in using online consultations (eConsult) and telephone triage.
- 2.2. Over a number of years GP practices in England have been moving towards introducing the additional option for online consultations as part of their access to the practice, in line with national guidance.

- 2.3. Transformative workstreams were already underway in primary care when the impact of the pandemic started to become clear. This meant that Devon's GP practices were already in a strong position to manage and respond to the challenges of working in a pandemic, such as access to online consultations and partnership working in developing Primary Care Networks.
- 2.4. Over the last year, all GP practices in Devon have offered online, telephone and video consultations as an initial triage step, only conducting face to face appointments where it was clinically necessary.
- 2.5. At the height of the pandemic, face to face appointments in GP practices in the NHS Devon CCG reduced to 52% in April 2020, compared with 78% in October 2019. The latest data for June 2021 suggests this is now 59%, 3% higher than the national average for face to face appointments.
- 2.6. On 13 May 2021, NHS England wrote<sup>1</sup> to GP practices across the country to advise that:
  - GP practices must all ensure they are offering face to face appointments.
  - Practices should respect preferences for face to face care unless there are good clinical reasons to the contrary.
  - All practice receptions should be open to patients, adhering to social distancing and infection prevention and control guidance.
  - Patients should be treated consistently regardless of mode of access.
  - Practices should continue to engage with their practice population regarding access models and should actively adapt their processes as appropriate in response to feedback.

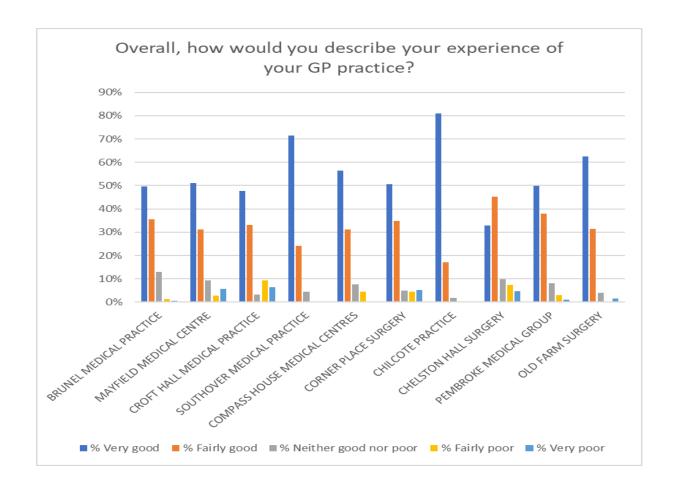
#### 3. National GP Survey

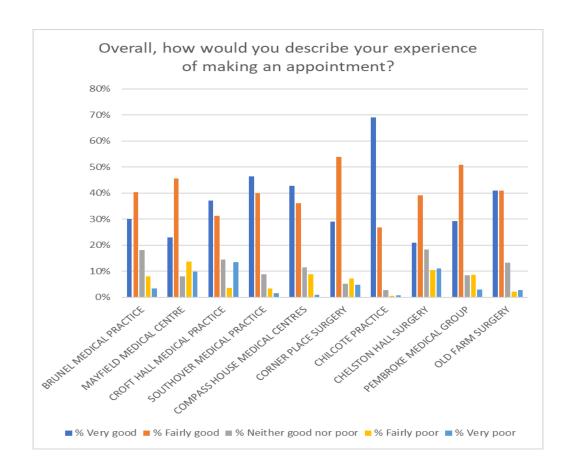
- 3.1. The GP Patient Survey is an independent survey run by Ipsos MORI on behalf of NHS England. The survey is sent out to over two million people across the UK. Responses were collected between January and April 2021; the results show how people feel about their GP practice.
- 3.2. The questionnaire was originally developed with the University of Exeter and University of Cambridge. This year the questionnaire has been redeveloped by Ipsos MORI and NHS England, to reflect changes in the delivery of primary care services because of the COVID-19 pandemic.
- 3.3. The outcomes and analysis of the national GP survey is available here <a href="https://gp-patient.co.uk/">https://gp-patient.co.uk/</a>.
- 3.4. Devon patients rated local GP practices highly in national GP Patient Survey this supports our own local findings. Our primary care and communications teams will be looking at the findings in more detail over the coming weeks to identify actions.

