## **Present:**

Councillor Mrs Scott (in the Chair)

Councillors

Burdess Hunter Walsh

Critchley O'Hara

## In Attendance:

Mr Pete Murphy, Executive Director of Nursing, Midwifery, AHP and Quality, Blackpool Teaching Hospitals NHS Foundation Trust (BTH)

Ms Janet Barnsley, Executive Director of Integrated Care, BTH

Mr Mike Chew, Divisional Director of Operations Families and Integrated Community Care, BTH

Ms Lynne Eastham, Director of Midwifery, BTH

Ms Elaine Day, Lancashire and South Cumbria Integrated Stroke and Neurorehabilitation Delivery Network (ISNDN) Manager

Ms Hayley Michell, Interim Programme Director, ISNDN

Ms Sharon Walkden, Programme Manager, ISNDN

Mr Mark Delabajan, Stroke Consultant Nurse, East Lancashire NHS Hospitals Trust

Ms Kate Aldridge, Head of Corporate Delivery, Performance and Commissioning

Ms Vikki Piper, Head of Housing

Ms Judith Mills, Consultant in Public Health

Ms Zohra Dempsey, Public Health Practitioner

Ms Ann Gawne, Public Health Practitioner, Harm Reduction

Mrs Sharon Davis, Scrutiny Manager

Councillor Jo Farrell, Cabinet Member for Adult Social Care and Community Health and Wellbeing

Councillor Maxine Callow, Chair, Scrutiny Leadership Board

## 1 DECLARATIONS OF INTEREST

There were no declarations of interest on this occasion.

## 2 MINUTES OF THE LAST MEETING HELD ON 10 NOVEMBER 2022

The Committee agreed that the minutes of the last meeting held on 10 November 2022 be signed by the Chairman as a true and correct record.

## **3 PUBLIC SPEAKING**

There were no requests from members of the public to speak on this occasion.

## 4 EXECUTIVE AND CABINET MEMBER DECISIONS

The Committee noted the decisions taken since its previous meeting.

## **5 STROKE NETWORK UPDATE**

Ms Elaine Day, Lancashire and South Cumbria Integrated Stroke and Neurorehabilitation Delivery Network (ISNDN) Manager, Ms Hayley Michell, Interim Programme Director, ISNDN, Ms Sharon Walken, Programme Manager, ISNDN and Mr Mark Delabajan, Stroke Consultant Nurse, East Lancashire NHS Hospitals Trust provided a presentation to update the Committee on the progress made in implementing the change in whole system approach to stroke services across the Lancashire and South Cumbria (LSC) Integrated Care System.

It was reported that 6,409 people attended a hospital emergency department in LSC with either stroke or stroke mimic symptoms in 2020/2021. There had been 2,575 patient admissions for acute stroke care and 442 deaths due to stroke in 2020/21. Thrombolysis and thrombectomy rates, both treatment types for stroke, were well below national averages. In order to address concerns regarding stroke treatment in the area, a series of priorities had been established for implementation over a three year period.

A business case had been produced at the outset of the programme which had made a number of assumptions regarding the number of patients to be expected, however, in reality the number of presentations at the emergency department had been much higher with a 15% increase in the number of strokes in addition to an increase in stroke 'mimics'. It had therefore been determined that a review of the business case was required which would be refreshed to reflect changes and the implementation plan updated with new timescales.

Members raised concerns regarding the wait times at the emergency department and in particular the length of time some ambulances had been waiting outside the hospital before patients were able to be triaged. In response, it was reported that suspected stroke and heart attack patients continued to be prioritised and that ambulances could alert the emergency department in advance of their arrival that a patient was presenting with stroke symptoms. The importance of quick treatment was highlighted and it was noted that the stroke team was in attendance to meet patients that presented at the emergency department with symptoms for immediate triage. The same pathway was available for those self-presenting at the emergency department.

Further concern was raised by those in attendance that in Blackpool people appeared to present themselves later than in other areas and whether stronger messaging could be used in order to encourage them to attend the emergency department as quickly as possible after experiencing symptoms. It was agreed that a new set of messaging would be developed and presented to the Committee for comment and input.

