

AUDIT AND GOVERNANCE COMMITTEE

AGENDA



Thursday 6 February 2020

at 10.00 am

**in Committee Room B
Civic Centre, Hartlepool.**

MEMBERS: AUDIT AND GOVERNANCE COMMITTEE

Councillors Black, Hall, Hamilton, Harrison, James, Loynes and Ward.

Standards Co-opted Independent Member: Ms Clare Wilson.

Standards Co-opted Parish Council Representatives: Parish Councillor John Littlefair (Hart) and Parish Councillor Alan O'Brien (Greatham).

Local Police Representative: Superintendent Alison Jackson.

- 1. APOLOGIES FOR ABSENCE**
- 2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS**
- 3. MINUTES**
 - 3.1 To confirm the minutes of the meeting held on 9 January 2020 (to follow).
 - 3.2 To confirm the minutes of the meeting held on 22 January 2020 (to follow).
- 4. AUDIT ITEMS**

No items.
- 5. STANDARDS ITEMS**

No items.



6. STATUTORY SCRUTINY ITEMS

6.1 Performance Update -- North East Ambulance Service:-

- (i) Covering Report - *Statutory Scrutiny Manager*
- (ii) Presentation - *Deputy Chief Executive, Deputy Chief Operating Officer and Assistant Director, Communications*

6.2 Repeat Prescription Ordering Service:-

- (i) Covering Report - *Statutory Scrutiny Manager*
- (ii) Presentation - *Medicines Optimisation Pharmacist, North of England Commissioning Support*

6.3 The Provision of High Quality Maternity Services and Elective Surgery at the University Hospital of Hartlepool - Action Plan Update:-

- (i) Covering Report - *Statutory Scrutiny Manager*
- (ii) Action Plan Update - *North Tees and Hartlepool Foundation Trust*
- (iii) Additional Paper Outlining Data Relating to High Risk Pregnancy to Support Action Plan - *Deputy Director of Public Health*

7. MINUTES FROM THE RECENT MEETING OF THE HEALTH AND WELLBEING BOARD

No items.

8. MINUTES FROM THE RECENT MEETING OF THE FINANCE AND POLICY COMMITTEE RELATING TO PUBLIC HEALTH

No items.

9. MINUTES FROM RECENT MEETING OF TEES VALLEY HEALTH SCRUTINY JOINT COMMITTEE

9.1 To receive the minutes of the meeting held on 2 September 2019.

10. MINUTES FROM RECENT MEETING OF SAFER HARTLEPOOL PARTNERSHIP

10.1 To receive the minutes of the meeting held on 22 November 2019.

11. REGIONAL HEALTH SCRUTINY UPDATE

No items.

12. DURHAM, DARLINGTON AND TEESSIDE, HAMBLETON, RICHMONDSHIRE AND WHITBY STP JOINT HEALTH SCRUTINY COMMITTEE

No items.



13. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT

For information: -

Date and time of forthcoming meetings –

Thursday 5 March, 2020 at 10.00 am

Thursday 12 March, 2020 at 10.00 am



AUDIT AND GOVERNANCE COMMITTEE

MINUTES AND DECISION RECORD

9 JANUARY 2020

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool.

Present:

Councillor: Ged Hall (In the Chair).

Councillors: James Black, Lesley Hamilton, Brenda Harrison, Marjorie James, Brenda Loynes and Barbara Ward.

Also Present: Councillor Shane Moore.

Barry Coppinger, Police and Crime Commissioner
Sarah Wilson, Police and Crime Commissioner's Office
Mark Cotton, Alan Gallagher and Victoria Court, North East Ambulance Service (NEAS)
Philip Kerr, North East NHS Independent Complaints Advocacy
Dylan Wilmot, Hartlepool Youth Council Representative

Officers: Chris Little, Director of Finance and Policy
Neil Wilson, Assistant Chief Solicitor and Deputy Monitoring Officer
Sylvia Pinkney, Head of Public Protection
Rachel Parker, Community Safety Team Leader
Jack Cummings, Participation Worker
Joan Stevens, Statutory Scrutiny Manager
Angela Armstrong, Scrutiny Support Officer
David Cosgrove, Democratic Services Team

100. Apologies for Absence

Apologies for absence were received from Ms Clare Wilson – Independent Member; Parish Councillors Alan O'Brien (Greatham) and John Littlefair (Hart).

101. Declarations of Interest

None.

102. Minutes of the meeting held on 5 December 2019

Confirmed.

103. Scrutiny Investigation into Anti-Social Behaviour in Hartlepool: Presentation - Feedback from the Young People's Survey (*Statutory Scrutiny Manager*)

The Statutory Scrutiny Manager introduced Dylan Wilmot, Hartlepool Youth Council Representative, who gave a presentation outlining the feedback gained by the Youth Council from their questionnaire to young people in the town asking them about their experiences of anti-social behaviour.

The two main aspects that young people had fed back through the questionnaire was that they felt that they were always blamed for anti-social behaviour problems and that there needed to be more activities available for young people to divert them from this type of behaviour.

The Chair questioned the comments around more input in schools on the consequences of anti-social behaviour and the Participation Worker clarified that this came from a young person that had been through the ASBAD (Anti-Social Behaviour Awareness Day) training that was undertaken by the Safer Hartlepool Partnership which was a hard-hitting deterrent orientated presentation given to secondary school children.

Members welcomed the presentation and the outcomes of the questionnaire which differed in some ways from other feedback they were receiving. Through questions and discussions, Members expressed their concern that young people often felt threatened by the behaviour of older people; mainly due to drug and alcohol issues. The ASBAD presentation was seen to be a highly effective tool that should, in some form, be given to young school children as well as deterring anti-social behaviour at as earlier an age as possible would be more effective.

Members also particularly noted the comments around the lack of youth clubs and the appetite for such provision but it did need to be in the right place at the right time. The Participation Worker stated that an LGBT youth club was very well attended but added that young people had to be 13 before they could attend other youth clubs in the town which begged the question where were those under 13 going?

The Statutory Scrutiny Manager stated that she would look to involving the Youth Council further in developing aspects of the final report and that there may be a further role for them in helping develop future interventions.

Recommended

That the Youth Council be thanked for their very helpful and informative questionnaire feedback and that the Youth Council representative be thanked for the presentation to Members.

104. Treasury Management Strategy (*Director of Finance and Policy*)

The Director of Finance and Policy presented the report which outlined: -

- i. a review of Treasury Management activity for 2018/19 including the 2018/19 outturn Prudential Indicators;
- ii. a mid-year update of the 2019/20 Treasury Management activity; and,
- iii. enabled the Audit and Governance Committee to scrutinise the recommended 2020/21 Treasury Management Strategy before it is referred to the full Council for approval.

The Director highlighted the sections in the report setting out strategy in relation to sustainable borrowing and the investment strategy for 2020/21. The Director indicated that the report set out how the Council would continue to comply with the regulatory framework to ensure the Council achieved the lowest borrowing costs and security for any temporary cash investments made by the Council.

The borrowing strategy underpinned the capital investment decision made in the Medium Term Financial Statement and Housing Revenue Account Business Plan to ensure affordable interest rates were secured. The timing of long term borrowing decisions would then be managed carefully to ensure that interest rates are fixed at an affordable level.

The Director added that the investment strategy the Council had adopted over the last few years was an extremely prudent approach and it would continue to do so. Council would also be requested to approve the existing counterparty criteria as set out in the report.

The Chair welcomed the report and the significant amount of work behind it. A Member questioned the 'Grange and Rift House Depot Substitution' borrowing referred to in the report and the Director responded indicating this was a 'swap' of previously approved funding but would provide Members with a detailed explanation.

The Committee approved the recommendations for submission to full Council.

Recommended

That the following recommendations be submitted to Council with this Committee's recommendation to approve.

Treasury Management Outturn Position 2018/19

- (i) Note the 2018/19 Treasury Management Outturn detailed in section 4 and Appendix A to the report.

Treasury Management Strategy 2019/20 Mid-Year Review

- (ii) Note the 2019/20 Treasury Management Mid-year Position detailed in section 5 of the report.

Treasury Management Strategy 2020/21 (Prudential Indicators)

- (iii) Approve the prudential indicators outlined in Appendix B to the report.

Borrowing Strategy 2020/21

- (iv) Core borrowing requirement (including borrowing for specific business cases) – following the securing of exceptionally low interest rates approve that the remainder of the under borrowing is netted down against investments.
- (v) To note that in the event of a change in economic circumstances that the Director of Finance and Policy may take out additional borrowing if this secures the lowest long term interest cost.
- (vi) To authorise the Director of Finance and Policy to implement Treasury Management arrangements which minimise the short and long term cost to the Council.
- (vii) Capital Investment Programme (CIP) – to note that in order to secure the CIP pot of £13.395m the Director of Finance and Policy will seek to lock into long terms loans once the 2020/21 budget proposals have been approved by full Council.

Investment Strategy 2020/21

- (viii) Approve the Counterparty limits as set out in paragraph 8.7 of the report.

Minimum Revenue Provision (MRP) Statement

- (ix) Approve the MRP statement outlined in paragraph 9.3 of the report.

