

## **HEALTH AND ADULT SOCIAL CARE SCRUTINY COMMITTEE**

Monday, 14<sup>th</sup> November, 2011 at 6.00 p.m.  
in Committee Room 2 at the Council House, Dudley

### **PRESENT:-**

Councillor Mrs Ridney (Chairman)  
Councillor J D Davies (Vice-Chairman)  
Councillors Mrs Aston, Barlow, K Finch, Mrs Harley, Ms Harris, Kettle, Miller, C Wilson and P Woodall and Ms Angela Hill

### **Officers**

Assistant Director of Law and Governance (Lead Officer to the Committee), Director of Adult, Community and Housing Services, Assistant Director Older People and Physical Disabilities, Quality and Complaints Manager, Scrutiny Officer (all Directorate of Adult, Community and Housing Services), Director of Corporate Resources, Treasurer (Directorate of Corporate Resources) and Mrs M Johal (Directorate of Corporate Resources)

### **Also in Attendance**

Cabinet Member for Adult and Community Services  
Mr Steve Corton – Head of Community Engagement, National Health Service (NHS) Dudley  
Mr Richard Topping – General Manager (Black Country) West Midlands Ambulance Service  
Ms Vicky Orton – Area Manager (Black Country South) West Midlands Ambulance Service  
Mr Les Williams – West Midlands Specialised Commissioning Team  
Mr Andrew Hindle – Strategic Commissioning Lead  
Ms Valerie Little – Director of Public Health  
Ms Judith Hesslewood – Pharmaceutical Advisor  
Mr Duncan Jenkins – Public Health Specialist  
Ms Nighat Hussain – Dudley Clinical Commissioning Group

## 27 **DECLARATIONS OF INTEREST**

Councillor Mrs Aston declared a personal interest in respect of agenda item number 9 (West Midlands Ambulance Service) as her son works for the West Midlands Ambulance Service.

Ms A Hill declared a personal interest in respect of agenda item No 11 (Dudley Memory and Dementia Pathway) in view of her being Chair of a user group that provides services to patients on the Dementia Ward at Bushey Fields.

---

28      MINUTES

RESOLVED

That the minutes of the meeting of the Committee held on 28<sup>th</sup> September 2011 be approved as a correct record and signed.

---

29      CONSIDERATION OF PETITIONS (IF ANY) REFERRED TO THE COMMITTEE BY THE PETITIONS OFFICER

---

No petitions had been referred to the Committee.

---

30      PUBLIC FORUM

No issues were raised under this agenda item.

---

31      CONSULTATION PROCESS IN RESPECT OF THE MODERNISATION OF ADULT SOCIAL CARE AND THE HOME CLOSURE PROGRAMME

---

A report of the Director of Adult, Community and Housing Services was submitted on progress on the consultation in respect of the Adult Social Care Modernisation Programme which sought support of the consultation process in respect of the re-provision of residential care homes alignment and proposed internal residential home closures.

The Chairman indicated that those members of the public that were in attendance to speak on the item would be subject to the same rules as that of the Public Forum in that each speaker would be limited to a maximum of five minutes.

The following comments and concerns were made by members of the public in relation to the proposed closure of New Bradley Hall:-

- Residents had signed a letter to say that they would have to be forcibly evicted and it was pointed out that the youngest resident in New Bradley Hall was aged 90 and the oldest was aged 103.
- Some residents were partially sighted and were used to their surroundings and residents could not feed, clothe or bathe themselves and extra care was not an option.
- Research that had been undertaken had identified that there was a risk that 50% of residents could die if they had to be moved and a letter had been submitted to Councillors from the Patient Panel, Moss Grove Surgeries expressing their concern regarding the serious consequences that could arise if residents were forced to move out.

- It was queried whether the decision to close New Bradley Hall would be reconsidered if evidence was submitted to show that closing the home would be detrimental to residents and could cause death.
- It was queried as to when the Equality Impact Assessment had been undertaken and what conclusions had been reached.
- Concern was expressed about the announcement of the closures and it was commented that it had not been made clear that New Bradley Hall would be closing until recently. It was alleged that there had not been a proper consultation on the closures and it was questioned that if it was the Council's intention to close all care homes, what would then happen to the buildings and grounds.
- Several comments were made on the allegation of there not being proper consultation to enable residents and members of the public to give their opinions and the reasons why the decision had been made to close New Bradley Hall was questioned.
- The quality of the service offered by New Bradley Hall was commented upon and it was stated that it was difficult for carers to offer the same service at home.

