

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

20 AUGUST 2013

WORK PROGRAMME

Report from: Neil Davies, Chief Executive

Author: Rosie Gunstone, Democratic Services Officer

Summary

This report advises Members of the current work programme for discussion in the light of latest priorities, issues and circumstances. This report gives Members the opportunity to shape and direct the Committee's activities.

1. Budget and Policy Framework

- 1.1 Under Chapter 4 – Rules, paragraph 22.1 (v) General terms of reference, each overview and scrutiny committee has the responsibility for setting its own work programme.

2. Background

- 2.1 Appendix 1 to this report sets out the existing work programme for the Committee.

3. Agenda planning meeting

- 3.1 Members will be aware that Overview and Scrutiny Committees hold agenda planning meetings on a regular basis. These give officers guidance on information Members wish them to provide when scrutinising an issue.
- 3.2. The agenda-planning meeting took place on 24 July 2013.
- 3.3. The following suggestions were made at the meeting:

It was suggested that the report back on Local Welfare Provision in Medway and the Physiotherapy Update will be by briefing note rather than report.

3.4. The Democratic Services Officer reported that, following discussions with South East Coast Ambulance Trust it was suggested that the update on NHS 111 should take place at the December 2013 meeting.

3.5. The Director of Commercial Services has also requested that consideration is given to the topic of public access defibrillators at the same meeting.

4. In-depth task group on health inequalities

4.1. Once the next task group on mental health has concluded it will be necessary to agree the membership of the subsequent in-depth review on health inequalities.

4.2. It is proposed that the Members to the task group should be appointed on a 3:1:1 basis.

5. Report on visit to SECAMB NHS 111 at Dorking

5.1. As part of a South East Coast network of health scrutiny Chairman and their officers a visit took place on 1 July 2013 to NHS 111 at Dorking hosted by the Chief Executive of South East Coast Ambulance Trust and the Medical Director of Harmoni attended by the Chairman of this Committee and Democratic Services Officer.

5.2. The group were given access to the call centre and an opportunity to talk to staff who were working there. It was stated that the Red 1 calls (cardiac arrest) there were 12-16 calls a day, for Red 2 calls (other potential life-threatening conditions) the centre was slightly under target, there had been issues over weekend cover to cope with the demand. In response to queries raised the Chief Executive stated that South East Coast Ambulance Trust (SECAMB) hold the contract with the commissioners for the NHS 111 service in the South East but sub-contract to Harmoni which is part of Care UK. For that area there are two call centres, one in Dorking and one in Ashford and it was stated that the sites covered for each other, working closely together.

5.3. Since the visit Members may have seen the negative publicity surrounding NHS 111 and in particular comments made by staff at Dorking. The Chairman of the Committee has written to the Chief Executive of South East Coast Ambulance Trust to raise concern with him. The response is attached as appendix 2 to this report.

5.4. Appendix 3 sets out a press statement from SECAMB in relation to NHS 111.

6. Cabinet Forward Plan

- 6.1. The following items are listed on the Cabinet forward plan within the remit of this Committee which have not already been programmed for pre-decision scrutiny:

Item	Date
Gateway 1 Procurement Commencement Community Meals	3 September 2013
Gateway 1 Procurement Commencement: Volunteer Centre Services & Voluntary Sector Support Service	3 September 2013
Gateway 3 Contract Award: Community meals	26 November 2013

7. Mental health task group

- 7.1. In view of the fact that there is an item on this agenda to discuss the future options for the adult mental health social work team it is now suggested that the mental health task group will report to 8 October 2013 meeting and subsequent Cabinet meeting to propose recommendations for the mental health strategy which will follow the implementation of the decision in relation to the adult mental health social work team.

8. Financial and legal implications

- 8.1. There are no financial or legal implications arising directly from this report.

9. Recommendations

- 9.1. Members are asked to consider whether to amend the existing work programme (attached as Appendix 1 to this report);
- 9.2. Members are asked to agree to receive information on Local Welfare Provision and an update on Physiotherapy by means of a briefing note;
- 9.3. That an update on NHS 111 and public access defibrillators should be programmed for the 18 December 2013 meeting.
- 9.4. Members are asked to confirm the setting up of the task group on health inequalities on the basis of 3:1:1 with names to be agreed through group whips if there are no nominations made at the meeting.

- 9.5. Members are asked to note that the mental health task group will now report to 8 October 2013 meeting as set out in paragraph 7 above.