105. Regulation of Investigatory Powers Act 2000 (RIPA) – Annual and Quarter 1 Update *(Chief Solicitor)*

The Chief Solicitor submitted a quarterly update on activities relating to surveillance by the Council and policies under the Regulation of Investigatory Powers Act 2011. The Principle Democratic Services Officer stated that the quarterly report showed there were no RIPA authorisations approved during the quarter to 31 December 2019. The Head of Public Protection clarified in response to Member questions that RIPA authorisations were only required in cases of covert surveillance and were not required for general CCTV operations.

Members sought further information on the use of CCTV cameras for traffic offences, particularly in relation to traffic light controlled junctions and those with yellow hatched boxes.

Recommended

1. That the report be noted.
2. That further information be circulated to Members on the use of CCTV cameras for traffic offences, particularly in relation to traffic light controlled junctions and those with yellow hatched boxes.

106. Scrutiny Investigation into Anti-Social Behaviour in Hartlepool: Presentation – Evidence from the Cleveland Police and Crime Commissioner (PCC) (Statutory Scrutiny Manager)

The Cleveland Police and Crime Commissioner (PCC) gave a presentation outlining the services and actions supported by his office in tackling crime and anti-social behaviour across the Cleveland area. The PCC particularly highlighted the services through the Victim Care and Advice Service, Hartlepool's multi-agency Community Safety Team, the Community Trigger, Targeted Youth Outreach services, the training being provided around Adverse Childhood Experiences (ACEs) and the Empowering Communities Inclusion and Neighbourhood Management System (E-CINs).

The PCC also highlighted that he funded three School Liaison PCSO officers across Cleveland that visited schools to talk to pupils on issues around drugs and anti-social behaviour. As had been mentioned by Members of the Committee, there was still an issue of access around the school curriculum and the PCC would welcome any support to increase this programme.

The Chair welcomed the PCC's comments on Hartlepool's Integrated Community Safety Team. The Statutory Scrutiny Manager referred to comments made during the drop-in sessions by a representative of the Middleton Grange Shopping Centre management that sharing of intelligence between the Police and their security staff on issues around anti-social behaviour, drugs and theft that directly related to the shopping centre would help in tackling such problems quickly. The PCC indicated that in other town centres there were regular meetings between police and shopping centre management to share such intelligence. There was also a regional 'retail crime' body addressing these issues.

A Member suggested that there were a wider range of opportunities around organised events / activities, such as the Hartlepool free swim programme in the summer that PCC representatives could access to extend the

messages to children and young people around anti-social behaviour, crime and drugs. In the discussions, the PCC welcomed the suggestion and indicated that he would share the programme undertaken with schools.

Members noted the comments made on the Community Trigger and commented that information on the community trigger wasn't as widely known as suggested. Use of the Community Trigger was also very restricted – the only attempt to use it in Hartlepool had been blocked, in the opinion of Members. Ward Councillors stated they could instigate a Community Trigger on a regular basis based on the reports they received from constituents outside of the reports made to the Community Safety Team and the Police.

A Member was also concerned that the Police themselves did not see anti-social behaviour as a priority thus leading to people feeling there was no point in reporting it in the first place. The PCC stated that he could not comment on Police operational priorities but could assure Members that through his office anti-social behaviour, which was a wider community, multi-agency issue, was being given priority.

The PCC referred to the new E-CINs system which had just been launched which was a single online reporting system that would improve crime and anti-social behaviour reporting for the public.

Recommended

That the presentation, the Police and Crime Commissioner's comments and the discussion be noted.

107. Scrutiny Investigation into Anti-Social Behaviour in Hartlepool: Presentation – Evidence from the North East Ambulance Service (NEAS) (*Statutory Scrutiny Manager*)

Representatives from NEAS were present at the meeting and gave a presentation outlining the issues the service had with anti-social behaviour and specifically violence and aggression towards its staff and how they were being addressed and staff supported. NEAS had introduced the wearing of body cameras for its staff when they were in situations away from their vehicle and where the member of staff thought it prudent to record.

NEAS staff had reported 1430 incidents over the past year with 113 (9%) in Hartlepool. These were mainly verbal abuse, though around 10% of incidents did escalate to physical assault. The two main reasons for these situations were mental health and alcohol. 75 assault cases had been progressed with 60 ending with some form of sanction against the offender.

The majority of incidents centred around alcohol and drug misuse and/or mental health issues and most often occurred in peoples own homes on an evening. The night-time economy was not a major factor.

The body cameras had been introduced, following a trial period, with the full cooperation of staff and Trade Unions. Footage was retained for a maximum of 31 days and was only accessed when there was a report of an incident. The new cameras were also boosting staff moral and reducing general sickness levels.

Members welcomed the presentation though did feel it somewhat sad that ambulance staff had to resort to the use of body cameras to protect themselves. Members questioned the numbers for Hartlepool and those offending and were informed that the numbers of incidents reported in Hartlepool in line with the overall number of calls. The majority of people causing problems were males aged 30-40.

NEAS representatives stated that they also shared information on problems across the region and with the Police. At the moment, NEAS staff were being asked to report all incidents, however small, and that these would be refined in the future. There was also the possibility of live streaming from cameras to A&E departments in the future which could be a significant development.

Recommended

That the presentation and the discussions be noted.

108. Scrutiny Investigation into Anti-Social Behaviour in Hartlepool: Presentation – Evidence from Council Champions *(Statutory Scrutiny Manager)*

The Risk Champion, the Leader of the Council, was present and commented that he had welcomed the opportunity to hear the presentations and discussions. The Leader commented that two issues he had been made aware of centred on the use of vehicles causing issues in some neighbourhoods and drugs.

The Committee returned to the presentation made by the Youth Council and discussed the issues around the lack of facilities for children and young people, in particular play and other facilities for under 13s. A Member for the Manor House ward indicated that while being the largest ward by population there was no play area within the ward; an issue she and her fellow ward councillors were campaigning to correct. A Member raised the availability of other groups and clubs for young people but other Members were concerned that most of these, like scouts/guides etc. all had a cost associated with them that many families would not be able to afford.

A Member referred to the position of other Councils who had their own community patrol teams dealing with anti-social behaviour issues 24 hours a day. Such an approach to these problems could significantly reduce input from other service areas.

The Leader commented that some of the reasons behind a review of play provision in the town were the lack of facilities in certain areas/estates and the lack of a maintenance budget and strategy for replacing worn out equipment. Members referred to the monies available through Section 106 agreements paid by developers and how this was restricted to capital investment.

Recommended

That the comments and debate be noted.

109. Scrutiny Investigation into Anti-Social Behaviour in Hartlepool: Presentation - Feedback from the Town-Wide Survey (*Statutory Scrutiny Manager*)

The Statutory Scrutiny Manager submitted a report outlining the findings from the town-wide survey on anti-social behaviour. The response rate to the survey had been very good with 379 residents responding. The data outlined in the report would be considered alongside the other information supplied to Members as part of the investigation and assist in preparing the draft recommendations from the investigation.

The Statutory Scrutiny Officer indicated that the feedback included some recurring themes, most of which had been discussed at meetings during the investigation, and included the need for better intelligence sharing, improved call handling for the 101 service, the need for more preventative activities, a greater awareness of the consequences of anti-social behaviour, better communications with and involvement of young people, more seasonal activities and addressing the perception among many people that there's no point in reporting anti-social behaviour as nothing ever gets done.

The Statutory Scrutiny Manager indicated that young people had expressed the need for better role models in their own community – something that could apply to older people as well, a means of reporting anti-social behaviour anonymously, better signposting to means of reporting and improving the ways older people can report.

The survey had given very positive feedback on the Victim Support service and the Integrated Community Support Team also received a lot of positive feedback. People did wish to see more consequences for people who were responsible for anti-social behaviour such as behaviour orders and prosecutions.

The Statutory Scrutiny Officer stated that the results of the survey could be considered in greater detail by Members during an informal session to be held in the following week where Members would be able to discuss the final report and draft some recommendations.

Recommended

That the report be noted and the results of the survey inform the Committee's discussion on the final report and potential recommendations.

110. Scrutiny Investigation into Anti-Social Behaviour in Hartlepool: Presentation – Evidence from Community Engagement (*Statutory Scrutiny Manager*)

The Statutory Scrutiny Manager submitted some further feedback from the following community engagement events undertaken as part of the Committee's investigation process. These included: -

- (i) Drop-In Sessions at North, Central and South Community Hubs with local residents and with residents at Hartfields Retirement Village, Laurel Gardens Extra Care Home and Albany Court Sheltered Housing;
- (ii) Workshops were undertaken with representatives from Residents' Groups from across the town; representatives of minority communities of interest or heritage at the Asylum Seekers Refuge Group; the Children in Care Council and Youth Council and young people involved with West View, Kilmarnock, Wharton Trust and Belle Vue Youth Clubs;
- (iii) Survey of people within Middleton Grange Shopping Centre developed in conjunction with and undertaken by the Children in Care Council and Youth Council;
- (iv) Interviews with residents who have experienced and reported anti-social behaviour;

Appendices to the report set out a summary of the feedback received from the above events along with three anonymised case studies for Members information.

Recommended

That the report and evidence reported be noted.

