

Medway Council
Meeting of Health and Adult Social Care Overview and
Scrutiny Committee

Tuesday, 9 April 2013

6.35pm to 10.05pm

Record of the meeting

Subject to approval as an accurate record at the next meeting of this committee

Present: Councillors: Avey (Chairman), Christine Godwin, Griffin, Pat Gulvin, Igwe, Mackness, Maisey, Purdy (Vice-Chairman), Rodberg and Watson

Co-opted members without voting rights

Christine Baker (Medway Pensioners Forum)

Substitutes: Councillors:
Bowler (Substitute for Councillor Murray)
Gilry (Substitute for Councillor Shaw)

In Attendance: Dr Alison Barnett, Director of Public Health
Tracy Bishop, Commissioning Manager, Planned Care, NHS Medway CCG
Alison Burchell, Chief Operating Officer, NHS Medway Commissioning Group
Rob Cadman, Political Assistant, Conservative Group
Councillor Pat Cooper
Barbara Graham, Legal Advisor
Dr Peter Green, Chief Clinical Officer, NHS Medway Clinical Commissioning Group
Rosie Gunstone, Democratic Services Officer
Julie Keith, Head of Democratic Services
Preeya Madhoo, Research and Review Team Manager
Councillor Vince Maple, Leader of the Labour Group
Barbara Peacock, Director of Children and Adults Services
David Quirke-Thornton, Assistant Director, Adult Social Care
Councillor David Royle

981 Record of meeting

The record of the meeting held on 29 January 2013 was agreed and signed by the Chairman.

982 Apologies for absence

Apologies for absence were received from Councillors Kearney, Murray and Shaw.

983 Urgent matters by reason of special circumstances

The Chairman announced that agenda item 10a Local Welfare Provision in Medway would be considered as an urgent item at the meeting to enable the Committee opportunity to comment on the specification for the procurement of an organisation to undertake delivery of the Local Welfare Provision in Medway.

He also referred to the fact that the LINK was no longer in existence and on behalf of the Committee wished to record the Committee's thanks to Shirley Griffiths for her contribution to the Committee.

984 Declarations of disclosable pecuniary interests

There were none.

985 Report of the Mid-Staffordshire NHS Foundation Trust Inquiry: Implications for Medway Council

Discussion:

The Director of Public Health gave a brief introduction to the report setting out the implications of the Francis Report into the serious failings at Mid Staffordshire NHS Foundation Trust for Medway Council.

She stated that section 4 of the report set out the specific recommendations aimed at Local Authorities as well as more general findings applicable to any organisation whose actions can impact on the quality and safety of services provided to the public.

Initially pointing out where some of the failings had occurred, she set out the initial measures being put in place to address these issues including a scrutiny development programme to further develop scrutiny in Medway and a Kent and Medway Quality Surveillance Group, on which Medway Council was represented, a group comprising NHS, Local Authority, Care Quality Commission and Monitor. This group had already met twice to share information on concerns relating to the quality of services. Emphasis was placed on the importance of listening and reacting effectively to the views of service users and their families.

Responding to a question, she stated that the contract to Healthwatch had been given to a consortium comprising the Sunlight Development Centre, the Metro Centre, Medway Ethnic Minority Forum and the Citizen's Advice Bureau. Following a request she undertook to share with the Committee further details around the tendering process.

The Committee, following further questions, put the following general views forward:

- Openness in reporting and sharing of clear information with Members was emphasised as was the duty of candour
- An early redevelopment of protocols around consultation on reconfiguration and ways of communicating with partners was important
- The Francis Inquiry was a 'wake-up call' for all organisations involved in care and it was hoped that all the new organisations being developed would remember to put the patient first
- A request was made for a very simple organisation chart illustrating the new system following reform of the NHS explaining briefly what each new organisation was responsible for

The Director of Public Health, responding to a further query, stated that the merger between Medway NHS Foundation Trust and Darent Valley NHS Trust had been 'paused' while NHS England undertake a review at Medway Maritime Hospital due to concern about their mortality statistics. A report on the review would be ready in July but due to the pause further work would then be needed before the merger would go ahead.

Decision:

- (a) The report was noted and the Committee agreed to receive an update on action proposed by the Council in response to the findings and recommendations of the Francis Inquiry;
- (b) It was agreed that further information be provided in relation to the tendering process for Healthwatch;
- (c) A simple structure chart of the new system following NHS reform, showing in brief the role of each organisation and group, including the Quality Surveillance Group, and who is represented on the groups was requested.