Lead officer contact

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Background papers - none

APPENDIX 1

Work Programme
Health and Adult Social Care Overview and Scrutiny Committee

Item	Work type	Responsible officer	Objectives	Timescale
Quarter 1 performance report	Performance reviews	Anthony Lewis	To consider and comment on Quarter 1 performance	20 August 2013
Review into quality of care and treatment at Medway NHS Foundation Trust	Community Issue	tba	To update the Committee on the findings of the Keogh review at Medway NHS Foundation Trust	20 August 2013
Accident and Emergency pressures	Community issue	Mark Devlin	To enable the Committee to understand the increased demand in A&E and the impact of it	20 August 2013
Re-commissioning of drug and alcohol services	Community issue	Dr Barnett	Consultation on changes to the drug and alcohol services	20 August 2013
Physiotherapy update	Community issue	Christina Caller	To inform the Committee of the outcome of the consultation on changes to the physiotherapy service	20 August 2013 (to be dealt with as a briefing note)
Councillor Brake to be held to account	Holding to account			20 August 2013
Update on the Francis Inquiry (Mid Staffs) – NHS	Community issue	Sally Alum/ Geoff Wheat	To consider an update on the Francis Inquiry (Mid Staffs) from the NHS	8 October 2013
In-depth task group on mental health	Policy development	Teri Reynolds	Feedback from the in-depth task group on mental health	8 October 2013
NHS 111 update and report on public access defibrillators	Community issue	Geraint Davies/Helen Belcher	To receive an update on the implementation of the NHS 111 service and to be informed about public access defibrillators	18 December 2013
Quarter 2 performance report	Performance reviews	Anthony Lewis	To consider and comment on Quarter 2 performance	18 December 2013
Patient transport	Holding to account	Helen Medlock (KMCS)	To scrutinise the robustness of the new patient transport provider	28 January 2014
Quarter 3 performance report	Performance reviews	Anthony Lewis	To consider and comment on Quarter 3 performance	8 April 2014
Annual Public Health report		Dr Barnett		
Local Welfare Provision in Medway	Community issue	David Quirke-Thornton	Update on the Local Welfare Provision in Medway	dealt with as a briefing note
Health and Wellbeing Board	Performance reviews	Dr Barnett/Barbara Peacock	To receive an update on the progress of the Health and Wellbeing Board	To be agreed
Update on the Francis Inquiry (Mid Staffs) – Medway Council	Community issue	Dr Barnett	To consider an update on the Francis Inquiry (Mid Staffs) from Medway Council	To be agreed

Item	Work type	Responsible officer	Objectives	Timescale
Support for carers and quality of care/value for money from service providers of social care across Medway	Community issue	David Quirke-Thornton	A report to set out how the funding for carers is spent and quality of care across Medway	To be agreed
Adult social care mental health	Pre-decision scrutiny	David Quirke-Thornton	To receive a report on further options for the delivery of mental health care management and services	To be advised for pre-decision scrutiny
Annual report on the commissioning of drug treatment programmes	Service information	Dr Alison Barnett	To consider annually the commissioning of drug treatment progress (ref to at Council 26 July 2012)	To be agreed around July 2013
Changes in dementia support services and services for the elderly	Service information	David Quirke-Thornton	To consider an update report on the changes to dementia support services	To be agreed

Note: Six monthly updates were requested by means of briefing notes on the action plans from the Mortality Working Group – starting July 2013.

Dates of future meetings:

2013: 25 June, 20 August, 8 October, 18 December

2014: 28 January, 8 April

Work completed in 2013/2014:

9 April 2013

- Kent and Medway annual adult safeguarding report – Briefing Note
- Balmoral Gardens – relocation of GP surgery – Briefing Note March 2013
- Update on Health Care Networks – Cancer, Cardiology and Urology – Briefing Note
- Quarter 3 performance report
- Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry: Implications for Medway Council (Francis report)
- NHS Powerpoint presentation – Mid Staffs FT Public Enquiry
- Health scrutiny – changes to legislation
- Phlebotomy changes

25 June 2013

- End of year performance report 2012/2013
- Phlebotomy changes
- Physiotherapy service changes
- Annual report on complaints and compliments
- NHS 111



