

Minutes of the Health Scrutiny Committee

Thursday 19th November, 2015 at 6.00 p.m.
in Committee Room 2 at the Council House, Dudley

Present:-

Councillor C Hale (Chair)
Councillor A Goddard (Vice-Chair)
Councillors M Attwood, R Body, K Casey, S Henley, C Perks, S Phipps, N Richards
and E Taylor.

Officers

M Farooq (Head of Law and Governance) (Lead Officer to the Committee), R Cooper (Head of Financial Services), D Harkins (Chief Officer Health and Wellbeing), I Newman (Chief Officer Finance and Legal Services), A Sangian (Senior Policy Analyst – People Directorate) and K Buckle (Democratic Services Officer – Resources and Transformation Directorate)

Also in Attendance

P Maubach – Chief Accountable Officer – Dudley Clinical Commissioning Group
N Bucktin – Dudley Clinical Commissioning Group
J Emery – Chief Officer – Healthwatch Dudley

20 **Councillor M Roberts**

Members referred to the late Councillor M Roberts being a valued Member of the Committee and as a mark of respect to both her and her family held one minutes silence.

21. **Apologies for Absence**

Apologies for absence from the meeting were submitted on behalf of P Bradbury and Councillors K Finch and D Russell.

22. **Appointment of Substitute Members**

It was reported that Councillor C Perks had been appointed to serve in place of Councillor D Russell and J Emery had been appointed to serve in place of P Bradbury for this meeting of the Committee only.

23. **Appointment to Group Vacancy**

It was reported that Councillor R Body had been appointed to the Group vacancy for the late Councillor M Roberts for the meeting of the Committee.

24. **Declarations of Interest**

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

25. **Minutes**

Resolved

That the minutes of the meeting of the Health Scrutiny Committee held on 24th September, 2015 be approved as a correct record and signed.

26. **Public Forum**

No issues were raised under this agenda item.

27. **Medium Term Financial Strategy**

A joint report of the Chief Executive, Chief Officer Finance and Legal Services and Strategic Director People was submitted on the Medium Term Financial Strategy (MTFS) for 2018/19 with emphasis on proposals relating to the Committee's terms of reference. Items directly specific to this Committee were those relating to the proposed Public Health budget for 2016/17 as contained in paragraphs 30 and 31 of the report submitted.

In presenting the report submitted, the Chief Officer Finance and Legal Services made particular reference to the agreed transfer of £2.2m by the Dudley Clinical Commissioning Group in order to further support the Adult Social Care service, the rising pressures on Adult Social Care by 2018/19 and in addition the new pressure in view of the impact of the National Living Wage.

It was noted that there would be a change in the budget process with Directorates being requested to identify further savings proposals, which would be considered by Cabinet in January, 2016 and Scrutiny Committees in January/February, 2016.

Arising from the presentation of the report submitted, Members raised concerns and asked questions and Officers responded as follows:-

- Although detailed plans for savings had been made, given the rise forecasted in the deficit of £50m by 2018/19 and the scale of the challenge, that this would ultimately impact on the level of services delivered and upon quality of life, however Officers would work to minimise those impacts which would involve working much closer with partners and providing support to enable the community to do more for themselves and each other;

- That Officers must minimise the risk to people and services and have already been provided with the opportunity to lobby local Government in relation to the impact of the national living wage, arguing that this should be recognised as a new spending pressure on the Authority.
- That discussions were continuing with the voluntary and community sector in relation to streamlining services and obtaining the best value for the services that were commissioned from the resources available and achieving a more coherent approach for purchasing services.
- Discussions were also ongoing in relation to transparency regarding the Council's aspirations and how services would look in the future, with larger budgetary constraints and fewer resources and work was continuing in relation to engaging communities in order to provide community led services. Further details in relation to the discussions and work referred to above would be disseminated to Members at a future meeting of the Committee.
- There may be greater reductions in Health Grants going forward and upon the basis that the savings from the Public Health Grant were deliverable, there could be a re-direction of funds to other activities of the Council that promote health which could mitigate the impact on the general fund.

The Chief Officer Health and Wellbeing undertook to report to a future meeting of the Committee in relation to work being conducted to strengthening communities and the transformation work that was underway.

J Emery referred to work being undertaken by Healthwatch, Dudley regarding quality services which investigated how the voluntary sector would be affected by reducing budgets and fewer resources and investigating alternatives in order to ensure that the quality of services would not be affected, especially with regard to the most vulnerable.