111. Presentation – Independent Complaints Advocacy Service - Update *(North East NHS Independent Complaints Advocacy (ICA))*

Mr Philip Kerr from the North East NHS Independent Complaints Advocacy (ICA) service gave a presentation to Members updating them on the numbers and types of NHS complaints the service had supported in the period April to November 2019. During this time there had been 39 new clients to the service from Hartlepool with 31 going on to receive full advocacy support. 17 cases had been closed and on 30 November 2019 there were 30 open cases. Some analysis of the complaints was provided setting out postcode origination, age profile, gender, ethnicity and any other protected characteristics. The presentation set out some of the complaints themes, the areas of complaint (hospitals, surgeries etc.) and some of the outcomes. The ICA representative also set out some of the awareness work the body had undertaken in 2019, working with Healthwatch, Hartlepool Carers, Hartlepool Deaf Group and a number of patient groups.

Members welcomed the presentation and particularly welcomed the work with the Deaf Group and the ICAs employment of a deaf advocate. A Member asked if there was any specific GP surgery or GP that had received complaints. The ICA representative stated that there was no re-occurring names with most complaints being around health issues and secondary care.

Recommended

That the update report be noted and that a further update in six months be submitted to the Committee.

102. Minutes of the meeting of the Health and Wellbeing Board held on 23 September 2019

Received.

103. Any Other Items which the Chairman Considers are Urgent

The Chairman ruled that the following item of business should be considered by the Committee as a matter of urgency in accordance with the provisions of Section 100(B) (4)(b) of the Local Government Act 1972 in order that the matter could be dealt with without delay.

Hearing in relation to a Standards Complaint against a Councillor

The Assistant Chief Solicitor and Deputy Monitoring Officer reported that a complaint had been received from Councillor Black in relation to social

media posts made by Councillor T Richardson. An investigation had been expedited and a report prepared and there was a request for a 'local hearing' of the complaint investigation report. In light of the seriousness of the complaint, the Assistant Chief Solicitor and Deputy Monitoring Officer was recommending that a hearing of the full Audit and Governance Committee be held as soon as practicable to hear the complaint investigation report.

There was also some amendments to the arraignments for investigating and hearing complaints that the Committee should also consider and those would be reported to the same meeting.

There was a brief discussion on the involvement of the complainant in the hearing with the Assistant Chief Solicitor and Deputy Monitoring Officer advising that Councillor Black, if involved would be as a witness rather than a decision maker on the matter.

It was agreed that a meeting of the Committee, acting as a local hearing, take place on Wednesday 22 January 2020 at 2.00 pm to consider the matter.

The meeting concluded at 12.55 pm.

CHAIR

AUDIT AND GOVERNANCE COMMITTEE

6th February 2020



Report of: Statutory Scrutiny Manager

Subject: PERFORMANCE UPDATE -- NORTH EAST
AMBULANCE SERVICE

1. PURPOSE OF REPORT

- 1.1 To provide the Committee with a performance update from the North East Ambulance Service (NEAS).

2. BACKGROUND

- 2.1 Following consideration of the NEAS Quality Account in March 2019, and prior to consideration of the new Quality Account in March 2020, a representative from NEAS will be in attendance at today's meeting to present a performance update.

3. RECOMMENDATIONS

- 3.1 That the Committee receives the update and seeks clarification where required.

4. BACKGROUND PAPERS

No background paper was used in the preparation of this report.

5. Contact Officer:-

Joan Stevens – Statutory Scrutiny Manager
Chief Executive's Department – Legal Services
Hartlepool Borough Council
Tel: 01429 284142
Email: joan.stevens@hartlepool.gov.uk

AUDIT AND GOVERNANCE COMMITTEE

MINUTES AND DECISION RECORD

22 JANUARY 2020

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool.

Present:

Councillor: Ged Hall (In the Chair).

Councillors: Lesley Hamilton, Brenda Harrison, Marjorie James, and Brenda Loynes.

Standards Co-opted Member:
Ms Clare Wilson – Independent Member

Also Present: Councillors Tony Richardson and Bob Buchan.

Officers: Neil Wilson, Assistant Chief Solicitor and Deputy Monitoring Officer
Joan Stevens, Statutory Scrutiny Manager
David Cosgrove, Democratic Services Team

104. Apologies for Absence

Apologies for absence were received from Councillors James Black and Barbara Ward.

105. Declarations of Interest

None.

106. Minutes of the meeting held on 9 January 2020

Deferred.

107. Proposed Amendment of the Arrangements for Dealing with Standards Allegations under The Localism Act 2011 *(Assistant Chief Solicitor)*

The Assistant Chief Solicitor submitted a report setting out some proposed amendments to the current arrangements for dealing with standards allegations to ensure that they remained current and that identified issues were addressed.

The existing arrangements did not include any limitation on the time for bringing standards allegations resulting in the ability of complainants to raise allegations for an unspecified period of time after an alleged breach. The passage of time prevents investigations taking place when the best possible evidence is available and the lack of timescale discourages complainants from acting in a timely manner. A 3 month time limit was, therefore, proposed for inclusion into the arrangements, albeit with the discretion to investigate outside of this time period if the circumstances warranted it.

The existing arrangements, also, wrongly give the impression that only a “hearing sub-committee” can hear standards allegations, despite the power to determine complaints being delegated specifically to Audit and Governance Committee (item 18 on page 32 of Part 3 of the Constitution). The existing arrangements also made reference to executive arrangements that were no longer relevant.

Members endorsed the proposed amendments though a Member did suggest a further change to the final paragraph of section 3 to simplify the English; “The Council would normally expect a complaint to be made within 3 months of the potential breach of the Code of Conduct occurring. However, a complaint received outside of this time limit may still be made with the agreement of the Chair of the Audit and Governance Committee and the Monitoring Officer if exceptional circumstances apply”. This amendment and those set out in the report were supported by Members.

Recommended

That the proposed amendments to the Arrangements for Dealing with Standards Allegations under The Localism Act 2011 as reported, and amended in the meeting, be approved.

108. Any Other Items which the Chairman Considers are Urgent

None.

109. Local Government (Access to Information) (Variation Order) 2006

Under Section 100(A)(4) of the Local Government Act 1972, the press and public were excluded from the meeting for the following items of business on the grounds that they involved the likely disclosure of exempt information as defined in the paragraphs referred to below of Part 1 of Schedule 12A of the Local Government Act 1972 as amended by the Local Government (Access to Information) (Variation) Order 2006.

Minute 110 – Consideration of Investigation Report – SC01/2020 – This item contains exempt information under Schedule 12A Local Government Act 1972 as amended by the Local Government (Access to Information) (Variation) Order 2006 namely, information relating to the financial or business affairs of a particular person (including the authority holding that information) (para. 1).

110. Consideration of Investigation Report – SC01/2020

(Assistant Chief Solicitor) This item contains exempt information under Schedule 12A Local Government Act 1972 as amended by the Local Government (Access to Information) (Variation) Order 2006 namely (para 1) information relating to the financial or business affairs of a particular person (including the authority holding that information)

The Assistant Chief Solicitor reported on a Complaint that had been received in relation to a breach of the Members' Code of Conduct. Details are set out in the Exempt section of the minutes.

Recommended

As set out in the Exempt section of the minutes.

The meeting concluded at 3.30 pm

CHAIR

AUDIT AND GOVERNANCE COMMITTEE

6th February 2020



Report of: Statutory Scrutiny Manager

Subject: REPEAT PRESCRIPTION ORDERING SYSTEM
(RPOS)

1. PURPOSE OF REPORT

- 1.1 To present and update on the implementation of changes to the Repeat Prescription Ordering System (RPOS).

2. BACKGROUND

- 2.1 Clinical Commissioning Groups (CCGs) across the area made the decision to revise Repeat Prescription Ordering Systems (RPOS). The changes had been adopted from similar work already implemented in other areas such as Sunderland, South Sefton and Luton CCGs. Indications being that such changes improved patient safety by ensuring that they only receive the medication required, reducing medicines waste.
- 2.2 On the 25 July 2019, the Audit and Governance Committee considered proposed changes by the NHS across County Durham and the Tees Valley to the way patients order their repeat prescriptions. The changes being that:-
- i) Community pharmacies would no longer be able to order repeat medication for patients. Instead patients would order their medication directly from their GP practice;
 - ii) Patients would still receive the medication that they need, it's the way that they order it that would change;
 - iii) The revised process would be implemented from 2 September 2019 and work was well under way to ensure this is as smooth as possible; and
 - iv) It was recognised that there will be a small number of patients for whom this would not be suitable and it may be appropriate for community pharmacies to continue to support them with ordering repeat medication. As part of the project, GP practices were identify these patients and special arrangements would be put in place for them

- 2.3 The Committee was asked to consider the intended revisions to the System prior to their implementation on the 2nd September 2019 and expressed its general support for the new arrangements. An update was, however, requested six months after the commencement of the scheme in Hartlepool to allow Members the opportunity to ascertain how the new procedures had bedded in and where any issues remained.
- 2.4 A representative from the North of England Commissioning Support Team will be present at today's meeting to present the requested update to the Committee.

3. RECOMMENDATIONS

- 3.1 That the Committee considers the update and seeks clarification where required.

4. BACKGROUND PAPERS

The following background paper was used in the preparation of this report:

- Report and minutes of the Audit and Governance Committee held on the 25 July 2020.

