

## SELECT COMMITTEE ON HEALTH AND ADULT SOCIAL CARE

Thursday, 27<sup>th</sup> March, 2008, at 6.00 p.m.  
in Committee Room 2 at the Council House, Dudley

### PRESENT:-

Councillor Mrs Ridley (Chairman)  
Councillor Mrs Faulkner (Vice-Chairman)  
Councillors Mrs Aston, Mrs Blood, Jackson, Lavender, J Martin, K  
Turner and Simms.

### Officers

Assistant Director of Housing (Strategy and Private Sector) (Acting as  
Lead Officer to the Committee), Assistant Director (Learning Disability  
and Mental Health), Head of Policy and Performance, Adult protection  
Co-ordinator (Directorate of Adult, Community and Housing Services),  
DAAT Manager (Chief Executive's) and Mrs M Johal (Directorate of  
Law and Property)

### Also in Attendance

Ms Sharpe and Mr Harrison (Director of Governance and Community  
Engagement), Ms Close (Dudley Group of Hospitals), Mr Chapman  
and Ms Green (West Midlands Ambulance Service)

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### APOLOGIES FOR ABSENCE

Apologies for absence from the meeting were received on behalf of  
Councillors Mrs Cowell and Ms Jordan, the Lead Officer to the  
Committee and the Scrutiny Officer.

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### DECLARATION OF INTEREST

A declaration of a personal interest, in accordance with the Members'  
Code of Conduct, was made by Councillor Mrs Aston in relation to  
Agenda Item No 7 (Annual Health Check – A Guide for Health and  
Adult Social Care Scrutiny Members) in view of the fact that her son  
works for the West Midlands Ambulance Service.

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### MINUTES

RESOLVED

That the Minutes of the meeting of the Committee held on 17<sup>th</sup> January, 2008 be approved as a correct record and signed.

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## PUBLIC FORUM

### Health Impact Assessment – Cradley Leisure Centre

The Chairman referred to an e-mail that had been circulated to her from a member of the public, who was also present at the meeting, regarding the necessity for a Health Impact Assessment to be carried out at the Cradley Leisure Centre site prior to and as part of the decision making process to declare the land surplus to requirements. The e-mail also referred to a previous meeting of the Committee held on 17<sup>th</sup> November 2005, Minute No 32 whereby it had been resolved that Cabinet be recommended that Health Impact Assessments form an integral part of any future major decision that affects health and well being in the Borough.

A Member of the Halesowen Area Committee commented that the matter was currently being considered as part of a consultation exercise and that a further consultation meeting would be held in the near future where the questioner should pose the question, as it was the most appropriate arena. A report would then be submitted to a meeting of the Halesowen Area Committee with a view to a recommendation being made to the appropriate Cabinet Member. The Chairman of the Halesowen Area Committee supported the comments made.

A Member was of the opinion that the Select Committee should have an interest with regard to health facilities and that consideration should be given to establishing whether an assessment was necessary, and if so, a recommendation made to undertake a health impact assessment. Reference was made to the Brierley Hill Leisure Centre and in responding, the Acting Lead Officer to the Committee pointed out that the Brierley Hill Leisure Centre was the responsibility of the Council whereas the Cradley Leisure Centre facilities were attached to the School. A Member suggested that the recommendation as referred to above should be reviewed to clarify and make clearer the position on which Leisure Centres the policy applied to and whether it included those attached to schools.

Arising from the ensuing debate it was agreed that if the question was not answered as part of the consultation exercise and future discussions at Halesowen Area Committee, the matter be referred back to the Select Committee for consideration. The Chairman also undertook to write to the Chairman of Halesowen Area Committee and the Director of Children's Services with a view to highlighting the need to consider the matter as part of the consultation process.

RESOLVED

- (1) That the Chairman be requested to write to the Chairman of Halesowen Area Committee and the Director of Children's Services regarding the need for a Health Impact Assessment to be carried out at the Cradley Leisure Centre site prior to and as part of the decision making process to declare the land surplus to requirements.
- (2) That if the matter was not considered as part of the consultation exercise and future discussions at Halesowen Area Committee, the issue be referred back to the Select Committee for consideration.

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DIRECTORATE OF ADULT, COMMUNITY AND HOUSING SERVICES EQUALITY AND DIVERSITY ACTION PLAN 2008/09

A report of the Director of Adult, Community and Housing Services was submitted on the annual Equality and Diversity Action Plan for 2008/09 for the Directorate of Adult, Community and Housing Services, a copy of which was attached as an Appendix to the report submitted.

RESOLVED

That the information contained in the report, and Appendix to the report, submitted on the Directorate of Adult, Community and Housing Services annual Equality and Diversity Action Plan for 2008/09, be noted.

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ANNUAL HEALTH CHECK – A GUIDE FOR HEALTH AND ADULT SOCIAL CARE SCRUTINY MEMBERS

A report of the Lead Officer to the Committee was submitted on an overview of the arrangements for the Health Care Commission (HCC) 2007/2008 Annual Health Check of National Health Service (NHS) Trusts and the role that the Health and Adult Social Care (HASC) Members could play in the process. The report also provided highlights of each Trust's Annual Health Check Declaration against compliance of the Commission's standards as selected by this Committee and comments were invited in order to formulate, in part, the HASC's commentaries on the performance of each trust to be submitted to the HCC in April.