The Committee also requested that data specific to Blackpool be presented so the immediate local picture of stroke could be understood. It was noted that the improvements continued to be a work in progress and Members requested that a further update be provided in due course.

## The Committee agreed:

- 1. To receive the material developed to encourage members of the public to seek help immediately following experiencing stroke symtoms.
- 2. To receive a further update on the implementation of the programme in due course.
- 3. To receive stroke data specific to Blackpool.

# 6 BLACKPOOL TEACHING HOSPITAL MATERNITY SERVICES UPDATE - CARE QUALITY COMMISSION REPORT (JUNE 2022)

Mr Michael Chew, Divisional Director, Blackpool Teaching Hospitals NHS Foundation Trust (BTH) presented the update report to the Committee following the Care Quality Commission's inspection of Maternity Services. He highlighted the development of the action plan to the Committee and the progress made to date on the actions noting that actions would only be described as completed/'green' once they could be considered embedded.

Ms Lynne Eastham, Director of Midwifery, BTH highlighted key areas of improvement including in the number of staff and senior leaders recruited, additional work on retention, the open and transparent mechanisms in place to allow staff to raise concerns, regular Executive Team walk-arounds and the introduction of safety champions. The aim was create a positive and open culture.

The Committee noted the progress made to date and the Trust's confidence that all actions would be completed and fully embedded before the action plan was considered completed. Members agreed to receive a further report on progress from the Trust in due course and requested that it include patient feedback.

## 7 DRUG RELATED DEATHS SCRUTINY REVIEW RECOMMENDATIONS UPDATE

Ms Judith Mills, Consultant in Public Health presented an update on the recommendations approved through the Drug Related Death Scrutiny Review. She highlighted that a new Harm Reduction Board had been established which was a partnership of the Council, Police, Probation and Prison Services amongst others to oversee all harm reduction work and that the recommendations of the scrutiny review were being implemented by that Board. She added that Lived Experience continued to inform all work in this area.

An update was provided on each of the review's recommendations and it was noted that significant progress had been made in a number of areas. In particular the use of naloxone as set out in recommendation 2 had increased and the lives saved had been recorded. Also highlighted was the response to recommendation 7, with it noted that the homeless healthcare provision had been increased with a holistic healthcare intervention now in place which would also include dental care.

The Committee praised the work undertaken to implement the recommendations and considered the review to have been a worthwhile undertaking due to the changes the review had brought about. It was agreed that the new scrutiny impact assessment developed be carried out on this review.

## 8 SUPPORTED HOUSING SCRUTINY REVIEW RECOMMENDATIONS UPDATE

Ms Vikki Piper, Head of Housing and Ms Kate Aldridge, Head of Corporate Delivery, Performance and Commissioning presented an update on the implementation of the Support Housing Scrutiny Review Recommendations. It was noted that the standards developed with and approved by the Committee had been approved by the Executive and were now available on the Council's website and that the Council continued to work with the Government regarding the development of regulations for the sector. The key role of scrutiny in the supported housing work was highlighted and the impact that it had had on real people and lives was noted.

The Committee agreed that the Supported Housing Scrutiny Review could be considered as completed and requested that future updates on continued progress be provided to the Committee as appropriate.

## 9 ORAL HEALTH STRATEGY SCRUTINY

The Committee considered the report of the Oral Health Strategy Scrutiny meeting and approved the comments for inclusion in the Strategy.

#### 10 MENTAL HEALTH PROVISION FOR YOUNG MEN SCRUTINY REVIEW FINAL REPORT

The Committee considered the final report of the Mental Health Provision for Young Men Scrutiny Review and approved it for consideration by the Executive.

## 11 SCRUTINY COMMITTEE WORKPLAN

The Committee considered its workplan and agreed to include the additional items identified during the meeting on Maternity Services, Stroke and Supported Housing.

In regards to the table of recommendations, Members noted that the Meals on Wheels leaflet had been developed to be more colourful and it was considered to be an excellent leaflet ready to be circulated.

## 12 DATE AND TIME OF NEXT MEETING

The date and time of the next meeting was noted as Thursday 23 February 2023, commencing at 6pm.

## Chairman

(The meeting ended at 7.38 pm)

Any queries regarding these minutes, please contact: Sharon Davis, Scrutiny Manager Tel: 01253 477213

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