5. Contact Officer:-

Joan Stevens – Statutory Scrutiny Manager
Chief Executive's Department – Legal Services
Hartlepool Borough Council
Tel: 01429 284142
Email: joan.stevens@hartlepool.gov.uk

AUDIT AND GOVERNANCE COMMITTEE

6th February 2020



Report of: Statutory Scrutiny Manager

Subject: THE PROVISION OF HIGH QUALITY MATERNITY SERVICES AND ELECTIVE SURGERY AT THE UNIVERSITY HOSPITAL OF HARTLEPOOL – ACTION PLAN UPDATE

1. PURPOSE OF REPORT

- 1.1 To receive progress on the implementation of the Action Plan produced following completion of the Audit and Governance Committee's investigation into 'The Provision of High Quality Maternity Services and Elective Surgery at the University Hospital of Hartlepool'.

2. BACKGROUND

- 2.1 In 2019 Audit and Governance Committee completed its investigation into 'The Provision of High Quality Maternity Services and Elective Surgery at the University Hospital of Hartlepool' and a copy of the resulting report can be accessed via the below link, or by contacting the Statutory Scrutiny Officer (joan.stevens@hartlepool.gov.uk or 01429 284142).

Link to report - [HIGH QUALITY MATERNITY SERVICES AND ELECTIVE SURGERY AT THE UNIVERSITY HOSPITAL OF HARTLEPOOL SITE | Hartlepool Borough Council](#)

- 2.2 The Committee's report sets out a series of recommendations which have been compiled into an Action Plan for completion by all relevant organisations / bodies involved in the investigation. The Committee received its first update on the progress of the Action Plan in August 2019 and requested a further update in 6 months, with additional data on the number of mothers registered to deliver their babies at the new Unit in Hartlepool.
- 2.3 Work has been ongoing on the implementation of the recommendations contained within the Action Plan and an update on progress is to be presented at today's meeting by representatives from the North Tees and Hartlepool Foundation Trust.

- 2.4 A copy of the Action Plan is attached at Item 6.3(ii) of the agenda for this meeting for consideration by the Committee. In addition to the Action Plan, an additional report is also provide at Item 6.3(iii) of the agenda, to provide the Committee with details of an assessment of Hartlepool's high risk population in relation to use of maternity services.

3. RECOMMENDATIONS

- 3.1 i) That the Committee considers the:
- Action Plan provided at Item 6.3(ii) and seeks clarification on progress where required.
 - Additional information provided at Item 6.3(iii) and seeks clarification on progress where required.
- ii) That the Committee considers the need for a further update in 6 months.

4. BACKGROUND PAPERS

The following background paper was used in the preparation of this report:-

Link to report - [HIGH QUALITY MATERNITY SERVICES AND ELECTIVE SURGERY AT THE UNIVERSITY HOSPITAL OF HARTLEPOOL SITE | Hartlepool Borough Council](#)

5. Contact Officer:-

Joan Stevens – Statutory Scrutiny Manager
Chief Executive's Department – Legal Services
Hartlepool Borough Council
Tel: 01429 284142
Email: joan.stevens@hartlepool.gov.uk

Action Plan

AUDIT AND GOVERNANCE SCRUTINY ENQUIRY ACTION PLAN: High Quality Maternity Services at the University Hospital of Hartlepool Site
Care Group: 1 Healthy Live Department: Maternity Services Developed by: SEL-Malak Date: Up-dated January 2020


Item	Problem/Issue/Identified gap in service	Specific proposed actions to be implemented to address the problem / issue: <i>These actions should be agreed within <u>SMART</u> principles.</i>	Date action initiated:	Responsibility: <i>Individual names of identified staff who have <u>agreed</u> to complete the action.</i>	Date to be evaluated:	Evaluation Status / Progress Update. <i>Where monitoring shows no improvement/change in practice, additional actions should be added with timescales for completion and further evaluation.</i>
1	That the preferred option for the provision of maternity services in Hartlepool continues to be the re-establishment of a consultant led maternity unit;	1. This has been previously discussed and remains unfeasible due to safety and quality issues in regard to required Royal College requirements in terms of consultant cover in addition to a requirement for emergency support services i.e. critical care			July 2019	1. 07/2019 Action Complete
2	That a 'Maternity Hub' be created on the UHH site, with midwife appointments provided from the Hub to secure appropriate levels of staffing on site to enable it to be fully open and operational, replacing its current 'open when required' status.	2. Hub: To establish Hub within the Birthing Centre (BC). To provide a range of antenatal and postnatal care options. Health Visitor (HV) service to be approached to work collaboratively. <ul style="list-style-type: none"> • Pre-booking appointments • Booking Appointments • Antenatal Clinic's • Breast feeding workshop • Parent Education • Postnatal Drop in clinic • Postnatal weekend clinics • Dietitian Intervention at GTT Clinics. 	07/2019	Head of Midwifery (HoM) Community Midwifery Matron (CMM) Community Midwives (CMW) Health Visiting Service (HV)	July 2019 05/12/19	2. 07/2019- Hartlepool Birthing Hub established and full range of services available delivered by Community Midwives. 05/12/19- Full range of Services being delivered from the Hartlepool Maternity Hub utilising resources by CMW <ul style="list-style-type: none"> • Pre-booking appointments • Antenatal Clinics • Breast feeding workshop • Parent Education • Postnatal/Antenatal Drop in Clinics • Weekend post/Antenatal Clinics • Dietitian service Health Visiting services approached to co-deliver bespoke education sessions for Teenagers and support breast feeding

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						support groups on-going discussions and further pathways to be developed. Action Complete
		2. Collaborative working a. HoM and Health Visiting Service lead to established Bi-Monthly meetings to ensure seamless collaborative relationships between Midwifery and HV	Feb 2019	HOM CMM & CM Health Visiting services	05/12/19	3. 05/12/19 a. HOM and HV Service lead have established Bi-Monthly Meeting to ensure robust working relationships between professionals and services Action Complete.
		b. Monthly meetings with HV lead and CMM to be established.		HOM CMM & CM Health Visiting services	05/12/19	b. CMM and HV Delivery lead meet monthly to ensure robust communication between services Action Complete.
		c. Services continue to be delivered from remaining Children Centres by both CM and HV.		HOM CMM & CM Health Visiting services	05/12/19	c. Joint service delivery BY Midwifery and HV from remaining Children Centres Action Complete.
		d. CM co-delivering Pregnancy and beyond with HV Service from Children Hubs within Hartlepool		HOM CMM & CM Health Visiting services	05/12/19	d. CM co-delivering Pregnancy and beyond with HV Service from Children Hubs within Hartlepool Action Complete.
		e. CM to explore joint working with HV service to jointly deliver CoC Teenage Team sessions		HOM CMM & CM Health Visiting services	05/12/19	e. Community Midwifery have developed a Continuity of Carer (COC) Teenage Team. On-going discussions continue with the HV service to develop pathway for Joint delivery of sessions

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		3. Models a. Scope Midwifery Models to support the delivery of intrapartum care at Birthing Centre Hub. b. Network with local and national Service to explore and consider options for delivery of safe sustainable models	07/2019	HOM CMM CoC Lead	July 2019 05/12/19	a. Models scoped and submitted to Chief Nurse Suggested models presented to Executive team 7/1/2020 requires further detail. b. Visits undertaken to local and regional birthing centres to view models and practice. Pathway development on-going to support intrapartum care at Hartlepool Hub. Staff engagement sessions undertaken to seek views on ways of working to support a new model of care for Hartlepool. Acknowledging on-going requirement to mitigate against ageing workforce and natural turnover.
		5. Recruitment a. Undertake Birth Rate + to establish workforce requirements for the current service delivery b. Develop and deliver work force strategy to recruit to vacant midwifery posts as of July 2019 c. Undertake recruitment Drive in June 2019 to recruit to vacant Midwifery posts d. Continue to support Midwifery preceptorship programme e. Support flexi retirement and flexi working patterns	Feb 2019	HOM Maternity Matrons	July 2019 05/12/19	5. 07/2019 Birth Rate + Completed awaiting final report. - a. 05/2019-Birth Rate + 2019 completed and presented to Finance director on-going discussion regarding workforce budget and strategy for 2019- 2022 b. Workforce strategy developed and presented to Trust board June 2019 Action Completed. c. Recruitment drive undertaken and all vacant midwifery posts successfully recruited too. Action Completed. d. Midwifery preceptorship programme supported for new graduate starters Action completed e. All flexi retirements supported if service requirements allow. Flexi working patterns are supported following discussion and service requirements allow. Action completed.

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3.	That a review be undertaken of all maternity services and classes provided in Community Hubs, Children's Centres and other venues across the town, with the aim of: - Better co-ordinating and building upon the existing services to meet the holistic needs of Hartlepool mum; and - Ensuring that services meet the needs of all sections of the population, including working mums	3. Review services for Parent Education a. Service review following closure of Children's Hubs Feb 2019 b. Deliver service from Hartlepool Maternity Hub c. Explore services to co-deliver with HV Service d. Develop services to support Vulnerable groups Offer Choice e. Develop Maternity Voices Partnership (MVP) Group.	July 2019	HOM CMM CMW & HV	July 2019 Dec 2019	3. a. 07/2019-service reviewed. Action Complete b. 05/12/19- Full range of service delivered from Hartlepool Maternity Hub and Children Centres by Community Midwifery. Action Complete c. Co-delivered Pregnancy Birth and beyond from children centres by CMW and HV. Action Complete d. CMW and HV exploring pathways to co-deliver from Hartlepool Maternity Hub for vulnerable groups e.g. Teenage pregnancy. e. MVP developed and active from Hartlepool Maternity Hub since July 2019. Action Complete.
4.	4. 1. That opportunities be explored to co-ordinate the provision of Public Health, and 0-19 Services, to help address the increase in co-morbidities that have seen an increase in the number of 'high risk' mums, and provide every child in Hartlepool with the best start in life. 2. A Task and Finish Group, of the Audit and Governance Committee, be established to monitor the implementation of the recommendations of the investigation.	4. Public Health/ 0-19 service collaboration a. Task and finish group established chaired by Deputy Director of Nursing UHNT & HP. Members; PH 0-19 service, CCG, HOM and General Manger Women's and Childrens Services (WAC's). b. 1 st meeting 1/5/1 c. 2 nd Meeting 30/5/19				4. Public Health Action: May 2019 Two meeting with PH, Midwifery Services, CCG and Health visiting.