Resolved

- (1) That the Cabinet's proposals for the Medium Term Financial Strategy to 2018/19, as set out in the report, and Appendices to the report, submitted be noted.
- (2) That the Chief Officer Health and Wellbeing be requested to submit a report to a future meeting of the Committee detailing the work on transformation and strengthening communities referred to above.

28. **Excess Winter Deaths.**

A report of the Chief Officer Health and Wellbeing was submitted on Excess Winter Deaths in Dudley, following the previous briefing presented to the Committee in 2012, due to those deaths being identified as an issue in the 2012 Health Profile of the Borough, published by the Department of Health.

Members also considered a powerpoint presentation of the Chief Officer Health and Wellbeing illustrating the graphs and charts contained in the report submitted and

it was noted that there had been a decrease in excess winter deaths within the Dudley Borough, with the Borough now being in line with neighbouring authorities and national standards. It was also noted that excess winter deaths were in the main caused by respiratory conditions.

The Cold Weather Planning Meetings and the annual Winter Warmth Campaign and the work conducted in order to promote vaccinations were referred to.

The Chief Officer Health and Wellbeing accepted that further work was required, particularly in relation to an audit against the data obtained pertaining to excess winter deaths, including sharing intelligence by partnership working in order to establish a systematic approach to identify those who were vulnerable. It was also noted that further signposting and training was required and issues in relation to cold homes would need to be addressed upon a timely basis, in order to prevent delayed hospital discharges.

Arising from the presentation of the report submitted, Members raised concerns, made suggestions and asked questions and the Chief Officer Health and Wellbeing responded as follows:-

- Services to residents of the Borough were offered through the Council's Home Improvement Service, which provided advice on switching to alternative energy providers and although some Government grants had been reduced, grant funding remained for loft insulation and further energy efficiencies.
- There was a Winter Warmth Planning Group which was co-ordinated by the Home Improvement Service and included National Health Services, Voluntary Sector, the Fire Service and Housing Association partners, who were involved with campaigns to encourage people to keep warm.
- That there was evidence that those who resided alone were at greater risk and work was continuing in relation to social support networks, connecting those who were vulnerable to support in their neighbourhoods, with part of the Winter Warmth campaign focusing on encouraging neighbours to check on each other.
- There was a discharge planning programme in place which often involved home visits in order to ensure that those vulnerable would be safe to return to their homes, with work also being co-ordinated with the Council's Adult Social Care and Housing Services;
- The Audit against the National Institute for Health and Care Excellence for reducing excess winter deaths would be undertaken in the spring, 2016.

In responding to a request from a Member for a case study on hospital discharge delays and the process, J Emery, Chief Officer Healthwatch Dudley undertook to provide Members with the Peoples Network Adult Social Care case study that had been undertaken.

A Member expressed concerns for those who were unable to afford to keep their homes warm and remained vulnerable.

Resolved

- (1) That the information contained in the report submitted on Excess Winter Deaths in Dudley, be noted.
- (2) That J Emery, Chief Officer Healthwatch Dudley be requested to forward to Members the Peoples Network Adult Social Care case study referred to above.

29. **Dudley and Walsall Mental Health Partnership NHS Trust – Older Adult Mental Health Services.**

N Bucktin gave a verbal update on the significant work being undertaken on the service model that the Clinical Commissioning Group wished to commission in relation to Older Adult Mental Health.

N Bucktin referred to the following:-

- A prevalence study of those suffering from older adult mental health which had raised issues in relation to the number of older patients admitted to hospital with mental health problems, including those who had been admitted from care homes and the need to prevent inappropriate admissions and speed up discharges.
- The development of older adult mental health services as part of the Vanguard programme including the development of new levels of care and teams in order to deal with services in a co-ordinated and integrated method.
- The development of commissioning additional community care services centring around older mental health patients who had been admitted to nursing residential homes.

It was noted that discussions were ongoing between the Dudley and Walsall Mental Health Partnership NHS Trust and the Dudley Clinical Commissioning Group and a report on Older Adult Mental Health Services would be presented to the Committee at a future meeting.

Resolved

- (1) That the verbal presentation on Older Adult Mental Health Services, be noted.
- (2) That the Dudley Clinical Commissioning Group be requested to present a report to a future meeting of the Committee on the development of Older Adult Mental Health Services.

30. **Stroke Service Reconfiguration.**

A presentation of P Maubach, Chief Accountable Officer, Dudley Clinical Commissioning Group was submitted on the Stroke Services Reconfiguration. The presentation had been circulated to Members and was

available on the Council's Committee Management Information System (CMIS).

