

OVERVIEW AND SCRUTINY COMMITTEE

The Overview and Scrutiny Committee consisted of the following members:

Councillor M Sartin (Chairman)
Councillor R Brookes (Vice Chairman)
Councillors N Avey, R Baldwin, N Bedford, S Kane, Y Knight, J Lea, A Mitchell, S Murray, S Neville, A Patel, D Stallan, B Surtees, H Whitbread and D Wixley.

The Lead Officer was Derek Macnab, Deputy Chief Executive and Director of Neighbourhoods.

Terms of Reference

The Overview and Scrutiny Committee's main functions are to monitor and scrutinise the work of the executive and its forward plan, external bodies linked to the District Council and the Council's financial performance. It is tasked with the consideration of call-ins, policy development, performance monitoring and reviewing corporate strategies including the Transformation Programme.

The Committee's workload over the past year can be broken down as follows:

(a) Scrutinising and monitoring Cabinet work

The Committee has a proactive role in this area through carrying out pre-scrutiny work. This involved considering the Cabinet's Key Decision List (Forward Plan) for the coming months on a meeting by meeting basis.

(b) Call-ins

The Committee received one call-in this year. In September 2017 a valid call-in was received by the Chief Executive, in connection with a Cabinet decision agreed at its meeting on 7 September 2017 (Reference C-015-2017/18). This was in regard to the proposed relocation of the Council's Housing Repairs and Housing Assets Services to the Oakwood Hill Depot, Loughton.

At the request of the lead member for the call-in, this matter was considered at a meeting convened in accordance with the procedure for the 'withdrawal or modification of a call-in' contained in the Council's Constitution.

As a result of this meeting the Housing Portfolio Holder agreed to ensure that an appropriate transport assessment was undertaken with regard to the relocation of Services to the Oakwood Hill Depot, prior to the preparation and submission of any planning application that was required for the provision of increased car parking facilities at the Depot.

This approach was supported by the lead member of the call-in and with that agreement, the Chairman of the Overview and Scrutiny Committee had determined that the call-in be treated as withdrawn.

(c) *Select Committees work programme monitoring*

The Committee received regular updates from the Chairmen of the four Select Committees reporting on the progress made on their current work programme. This allowed the Committee to monitor their performance and if necessary adjust their work plans to take into account new proposals and urgent items.

(d) *Items considered by the committee this year*

Over the year the Overview and Scrutiny Committee received various presentations and considered a range of diverse topics.

Presentations:

(i) Princess Alexandra Hospital NHS Trust – In June 2017 the Committee welcomed three officers from the Princess Alexandra Hospital (PAH) Trust. They were there to respond to the concerns raised by the Committee regarding aspects of its inpatient, outpatient and medical emergency services and other areas which were highlighted by the Care Quality Commission (CQC).

They noted that the trust was rated as inadequate and focused on their improvement plan for the CQC where they recommended 'must dos' and 'should dos'.

Another area of concern was staffing across the board; not just nurses. They were close to London where staff could earn more money and therefore recruitment and retention was difficult for the PAH.

They have also been working hard on staff engagement and were now having weekly briefings.

(See Case Study for full details)

(ii) Barts Health NHS Trust – in October 2017 the Chairman welcomed officers from Barts Health NHS Trust, who were attending to update Members on their improvement plan from their last visit on 23 February 2016. In attendance were Alan Gurney, Managing Director and Dr Heather Noble, Medical Director both from Whipps Cross Hospital.

Mr Gurney advised that the Care Quality Commission (CQC) undertook a focused unannounced inspection in May 2017 of three of the core services at Whipps Cross Hospital, these were surgery, end of life care and outpatients and diagnostic imaging. This visit was a follow up to the CQC's previous inspection of Whipps Cross Hospital in July 2016, which at that time, rated Whipps Cross Hospital as inadequate overall. In September 2017 the CQC published their report and the inadequate overall rating for the hospital had improved and the status had moved from inadequate to required improvement, although some areas such as surgery still remained inadequate.

The problems that remained with surgery were due to the age of the buildings and the state of repair; the theatres were old and needed major investment to repair and update them. Mr Gurney reported that Barts Health Trust were reinvesting £1.4 million in the current financial year to completely overhaul and refurbish two of the operating theatres that the CQC were concerned about.

Whipps Cross Hospital continued to focus their efforts on improvement including:

- Taking immediate action to improve surgical services by improving the environment and governance within the service;
- Recruiting more permanent staff;
- Improving the flow through the hospital so that patients do not have to wait too long for treatment and cancellations are kept to a minimum;
- Identifying and learning from incidents which occurred; and
- Ensuring all staff are aware of infection and control guidelines and policies.

