

# HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

#### **13 OCTOBER 2020**

# KENT AND MEDWAY RESTART AND RECOVERY PROGRAMME

Report from: Wilf Williams, Accountable Officer, NHS Kent and Medway CCG and Senior Responsible Officer for Transforming Health and Social Care in Kent and Medway

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### Summary

Appendix 1 highlights progress on NHS restart and recovery from the Medway and Swale Integrated Care Partnership and Appendix 2 is a copy of the September restart and recovery update published as part of the papers for the 24 September 2020 Kent and Medway Clinical Commissioning Group (CCG) governing body meeting in public.

## 1. Budget and Policy Framework

1.1 Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway. In carrying out health scrutiny a local authority must invite interested parties to comment and take account of any relevant information available to it, and in particular, relevant information provided to it by a local Healthwatch. The Council has delegated responsibility for discharging this function to this Committee and to the Children and Young People's Overview and Scrutiny Committee as set out in the Council's Constitution.

## 2. Background

2.1 At the last meeting of the Committee Members considered a <u>report</u> which provided an overview of how the NHS across Kent and Medway was working together in response to the COVID-19 pandemic and how it would continue to do so through the restart of NHS services.

- 2.2 Members asked for a further update to this meeting, to include more specific data and information on priorities and milestones for the restart activities identified.
- 2.3 The attached reports (Appendix 1 and 2) from the Medway and Swale Integrated Care Partnership and the CCG highlight the key components of the NHS restart and recovery programme. Appendix 1 is a report prepared for this Committee and Appendix 2 is a paper from the Kent and Medway CCG Governing Body in September.
- 2.4 The reports highlight progress against national priorities set out by NHS England for what is called Phase 3 of the NHS response to Covid-19.
- 2.5 Appendix 1 provides a table with the Medway NHS Foundation Trust position in August 2020 and targets for September and October. Appendix 2 provides a broader summary of actions across Kent and Medway NHS partners to restart services.
- 2.6 Elective surgery recommenced at Medway NHS Foundation Trust at the end of June and the trust plans to be delivering 90% of pre-Covid-19 levels of overnight elective and day case procedures in October.
- 2.7 Diagnostic capacity (including MRI/CT scanning and endoscopy) is key to supporting restart of elective care. Additional diagnostic capacity is being increased at Medway NHS Foundation Trust and through significant additional capacity made available by independent sector providers in Medway (including endoscopies at Will Adams Treatment Centre and imaging at Spire Alexandra).
- 2.8 Out-patients services are providing a blended approach of face-to-face and virtual appointments. The trust plans to provide 100% of last year's outpatient activity from September onwards.
- 2.9 Cancer performance across Kent and Medway is positive with 97.9% of urgent referrals seen within the two week target and 89% of patients seen within 62 days. Cancer service demand is rising but not yet back to pre-pandemic levels. (Slide 13 of Appendix 2).
- 2.10 Primary Care services across Kent and Medway are working to support patients at high risk of poor outcomes from Covid-19, including BAME and deprived communities. Activity includes improving patient ethnicity recording and plans for close monitoring through primary care of high risk patients who do test positive for Covid-19 and self-isolate. (Slide 24 of Appendix 2.)

#### 3. Risk management

- 3.1 The risks associated with the restart and recovery programme include the impact of a potential second wave of COVID-19, particularly if it were to coincide with winter which traditionally sees a surge in demand for healthcare services.
- 3.2 The objective of the NHS is to maintain elective services through an increase in covid-19 infections; to avoid the wide scale halting of non-urgent services seen in the initial response to the pandemic. The ability to deliver on this will be dependent on the scale on increased infection rates and associated hospitalisation of Covid-

- 19 patients. This will to a large degree be driven by the communities response to maintaining social distancing and other guidance to prevent the spread of Covid-19.
- 3.3 Risks and mitigations are discussed at a strategic level within partner organisations to ensure all parts of the care system are in the best possible position to continue with the restart and recovery programme and at the same time to prepare for winter and a potential second wave of COVID-19.
- 3.4 The Medway and Swale Integrated Care Partnership has established a Joint Strategic Response Team which meets regularly and comprises senior representatives from Medway NHS Foundation Trust, Medway Community Healthcare, Medway Council, the CCG and other partners, to consider progress and risk management.

#### 4. Financial implications

- 4.1 There are no financial implications to Medway Council arising directly from this report.
- 5. Legal implications
- 5.1 There are no legal implications to Medway Council arising directly from this report.
- 6. Recommendation
- 6.1 The Committee is asked to note and comment on the NHS restart and recovery programme as set out in Appendices 1 and 2.

#### Lead officer contact

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#### Appendices

Appendix 1 – Medway and Swale Integrated Care Partnership restart and recovery update

Appendix 2 - Kent and Medway CCG restart and recovery programme update.

### **Background Papers**

None.