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	Maternity – Promotion and Marketing					
5.	5. That a marketing plan be put in place to promote the breadth of services available for mums in Hartlepool, leading up to the birth, for the birth and after, with particular emphasis on: a. Promotion of the Hartlepool Birthing Unit; and b. The review of promotional material and websites (including the 'Birthplace Choices' leaflet) to showcase services across the UHH and UHNT equally c. That staff training be reviewed to ensure consistency of professional advice in terms of options for births, including the promotion where appropriate of the Hartlepool Birthing Centre	Marketing: a. Promote the Local Maternity System (LMS) Choice booklet and App across the service. Communicated through Trust site, MVP social media site and group. Promotion of the service through MVP group and social media face book page Develop strategy for marketing of chosen model following scoping and decision for service delivery b. To continue to promote choice by providing up-to-date information to support informed choice c. Sign posting of women to information to support choice e.g. Nice criteria for delivery at midwifery led units and better births NHS 5-year plan Undertake one-one birth plan	July 2019	HOM CMM CMW HV	July 2019 & Dec 2019	5. Evaluated July 2019 and Dec 2019 a. LMS Choice App launched and Market to promote Birth Choice for all women Action Completed July 2019 MVP group developed and providing feedback to the service for development and improvement Action Completed Dec 2019 b. On-line booking Proforma developed to improve 1 st contact and early pre-booking appointment and booking appointment. Ensures robust information to promote Womens choice Action Complete Dec 2019 c. Face to Face booking appointments, and birth planning promote discussions throughout pregnancy regarding choice on an individual basis depending on risk. Action Complete
	Maternity Commissioning					
6.	6. That the Hartlepool and Stockton Clinical Commissioning Group (HaST CCG), as the commissioner of	NEAS no longer designates the unit as a place of safety, if an emergency response is required. NHS Pathways, has been updated for a "declared				Updated by Mark Cotton - NEAS

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	ambulance services, renegotiate their contract with NEAS to remove the designation of the Birthing Centre as a 'place of interest' and provide an assurance that calls for assistance from the Centre would be given the highest possible priority.	obstetric emergency" to become a Category 1 incident when the call is received from a healthcare professional.				
	Elective Care					
7.	7. Whilst the increase in the take up of elective, inpatient and outpatient services at UHH is encouraging, further work needs to be undertaken to ensure that all patients (from Hartlepool and elsewhere) are fully aware of the options available for treatment at the UHH.	<p>The Trust has a well-developed number of services on the UHH site with a focus upon the transfer of additional elective services as outlined in the embedded attachment.</p> <p>Work is ongoing with Hartlepool Borough Council to further develop the Integrated Single Point of Access with a focus upon supporting Frail Older People.</p>				<p>Attached - Elective Care Action</p>  <p>OG update.docx</p> <p>The development of community services from the Holdforth Hub has been implemented: this includes trial without catheter (TROC) and delivery of I.V medications for example anti biotics.</p> <p>The Trust is carrying out a higher volume of joint replacements and joint revision surgery at UHH since the introduction of the extended recovery which has allowed more complex cases to be carried Other Trusts are now visiting the organisation to look at how we have achieved this.</p> <p>Further to receiving the delivery of some specialist equipment we will be recommencing lumbar spinal procedures.</p> <p>From April all hand trauma and elective lists will be at the UHH site resulting in all hand trauma (OPD and operating) being</p>

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						conducted on the UHH site.

Attached - Summary information relating to maternity bookings for 2018/2019:



Maternity Bookings
10th December 2019

Maternity Bookings 10th December 2019 for: 2018/2019

Date:2018	Stockton	East Durham	Hartlepool	
Home	4	2	4	10
Hartlepool	1	0	100	101
North Tees	1851	275	1,016	3,142
CDDFT	5	207	3	215
James Cook	535	7	50	592
RVI	1	1	1	3
Sunderland	0	248	11	259
Other	2	7	0	9
Total	2399	747	1185	4,331
Date 2019	Stockton	East Durham	Hartlepool	
Home	8	3	7	18
Hartlepool	0	1	24	25
North Tees	1636	265	986	2,887
CDDFT	1	165	2	168
Friarage	0	1	0	1
James Cook	505	3	55	563
RVI	0	2	2	4
Sunderland	2	237	8	247
Other	0	3		3
Total	2156	680	1084	3,920

Obstetric & Gynaecology Services	Delivered at North Tees	Delivered at Hartlepool
Obstetrics		
The majority of pregnancy care is midwifery & community based.		
We deliver full community services in Hartlepool & Stockton.		
Hospital Based Services		
• Early Pregnancy Assessment Clinics	✓	✓
• Consultant Antenatal Clinics for high risk pregnancy	✓	✓
• Ultrasound scan – dating, screening & growth	✓	✓
• OGGT clinics to screen for diabetes in pregnancy	✓	✓
• Consultant with fetal medicine interest scans	✓	✓
• Obstetric Medical Antenatal Clinics For women with diabetes or medical conditions	✓	✓
• Multiple Pregnancy Clinics	✓	✓
• Maternity Day Assessment Unit For urgent assessment or routine outpatient monitoring	✓ 7 days /week	✓ Monday - Friday
• Postnatal Consultant Reviews	✓	✓
• Maternity Psychiatry Clinics	✓	
• Anaesthetic High Risk Clinics	✓	
• Home Birth – community based	Stockton area ✓	Hartlepool area ✓
• Inpatient intrapartum care – delivery suite	✓	
• Emergency Obstetric Service	✓	
• Obstetric Operating Theatre	✓	
• Inpatient maternity care	✓	
Gynaecology		
• General Gynaecology Outpatient Clinics	✓	✓
• Specialised Gynaecology Outpatient Clinics		
• Rapid Access – 2 Week Rule Clinics	✓	✓
• Postmenopausal Bleed Clinics	✓	✓
• Colposcopy Clinics	✓	✓
• Gynaecology Oncology Clinics	✓	✓
• Abnormal Uterine Bleeding Clinics	✓	✓
• Chronic Pelvic Pain/ Endometriosis Clinics	✓	✓
• Urogynaecology clinics	✓	✓
• Urodynamic Clinics	✓	✓
• Pessary Replacement Clinics	✓	✓
• Paediatric Gynaecology Clinics	✓	✓
• Pregnancy Advisory Clinics	✓	✓
• Early Pregnancy Assessment Clinic	✓	✓
• Fertility Clinics		✓
• Outpatient Treatment / Procedures	✓	✓ More at Hartlepool
• Day case clinic/ward based treatments	✓	✓
• Gynaecology Operating		
• Day case surgery	✓	✓
• Inpatient surgery	✓	✓ Selected cases
• Emergency Gynaecology Service	✓	

- We have increased the procedures being offered as suitable for surgical treatment in Hartlepool and have undertaken selected inpatient operating at Hartlepool.
- There is also the recent development of the second outpatient procedure room at Hartlepool with the aim of further developing the outpatient surgical treatments that can be offered in gynaecology. The outpatient treatments currently being offered at Hartlepool include treatments for heavy periods (endometrial ablations or removal of polyps and fibroids), treatment for cervical abnormalities and there is an aim to develop outpatient treatment options for certain early pregnancy complications and certain bladder complaints. The outpatient procedure clinics are more developed at Hartlepool than at North Tees.

AUDIT AND GOVERNANCE COMMITTEE

6th February 2020



Report of: Deputy Director of Public Health

Subject: THE PROVISION OF HIGH QUALITY MATERNITY SERVICES AND ELECTIVE SURGERY AT THE UNIVERSITY HOSPITAL OF HARTLEPOOL – ADDITIONAL PAPER OUTLINING DATA RELATING TO HIGH RISK PREGNANCY TO SUPPORT ACTION PLAN

1. PURPOSE OF REPORT

- 1.1 The purpose of this additional paper is to provide background data and information relating to high risk births in Hartlepool with a risk factor of alcohol, smoking and obesity.

2. BACKGROUND

- 2.1 This report is presented for consideration alongside the action plan and is intended to provide the data for smoking status at the time of delivery and estimated numbers of live births in Hartlepool where these risk factors may have been a risk factor for those births. The data for obesity and alcohol has been estimated.

3. RECOMMENDATIONS

- 3.1 That the Committee considers the data (attached at **Appendix A**) in parallel with the Action Plan.

