

Minutes of the Health and Adult Social Care Scrutiny Committee

Wednesday 21st November, 2018 at 6.00 p.m.
in Committee Room 2 at the Council House, Dudley

Present:

Councillor M Mottram (Chair)
Councillor P Miller (Vice-Chair)
Councillors J Baines, R Body, B Gentle, A Goddard, A Hopwood, L Johnson, C Perks, H Rogers and D Stanley; S Pritchard.

Dudley MBC Officers

M Samuels – Strategic Director People, M Bowsher – Chief Officer Adult and Social Care, D Harkins – Chief Officer Health and Wellbeing, C Conway – Assistant Team Manager (MCA and DoLS), D Lunt – Adult MASH Team Leader (People Directorate); C King – Principal Trading Standards Officer (Place Directorate); I Newman – Chief Officer Finance and Legal Services, R Cooper – Head of Financial Services and H Shepherd – Democratic Services Officer (Chief Executive's Directorate).

Also in Attendance

Dudley Clinical Commissioning Group (CCG): L Broster and N Bucktin
Dudley Group NHS Foundation Trust: L. Abbiss, D Lewis and L Peaty
Independent Chair of Dudley Safeguarding Adults Board - L Murphy

21 Apology for Absence

An apology for absence from the meeting was submitted on behalf of P Bradbury, Co-opted Member.

22 Appointment of Substitute

It was noted that S Pritchard had been appointed as a substitute member on behalf of P Bradbury for this meeting of the Committee only.

23 Declarations of Interest

No member made a declaration of interest in accordance with the Members' Code of Conduct.

24 **Minutes**

Resolved

That the minutes of the meeting held on 25th September, 2018, be approved as a correct record and signed.

25 **Public Forum**

No issues were raised under this agenda item.

26 **Medium Term Financial Strategy**

The Committee considered a joint report of the Chief Executive, Chief Officer Finance and Legal Services and the Strategic Director People on the Medium Term Financial Strategy (MTFS) to 2021/22, with emphasis on proposals relating to the Committees terms of reference. Items directly relevant to the Committee were those in relation to Health and Adult Social Care within the People Directorate and the Public Health budget.

In presenting the report, the Chief Officer Finance and Legal Services made particular reference to paragraph 36 of the report submitted, which reflected the revised spending proposals and forecasts for assumed available resources. It was noted that moving forward, the total service spend for each year was forecast to be higher than the total amount of resources available. It was advised that deficits could be met from reserves in the short term, but reserves would be exhausted by 2021/22.

It was reported that an area of concern related to the cessation of the four year settlement that would end in 2019/20. A fair funding review was being undertaken by the Government to review local government finance, which would become effective from 2020/21. Until such time there was an uncertainty as to the amount of funding that would be allocated to Dudley in future years, but this predicament was the same for all Local Authorities.

Resolved

That the Cabinet's proposals for the Medium Term Financial Strategy to 2021/22, set out in the report and appendices to the report submitted, be received and noted.

27 **Dudley Safeguarding Adults Board Annual Report 2017/18 and Deprivation of Liberty Safeguards**

A report of the Strategic Director People was submitted on the Adult Safeguarding Board's Annual Report for 2017/18.

The Independent Chair of the Adult Safeguarding Board introduced the report and in doing so outlined the main objectives of the Board, which were to protect any adult with care and support needs from experiencing or being at risk of abuse or neglect.

It was reported that during 2017/18, there had been significant developments in the local safeguarding system, including the establishment of the Multi-Agency Safeguarding Hub (MASH). Work within the MASH was on-going to embed standards and provide consistency, but that overall the hub had enabled a more united approach in dealing with safeguarding enquiries and had resulted in better decision outcomes. Further work was needed in providing a consistent approach and to co-locate the children's MASH with the Adult's MASH to provide a single front door for all safeguarding concerns.

The Independent Chair advised that work had been undertaken to tackle the on-going increase in financial abuse and to protect victims of financial scamming, with extensive support provided by Dudley's Trading Standards team. Further work was to be done in engaging with Financial Institutes to obtain support for victims and to address the growing problem.

It was acknowledged that engagement with residents in raising awareness of safeguarding and promoting the avenues in which concerns should be reported was an area that needed improvement.

It was advised that the Board had been internally audited and recommendations for future improvement had been identified in relation to performance data that was presented to the Board and the risk register not being completed correctly, nor did it correspond with the business plan. Processes had since been implemented to ensure that all partners' performance data were presented to the Board and that the risk register was regularly reviewed. Work would continue to be progressed to address these issues.

The Adult MASH Team Leader, Principal Trading Standards Officer and Assistant Team Manager (MCA and DoLS), then gave a detailed powerpoint presentation on the work undertaken by the Safeguarding Adults team, the Trading Standards team and the Deprivation of Liberty Safeguards team.

Following the presentation, Members asked questions and made comments and responses were provided where appropriate, as follows:-

- Should a member of staff at a Care Home be found to have violated patients safeguarding, disciplinary action would be taken and the incident reported to the Disclosure and Barring Service (DBS). It would be the decision of the DBS as to whether that person would be allowed to work at other care home facilities.