In response to comments and questions as indicated above the Director of Adult, Community and Housing Services and the Assistant Director Older People and Physical Disabilities responded to the points made. With regard to the statement about the youngest resident being ninety years of age, the Assistant Director Older People and Physical Disabilities clarified that point and confirmed that the youngest resident was in fact in their sixties. The Equality Impact Assessment as referred to would be undertaken as described in the Home Closures Programme and would be the same as that applied to Arcal Lodge, which was the first home to be closed. During the course of the process, which was usually over a period of twelve to eighteen months, an impact assessment would be formulated on the home and work would be undertaken with relatives and carers. Where there were no relatives, an advocacy service was offered. The assessment would then be updated, assessed and open for discussion and comments. An overarching Equality Impact Assessment had been completed as part of the September Cabinet report. With regard to future home closures the same process would be adhered to at the appropriate time in line with the proposed schedule for closures, as stated in the report to Cabinet on 14<sup>th</sup> September, 2011.

The Assistant Director Older People and Physical Disabilities reported further that staff involved in the Equality Impact Assessment should be commended on their work as they were involved in compiling intricate information from the residents to ensure specific needs of individuals could be identified and met. Continual care was important in line with individual needs and work was being undertaken to suit requirements and in that regard, extra care or another alternative might be an option for certain people.

With regard to comments made about mortality rates being higher when residents were moved from homes, the Director of Adult, Community and Housing Services confirmed that there was a great deal of national research offering a range of views and conclusions, however the research referred to did not take into account the age and medical condition of the residents. Consideration needed to be given to the impact to residents in the Dudley Borough and a monitoring programme had been compiled on residents that had already been moved and this information could be provided to the Committee, if requested. It was also pointed out that the comments made in the letter from the Patient Panel had been seriously considered and a meeting would be held with Dr Hegarty towards the end of the month with a view to determining the level of concern and seeking advice on the best way to move forward.

The Assistant Director Older People and Physical Disabilities referred to the query about the future of the buildings and grounds when homes were closed and it was reported that the Council had a definitive process with regard to closures and it was stated that this process would be adhered to. With regard to the condition of the New Bradley Hall building it was stated that major refurbishment had taken place in the year 2000 to meet regulations and to maintain required home standards, further and significant investment would need to be made in the next five to ten years, should the building remain open. The building was not economical in terms of energy efficiency and to maintain the décor and to make further improvements, it had been estimated that it would cost in the region of £750,000. The decision on which homes to close had been made based on the fabric, condition and age of the building.

A Member expressed concern about the lack of information that had been made available on the issue of the closure of homes, the consultation process, whether other options such as finding an alternative provider had been considered, what costs would be incurred for the closure of the home, whether consideration had been given to residents receiving high quality care given some residents could not afford it and whether residents would receive local care. In responding the Assistant Director Older People and Physical Disabilities stated that the option of an alternative provider had been explored but the advice received had been that it was not a viable option. With regard to high quality care and affordability, financial top-ups were available for existing residents and local care would be provided, if specified.

In concluding the debate the Chairman informed the meeting that a petition opposing the closure of New Bradley Hall had been received and would be considered at the meeting of the Council on 28<sup>th</sup> November, 2011. It was requested that further progress reports on the plan of action and detailing information on the transfer of residents be submitted to the Committee in due course.

## RESOLVED

- (1) That the information contained in the report submitted on progress of the consultation in respect of the Adult Social Care Modernisation Programme and the consultation process in respect of the re-provision of residential care homes alignment and proposed internal residential home closures, be noted.
  - (2) That the consultation process in relation to care home closures be supported.
  - (3) That the Director of Adult, Community and Housing Services be requested to submit further progress reports to the Committee with regard to New Bradley Hall detailing the plan of action and information on the transfer of residents for monitoring purposes.
- 

## 32 REVENUE BUDGET STRATEGY 2012/13

A joint report of the Chief Executive, Treasurer and Director of Adult, Community and Housing Services was submitted on the Revenue Budget Strategy for 2012/13 and the Medium Term Financial Strategy as part of the consultation being undertaken on the Strategy.

Arising from the presentation given by the Treasurer on the content of the report and Appendix to the report, Members acknowledged that savings had to be made but concern was expressed about the impact of the cuts on vulnerable people. It was also pointed out that reducing staff at a senior level and support workers would have a detrimental impact on the quality of services offered.

The Chairman referred to older people services and the savings being achieved through reducing long term care needs and indicated that there was a need to be flexible, as vulnerable people would be particularly affected. There was a need for vulnerable people to have consistency and they would find it difficult to adapt if they did not have familiar care workers. Concern was also expressed about the reduction in training and a reduction in qualified Social Workers and it was commented that there was a need to have highly trained staff. In responding the Director of Adult, Community and Housing Services indicated that a range of options were being explored to offer training via alternative methods as a means to reduce external costs.

