

Minutes of a meeting of the Health and Social Care Overview and Scrutiny Committee held on Thursday, 26 October 2023 in Council Chamber - City Hall, Bradford

Commenced 4.40 pm
Concluded 7.30 pm

Present – Councillors

LABOUR	CONSERVATIVE	BRADFORD SOUTH INDEPENDENTS
Jamil Humphreys Kausar Godwin Lintern Mitchell	Coates Nunns Nunns	Clarke

NON VOTING CO-OPTED MEMBERS

Susan Crowe	Bradford District Assembly Health and Wellbeing Forum
Trevor Ramsay	i2i patient involvement Network, Bradford District NHS Foundation Care Trust

Observers: Councillor Ferriby, Portfolio Holder Healthy People and Places, Councillor Mitchell

Councillor Jamil in the Chair

27. DISCLOSURES OF INTEREST

In the interest of transparency Councillor Humphries declared that she worked for the Thornbury Centre (Minute 30).

28. INSPECTION OF REPORTS AND BACKGROUND PAPERS

There were no appeals submitted by the public to review decisions to restrict documents.

29. REFERRALS TO THE OVERVIEW AND SCRUTINY COMMITTEE

There were no referrals to the Overview and Scrutiny Committee.

30. **UPDATE ON GP ACCESS ACROSS THE BRADFORD DISTRICT AND CRAVEN HEALTH AND CARE PARTNERSHIP**

The report of the Executive Director of Strategy, Transformation, Primary and Community (**Document “L”**) provided an update on progress made since October 2022 in helping people understand the services available from their GP practice and accessing support when they need it.

It also highlighted areas of improvement and challenges that continued, including those that were not just local to our geography. The report also sought support from members in our public information and awareness work to help people access the right support from the right health professional.

The Associate Director was in attendance and at the invitation of the Chair, gave a synopsis of the report. She explained the feedback on GP practice access that had been received through the public involvement work, through insight from Healthwatch Bradford and District, hearing from the experiences shared by members and national data such as through the NHS GP Patient Survey. GP practices were offering significantly more appointments than ever before and doing so in a range of flexible ways that reflected clinical need as well as personal preference. While more appointments were being offered, and with a wider range of healthcare professionals, the demand was higher than the total available appointments. The focus went beyond only addressing people's concerns based on personal experience or wider perceptions about access to GP practices, with a focus on the quality of access to the right healthcare professional and in the right setting. There were ongoing challenges that continued to impact on the ability to recruit and fill roles across the place. This in turn led to an increased workload for existing teams, while ensuring the safe care of people. PCNs were based on GP-registered lists and are made up of practices, typically serving 30,000 to 50,000 people. This could include enhanced access outside of normal working hours, while benefitting from a broader team of healthcare staff. Working with members and communities it was important to help people make the best and most appropriate use of their whole GP practice team. This was a longer-term behaviour change programme that needed a consistent approach to community awareness and education as well as helping people understand the changing model of delivery to help protect the future sustainability of GP practices. The work of colleagues in GP practices should be recognised and to dispel the myth that fewer appointments were being offered when a record number of appointments now being booked.

A Q& A session ensued:

- Information was sought on the significant frustration within communities due to people not being able to secure appointments with their local GP practices?
 - Appointments were given according to the need of medical circumstances however the general census within the overall GP practices was that number of appointments that were being given were higher than expected. Furthermore, greater discussions were ongoing with the public on how to improve services in the future;

- What was being done to override the public’s misconception of poor services?
 - Social media was a difficult area to tackle, however, a co-ordinated campaign was being considered to share success;
- Information was sought on statistics of appointments given?
 - Bradford district and Craven averaged 386,000 appointments per month over the last twelve months (full year 4.6million). Most appointments were within 7 days and most taken place face-to-face (around 7 in 10, higher than the national average). Between July 2019 and July 2023 there was growth in the number of appointments by 36,593, or 10.4%;
- How did Bradford compare to neighbouring authorities?
 - In comparison, figures with other places across the NHS West Yorkshire Integrated Care Board (ICB) area. Our place-based partnership covered 24.8% of the population of the ICB. In July 2023, our place-based practices offered 387,160 appointments 28.5% of the WY total 1,356,606.

Resolved:-

That a further update be presented to a meeting of the Committee in 12 months.

To be actioned by: Strategic Director, Strategy and Transformation, Bradford District and Craven Health and Care Partnership

31. LIVING WELL

Resolved:-

That this item be deferred to the Committee’s meeting on Thursday 23 November 2023.

To be actioned by: Overview and Scrutiny Lead

32. HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE WORK PROGRAMME 2023/24

The Report of the Director of Legal and Governance (**Document “N”**) presented the Committee’s work programme 2023/24.

No resolution was passed on this item.

Chair

Note: These minutes are subject to approval as a correct record at the next meeting of the Health and Social Care Overview and Scrutiny Committee.