

Health and Adult Social Care Scrutiny Committee – 23rd January 2014

Report of the Lead Officer to the Committee

Responses arising from previous Committee meetings

Purpose of Report

1. To consider progress updates and responses arising from previous Committee meetings.

Background

2. Information requests from members are regularly experienced as part of the scrutiny of Dudley's health, care and wellbeing services; with the aim of realising continued improvement across the sector. Clearly some queries cannot be answered immediately with some prompting further investigation, or consultation, prior to being reported back to Committee.
3. To keep members updated, updates and responses arising from previous meetings including resultant proposals are presented at appendix 1.

Finance

4. Financial implications corresponding to Council responsibilities will be met through existing resources.

Law

5. Section 111 of the Local Government Act 1972 authorises the Council to do anything which is calculated to facilitate or is conducive or incidental to the exercise of any of its functions.
6. The Health and Social Care Act 2012 places the scrutiny of health, care and well-being services by local authority members onto a statutory footing.

Equality Impact

7. The work of the Committee can be seen as contributing to the equality agenda in the pursuit of improving care for all. This implies a challenge to ensure that services meet the needs of all sectors of the community to make this an even greater reality in Dudley.

Recommendation

8. Members approve proposals at Appendix 1.



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Documents used in the preparation of this report:-

1. Minutes of November 2013 Committee.

Appendix 1

Stroke Transformation Programme

Background

The Committee received an update on progress of the Birmingham, Solihull and Black Country Stroke Transformation Programme. It was noted that initial twenty minutes of an episode was crucial. As such quick and local access to services are important factors in administering intervention and medication as soon as possible.

Members were assured that there was no room for complacency and given that contracts were for a set number of years, standards and targets should initially be set high in striving for excellence.

Members noted the treatment of approximately 680 confirmed stroke patients last year. Evidence received also suggested records of many cases mimicking stroke conditions therefore the actual figure of patients assessed, admitted and investigated would be higher.

Project representatives indicated that there is distinct possibility that during the review evidence may suggest that there is no need for change; the 6 sites may remain as hyper acute and therefore there would be no need for a public consultation or procurement.

Members felt Dudley HWBB and Regional Health Scrutiny Chairs' Group should also be engaged in advancements as key stakeholders in the pursuit of an effective model for all involved.

Information requested

Data specific to Dudley relating to patients receiving Computerised Tomography (CT) scans within an hour of admission, percentage of patients thrombolysed and percentage of all conscious stroke patients to receive a swallow screen within four hours of admission was requested.

Response:

Results for DGH April 2013 - for OSC Report

	Target	Q1 Total	Q2 Total	Oct-13
% of all stroke admissions thrombolysed (SSNAP)	10%	23%	15%	30%
% patients scanned within one hour of hospital arrival	50%	54%	57%	68%
% conscious patients receive a swallow screen within 4 hours admission (SSNAP)	100%	95%	97%	95%

The figures account for all patients for swallowing, not only those that are fully conscious, but also those who are semi conscious.

Percentage of patients thrombolysed is higher than the national target in Dudley however it should be emphasised that the percentages will vary from month to month.

Evidence indicates progressive improvement of CT scanning within 1 hour and Dudley demonstrates achievement well above the target.

Other Information

The presentation indicated a target of 95% patients to receive a CT scan within one hour of admission. However Dudley Group understood that the target was 50% within an hour and 100% within twelve hours. Clarity was sought on this.

Response:

The correct targets are 50% in 1 hour and 95% in 12 hours West Midlands Stroke specification.

Proposal:

It is proposed that members note the above responses.