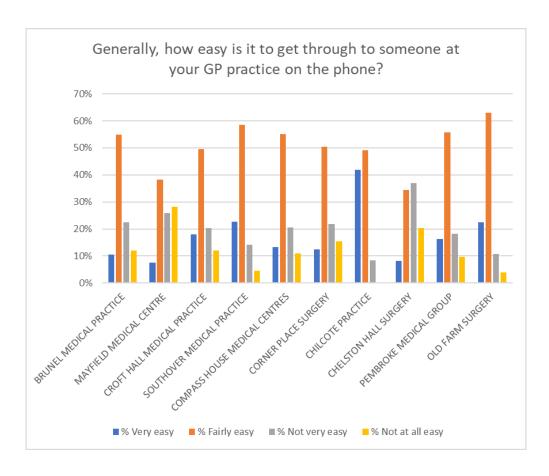
<sup>&</sup>lt;sup>1</sup> https://www.england.nhs.uk/wp-content/uploads/2021/05/B0497-GP-access-letter-May-2021-FINAL.pdf

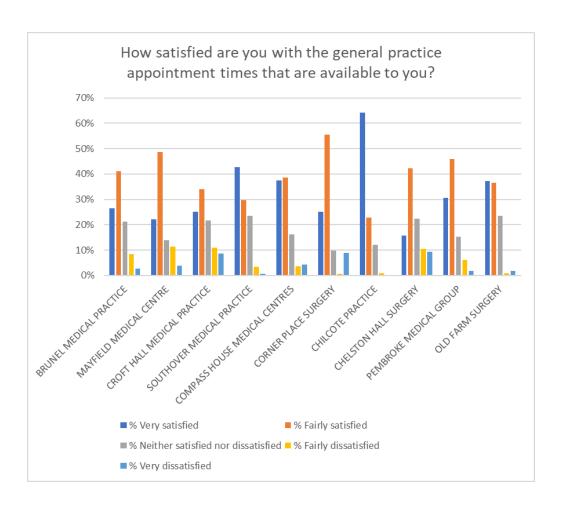


3.5. The following charts highlight the results for practices in Torbay. There are instances where the results of the survey suggest improvements are required. The CCG's Primary Care Team is continuing to monitor performance and are supporting practices to make further improvements.









#### 4. Virtual Voices Panel

- 4.1. We have the benefit of a Virtual Voices Panel a virtual panel of 1,700 people from across Devon, Plymouth and Torbay, who provide representative views and feedback on NHS services and priorities.
- 4.2. The representation has been established using <u>ACORN</u> classifications, which allows the segmentation of the population of Devon. By analysing demographic data, social factors, population and consumer behaviour, it provides precise information and an understanding of different types of people, and recruiting the panel to these classifications, allows the panel to be representative of the population.
- 4.3. The Virtual Voices Panel is a great way of gauging views quickly, as a temperature check, from a representative group of people from right across Devon. The average response rate for other Panels in other CCG areas is 10-15%. With an average response rate of 12% from the Devon Panel, we are well above average with the response rate for this survey being 18% making the data we receive even stronger.

- 4.4. To test patient experience with respect to GP access we ran a temperature check with the Virtual Voices Panel, we wanted to understand:
  - what local people's perceptions are of being able to get the medical help they need from their GP.
  - whether their perceptions influenced their decision making and what the impact might be on the wider NHS system.
  - what we can do to help people's understanding of how they can access their GP.
- 4.5. The survey was followed up with a virtual focus group for more detailed discussion with 7 members of the public and Healthwatch.

Headlines from the survey

- 75%\* (201) of people made an appointment during the last year.
- 75% (203) of people experienced no issues with getting a GP appointment and they didn't need to use another service.
- 57% (138) of people who made an appointment found it either easy or very easy to book an appointment. Only 13% (34) found it difficult (10%) or very difficult (3%).
- Most of the comments stated that GP practices have been excellent throughout the pandemic and provided a great service. Respondents felt they could access their GP if needed.
- 65% (44) of respondents were aware of changes to accessing GP practices, and more people were aware of practices re-directing walk-in's and being able to phone their practice, than being able to consult with their practice online.
- 41% (100) of people reported that the appointment fully met their needs, whilst 24% (60) people said it met some of their needs, but they wanted further support from either their GP or another service.
- 39% (95) of people had their appointment over the phone, 27% (66) met their GP face to face at the practice.
- There were few specific examples of where peoples GP practice had not met their expectations and whilst some people stated they want GP services to return to normal and that they missed the human contact in a face to face appointment, this was not a dominant theme

