## SELECT COMMITTEE ON HEALTH AND ADULT SOCIAL CARE

Thursday, 18<sup>th</sup> September, 2008, at 6.00 p.m. in Committee Room 2 at the Council House, Dudley

## PRESENT:-

Councillor Mrs Ridney (Chairman) Councillor Mrs Faulkner (Vice-Chairman) Councillors Mrs Aston, Mrs Cowell, J D Davies, Mrs D Harley, Islam, Kettle, K Turner and Tyler

## Officers

Assistant Director Policy, Performance and Resources (Lead Officer to the Committee), Scrutiny Officer and Mr J Jablonski (Directorate of Law and Property)

# Also in Attendance

Ms S Hill (Head of Community Engagement) Dudley Primary Care Trust

Mr D Jenkins (Pharmaceutical Advisor) Dudley Primary Care Trust Mr G Barker – LIN k Member

# 20 <u>APOLOGY FOR ABSENCE</u>

An apology for absence from the meeting was submitted on behalf of Councillor K Finch.

# 21 <u>DECLARATION OF INTEREST</u>

No member made a declaration of interest in accordance with the Members' Code of Conduct in respect of any matter to be considered at this meeting.

### 22 MINUTES

## **RESOLVED**

That the Minutes of the meeting of the Committee held on 8<sup>th</sup> July, 2008 be approved as a correct record and signed.

### 23 PUBLIC FORUM

At this juncture the Chairman informed the Committee that she had received a letter from a member of the public who was receiving home support from a member of the Council's Visual Impairment Team. The letter contained praise for the Council employee involved and the Chairman reported that she had spoken to the Cabinet Member for Adult and Community Services and the Director of Adult, Community and Housing Services so that the service given by the officer might be recognised in some way.

The Scrutiny Officer was asked to reply to the letter received informing the writer of the action taken.

# 24 <u>CONSULTATION REGARDING PROPOSED CHANGE OF GENERAL PRACTITIONER (GP) SERVICE - UPDATE</u>

Ms Hill, Head of Community Engagement – Dudley Primary Care Trust informed the Committee that, following on from the decisions taken at the last meeting and recorded at Minute 14 of the minutes of that meeting, further consideration had been given to the proposal to relocate the Wollaston Surgery and that in view of the representations made the surgery would be staying in Wollaston. The issues giving rise to the consultation would be sought to be resolved in another way.

Councillor Mrs Cowell a local ward member reported that people in the area were grateful that the surgery would be staying in Wollaston.

### **RESOLVED**

That the information reported orally be noted.

#### 25 GLOSSARY FOR HEALTH AND ADULT SOCIAL CARE MEMBERS

A report of the Lead Officer to the Committee was submitted on a glossary of terms, or abbreviations, commonly used in reports submitted to this Committee. A full list of the terms or abbreviations were set out in the Appendix to the report submitted.

#### **RESOLVED**

26

That the information contained in the report, and Appendix to the report, submitted be noted and that the glossary, as set out in the Appendix, be included in agenda papers for the remainder of the municipal year.

# ANNUAL REPORT OF THE SELECT COMMITTEE ON HEALTH AND ADULT SOCIAL CARE 2007/2008

A report of the Lead Officer to the Committee was submitted on the Annual Report of the Committee for the municipal year 2007/2008.

During consideration of the content of the Annual Report Members made a number of comments relating in particular to:-

- The issues of alcohol use and abuse especially by young people and the need to be proactive and develop understanding in trying to deal with this issue especially as it covered a number of areas apart from health
- The possible use of premises in Bank Street, Brierley Hill for use as an Autism Centre.

In respect of the alcohol issue it was reported that the Committee would at a future meeting be considering the Draft Alcohol Strategy and therefore there would be a further opportunity to raise and consider issues again and that the Lead Officer would forward the suggestion made about the premises to the Assistant Director (Learning Disability and Mental Health).

#### **RESOLVED**

That the Annual Report of the Select Committee on Health and Adult Social Care 2007/2008 be approved for submission to the Council.

# 27 TREATMENT OF AGE RELATED MASCULAR DEGENERATION

A report of the Director of Governance and Community Engagement – Dudley Primary Care Trust was submitted, following a request made by the Committee, on information regarding the provision of treatment for Age Related Mascular Degeneration.

Duncan Jenkins, Pharmaceutical Advisor – Dudley Primary Care Trust (PCT) updated the information contained in the report submitted and in so doing informed the Committee of the position regarding the NICE Guidance; the process involved leading to receipt of such guidance and its implications in respect of the treatment; the position within Dudley PCT including interim clinical criteria for treatment and the current position on this matter.