- Once a safeguarding issue had been reported, it would depend on the nature of the incident as to whether the person who had reported the incident would be notified of the outcome. Permission of the victim would also need to be obtained before information could be disclosed and their wishes would need to be respected. The possibility of providing a simple notification to confirm that the incident was being investigated would be explored.
- Each individual's case would be considered independently and on its own merit. If a report was received, but the individual in question insisted that they were not being subjected to any kind of abuse, appropriate investigations would be completed, however that individual's wishes would need to be taken into consideration. It was noted that some cases were extremely challenging and complex.
- A lot of work was to be done to promote awareness of financial scamming in the hope of prevention. It was acknowledged that prevention was difficult due to the sophistication of the crime, but it was envisaged that using resources to investigate and prosecute scammers, would deter potential scammers in the future.
- Every effort was made to promote and raise awareness of financial scams and who to contact if fell victim to such a scam. Trading Standards welcomed the support and the opportunity to work with local Councillors in promoting awareness.
- In the majority of financial scam cases investigated by Trading Standards, a proportion of the money lost as a result was retrieved. It was recognised that it was essential to obtain support and work collaboratively with Financial Institutes to ensure resident's financial losses were retrieved.
- National statistics identified that woman aged 82 years or older were most likely to fall victim to financial scams. This was considered to be as women statistically lived longer than men.

Members expressed their support to the Safeguarding Team for the work that they undertook in protecting Dudley's vulnerable residents and the on-going training provided to Members and staff in promoting awareness of safeguarding and avenues to report concerns.

Members also commended Trading Standards for their continued dedication and hard work in all aspects of their role.

The Chair, on behalf of the Committee, expressed his thanks to the presenting Officers for the detailed presentations, but requested that for future meetings the presentation slides be circulated to Members in advance to allow Members sufficient time to digest the information provided.

Resolved

- (1) That the report on the Dudley Safeguarding Adults Board Annual Report for 2017/18 and the comments made at the meeting, be noted.
 - (2) That a copy of the presentation slides be circulated to all Members of the Health and Adult Social Care Scrutiny Committee, by the Democratic Services Officer.
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28

Quality of Maternity Care in Dudley

An update was provided by the Head of Maternity Services, Dudley Group NHS Foundation Trust on the quality of maternity services provided by the Dudley Group NHS Foundation Trust.

In presenting the report, the Head of Maternity Services referred to Dudley Maternity Services Quality Improvement Board report that was published in October 2017, attached as appendix 1 to the report submitted and highlighted the changes that had occurred during the twelve-month period.

It was reported that the Care Quality Commission (CQC) had visited the maternity unit during the inspection of the trust in December 2017 and had rated the service as 'good'. The recommendations from the CQC team related to improvements that the Maternity Service had identified themselves as areas for improvement and plans were in place to address these sections.

It was noted that Leadership and staffing was an important aspect of the Maternity Service, which had benefited as a result of the review, with active support by the Chief Executive (Dudley Group NHS Foundation Trust).

The work of the Maternity Triage that was being done in collaboration with Birmingham Women's Hospital to implement the Birmingham Symptom Specific Obstetric Triage System, to ensure pregnant women were seen in a timely manner was referred to, together with the work being undertaken with the three Black Country Authorities to achieve standardisation and improve outcomes.

In referring to the Clinical Negligence Scheme for Trusts and the incentive fund available, the Head of Maternity Services informed the Committee that Dudley Maternity Service was successful in meeting all ten of its requirements and had received 10% of their base contribution back to the trust, plus an additional bonus payment.

The work undertaken in conjunction with Public Health in respect to smoking cessation, healthy eating, improved exercise and the benefits of breastfeeding was referred to and it was recognised that there was still a significant amount of work required in these areas to achieve the national agreed target.

The Head of Maternity Services commented that the improvements made in respect of the bereavement care and the support provided to bereaved parents had had a positive impact on the service, which had been further improved by the appointment of the Bereavement Midwife. Changes had also been made to the patient engagement, which was now led by a former patient that had had a bad experience of the Maternity Service and who provided a critical friend and support to others.

Members commended Officers for the excellent detailed report submitted and congratulated the team on the excellent service that they provided.

Arising from a question raised by a Member, it was confirmed that the West Midlands on a whole performed poorly in comparison to the national average in respect of women smoking whilst pregnant. This was considered to be a cultural issue, but that a number of initiatives were being promoted, in conjunction with Public Health, to encourage prospective mothers to cease smoking. Early intervention promoting the benefits of breastfeeding, as well as improving the support that was provided to new mothers was considered to be a key objective for both services.

Arising from a question raised with regards to the support provided to mothers that suffered with postnatal depression and who were unable to breastfeed as a result, the Chief Officer Health and Wellbeing confirmed that the Council was commissioned to provide postnatal support, as this support did not form part of the maternity service. It was acknowledged that the service was unsuccessful in the Borough and would be a priority for Public Health to address.

Bereavement care was recognised by Members as an essential service for bereaved parents. The Head of Maternity Services confirmed that there were no imminent plans to increase the number of staff in this area, but it would continue to be evaluated.