986 NHS powerpoint presentation - Mid Staffordshire Inquiry

Discussion:

The Director of Nursing, Kent and Medway Area Team, NHS England and the Chief Nurse from NHS Medway Clinical Commissioning Group gave a powerpoint presentation setting out the broad outlines of the initial response from the NHS to the Francis Inquiry. It was agreed that a copy of the presentation would be shared with the Committee.

The Director of Nursing then responded to Members' questions and comments, which included:

- Members felt that compassion could not be taught in the general training of nursing staff. It was agreed that there needs to be careful scrutiny of nurses during the training process to ensure that they have the correct level of skills
- There was a degree of cynicism around the ambitious targets being set by the NHS as to whether in reality the service improvements could be achieved
- It was emphasised that in order to allow sufficient opportunity for showing compassion the right staffing levels would need to be in place
- The point was made that for the Patient Advice and Liaison Service (PALS) and the complaints system to be effective it needed to be independent from the NHS
- An assurance was given that the GPs who are now commissioning services in the NHS are much closer to the needs of patients and will be witnessing first-hand the outcome of their commissioning. Hence it should be more of an efficient service.
- It was agreed that 'soft' intelligence was important and the Quality Surveillance Group locally would be the place where concerns would be shared and acted upon
- From a Member's perspective it was agreed that it was important for them to understand the NHS system better in order that concerned constituents could be directed to the right place

In relation to the meetings of the Quality Surveillance Group the Director of Children and Adults requested that adequate notice is given of the meetings of that group to enable each partner to attend.

The Director of Nursing, Kent and Medway Area Team, NHS England and the Chief Nurse from NHS Medway Clinical Commissioning Group were thanked for their helpful and informative presentation. It was agreed that the Committee should consider regular updates on action flowing from the Francis Inquiry regularly.

Decision:

It was agreed that the next update on this matter should be programmed for the October 2013 meeting

987 Health scrutiny - changes to legislation

Discussion:

The Head of Democratic Services introduced the report on health scrutiny changes to legislation and explained that the health scrutiny regulations had now been published.

Members reflected on the recommendations and some Members expressed concern about the proposed requirement to notify full Council of any decision to make a referral to the Secretary of State on a contested service reconfiguration before a referral is made.

A query was raised about the possibility of a conflict of interest for those officers who have a voting role on the Health and Wellbeing Board and who also attend Overview and Scrutiny Committees dealing with health scrutiny. It was agreed that this should be considered further and advice provided.

Decision:

- (a) It was agreed to recommend the Council at its meeting on 25 April 2013 to:
- (i) continue to discharge the function of health scrutiny via the Health and Adult Social Care and Children and Young People Overview and Scrutiny Committees;
 - (ii) delegate the right of referral of a contested service reconfiguration to the Secretary of State to the relevant Overview and Scrutiny Committee where the detailed work on any proposed service reconfiguration will take place; and
 - (iii) agree that the membership of the Health and Adult Social Care Overview and Scrutiny Committee and the Children and Young People Overview and Scrutiny Committee should each include a representative of Healthwatch to ensure that the views of the public and people who use services continue to be represented at Overview and Scrutiny Committee meetings (noting that the Healthwatch representative should not also be a member of the Health and Wellbeing Board).
- (b) To request advice on the position of officers who are Members of the Health and Wellbeing Board and who also attend the Health and Adult Social Care and Children and Young People Overview and Scrutiny Committees with regard to potential for conflicts of interest.

988 2012/2013 Quarter 3 Performance Monitoring

Discussion:

The Assistant Director, Adult Social Care, gave a brief introduction to the report and highlighted areas of the Council's performance in particular referring to additional measures being put in place to boost performance in relation to carers' assessments.

Responding to a question about the number of carers in Medway he stated that it was only carers for those eligible for social care that could be counted in this particular measure. However, he undertook to provide actual numbers from 2013/2014, which would include those who had declined to have an assessment.

In relation to the measure MHSW1 Number of people receiving support from Mental Health Social Work team he explained that this is not a target, and he expected the figure to fluctuate between 350-500 which was average for similar

local authorities. He reminded Members that historically there had been a discrepancy, caused by a system reporting error, between the numbers of people recorded as receiving this support, which was why the figures appeared in this report.

Decision:

The third quarter performance against the Key Measures of Success used to monitor progress against the Council Plan 2012/2013 was noted.

989 Phlebotomy service changes

Discussion:

The Chief Operating Officer, NHS Medway Clinical Commissioning Group, introduced the completed questionnaire setting out proposed changes to the phlebotomy service. She explained that the changes had been brought about by a number of reviews of the service and notice given by Medway NHS Foundation Trust that the trust no longer wished to provide a GP referred phlebotomy service.