There was a need to invest in the future of Whipps Cross and redevelopment was greatly needed. A strategic outline case was with the Trust's regulators for approval. Once approved the next level would be to outline a business case and then options would be looked at for the redevelopment of the site and how the Trust would be able to acquire the funding for this major project.

(iii) Transport for London (TfL) – in January 2018 the Committee welcomed Mark Hart, the Transport for London Community Partnership Specialist (West) who was there to speak to and answer questions from members on their concerns in regards to the operation of local bus services within the Epping Forest District run by TfL.

Mr Hart said that in 2016 bus routes 167, 397 and 549 had been reviewed in preparation for a new contract with a service provider, to be let in March 2017. They reviewed all their services looking at capacity, reliability and, increasingly, costs, as they were also a publically funded organisation. They were now in a tighter financial position as TfL had lost financial support from Essex County Council and their grant from Central Government, which was roughly about £700 million per year. They had to now look at how they did things and to do them smarter. It also meant that they had to look at reducing the services they provided.

There was also a demand for the 167 from school children so they created route 677, especially for school children.

The 167 route would be reviewed again when the contract was due for renewal. Contracts tended to run for 5 years with a further 2 years depending on the performance of the contractor.

Generally, because of the increase in bus journey times there had been a decline in passenger numbers. The current 5 year TfL business plan was looking at reductions in mileage run by the their bus service but then there would be an increase, largely because of increased new housing and a return to growth at the end of that 5 year period.

(iv) Epping Forest College – in February 2018 the Principal of Epping Forest College, Ms Famili, addressed the Committee on the recent unfavourable Ofsted reports and updated the Committee on the latest improvements made by the College.

A full Ofsted re-assessment had been carried out recently; but unfortunately she could not share the results of that with the Committee. However, their self-assessment had shown they had noticeably improved since last year. They had moved one stage further up on their journey to excellence. They still have challenges

and notices of improvement and these would not be removed until the Ofsted report was published and their judgement given.

As an overview she noted the results that they had received so far, which they were extremely pleased about. In July/August last year they had a 5.6% increase on their study programme that took them to just around the national benchmark, before that they were around 8% adrift of that national level. On level 2 they had increased to 12.8%, now 5% above the national benchmark; on level 3 that had increased by 3% to 88%. Significant improvements had been made on GCSE English; they were now 16% above the national benchmark. Over 93% of their learners expressed their enjoyment of studying at Epping Forest College, which was an increase of over 12% from the year before.

All these improvements had been achieved through hard work by members of staff at the college and also having a very supportive and challenging board of governors. They have tackled poor performance by giving support where it was needed and taking immediate action when needed.

Other Topics Considered:

(i) Over the course of the year the Committee considered the Cabinet's Forward Plan and Key Objectives for the coming year on a regular meeting by meeting basis. At each meeting the Committee looked at the updated list of the coming year's work programmed in for the Cabinet.

(ii) In June 2017 the Committee considered the Council's corporate priorities and programme of key decisions for 2017/18. The committee went through the plan page by page asking questions as appropriate.

(iii) The Leader of the Council, Councillor C Whitbread introduced the key action plan for 2017/18 that arose from the Council's current Corporate Plan. He noted that the report started with Council's finance. He observed that over the last decade the council has been able to protect front line services, where other councils across the country have struggled to do so.

(iv) The Committee considered the outturn figures (quarter 4) for the corporate plan key objectives for 2016/17. Progress in relation to individual actions and deliverables was reviewed by the Cabinet and the Overview and Scrutiny Committee on a quarterly and outturn basis.

(v) In July 2017 considered the new Corporate Plan for 2018 to 2023. This new Corporate Plan sought to lay out the journey the Council would take to transform the organisation to be 'ready for the future'. This plan strived to link the key external drivers influencing Council services, with a set of corporate aims and objectives, grouped under three corporate ambitions.

The Corporate Plan was the Council's highest level strategic document. It set the strategic direction of the organisation for the lifetime of the plan, and as such informed all other plans produced by the Council.

(vi) At their October 2017 meeting the Committee received the final report of the Transformation Task and Finish Panel they had set up in June. The Panel had three meetings to consider information relating to the programme

and their report summarised the work carried out and the recommendations made as a result of the meetings. These recommendations were agreed subject to a couple of minor amendments.

(vii) During the year the Committee reviewed and commented on the Quarterly progress of the Corporate Plan Key Action Plan for 2017/18, receiving the quarter 1 progress report at their October meeting.