The following principal points were made

 Given that the final NICE Guidance was likely to be that the treatment was cost effective there would be a significant financial implication of the order of £1-2 million. Once this allocation had been made it would not be available for spending in other areas.

- Approximately 100 to 200 patients were likely to be treated in the first year and half that number again in the second year. These were approximate figures only as actual numbers involved were difficult to calculate.
- The cost of treatment was between £11 to 15,000 per patient with most patients requiring up to fourteen injections per year. The number of injections would depend on the effects of the treatment however for some patients even if they received the treatment their condition could deteriorate.
- The number of injections would not be limited but based on clinical criteria.
- Other treatments were also available.
- Following receipt of the final NICE Guidance there would be a meeting of the Ophthalmic Managers Drugs Group to consider the clinical criteria with a meeting later of the NICE Implementation Group.
- Decisions would still need to be made as to how to implement the Guidance for example in some PCT areas treatment would only be made in respect of one eye whilst in Dudley it was considered that treatment should apply to one or both eyes.
- An indication was given that the treatment would be available across the Borough after the end of next week.

The Chairman at the conclusion of the consideration of this matter thanked the representatives from the PCT for the information given and their open and helpful approach to the request made in respect of this matter.

#### **RESOLVED**

That the information contained in the report, and as reported at the meeting, on the treatment of Age Related Mascular Degeneration, be noted.

# 28 <u>IMPROVING HEALTH AND WELLBEING IN DUDLEY; DUDLEY</u> PRIMARY CARE TRUST (PCT) STRATEGIC FRAMEWORK

A report of the Director of Governance and Community Engagement was submitted, following a request made by the Committee, for information on the Strategic Framework of Dudley PCT. The report submitted built on the report submitted to the meeting of this Committee in July, 2008 on World Class Commissioning and provided an update as to how this was being taken forward in Dudley.

Ms Hill, Head of Community Engagement – Dudley PCT in her presentation of the content of the report referred in particular to the 10 goals set out in paragraph 4 of the report and identified measurable outcomes to track progress in respect of those goals as set out in paragraph 7 of the report submitted.

As the document had been submitted to the Committee at a very early stage it had not yet been finalised and had yet to be submitted to the Strategic Health Authority and the Board of the PCT. In this connection it was reported that goal 3 – reducing coronary vascular disease – was likely to be included with goal 5 – providing systematic and targeted prevention as they were of a similar kind. A further strategy would then be included as one of the 10 goals.

Ms Hill also informed members that she had copies of the Annual Report of the PCT for circulation to them.

Arising from the presentation given Members made a number of comments relating in particular to:-

- The interim nature of the report submitted. It was reported that when the report had been finalised it would be submitted to the Committee for further consideration and would include relevant figures.
- The importance of very early intervention in respect of stroke victims. The importance of this was reflected in its inclusion as one of the top 10 goals.
- A query as to how information on one of the identified measurable outcomes – percentage of all deaths that occurred in place of choice – would be obtained.
- In response an indication of the work being carried out was given and it was suggested that a report on this matter, to include measures to support people who wished to remain at home, be submitted to a future meeting on this Committee.
- The 'hidden' conditions of hyper-tension and diabetes and the need for these conditions to be considered together and linked to measures in respect of obesity.

It was reported that whilst diabetes was not included as a top 10 goal it would be included in goal 5 and was still a high priority just outside the top 10.

 The need for information on conditions, detection and treatments, including in respect of those conditions indicated above, to be available in settings other than in surgeries for example by the use of visits by a professional to schools and in pharmacies.

In this connection an indication was given of Community Outreach work, in conjunction with Public Health, being undertaken involving Community Health Improvement and Health Trainers.

A lot of joint work with the Council was also being undertaken.

#### **RESOLVED**

- (1) That the information contained in the report, and as reported at the meeting, on the Strategic Framework of Dudley Primary Care Trust, be noted.
- (2) That the Lead Officer to the Committee be requested to arrange for the submission of a report on the issue of deaths that occur in the place of choice, to include details of measures to support people who wished to remain at home, to a future meeting of this committee

# 29 <u>COMMENTS MADE BY THE LEAD OFFICER TO THE COMMITTEE</u>

The Lead Officer to the Committee informed Members of the following matters:-

- (a) The arrangements regarding a joint review inspection of Learning Disability Services, involving the Chairman of this Committee, which would take up 5 days during the period 13<sup>th</sup> to 31<sup>st</sup> October.
- (b) The work that had been carried out to produce a poster following on from the Committee's website, so as to further engage with the public and involve them in the work of the Committee. Once the posters had been finalised they would be distributed to suitable outlets to include GP surgeries, other health outlets and pharmacies.

The meeting ended at 7.15 pm

**CHAIRMAN**