# HEALTH AND ADULT SOCIAL CARE SCRUTINY COMMITTEE

Tuesday, 26<sup>th</sup> February, 2013 at 6.00 p.m. in Committee Room 2 at the Council House, Dudley

#### PRESENT:-

Councillor Ridney (Chair)
Councillor K Finch (Vice-Chair)
Councillors Cowell, Elcock, Harris, Hemingsley, Mrs Rogers, Vickers and C Wilson

#### Officers

Steve Griffiths, Democratic Services Manager (Acting as Lead Officer to the Committee for this meeting) and Maggie Venables, Assistant Director of Adult, Community and Housing Services

#### Also in Attendance

Pauline Sharratt – Assistant Director of Children's Services
Judith Shorrock – Directorate of Children's Services
Alison Tennant – Dudley Clinical Commissioning Group
Laura Broster – Dudley Clinical Commissioning Group
Marsha Ingrham – Dudley and Walsall Mental Health Partnership NHS Trust
Rosie Musson - Dudley and Walsall Mental Health Partnership NHS Trust
Derek Eaves – Dudley Group of Hospitals NHS Foundation Trust
Liz Abbiss – Dudley Group of Hospitals NHS Foundation Trust
Emma Wilkins – West Midlands Ambulance Service NHS Foundation Trust
Vickie Whorton – West Midlands Ambulance Service NHS Foundation Trust

#### 30 APOLOGIES FOR ABSENCE

Apologies for absence were received on behalf of Councillors Kettle and Mrs Roberts, Mohammed Farooq, Aaron Sangian and Dr David Hegarty.

#### 31 MINUTES

#### **RESOLVED**

That the minutes of the meeting of the Committee held on 12<sup>th</sup> November, 2012 be approved as a correct record and signed.

# 32 PUBLIC FORUM

No issues were raised under this agenda item.

# 33 <u>CHANGE IN ORDER OF BUSINESS</u>

With the consent of the Committee, the Chair indicated that Agenda Item No. 7 (National Childbirth Trust – Antenatal Classes) would be considered as the next item of business.

#### 34 NATIONAL CHILDBIRTH TRUST (NCT) – ANTENATAL CLASSES

The Committee considered a report of the Accountable Officer, Dudley Clinical Commissioning Group (CCG), on changes to the commissioning of National Childbirth Trust (NCT) Parentcraft antenatal classes in the Borough.

The report outlined the background to the discussions leading to the commissioning of the original NCT pilot in 2009, subsequent contractual arrangements and recommendations for future service provision. The report also included recommended actions to ensure that the service was fully evaluated and that a partnership approach be taken to agree future Parentcraft service provision.

The NCT contracts had expired on 20<sup>th</sup> December, 2012 and it had been agreed that the Primary Care Trust and Dudley MBC would not renew the contracts with NCT until performance data was available to demonstrate the success of the service. Dudley MBC had subsequently decided not to renew the NCT contract and the Assistant Director of Children's Services had provided the Committee with a briefing note detailing the circumstances whereby the local authority could not identify the NCT contract as a priority service for continuation.

The report indicated that meetings would take place between officers of the Council and the CCG to consider the joint way forward. NCT had confirmed that the CCG had commissioned them to deliver more classes up to the end of March, 2013 subject to venues being identified. It was accepted that there were a number of learning points in connection with this contract relating to structural changes in the NHS and the future joint commissioning of services.

The Committee emphasised the importance it placed on antenatal services and expressed concern about the availability and access to services and the targeting of support to vulnerable families, particularly if the classes were subject to a charge by NCT. Officers indicated that the NCT contract was only a small part of the overall service delivery and had not been wholly successful in accessing vulnerable groups. Other initiatives with NCT, such as the training of peer mentors, and a more targeted approach had been taken in areas with high levels of deprivation.

The CCG indicated that a maternity review would be undertaken, including an evaluation of the targeting of service provision for vulnerable groups. The Committee expressed concern that the NCT pilot had not reached the vulnerable families as intended and that in future greater consideration be given as to how to reach those groups through a range of community facilities with service provision being better designed to reflect the needs and lifestyles of the groups to which support was being offered. The Committee also highlighted the learning points concerning joint commissioning to ensure that the responsible agencies communicated more effectively and worked together to provide the right services to meet the needs of all individuals and families in need of support.