\*(percentages reflect that not all respondents answered every question)

Headline themes from the focus group

- There was a range of experiences reported, but the majority felt the service they received was a good one, the majority who had tried to get a GP appointment over the last year had been able to and they reported a positive experience.
- People reported eConsult as a better way to access their GP practice appointments, reducing the pre-pandemic waiting times.
- People found online consultation was a good way to converse with GPs.

- Concerns were shared about people who were less comfortable with technology and the equity of access if moving towards a more digital approach.
- Concerns were raised about the impact of the pandemic on routine appointments (e.g. blood pressure, diabetes).
- People still wanted the option to physically speak to someone for reassurance for anything of concern.
- People reported being happy to book online (or via an app), if it meant they got the desired outcome (i.e. an appointment).
- Some reported receptionists as a barrier rather than a navigator through a system.
- People reported good experiences of other services, including 111 and joined up services getting patients to hospital when needed.

#### 5. Healthwatch

- 5.1. Healthwatch Devon, Plymouth and Torbay submitted a report to the CCG's Quality Assurance Committee on patient experiences of GP services. Evidence had been collated between 1 November 2020 31 March 2021.
- 5.2. The report found that while patients had reported concerns about GP access for a range of practices across Devon, these were generally one report per practice, apart from a few isolated cases.
- 5.3. Across all reports Healthwatch received, the main issues raised relating to access were:
  - Contacting the practice by telephone/online services.
  - Patient difficulties in using GP e-consult including triage.
  - Poor/lack of communication between surgery and patient.
- 5.4. We also commissioned Healthwatch to carry out some face to face engagement work in all four of our Emergency Departments to gauge some feedback about attendances and what led people to go there.
- 5.5. Visits have taken place at University Hospitals Plymouth and Torbay and South Devon Foundation Trust. There is more work to do and Healthwatch will be speaking to more people at UHP and RDE and NDHT.
- 5.6. For Torbay Hospital, 103 respondents participated in the survey, though some did not complete every question, some questions allowed respondents to select more than one answer, so percentages may not total 100. Headline findings, are
  - The majority of people spoken to (52%) were visiting the ED between 10am and 2pm. Most (75%) were visiting on a weekday.
  - **84%** of respondents were from the TQ area, **15%** were from outside Devon, and just under **2%** were from the PL or EX areas.

- **78%** of respondents were visiting the ED for a new injury or illness and **21%** were visiting for an existing injury or illness.
- 5.7. The percentage of patients who sought treatment or advice elsewhere before attending the ED:
  - 47%: NHS 111
  - 24%: Primary Care (GP)
  - 24%: None (did not seek treatment or advice elsewhere)
  - 7%: Another hospital department
  - 5%: Other service
  - 3%: 999/Ambulance service/paramedics
  - 2%: Pharmacy
  - 2%: MIU/walk-in centre
  - <1%: eConsult</li>
- 5.8. The percentage of respondents who were directed/referred to the ED by another service:
  - 36%: NHS 111
  - 33%: None (not referred or directed)
  - 19%: Own GP
  - 6%: Another hospital department
  - 6%: 999/Ambulance service/paramedics
  - 4%: Other service
  - <1%: Pharmacy
  - <1%: MIU/walk-in centre
  - <1%: eConsult</li>
- 5.9. When asked if they were attending the ED because they were unable to access treatment elsewhere:
  - 82% of respondents said no
  - 7% said they were unable to access NHS 111
  - 5% said they were unable to access GP treatment
  - 4% said they were unable to access another hospital department
  - 3% said they were unable to access another service
  - 1% said they were unable to access MIU
  - 1% said they were unable to access 999/ambulance service/paramedics.
- 5.10. **15%** of those visiting the ED were on a waiting list for hospital treatment and **9%** had been discharged from hospital treatment in the previous three months.
  - Of the 16 people who were on a waiting list for hospital treatment, just over half (56% or nine people) said their visit was related to that condition.
  - Of the nine people who had been discharged from hospital treatment recently, just over half (55% or five people) said their visit was related to that treatment.