4. BACKGROUND PAPERS

The following background paper was used in the preparation of this report:-

Link to report - [HIGH QUALITY MATERNITY SERVICES AND ELECTIVE SURGERY AT THE UNIVERSITY HOSPITAL OF HARTLEPOOL SITE | Hartlepool Borough Council](#)

5. Contact Officer:-

Craig Blundred
Deputy Director of Public Health
Hartlepool Borough Council
Tel: (01429) 284104
Email: craig.blundred@hartlepool.gov.uk

Dean Langstaff
Public Health Analyst
Hartlepool Borough Council
Tel: (01429) 402805
Email: dean.langstaff@hartlepool.gov.uk

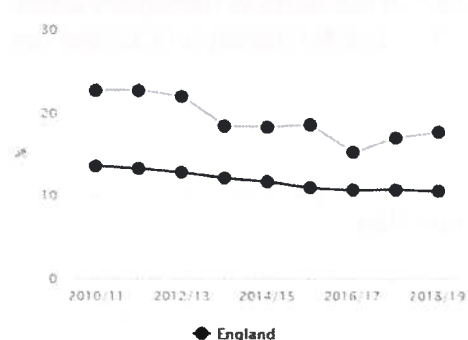
Hartlepool Maternity Risk Factors – Alcohol, Smoking & Obesity

In the latest Office of National Statistics (ONS) figures, mid-2018, Hartlepool has a population of 93,242 people, 45,524 males and 47,718 females. Of those 17,236 females are of childbearing age, aged between 15 and 45 years. The ONS figures for live births in 2018 shows that Hartlepool had 1032 live births. In the last six years the number of live births in Hartlepool has remained quite stable, with each year remaining within 5% of the previous year's total.

The latest smoking at time of delivery data has Hartlepool with 17.7% of births to women who were still smokers at time of delivery. This has fallen from a rate of 22.7% in 2010/11, to a low of 15.3% in 2016/17. There has however been a year on year increase for the last two years. In terms of numbers, there were 167 live births to women who were still smokers at time of delivery in 2018/19.

Smoking status at time of delivery Hartlepool

Proportion - %



Recent trend: ↗

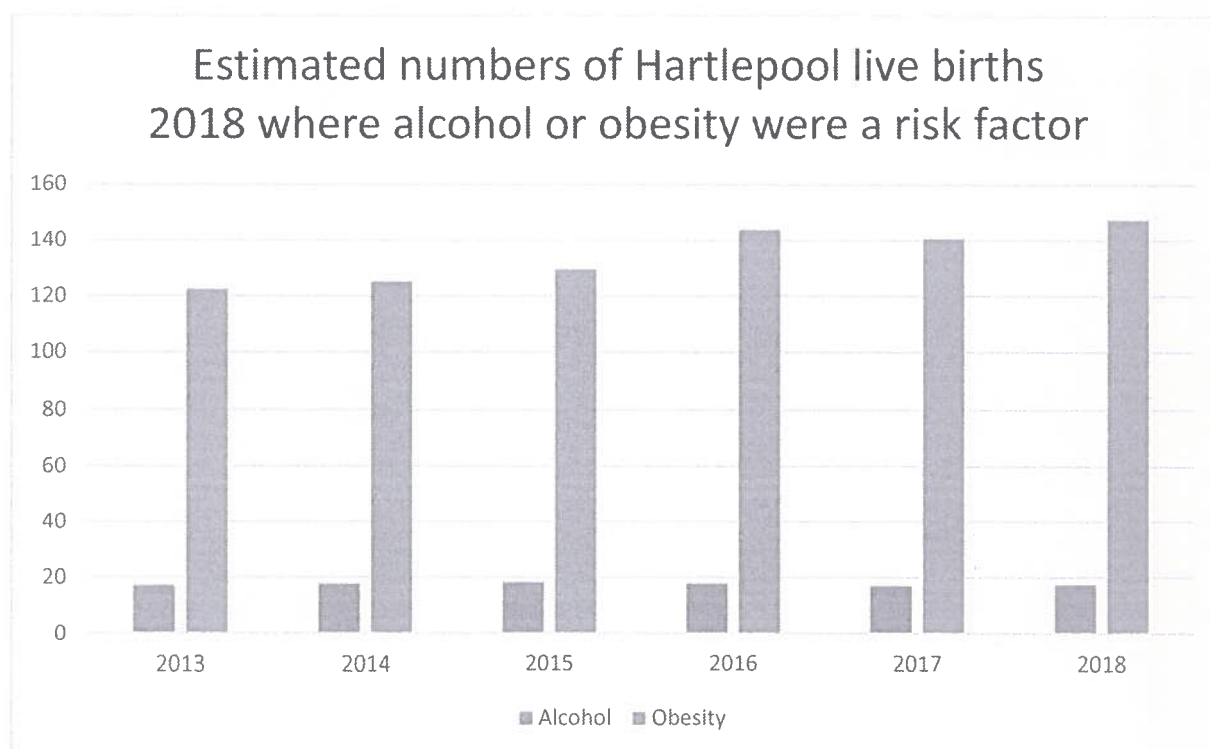
Period	Hartlepool				North East region	England
	Count	Value	Lower CI	Upper CI		
2010/11	254	22.7%	20.3%	25.2%	21.1%	13.6%
2011/12	259	22.7%	20.4%	25.2%	20.7%	13.3%
2012/13	234	21.9%	19.5%	24.5%	19.7%	12.8%
2013/14	181	18.4%	16.1%	20.9%	18.9%	12.2%
2014/15	185	18.3%	16.0%	20.8%	18.0%	11.7%
2015/16	186	18.6%	16.3%	21.1%	16.8%	11.0%
2016/17	150	15.3%	13.1%	17.6%	16.1%	10.7%
2017/18	151	17.0%	14.7%	19.6%	16.3%	10.8%
2018/19	167	17.7%	15.4%	20.2%	15.7%*	10.6%

Source: Calculated by PHE from the NHS Digital return on Smoking Status At Time of delivery (SA TOE)

The following information relating to alcohol and obesity in pregnancy takes prevalence estimates and applies these to the numbers of live births to give the expected level of impact for each risk factor for the Hartlepool population, but does not factor in any other inequalities which may impact on this.

Estimates of dependent drinkers by the University of Sheffield place Hartlepool at 1.69% of the population. If this were to be applied to the live births in 2018, then 17 would have been to dependent drinkers. The estimate of dependent drinkers has remained static at 1.69%, which is reflected in the small movement of live births to dependent drinkers across the reporting period, all years have either 17 or 18 live births to dependent drinkers.

Obesity estimates on the Quality Outcome Framework (QOF) give Hartlepool an obesity prevalence of 14.3% in its adult population. If this estimate is applied to the 2018 live births, then Hartlepool would have 148 births to obese mothers. Across the six year reporting period obesity levels remained at 12% from 2013 to 2015. However, since 2016 they have increased every year, up to 13.7% in 2016, 14% in 2017 and 14.3% in 2018.



Dean Langstaff – Public Health Analyst – Hartlepool Borough Council

Dean.langstaff@hartlepool.gov.uk

TEES VALLEY JOINT HEALTH SCRUTINY COMMITTEE

MINUTES

2 SEPTEMBER 2019

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool.

Present:

Councillor G Hall (Hartlepool BC), in the Chair.

Darlington Borough Council: Councillor E. Heslop.

Hartlepool Borough Council: Councillors B Harrison and B Loynes.

Middlesbrough Borough Council: Councillors A Hellaoui and E Polano.

Redcar and Cleveland Borough Council: Councillors D Rees, N Cooney (Vice-Chair) and S Smith.

Stockton-On-Tees Borough Council: Councillors E Cunningham, C Gamble and L Hall.

Also Present: Siobhan McArdle and Gill Hunt, South Tees Hospitals NHS Foundation Trust

Clare Cuthbertson, Elspeth Devanney, Dominic Gardner,
Dr Ahmed Khoja, Dr Raj Kumar, Tees, Esk and Wear Valley NHS
Foundation Trust

Daniel Maddison and Katie McLeod, NHS Hartlepool and Stockton
Clinical Commissioning Group

Donna Owens and Sarah Gill, NHS North of England Commissioning
Unit.

Officers: Joan Stevens, HBC Statutory Scrutiny Manager
David Cosgrove, HBC Democratic Services Team
Judy Trainer and Peter Mennear, Stockton Borough Council
Alison Pearson, Redcar and Cleveland Borough Council

9. Apologies for Absence

Councillors:

J Clarke and W Newall (Darlington BC).

J McTigue (Middlesbrough BC).

10. Declarations of Interest

None.

11. Minutes of the meeting held on 17th June 2019

Confirmed.

12. South Tees Hospitals NHS Foundation Trust – CQC Inspection Report Update *(South Tees Hospitals NHS Foundation Trust and Hartlepool and Stockton on Tees Clinical Commissioning Group)*

The representatives from South Tees Hospitals NHS Foundation Trust (STHFT) gave a presentation to the Joint Committee setting out the results of the Care Quality Commission (CQC) inspection in January/February 2019 and the improvement and action plans put in place as a consequence of the overall rating of 'requires improvement'. The presentation showed the specific results for the assessed areas for both James Cook University Hospital, Middlesbrough (JCUH) and Friarage Hospital, Northallerton (FHN).

The Trust representative highlighted the 'good' areas highlighted in the inspections and commented that some of the issues that had resulted in a 'requires improvement' rating. Critical Care had been an area that had been rated as 'requiring improvement' and critical care had been moved from FHN to JCUH but some of the rating for JCUH had reflected the CQC's consideration that there were insufficient side wards available; an issue that without sizeable capital input would be difficult to address. Issues around diagnostic imaging, for example, were matters that the Trust had raised with the CQC before the inspection.