It was also noted that the overall number of blood tests was increasing but that this was in the community and primary care settings and had decreased over the past year at Medway NHS Foundation Trust.

Extensive consultation had been undertaken with service users and was ongoing to develop a specification, which meets the needs of Medway residents. A move to have earlier opening times for the phlebotomy service at the hospital had proved very popular and it was intended to move forward with a service, which still met that need and provided an early morning service.

In response to a question, she stated that the actual locations were not yet known. The Clinical Accountable Officer from Medway Clinical Commissioning Group explained that it was not possible to insist on GP practices undertaking phlebotomy but negotiations would be undertaken with GPs once the specification had been drawn up.

In relation to the numbers involved in using the phlebotomy service at Medway Maritime Hospital she stated that of the approximate forecast of 157,948 blood tests in Medway for 2012/2013, around 29% (45,912) were undertaken at the hospital, the rest were undertaken in the community.

Members were keen to comment on possible locations once these are known and the specification is drawn up. They had particular concerns about certain areas of Medway, which were more remote and wanted to reassure themselves that the new service was accessible to the public and not in any way disadvantageous.

Decision:

- (a) It was agreed that the changes do not constitute a substantial variation or service development;
- (b) It was requested that a further report should be programmed for the next meeting of the Committee, setting out the specification of the service to be procured and suggested opening times, for further comment.

990 Relocation of the physiotherapy service

In the absence of a presenter for this item it was deferred to the next meeting of the Committee.

991 Local Welfare Provision in Medway

Discussion:

The Assistant Director, Adult Social Care, introduced the report and explained the need for an urgent report in order to allow the Committee an opportunity to comment on the specification for the Local Welfare Provision Scheme, before procurement.

Details were given of the changes brought about by the Welfare Reform Act 2012, which abolished the Discretionary Social Fund scheme previously administered, by the Department of Works and Pensions (DWP) with effect from 1 April 2013. Responsibility for developing Local Welfare Provision (LWP) Schemes had transferred to local authorities. He explained the interim arrangements put in place to deal with the administration and delivery of the service until such time as the procurement exercise has been undertaken.

Further to a question he explained the reason for using Caring Hands in the Community as the interim provider was in view of the fact the organisation was well established, covered a wide range of similar support already and had established premises. Following a subsequent question he clarified that it was possible for potential recipients of support to have a confidential discussion with an experienced male or female Advisor to ensure that all essential products were made available.

Reference was made to a scheme in Kent where the public can donate their unwanted good quality furniture, which can then be recycled to meet the needs of people who are homeless.

The Assistant Director, Adult Social Care undertook to keep the Committee updated on the uptake of the scheme.

Decision:

The arrangements being put in place for local delivery of the LWP scheme in Medway were noted.

992 Work Programme

Discussion:

The Democratic Services Officer introduced the work programme and explained that at a recent meeting of Business Support Overview and Scrutiny Committee two further items of business were put forward as items to be added to this Committee's work programme. These were

- a Member briefing on obesity which would also be extended to Members of Children and Young People Overview and Scrutiny Committee
- a possible report or briefing note on prescribing medication – this should cover whether adequate information is provided to patients and whether over-prescribing of antipsychotic medication and antibiotics were an issue in Medway

She also referred to an update on the position with the Joint HOSC with Kent County Council on the topic of acute adult mental health inpatient beds.

A question was asked about who would be responsible for bringing back the report on patient transport and the Clinical Accountable Officer, NHS Medway CCG undertook to look into this. A suggestion was also made that a date should be allocated to the dementia update report and this should be extended to include a wider update on services for the elderly in Medway.

Discussion then took place around the potential for putting an item on the work programme relating to children's health as the view was expressed that children's health was not receiving adequate coverage. The Democratic Services Officer explained that the topic of children's health was within the terms of reference for Children and Young People Overview and Scrutiny Committee and therefore not a topic for this Committee. She also confirmed that any change to the terms of reference of any Scrutiny Committee would need to be determined by the Council rather than this Committee. It was agreed that this matter should be discussed further outside of the meeting.

Decision:

- (a) The situation in relation to the NHS Kent and Medway JHOSC on the mental health inpatient services review was noted;
- (b) The Clinical Accountable Officer, NHS Medway CCG undertook to advise, following the meeting, who would bring back the report on patient transport to the Committee;
- (c) It was agreed that a date should be set for the dementia update and the report should be extended to include information about the services for the elderly in Medway;
- (d) A Member briefing on obesity should be organised for the Committee and an invitation be extended to Children and Young People Overview and Scrutiny Committee to the briefing;

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- (e) It was agreed that further discussions would take place between relevant Members and Officers about the scrutiny of children's health.

Chairman

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