In response to a further query relating to older people, people with a learning disability and the reduction in teams from five social care teams to two teams, the Director of Adult, Community and Housing Services stated that in relation to issues about Learning Disability Services, consultation was taking place and further work would be carried out on the options for care and support. A report detailing information on the particular model chosen could be submitted to a future meeting of the Committee.

## RESOLVED

That the information contained in the report, and Appendix A to the report, submitted on the Cabinet's Revenue Budget Strategy proposals for 2012/13 and the Medium Term Financial Strategy, be noted and that the Cabinet be informed that there are no specific observations that this Committee would wish to make.

---

### 33 WEST MIDLANDS AMBULANCE SERVICE

A report of the West Midlands Ambulance Service National Health Service (NHS) Trust was submitted on the current position on transformation of ambulance services. The report summarised the strategy of the Trust on this matter and indicated the proposed location for Hubs and Community Ambulance Stations.

Arising from the presentation of the report, Mr Richard Topping, General Manager (Black Country) undertook to circulate to Members of the Committee information and a map of the Community Ambulance Stations covering the North of the Borough to include the Gornal, Sedgley and Coseley areas.

Mr Topping also undertook to provide a response to a query from a Member about the costs involved relating to the transformation of services and how it would be funded. He also undertook to take back comments made in relation to educating people with a view to changing their perceptions.

During the ensuing discussion Members expressed an interest in visiting one of the existing "Make Ready" sites in Staffordshire to see the operation in a live setting.

## RESOLVED

- (1) That the information contained in the report on the transformation of services be noted.
  - (2) That the Scrutiny Officer be requested to liaise with the West Midlands Ambulance Service with a view to arranging a visit for Members of the Committee to an existing "Make Ready" site in Staffordshire to view the operation in a live setting.
- 

### 34 IMPROVING TRAUMA CARE ACROSS THE WEST MIDLANDS

A report of the West Midlands Commissioning Team was submitted on the proposals of the NHS for improving trauma care across the West Midlands. An updated report was circulated to Members of the Committee prior to the meeting.

Arising from the presentation of the report by Mr Les Williams, Members expressed concern about the financial implications on families visiting patients at trauma centres and it was also queried whether there was a mechanism in place for treating military service officials and whether there were any plans to incorporate services. In responding Mr Williams indicated that the military was a separate service but that both services worked together. With regard to the financial implications for families visiting relatives it was stated that when patients were stable they were transferred to their local hospital but he undertook to feedback comments made to the Sub-Group.

In response to a query Mr Williams undertook to circulate to Members of the Committee information on average periods of rehabilitation, treatment times and length of stays in hospital.

#### RESOLVED

- (1) That the information contained in the report on improving trauma care across the West Midlands be noted.
- (2) That the National Health Service be supported in its proposal for a period of engagement with identified high-risk stakeholders for approximately 6-8 weeks.

---

35

#### DUDLEY MEMORY AND DEMENTIA PATHWAY

A report of the National Health Service Dudley Partnerships and Service Development was submitted on progress of the Dudley memory assessment service and dementia pathway.

Arising from the presentation of the report Mr Hindle responded to Members' queries and stated that national prevalence indicated that two hundred people per year were diagnosed with dementia, that two nurses were sufficient as each nurse was geared to assess up to four hundred patients per year and that work was being undertaken with General Practitioners (GP's) with a view to educating GP's in assessing patients. Mr Hindle acknowledged comments made about the need to simplify the flowchart relating to access to dementia gateway services.

The Chairman suggested that a further report be submitted to the meeting of the Committee to be held in March, 2012 for monitoring purposes and it was agreed that the Specialist Dementia Nurses also be invited to the meeting.

#### RESOLVED

- (1) That the information contained in the report on the Dudley memory and dementia pathway be noted.
- (2) That a further report be submitted to the meeting of the Committee to be held in March, 2012 and that the Specialist Dementia Nurses also be invited to attend.

---

36 DUDLEY PHARMACEUTICAL NEEDS ASSESSMENT (PNA)

A report of the Director of Public Health was submitted on the needs for pharmaceutical services, which each Primary Care Trust was required by law to publish. The full document had been made available on the Council's website.

RESOLVED

That the information contained in the report and the Pharmaceutical Needs Assessment Document be noted.

---

37 PROCEDURES OF LIMITED CLINICAL VALUE (PLCV) AND AESTHETIC POLICIES

A report of the National Health Service Dudley Partnerships and Service Development was submitted on the background and current position of the programme of work for the management of both Aesthetic policies and Procedures of Limited Clinical Value within Dudley, which were provided in partnership with colleagues from the Black Country Cluster.

RESOLVED

That the framework to implement the Black Country Cluster policies for both Procedures of Limited Clinical Value and Aesthetics in the Dudley Borough, be supported.

---

The meeting ended at 9.08 p.m.

CHAIRMAN