#### 6. Feedback from local GPs

- 6.1. Local GPs have shared their feedback and experience of appointments and primary care attendances over the last few weeks.
- 6.2. Devon LMC has found that there is 14% increase in the number of contacts to general practice compared to pre-COVID levels. GPs also report an increase in non-urgent contacts to primary care, with an overwhelming volume of enquiries in relation to the COVID-19 vaccination programme, advice on foreign travel and seeking proof of vaccination status.
- 6.3. They also report an increase in contacts relating to very minor ailments, where patients are not accessing self-care advice and support from alternatives.
- 6.4. Findings from the national GP survey and Virtual Voices Panel suggests that most people who needed to see a GP were able to and were happy with the service they received.

#### 7. NHS 111

### Think 111 First campaign

- 7.1. The CCG has been working with NHS partners to launch a local campaign to promote the NHS 111 online and telephone service, aligned with a national campaign that launched last winter. Using local insight and findings from engagement about people's experience of using 111, the CCG has been working with a local marketing and design agency on developing a new 111 campaign that targets both residents and visitors to raise awareness of the service and reassure people about using it.
- 7.2. The first phase of the campaign launched at the end of May ahead of the May Bank Holiday and particularly targeted visitors in Devon, using links with local hospitality and accommodation owners (through district councils) and with Visit Devon. The next phase of the campaign will focus on residents of Devon.

How general practice direct people to 111 out of hours for urgent advice when the practice is closed on their phones, website, etc.

7.3. GP practices signpost their patients to 111 for urgent advice outside of practice hours with messaging on their recorded phone lines and with messaging on their practice websites, so that if anyone gets in touch when the practice is closed, they have clear information about where they can go for advice.

#### Direct booking arrangements from 111 to general practice

- 7.4. 111 are able to book patients directly on to a worklist within GP practices across Devon. This service is available within normal GP working hours and the size of the work list is predicated on the number of patients a practice has. Currently practices are making one appointment on the worklist available, for every five hundred patients they have registered. These worklists are for Primary Care suitable cases and GPs will endeavour to call the patients back within the timeframe assigned by the national NHS Pathways system. The system using the information provided by the patient to assign a timeframe and these can vary significantly depending on the case from within two hours to several days depending on urgency.
- 7.5. Patients can only be booked directly on to a worklist where there is availability and in cases where there isn't the patient will likely be asked to call the practice.
- 7.6. It is worth noting that in keeping with national policy, these bookings are not an appointment and it it's down to the practices clinical judgement as to how they are dealt with on a case by case basis.

#### How information is shared between 111 and general practice

- 7.7. Where a patient is booked on to a local work list, this is undertaken via a national system called GP Connect which matches the patient with their practice and adds them to the appointment.
- 7.8. In both cases where a booking is made or the patient is asked to call the practice, a message will be sent to the practice system. This message will contain all of the information provided during the patients call with 111 call and the output from the NHS Pathways system.

#### 8. Next Steps

- 8.1. The data and evidence available to us does not indicate that there is a systemic issue with GP access across Devon, Plymouth and Torbay.
- 8.2. The CCG continues to support practices with communications on access to general practice and reassure local people face to face appointments are available and have been across the course of the pandemic when deemed clinically appropriate.
- 8.3. To support general practice, the CCG is developing a primary care communications campaign with three aims:
  - Support general practice teams in Devon to manage increased levels of activity and demand management.

- Share facts and data about how services have been used and bust some of the myths and false perceptions e.g. that GP practices are closed.
- Educate people and support them to use the right local services for their needs.
- 8.4. Healthwatch have been commissioned to conduct some engagement on the ground in our EDs, talking to people in the waiting rooms about their decision-making process and what brought them to ED (excluding those that have come by ambulance). We will ask about:
  - which practices patients are registered with
  - why they chose to go to ED
  - whether they had any contact with their GP or 111 beforehand
  - whether they were directed to ED by another service
  - whether they are on any waiting lists
- 8.5. This will take place in each of our four EDs, over a course of week for each site, at varying times of day. This will enable the system to ascertain drivers of demand and appropriately target communication activity.

#### Recommendations

The Board is recommended to note the report.