The Trust management were obviously very concerned at the overall CQC rating but had instigated significant work in preparing the action plans that had been submitted in response to the inspection on 24 July.

Members expressed their concern at some of the areas highlighted as requiring improvement. The Trust representatives indicated that the report had been very difficult for their hard-working staff but commented that some of the issues were simple 'own goals' that could be easily and quickly addressed but others could not be so easily remedied. The Trust representatives stated that they had conflicting demands between to balance between the quality regulator and the financial regulator. The Trust had cut over £40m from its budget and considered that any staff morale issues were probably more reflective of the national situation than a local one.

The Trust had some very specific problems that the CQC seemed not to have accounted for. The bed occupancy rate was running at 94% when the national figure was some 9% lower. The Trust worked with other Critical Care sites across the northeast and their outcomes were good when compared across the other sites. It was difficult to balance financial

efficiency and patient safety and perhaps the Trust had been wrong to think the CQC would have been more understanding of this.

Reducing bed occupancy rates to the national average did have consequences and could have particular effects on cancer services for example. The Trust also had £225m of long term debt and one of the worst PFI schemes in the country that took £17m out of the budget each year. The Trust had ambitions that would have addressed some of the issues raised in other areas. The CQC's comments in relation to paediatric A&E had led to some changes in the A&E area and additional security. The Trust had been campaigning for a specialist paediatric A&E unit but this would require a £70m investment it did not have the capital for.

Members discussed some of the issues around the high bed occupancy rate and questioned if this was due to hospital and bed closures. The Trust representatives did not feel this was the case. The whole of the hospital provision across the Tees Valley needed to be seen as a single system delivering across the whole area. One major issue being seen at JCUH, probably amplified as the regional major trauma centre, was the numbers of people coming to A&E with complex medical needs.

The meeting discussed the arrangements the Trust was putting in place to respond to the CQC ratings and the engagement of staff in the process. The issues around critical care were focussed upon in Members debate and the Trust representatives indicated that there were some issues that could only be resolved through capital investment and there had been funding bids turned down. Staffing was also a concern for Members and the Trust indicated that the vacancy level was currently 5.5% (around 90 fte). Numbers of trainees were good with the Trust retaining around 90% of all student nurses when they qualified; the problem was that at the other end of the age spectrum a lot of experienced nurses were retiring.

Decision

That the South Tees Hospitals NHS Foundation Trust be thanked for their informative presentation.

13. Teesside Rehabilitation Services Developments (*Tees, Esk and Wear Valley NHS Foundation Trust*)

Representatives of Tees, Esk and Wear Valleys NHS Foundation Trust outlined proposals for a reconfiguration of the rehabilitation services currently operating out of Lustrum Vale in Stockton and Kirkdale at Roseberry Park. Engagement with patients and families' had driven the proposed changes together with the CQC wish to see a move away from 'locked units' such as Kirkdale. Services would be centred at Lustrum Vale with an extended Community Team operating longer hours – 8.00 am to 8.00 pm, 7 days a week. This would be backed with additional training for staff who were now meeting the needs of patients with more complex needs

than in the past. The new remodelled pathways would ensure that patients would be assessed and into care models much quicker.

The Chair commented that there was significant debate locally and nationally around the availability of beds for patients with complex mental health needs and the numbers outlined here seemed to be quite low when the service covered the whole Tees Valley area. The representatives stated that based on the national figures, there should be 19 in-care beds for every 100,000 population. Across the services there would be 64 acute beds and 10 psychiatric beds. The changes here would ensure a better transition for patients from acute services. The expanded Community Team would carry out assessments in the community providing greater flexibility for patients.

Decision

That the Tees, Esk and Wear Valleys NHS Foundation Trust representatives be thanked for their presentation and that a further update be provided in 6 months' time to the Joint Committee.

14. Care Quality Commission Inspection Results – West Lane Hospital (*Tees, Esk and Wear Valley NHS Foundation Trust*)

Representatives of Tees, Esk and Wear Valleys NHS Foundation Trust provided the Joint Committee with an update on the situation at West Lane Hospital following the CQC Notice of Decision to close the hospital in August 2019. Dr Ahmed Khoja opened the update by issuing an apology for the failures of care at West Lane which had proved to be a very distressing time for patients and their families in particular.

The presentation outlined the timeline of events leading up to the closure notice and the steps being undertaken to move the remaining patients out to alternative provision. There were currently seven patients remaining with the funding for an alternative venue for two of the young people with particularly complex needs. Work was ongoing to enhance the community support teams and the development of new plans for the future were underway; there was a need for these services in the Tees Valley.

The Trust accepted that there was a long way to go, particularly with regaining the trust of patients and their families.

Members questioned the timescales for reopening the hospital. Members were concerned that some of the young people previously placed in the hospital could now be moved to units some distance away putting even further strain on their families. The Trust representatives stated that much would depend on the reopening date and the assessment of the young people at that time but there would be the option for them to return. As for reopening the hospital it was not anticipated that it would reopen within the next six months. Members stated their belief that there needed to be a

promotion of openness by the Trust ensuring that patients, their families and the community know the truth of what happened.

Decision

That the Tees, Esk and Wear Valleys NHS Foundation Trust representatives be thanked for their presentation and that a further update be provided in 6 months' time to the Joint Committee.

15. Respite and Short Breaks Update/Monitoring *(North of England Commissioning Support Unit/Tees, Esk and Wear Valley NHS Foundation Trust)*

The representatives from the North of England Commissioning Support Unit and Tees, Esk and Wear Valley NHS Foundation Trust gave a presentation updating the Joint Committee on the progress of the review of the respite and short breaks service in Teesside.

Members referred to the previous issues around the review of the respite and short breaks service and sought assurance that the two venues, Bankfields Court in Middlesbrough and Aysgarth in Stockton, would continue to be available for families to utilise for short breaks and respite care. It was indicated that they would continue to operate but there was to be a review of the buildings being fit for purpose. Bed based respite care would continue for those families that chose it.

The presentation had referred to a Panel being implemented to consider referrals and assessments to provide some consistency. Members' questioned who would be represented on the Panel and commented that they would welcome representation from users of the service (and/or their family members). Members commented that the care these families provided was saving the NHS very significant sums of money each year and the provision of a respite and short breaks service was the least that could be done to help ensure they could continue to provide care for their loved ones. The needs of the carers also needed to be taken into account as part of this service, not just the individuals that received the service directly. The Chair questioned if Personal Independence Payments (PIP) could be used by these patients. The representatives commented that this was outside that system.

Decision

That the North of England Commissioning Support Unit and Tees, Esk and Wear Valley NHS Foundation Trust representatives be thanked for their presentation and that a further update be provided in 6 months' time to the Joint Committee.

16. Recommissioning of Improving Access to Psychological Therapies (IAPT) Services – Contract Award *(County Durham and the Tees Valley Commissioning Groups)*

The representative from NHS Hartlepool and Stockton Clinical Commissioning Group updated the Joint Committee on the recommissioning of IAPT services. Following discussions between the CCGs it had been agreed that there would be two contract areas; one covering the Durham CCG area and one for the whole of Teesside and these would adopt the existing Durham model of one single provider. This had only been approved recently and therefore the contract had not yet gone out to the market but would shortly.

The aim behind the single provider model was to put in place a service that was more dynamic and responsive and simpler for people to access. The model would also look at the wider needs of patients in supporting their mental health through assisting access to additional support mechanisms such as housing advice etc.

Members questioned when the new service would be in place and was there sufficient time for this in light of the wider area being covered. The representative stated that the contract was due to commence in April 2020 and the specification was very robust and had become a reference point for others. The funding was based on the current and predicted rises in patient numbers. The services was a 16+ service; there was a separate review underway of similar services to school aged children and young people.

Decision

That the representative from NHS Hartlepool and Stockton Clinical Commissioning Group be thanked for his update report.

17. Direct Access to Hearing Services – Contract Award – NHS Hartlepool and Stockton on Tees CCG and NHS Darlington CCG *(Hartlepool and Stockton on Tees NHS CCG and Darlington NHS CCG)*

The Hartlepool BC Statutory Scrutiny Manager reported that an updated timetable for the contract award had not yet been received and would be circulated to Members and officers once received. A further update had been scheduled for the March 202 meeting.

Decision

That the report be noted.

18. Local and Regional Health Scrutiny Work Programmes *(Statutory Scrutiny Manager)*

A number of the work programmes for the member authorities had been circulated. The representatives from Redcar and Cleveland BC commented that in light of the presentation earlier in the meeting, they would share the results of their investigation into South Tees Hospitals NHS Foundation Trust.

Decision

That the work programmes be noted.

19. Any Other Items which the Chairman Considers are Urgent

Members referred to the recent changes made to the repeat prescription services in the region and suggested that an update at the next meeting would be useful so Members could share their experiences of the changes in their areas and receive an update from the North of England Commissioning Support Unit.

The meeting concluded at 12.35 pm.

CHAIR

SAFER HARTLEPOOL PARTNERSHIP MINUTES AND DECISION RECORD

22 November 2019

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool.