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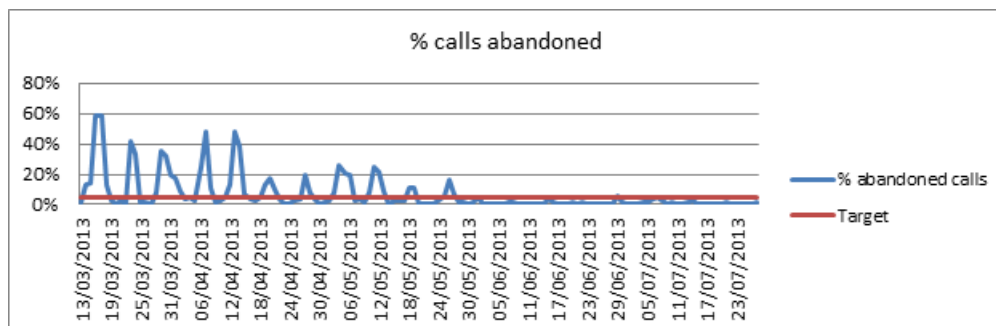
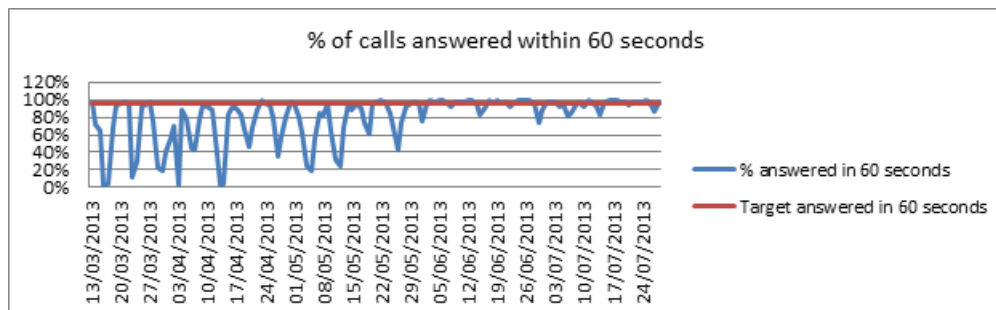
To: HOSC Chairs and Scrutiny Officers

2 August 2013

Dear Colleagues,

In light of the recent dispatches programme and some queries we have received we wanted to write to provide you with the assurance you may need that your local NHS 111 service is a clinically safe service that is being delivered in line with the rest of the services nationally. Hardcash productions made a number of allegations prior to the airing of the dispatches programme on Monday evening and we would like to provide you with the response that we gave to them which is attached with this letter.

Additionally, we would like to draw your attention to our on-going improvement with regards to the service delivery. The figure below highlights the improvements that we have made in answering calls within 60 seconds and the reductions we have seen in call abandonment rates.



As you know we were served a performance notice in April 2013 and due to our significant performance improvements it has been agreed that we can now return the service to business as usual processes. We will continue to work with commissioners and within the service in order to improve the service further in line with the rest of the national services.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Geraint Davies', with a stylized, cursive script.

Geraint Davies
Director of Commercial Services

Encs



Please attribute to a South East Coast Ambulance Service NHS Foundation Trust (SECamb) spokesperson:

“NHS 111 across our region currently deals with approximately 15,000 calls each week and we are confident the service we are providing is clinically safe and meets our contractual performance requirements. This confidence in our service comes from on-day clinical supervision, audit (which is carried out as part of the NHS Pathways licensing requirements), as well as a comprehensive review of any concerns raised and the identification of learning points.

“The NHS Pathways triage system that NHS 111 uses is the same system used to assess patients in our 999 control rooms and has been specifically designed to focus on patient safety. The Pathways system has been approved by the NHS with advice and guidance from the Medical Royal Colleges and the system is subjected to rigorous and continuous audit by the doctors on the NHS Pathways team.

“NHS 111 is a new service that was introduced in March 2013 in our region. As with any new system, there were some issues identified in the early stages, the principal one being that demand was very much higher than expected at weekends. Nevertheless patient safety is our top priority in all aspects of our service and we have been working hard to tackle these issues. We have seen significant improvements since the launch of the service and we do not recognise the issues raised as typical of the service that thousands of people who use NHS 111 across our region are now receiving.

“However, we do take any concerns raised extremely seriously. As the lead contractor for the service in our region we will work in partnership with our colleagues at Harmoni to identify if further improvements can be made and will continue to ensure patients receive the service they expect and deserve.

“It was always anticipated that a proportion of calls would, correctly, be passed through the 111 system to 999 – as they did previously from out-of-hours providers and from NHS Direct. As the service has developed this proportion has reduced, supported by immediate real-time feedback from ambulance staff which has proved extremely useful. Nationally our region has been among those with the lowest referral rates to 999, reflecting the 999 experience that we bring, and we are averaging below the national standard of 10% of calls being referred to 999.

“It is inevitable that there are some patients that can be assessed more accurately by a face-to-face assessment and who don’t subsequently need transferring to hospital but who instead can be treated at the scene and/or referred to another NHS service. This is appropriate and to be expected, as we also see this in 999 where we transport approximately 50% of the patients we attend to an A&E department.”

With regards to the concerns raised by Mr Anthony:

“We received a call at 6pm on a Bank Holiday Monday that Mr Anthony would like a district nurse to attend as soon as possible. Within minutes of that call being received, we acted appropriately to

pass the details through to the district nurse team. We received two follow up calls that evening and we also passed them through to the district nurse team immediately. We would once again like to pass on our condolences to Mr Anthony at this difficult time.”

23rd July 2013