Ms Green and Mr Chapman presented the report attached at Appendix 1 and also circulated response times for the West Midlands Ambulance Services NHS Trust. A question and answer session then followed and in response to a particular question about cleanliness and the prevention of infections spreading, Ms Green reported that equipment was regularly changed, stretchers were cleaned after every use and that linen was also regularly washed. With regard to the Patient Transport Service and patients travelling together she reported that the vehicle was cleaned on a daily basis. Also, to try to prevent transmission of infections, when calls were taken, particular information was requested about the patient to ascertain the vulnerability of the patient and, if a patient was found to be infectious or susceptible to infections, arrangements would be made to ensure that the patient did not travel with anyone else. However, she acknowledged that some patients could still slip through where background information had not been provided. The Acting Lead Officer to the Committee suggested that a template of standard questions should be used to ensure that appropriate questions were asked each time to avoid information being missed. Ms Green undertook to pursue the matter.

Ms Close then presented the report attached at Appendix 2 on behalf of the Dudley Group of Hospitals and in doing so she particularly referred to existing and new targets and explained that the Trust were on target to meet all of the targets with the exception of MRSA bacteraemia. The Trust had been set a very low target of 12 for the year but that there had been 19 cases. However, she explained that of the 19 cases, 10 were classed as 'pre-48 hour' cases, in that they were admitted to the Trust with the infection.

Arising from the presentation a Member queried the process when admitting patients and asked if all patients were swabbed and checked or whether it was only those suspected of having MRSA. In responding, Ms Close advised that if admissions were planned all patients were screened and if a patient was found to have MRSA the patient would be treated accordingly and then screened again following treatment. However, if the patient was an emergency admission, high-risk patients would be screened and if found to have the infection they would be treated in isolation.

In responding to further questions Ms Close reported that as part of Patient Focus, patients were involved and information in the form of newsletters was sent out to keep people informed. Members were also invited around hospitals and a question and answer session was also arranged. There were various other meetings that were open to the public where issues could be raised.

Ms Sharpe then presented the report as attached at Appendix 3. She referred to Safety Standard C4c, which had been reflected as 'not met' but assured Members that it posed very little risk.

RESOLVED

- (1) That the information contained in the report, and Appendices attached to the report, submitted on an overview of the arrangements for the Health Care Commission (HCC) 2007/2008 Annual Health Check of National Health Service (NHS) Trusts, be noted.
- (2) That the Scrutiny Officer, on behalf of the Committee, be requested to prepare commentaries on each Trust to include concerns as raised above by Members, in particular with regard to infectious diseases.

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#### DUDLEY'S ALCOHOL STRATEGY AND INITIATIVES AIMED AT REDUCING ALCOHOL MISUSE IN DUDLEY

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A report of the Chief Executive was submitted on delivery against the current alcohol strategy to highlight initiatives that aimed to reduce alcohol misuse and on the development of the new Alcohol Strategy.

Arising from the presentation of the report a Member referred to performance and the target in respect of reducing public perception of alcohol misuse and indicated that this should be reversed and efforts made to increase public perception. He also referred to domestic abuse, including abuse against men, and queried what efforts were made to inform people where they could get help and how they could be protected. The Chairman concurred with the comments made about the target to reduce public perception and indicated that further work should be done to alert people of the problems that existed with alcohol abuse and that it also led to other problems such as anti-social and criminal behaviour. Comments were also made about restricting the number of off-licences being opened. In responding the DAAT Manager explained about the various processes including the work of the Domestic Abuse Co-ordinator. With regard to the target in reducing public perception the Assistant Director (Learning Disability and Mental Health) acknowledged that the wording was incorrect but indicated that the target aimed to reduce public complaints about alcohol. He also explained about an action in respect of improving public awareness of the harm caused by alcohol misuse to individual, families and communities. The DAAT Manager further commented that work was underway to help tackle the problem and that an advert on drugs and alcohol problems would be placed in the summer edition of Dudley Together. Funding had also been allocated from the Neighbourhood Renewal Fund with a view to training the owners of off licences on the health implications and to prevent them from selling to the under-aged.

RESOLVED

- (1) That the information contained in the report, and Appendices attached to the report, submitted on implementing the 2006 Alcohol Strategy and the work being undertaken on developing a new strategy, be noted.
- (2) That a further report on the Alcohol Strategy, together with an Action Plan for implementation, be submitted to a future meeting of the Committee.

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ANNUAL REPORT OF THE ADULT PROTECTION COMMITTEE

A report of the Director of Adult, Community and Housing Services was submitted on the Annual Report of the Adult Protection Committee.

Arising from the presentation of the report a Member referred to staff training and queried whether Members would be informed on relevant contact points regarding referrals, issues or concerns. It was also considered that a training session should be arranged for Members to enable them to respond to queries from the public and to also assist them whilst conducting social services visits.

RESOLVED

That the information contained in the report, and Appendices to the report, submitted on the Annual Report of the Adult Protection Committee, be noted.

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RESETTLEMENT OF RIDGE HILL HOSPITAL

A report of the Director of Adult, Community and Housing Services was submitted on the welfare of residents resettled from Ridge Hill Hospital.

RESOLVED

That the information contained in the report now submitted, on the welfare of residents resettled from Ridge Hill Hospital, be noted and that a further progress report be submitted to the Committee in twelve months' time.

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UPDATE ON THE COMMITTEE'S STROKE REVIEW

It was noted that, following a verbal report given, a report on the Stroke Review had been drafted following feedback and comments that had been received. There were a number of recommendations and a report would be submitted to a future meeting of the Committee.

RESOLVED

That the verbal report be noted and that a report on the Stroke Review be submitted to a future meeting of the Committee.

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CHAIRMAN'S ANNOUNCEMENTS

The Chairman informed the meeting that this was the last meeting that Councillor Jackson would attend as a Member and thanked him for his support and wished him success for the future.

As this was also the last schedule meeting of the Committee for the 2007/08 Municipal Year the Chairman thanked all Members of the Committee for their support and contributions throughout the year.

The meeting ended at 8:15 pm

CHAIRMAN