P Maubach provided a summary of the review of stroke services making particular reference to the Hyper Acute Stroke Unit and the viability of stroke services, with performance being measured against key pathways. It was noted that Dudley generally outperformed their four other Black Country partners, with performance standards for local services being one of the best in the region, remaining both clinically and sustainably viable.

In concluding the presentation, P Maubach advised that as far as the Dudley Group of Hospitals NHS Foundation Trust were concerned, Russells Hall Hospital met the requirements of the Black Country in relation to stroke services and there would be ongoing consultations with the newly formed Black Country Alliance, in view of the need to demonstrate how they could maintain the standard of service of delivery, for hyper acute stroke services and if not how they could work together to address the issue. It was noted that the outcome of those consultations were currently awaited.

Following queries raised by Members in relation to the terminology in the Team Centred Data contained in the report submitted, P Maubach agreed to forward to Members a glossary of the data.

It was noted that once monitoring a service provider commenced, that provider was challenged to improve their standards and performance generally improved.

It was agreed that a further update would be provided to the Committee in January, 2016 on the final number of Hyper Acute Stroke Units in the Birmingham, Solihull and Black Country conurbation.

Resolved

- (1) That the information contained in the presentation on the Stroke Services Reconfiguration, and as reported on at the meeting, be noted.
- (2) That the Dudley Clinical Commissioning Group be requested to provide Members with a glossary of the Team Centred Data contained in the report submitted detailing the terminology.
- (3) That the Clinical Commissioning Group be requested to provide an update on the final number of Hyper Acute Stroke Units in the Birmingham, Solihull and Black Country Conurbation to a future meeting of the Committee.

31. **Update on Urgent Care Centre**

A report of P Maubach, Chief Accountable Officer, Dudley Clinical Commissioning Group was submitted on the Dudley Urgent Care Centre.

In presenting the report submitted, P Maubach made particular reference to current activity, performance and future developments of the Urgent Care Centre following the Centre becoming fully operational on 1st April, 2015.

It was noted that the Centre had been consistently meeting performance targets since the piloting and running of the Centre and was currently one of the best performing centres in the Country and following the co-location of the walk in service, the Urgent Care Centre had re-directed patients to primary care services, which had alleviated pressures on the Accident and Emergency Department at Russells Hall Hospital, producing a great success.

The re-design work that was required in order to directly locate consulting rooms to the reception area at the Urgent Care Centre were referred to and it was noted that the Governing body of the Dudley Clinical Commissioning Group had approved the feasibility study for re-locating the consulting rooms and the process that would be followed in order to complete the re-design work was outlined. It was hoped that the reconfiguration of the Centre would be completed by Easter 2017, which should improve the patient experience.

Arising from the presentation of the report submitted, Members asked questions and made comments and P Maubach responded as follows:-

- It had taken time to ensure the correct plan and re-design was in place in order to meet patients' needs and requirements and also the most cost effective and affordable method of the re-design work had to be investigated, however the quality of service had not been affected during the period of consultation.
- That the time estimate for the re-design work was approximately 9 months, however timescales were dependent upon the planning process as approval would be required from the Council's Development Control Committee and the length of time for that process was unknown.
- Discussions had taken place with the Urgent Care Centre providers, who had agreed to schedule further General Practitioners and nurses during anticipated bank holiday peak times, however as the demand for night services remained low the provision of the 24 hours each day, 7 days each week service may require a varied method of service provision.
- Although predicting demand on the service had been reliable, there would be periods when there would be more patients requiring to access the service than predicted, however due to joint working, demand on services would now be more manageable during those peak periods.
- That every General Practitioners Practice was required to offer urgent same day appointments, however that requirement would continue to be monitored.
- That consultations would be undertaken with the Dudley Clinical Commissioning Group's Head of Communications in relation to further advertising "Pharmacy First".

J Emery, Chief Officer, Healthwatch Dudley referred to a survey and feasibility study, that had been conducted at the Urgent Care Centre and undertook to forward to Members the Healthwatch Dudley Report in relation to the Centre.

It was noted that residents of the Dudley Borough were encouraged to access pharmacies and General Practitioner appointments in the first instance.

J Emery advised that it had been evidenced by the above survey that patients had not been deterred from accessing the Urgent Care Centre by parking charges.

The Chair referred to the success of the Urgent Care Centre.

Resolved

- (1) That the information contained in the report submitted on the Dudley Urgent Care Centre, be noted.
- (2) That J Emery, Chief Officer Healthwatch Dudley, be requested to forward to Members the Dudley Urgent Care Centre Report referred to above.

The meeting ended at 7.40 p.m.

CHAIR