Officers at the meeting noted the views of the Committee on the need to improve communication and working together, particularly in the context of the major ongoing changes affecting health services. This necessitated a more robust approach to commissioning and presented significant opportunities for all partners to achieve common service-delivery aims by working together more effectively in the future.

#### **RESOLVED**

That the report and ongoing review activity, as set out in the report and updates provided to the Committee, be noted and that a further report be submitted to a future meeting of the Committee on the outcome of the ongoing service review affecting the provision of antenatal services in the Borough.

#### 35 NATIONAL HEALTH SERVICE (NHS) QUALITY ACCOUNTS 2012/13

The Committee considered a report of the Lead Officer reviewing the progress of key NHS providers in Dudley against improvement priorities set out in their 2011/12 NHS Quality Account and giving consideration to emerging priorities for the forthcoming year.

The Quality Accounts submitted to the meeting included locally agreed priorities for improvement based on an ongoing dialogue with patients and the public to ensure that local relevance was maintained. The Committee considered progress against the improvement issues for each NHS provider and discussed various associated issues as set out below.

#### West Midlands Ambulance Service NHS Foundation Trust

Reference was made to the major transformation activity and the greater focus on community service provision. Officers explained reasons as to why the target concerning trained paramedics on ambulances had not been met and made reference to work with the Clinical Commissioning Group such as the 'GP in a car' and 'falls car' initiatives. Overall the ambulance service was meeting its local targets on response times to attend incidents.

The Committee also discussed issues relating to parking in Burton Road, the delivery of patients to the walk in centre, liaison with the falls service provided by the local authority, regional work in connection with mental health services and the potential implications of the introduction of the 111 service. The Committee reiterated the need for WMAS to work with all partner organisations with the ultimate aim of improving service delivery to local residents.

### The Dudley Group of Hospitals NHS Foundation Trust

Reference was made to the roll-forward of the priority areas of patient experience, pressure ulcers, infection control, nutrition and hydration. Targets would be reviewed locally in the light of experience, however, it was noted that the targets on infection control were now being set nationally by the Department of Health. Officers outlined measures being taken to control infections in response to concerns expressed locally and nationally.

The Committee discussed specific issues concerning the measuring of targets for nutrition and hydration. Whilst recognising the importance of targets, Members also referred to the quality of patient care and how the performance measures were used to make a practical difference to the quality of care. Concerns were also expressed as to how the performance data was collected. It was suggested that future reports could include practical examples to demonstrate improvements in the patient experience.

# **Dudley and Walsall Mental Health Partnership NHS Trust**

Reference was made to the ongoing progress of identifying future priorities in the national/regional context in consultation with staff, service users, carers and other partners. The priorities associated with patient safety, clinical effectiveness and patient experience would be reviewed in the context of further information received.

In relation to patients who self harmed, the first priority was patient safety by dealing with any physical injuries and subsequent consideration to mental health issues and future coping strategies. The Committee made reference to significant challenges associated with patients with a 'dual diagnosis' or multiple problems such as eating disorders, self-harming, alcohol problems or substance misuse. Whilst recognising these complex and challenging issues, officers recognised there were opportunities for partners and agencies to take a 'joined up' and holistic approach.

In receiving the Quality Accounts from the NHS providers, the Committee noted differences in the presentation of the information, however, Members recognised the common theme of continuous improvement and achieving better outcomes for patients and service users, particularly in the context of major changes affecting the NHS and other partner organisations.

# **RESOLVED**

(1) That the review of progress against the improvement priorities based on the information presented in the report and verbal submissions to the Committee be noted.

- (2) That the NHS providers take account of the comments of Members in relation to planned priorities for improvement in 2013/14 with the aim of ensuring they are representative of the quality of services provided and cover identified areas of importance to local people.
- (3) That the views expressed at the meeting be reflected in the formal commentary on the finalised Quality Accounts expected in April, 2013.
- (4) That the thanks of the Committee be extended to the representatives of the key NHS providers for their attendance, submissions and contributions to this meeting and the ongoing work of the Scrutiny Committee.

# 36 QUESTIONS UNDER COUNCIL PROCEDURE RULE 11.8 AND QUESTIONS ON INFORMATION ITEMS

No questions were raised under this agenda item. The Chair invited Members of the Committee to contact the Scrutiny Officer should they wish to raise any matters arising from business that was deferred as a result of the cancellation of the previous meeting.

The meeting ended at 8.00 p.m.

**CHAIR**