(viii) Also at each meeting the Committee reviewed the updated version of the Council's Forward Plan of Key Decisions asking questions of Cabinet members as appropriate on the current position of any of the items covered by the Forward Plan that they suspected were not achieving as they should.

(ix) In February 2018 the Head of Customer Services, Ms Shaw introduced the first the annual report on the Customer Service Programme.

The Customer Service Programme was redesigned to focus on 4 key projects:

- Civic Offices Reception,
- Corporate Contact Centre (CCC),
- Systems and Digital Development,
- Customer Satisfaction.

(x) Another monitoring report came to the February 2018 meeting. This reported the progress of projects and programmes within the Transformation Programme, known as the Project Dossier.

(e) Case Study: Princess Alexandra Hospital NHS Trust

At their first meeting of the year the Overview and Scrutiny Committee welcomed three officers from the Princess Alexandra Hospital (PAH) Trust. They were Lance McCarthy (Chief Executive), Stephanie Lawton (Chief Operating Officer) and Nancy Fontaine (Chief Nurse). They were there to respond to the concerns of the Committee in response to the concerns of Care Quality Commission (CQC) regarding aspects of its inpatient, outpatient and medical emergency services and other area of concern.

Mr McCarthy (Chief Executive) started off by referring to the strategic issues that affected the Hospital Trust. He noted that the trust was rated as inadequate and focused on their improvement plan for the CQC where they recommended 'must dos' and 'should dos'. In total they had 38 actions/issues raised. That formed the basis of their quality improvement plan; but they also had over 600 other items that they had to consider and to tackle any of the underlying issues to prevent them happening again. They have a good framework on these actions and know everyone that would be leading on them. Reporting up to the executive team and then on to the Trust Board on a bi-monthly basis. Also, as part of being in special measures, they have a monthly governance oversight meeting with the CQC and NHS Support.

Ms Fontaine (Chief Nurse) noted that on receipt of the CQC findings they took an extremely serious view and took immediate action on the mortuary situation, where it was deemed to be substandard. The capital programme for the renovation of the

mortuary was programmed as a “to do”, but was delayed as the finance was needed for something else, but it was never not going to be done. The Human Tissue Authority, the authority responsible, inspected them in December and stated that they had met the required standards. The Trust was now working with partners around Hertfordshire and Essex as well as Community Trusts who commissioned services from them. They have also appointed a specialist consultant clinician for ‘end of life’. The CQC had now commented on the compassionate care they now deliver. Although it was not always possible or in their gift to transfer patients to a hospice or preferred place of care that they wished to go to. And, according to their Sustainability and Transformation Partnerships (STP) partners they were state of the art in that they were leading with their commissioners and Community Trust to get one standard across Hertfordshire and Essex; not an easy thing to do.

The Critical Care Unit came as a shock; there were many areas where they were not performing as well as they should, such as the emergency department, but for Critical Care they had always met their clinical outcomes and their mortality outcomes and expected deaths care was always rated as among some of the best in the country.

The CQC were concerned about outcomes and delays in getting the patients out of the Critical Care unit. The Critical Care leads were honest about not pushing forward opportunities to be innovative and were probably sitting on their laurels and were now determined that at the next inspection they would be rated as good. It was important to note that all their intensive care patients were safe and they had managed to keep safety at the forefront.

They saw about 109,000 patients a year through their emergency department, and for many of their patients they did not have any other out of hours facilities to go to. That was a long standing issue, outside of GP practices there were not many advanced practitioners working out of hours and at weekends, however they were working to create places for patients to go to throughout their sector.

The other area was around training, access to training and appraisals. They had put in a new system for statutory mandatory training and an appraisal system that was meaningful for all their staff.

Another area of concern was staffing across the board; not just nurses. They were close to London where possible recruits could earn more money and therefore recruitment and retention was difficult for PAH. They had put in lots of innovative approaches to recruiting and retaining staff, especially for nursing and doctors, both nationally and international recruitment. They have had a lot of successes and have received an ‘outstanding’ for their maternity and gynaecology units and had bucked the national trend and did not have a shortage of midwives having only 4.5 vacancies. For theatres across the hospital they had only one vacancy. These were areas that had been really successful in recruiting due to making sure that staff and patients felt safe.

Finally it was important to recognise that the CQC saw that there was a disconnect between the board and senior management around getting messages down to the staff. They had been working hard on staff engagement and now have weekly briefings. They were focusing on staff experience through listening events and focus groups, to let them know that they were listened to.