Present:

Responsible Authority Members:

Councillor: Shane Moore (In the Chair)
Denise McGuckin, Director of Regeneration and Neighbourhoods
Chief Inspector Nigel Burnell, Chair of Youth Offending Board
Kevin Harrison, Cleveland Fire Authority
Michael Houghton, NHS Hartlepool and Stockton on Tees and
Darlington CCG

Other Members:

Sally Robinson, Director of Children's and Joint Commissioning
Services

Also Present:

Councillor Ged Hall, Hartlepool Borough Council
John Lovatt was in attendance as substitute for Jill Harrison, Angela
Corner as substitute for Chris Joynes, Sylvia Pinkney as substitute for
Tony Hanson and Sarah Wilson as substitute for Barry Coppinger.

Officers: Rachel Parker, Community Safety Team Leader
Roni Checksfield, Youth Offending Service Team Manager
Denise Wimpenny, Principal Democratic Services Officer

29. Apologies for Absence

Apologies for absence were submitted on behalf of Barry Coppinger, Police and Crime Commissioner for Cleveland, Councillor John Tennant, Hartlepool Borough Council, Tony Hanson, Assistant Director, Environment and Neighbourhood Services, Hartlepool Borough Council, Jill Harrison, Director of Adult and Community Based Services, Hartlepool Borough Council, Joanne Hodgkinson, Safe in Tees Valley and Chris Joynes, Thirteen Group.

30. Declarations of Interest

None.

31. Minutes of the meeting held on 11 October 2019

Confirmed.

32. Cleveland Fire Arson Strategy - Presentation

(Representative from Cleveland Fire Authority)

Issue(s) for consideration

The Representative from Cleveland Fire Authority, who was in attendance at the meeting, provided the Partnership with a detailed and comprehensive presentation in relation to the Cleveland Fire Brigade Arson Reduction Strategy which was to reduce the incidence of deliberate fires and their consequential impacts. The presentation included an overview of the impact of arson on local communities, the powers available to deal with deliberate fire setting as well as the national perspective in terms of arson statistics which showed that Cleveland had the worst rate of arson in the UK per 10,000 population. The main arson issues affecting Hartlepool were refuse, grassland and vehicles with hotspot areas being Manor House and De Bruce. A year on year analysis of Hartlepool's crime related incidents was provided as well as details of targeted engagement activities to reduce fires in homes and deliberate fires.

In the discussion that followed the presentation the representative responded to queries raised arising from the presentation. In response to clarification sought as to how the Council could assist in reducing refuse fires, the Partnership was advised that a number of deliberate fires were as a result of fly tipping in back streets or wheelie bin related, details of which were provided.

Clarification was provided in relation to the challenges facing the service, hot spot areas, community engagement activities as well as education in schools. The difficulties identifying who was responsible for deliberate fire setting in back streets and the potential reasons for such fires was discussed. It was noted that activities such as burning materials from metals was taking place and the potential links of activities of this type in terms of substance and drug misuse were highlighted. The benefits of joined up working between the Fire Authority and Council Refuse staff around education campaigns was emphasised and it was agreed that discussions in this regard be held following the meeting.

Decision

- (i) That the contents of the presentation and comments of Partnership Members be noted.
- (ii) That discussions be held following the meeting between the Council and the Fire Authority around joined up working in terms of education campaigns.

33. Youth Justice Plan 2019-2020 *(Director of Children's and Joint Commissioning Services)***Purpose of report**

To consult with members of Safer Hartlepool Partnership on the Youth Justice Strategic Plan for 2019-2021 (**Appendix A**)

Full Council will be asked to adopt the plan on 20 February 2020. Recommendations made by Safer Hartlepool Partnership, Children's Services Committee and Audit and Governance will be considered in the final plan presented to Council.

The final version of the Strategic Plan will also be sent to the National Youth Justice Board.

Issue(s) for consideration

The report provided background information regarding the purpose of the Youth Justice System together with details of the role and functions and primary objectives of the Youth Offending Services.

Members were advised of the following key strategic objectives that the Youth Offending Service and broader Youth Justice Partnership would focus on during 2019-20:-

- Early Intervention and Prevention
- Re-offending
- Remand and Custody
- Voice of the Young Person
- Effective Governance
- Risk and Safety and Wellbeing (Asset Plus)
- Child First

Decision

That the draft Youth Justice Strategic Plan 2019-21, attached at Appendix A, be agreed for submission to Children's Services Committee and Council in February 2020.

34. Understanding Reoffending in Hartlepool *(Cleveland Reducing Reoffending Group)***Purpose of report**

To update the Partnership on research and analysis being undertaken in relation to reoffending in Hartlepool.

Issue(s) for consideration

The report provided the background to the Cleveland Reducing Reoffending Group (RRG) which had been established to provide strategic level co-ordination of the reducing reoffending agenda for adults and young people across the Cleveland Police Force area.

Reoffending rates for adult offending in the Cleveland area remained stubbornly high with all four local authorities featuring within the "Top 20" areas with the highest reoffending rates in the country, details of which were set out in the report. An analysis of reoffending rates in Hartlepool were provided, as outlined in the report. Initial findings of the research and analysis conducted by the Cleveland Reducing Reoffending Group had identified that there were more than 30 individuals who had committed 10 or more criminal offences in a 12 month period, with less than half of these offenders engaged with the Integrated Offender Management Scheme.

Partnership Members debated issues arising from the report at length and commented on aspects of the data presented. It was reported that the data outlined in percentage terms could be misleading and present a more negative picture of the position. It was clarified that whilst reoffending rates were generally high, first time entrants had reduced and reoffending rates of young people in Hartlepool was lower than other areas with fewer prolific young offenders.

Decision

- (i) That the contents of the report and comments of Partnership Members be noted.
- (ii) That full findings of the research and analysis of reoffending in Hartlepool once completed be presented to a future meeting of the Partnership.

- (iii) That a representative from the Cleveland Integrated Offender Management Scheme be invited to a future meeting to provide an overview of the scheme to include the selection criteria.

35. Domestic Violence and Abuse Strategic Group Update *(Director of Children's and Joint Commissioning Services)*

Purpose of report

To provide an overview of work undertaken by the Hartlepool Domestic Abuse Strategy Group over the last year.

Issue(s) for consideration

The report provided background information to the purpose of the Domestic Abuse Strategic Group. Over the past year the Group had focussed on gathering data and intelligence to inform the strategic needs analysis that would underpin the Domestic Abuse Strategy 2020/2023. Progress on the development of the needs analysis had been slow as all partners had been requested to provide data in relation to domestic abuse over a three year period and the response to this request was poor with limited information provided.

Following discussions of the Strategic Group it was agreed that a public survey be undertaken to understand the perceptions of Hartlepool people in relation to domestic abuse as well as workshops, where multi-agency professionals were asked to provide input, feedback from which was set out in the report. The Office of the Police and Crime Commissioner also delivered a strategic event entitled "Domestic Abuse is Everybody's Business", details of which were provided. The Partnership was provided with an overview of other work undertaken which included delivery of 16 Days of Activism events. An update on progress in relation to implementation of the Domestic Abuse Bill was also provided.

Partnership Members welcomed the proposals to develop a domestic abuse needs assessment and strategy across the OPCC footprint which would then be delivered through local partnership delivery plans. The representative from the Police and Crime Commissioner's Office referred to a Task and Finish Group that had been scheduled for 12 December 2019 to discuss the proposals to which the Director of Children's and Joint Commissioning Services and representative from the CCG expressed an interest in participating. The representative from the PCC's Office agreed to circulate information in this regard.

Decision

- (i) The contents of the report and progress made to date on the work of the Domestic Abuse Strategic Group be noted.
- (ii) The Partnership agreed the request of the Strategic Group to engage with Community Safety Partnerships and the OPCC across Tees to develop a domestic abuse needs assessment and strategy across the OPCC footprint which would then then delivered through local partnership delivery plans.
- (iii) That the intention to deliver the 16 Days of Activism during November and December be noted.
- (iv) That information in relation to the Task and Finish Group scheduled for 12 December be circulated to the Director of Children's and Joint Commissioning Services and CCG representative following the meeting.

36. Safer Hartlepool Partnership Performance *(Director of Regeneration and Neighbourhoods)***Purpose of report**

To provide an overview of the Safer Hartlepool Partnership performance for Quarter 2 – July to September 2019 (inclusive).

Issue(s) for consideration

The report provided an overview of the Partnership's performance during Quarter 2, as set out in an appendix to the report. Information as a comparator with performance in the previous year was also provided. In presenting the report, the Community Safety Team Leader highlighted salient positive and negative data and responded to queries in relation to crime figures by type.

With regard to deliberate fires, whilst the challenges outlined by the Fire Representative were acknowledged, as referred to in Minute 32 above, Partnership Members were pleased to note that deliberate fires had reduced by 14% and anti-social behaviour had also reduced as a comparator with the previous year.

The Chair of the Youth Offending Board commented on the benefits of intelligence gathering and the importance of the community reporting any issues of concern to the Community Safety Team. Reference was made to the current Audit and Governance scrutiny investigation in relation to anti-social behaviour where there had been a positive level of response from the public, details of which were shared with the Partnership.

Decision

That the Quarter 2 performance figures and comments of Partnership Members be noted.

37. Date and Time of Next Meeting

The Chair reported that the next meeting would be held on Friday 10 January 2020 at 2.00 pm.

38. Chair's Concluding Remarks

Prior to concluding the meeting, the Chair took the opportunity to wish everyone a Merry Christmas and best wishes for the New Year.

The meeting concluded at 11.10 am.

CHAIR