Resolved

- (1) That the report on the quality of Maternity Services and the comments made at the meeting, be noted.
- (2) That further updates be provided to future meetings of the Scrutiny Committee.

The Development of Dudley Group Foundation Trust Strategy for 2019-2021

A report of the Director of Strategy and Business Development – Dudley Group Foundation Trust, was submitted on the steps taken to refresh the Dudley Group Foundation Trust Strategy and to gather feedback on the strategy's development.

The Deputy Director Strategy and Business Development presented the report in detail and provided a background to the creation of the Strategy in 2014. It was acknowledged that all of the targets set out in the Strategy had been achieved over the three-year period and were now out dated.

It was recognised that the implementation of the Multi-Specialty Community Provider (MCP), and the awaited Governments ten year plan, would both impact upon the Strategy and therefore the refreshed document was suggested to be for a two year period only.

The methodology used to refresh the Strategy and the key outcomes from the consultation were outlined. It was commented that the key themes from the consultation had been aligned with the Trusts strategic objectives and would be incorporated into the draft Strategy document.

Arising from a question raised by a Member, the Deputy Director Strategy and Business Development concurred that it was customary for a strategy document to be for a five or ten year period. As the Trust was still uncertain of the implications from the implementation of the MCP, it was considered more appropriate for the Strategy to be for a period of two years, as it was difficult to see beyond that timeframe at this stage.

In responding to a further question raised as to whether the services and facilities available in Dudley was enough to accommodate all of its residents, the Deputy Director Strategy and Business Development confirmed that she believed that it was. It was commented that the Trust was aware of the demand for services, and were consistently working to improve the efficiency and effectiveness of the services it provided. The Deputy Director of Strategy and Development commented that the work relating to the MCP would ensure that services were configured to meet patient needs. It was acknowledged that Dudley was one of the best performing Trusts nationally for prompt referral for treatment times which resulted in patients accessing acute services quickly.

In referring to the issues with car parking, the Deputy Director Strategy and Business Development stated that negotiations with the PFI provider were in progress to look at appropriate parking options and that work with the Council was being explored to develop better green travel plans and the feasibility of increasing cycling facilities, such as secure cycle storage, for staff and patients at the hospital.

Resolved

That the report on the development of Dudley Group Foundation Trust Strategy for 2019-2021 and the comments made at the meeting, be noted.

Clinical Commissioning Group Policy on NHS Continuing Healthcare

The Committee considered a report on the challenges raised by the Equality and HR Commission (EHRIC) regarding the legality of the Clinical Commissioning Group's (CCG) NHS Continuing Healthcare (CHC) policies for funding of Care provided in the home.

In presenting the report, the Director of Commissioning, Dudley CCG explained in detail the existing policy and the care packages that were provided and outlined the proposals for addressing the legality challenge made by the Equality and Human Rights Commission regarding funding for packages of care provided in the home.

Following the presentation of the report, Members asked questions, made comments and responses were provided where appropriate, as follows:-

- No applications requesting care at home had been rejected and two applications exceeding the 20% financial threshold had also been granted. Those patients that qualified for continuing healthcare and were currently at a care home, had chosen that category of care for themselves.
- A patients continuing healthcare would be reviewed after a period of time, as some patient's health did improve and no longer required the care. However the majority of cases were complex and care would need to continue to be provided in their chosen environment.
- The choice of care facility would depend on the complexity of a patient's needs, which would also limit their choice available locally and may result in patients having to travel to a provision further afield that could provide the right level of care for them.
- There would be no cost implications as a result of the changes to the policy.

In referring to the continuing healthcare criteria and the number of patients that did not qualify, the Director of Commissioning, Dudley CCG agreed to provide statistical information in respect of the number of applications received and the number of those that were refused, following the meeting. It was commented that there was a high number of applications received that did not meet the criteria and were subsequently refused.

Resolved

- (1) That the proposals outlined in report in respect to the Clinical Commissioning Groups policy on NHS Continuing Healthcare, be noted and the comments made by members be reported to the Clinical Commissioning Groups Commissioning Development Committee on 19th December, 2018.
- (2) That statistical information in respect of the number of continuing healthcare applications received and the number of those that were refused, be provided by the Director of Commissioning, Dudley CCG and circulated to all Members of the Scrutiny Committee.

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Feedback from the Health and Adult Social Care Scrutiny Committee (Scrutiny Development) Working Groups

A report of the Lead for Law and Governance was submitted to provide feedback from the Health and Adult Social Care Scrutiny Committee (Scrutiny Development) Working Groups that were held on 29th August and 15th October, 2018.

In referring to paragraph 15 of the report submitted, it was noted that the meeting scheduled for 11th December, 2018 had now been cancelled. Therefore the next meeting of the Scrutiny Development Working Group would be held on Thursday 3rd January, 2019.

Resolved

That the report submitted on the feedback from the Health and Adult Social Care Scrutiny Committee (Scrutiny Development) Working Groups, be noted.

The meeting ended at 8.30 p.m.

CHAIR