

# HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

17 MARCH 2016

## WORK PROGRAMME

Report from: Perry Holmes, Chief Legal Officer

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### 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. A summary of a meeting held on 4 March 2016 regarding winter pressures across the health and social care system is also detailed.

### 1. Budget and Policy Framework

- 1.1 Under Chapter 4 – Rules, Part 4 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. An agenda planning meeting was held on 25 February 2016 at which Members agreed the following:
- That the Adult Social Care Strategy should be programmed for 21 June 2016 meeting
  - An all Member briefing on dentistry (this was originally put forward by Councillor Purdy as a possible Member item)
  - A briefing note would be circulated to the Committee in relation to acute inpatient mental health beds following the publication of a report to the KCC Health Overview and Scrutiny Committee which advised that Clinical Commissioning Groups and Kent and Medway NHS and Social Care Partnership Trust (KMPT) were involved in remodelling the demand

on beds and that KMPT had submitted a proposal for the addition of 16 beds to the current stock

- A future report would be brought to the Committee in relation to the proposed closure of St Bartholomew's Hospital in Rochester
- It was agreed that concerns, raised by Councillor Freshwater, about accommodation and retention of nursing staff at the hospital would be raised during the discussion on the item on the hospital at this meeting
- It was agreed that it would be determined, following the meeting, whether to accept the invitation from the Care Quality Commission, to comment on the inspection of South East Coast Ambulance Trust (SECAMb)
- It was agreed that a link would be sent to the Committee of the report to the Health and Wellbeing Board on the Sustainability Transformation Plan for information

#### **4 Forward Plan**

- 4.1. The latest Forward Plan of forthcoming Cabinet decisions was published on 7 March 2016:

<http://democracy.medway.gov.uk/mgListPlanItems.aspx?PlanId=244&RP=115>

- 4.2. The following items listed on the forward plan relate to the terms of reference of this Committee. The Committee is asked to identify any items it may wish to consider as pre-decision scrutiny (where dates permit) in addition to those listed in Appendix 1.

<b>Cabinet date</b>	<b>Title</b>	<b>Comment</b>
5 April 2016	Developing and Empowering Resources in Communities	
5 April 2016	Gateway 4 Post Project Completion Review: Infrastructure Support Services	
10 May 2016	Better Care Fund – section 75 agreement	
12 July 2016	Adult Social Care Strategy	See 3.1 above – planned for June meeting

#### **5. Meeting with the Emergency Care Improvement Team on 4 March 2016**

- 5.1. At the last meeting of the Committee it was noted that the Chairman, Vice-Chairman and spokespersons of the Committee, with a representative from adult social care, would be meeting with the Emergency Care Improvement Team from Medway Maritime Hospital

- 5.2. A meeting took place at Gun Wharf on 4 March 2016 with:

Nye Harries, Head of Improvement (Cluster 3) NHS Emergency Care Improvement Programme (ECIP)

The Chairman, Vice-Chairman and UKIP spokesperson  
The Deputy Director, Children and Adults  
Democratic Services Officer  
Interim Deputy Chief Operating Officer,  
NHS Medway Clinical Commissioning Group (CCG)

to discuss how the health and social care system was coping with winter pressures and consider how to more effectively scrutinise the hospital trust.

- 5.3. The Head of Improvement, ECIP explained that the programme, supported by the Department of Health, NHS Trust Development Agency, NHS England and Monitor, were working with the 28 most challenged health and social care systems across the country. Part of the programme was to ensure improvements to emergency flow could be embedded and the improvements needed were cross-system improvements, across health, social care and the independent and voluntary sector, not just the NHS.
- 5.4. As far as patient safety were concerned Members were informed that there was strong evidence to prove that delays causing people to be held in a hospital environment were harmful, both in increased risk of infection, loss of mobility and the fact that for the frail elderly a 10 day stay in hospital equated to 10 years of muscle ageing.
- 5.5. Members involved in the meeting reached the view that it would be helpful to concentrate scrutiny on the whole system in respect of the three workstreams on which the ECIP programme is focussed namely:
- Admission avoidance
  - Patient flow
  - Discharge facilitation

ensuring that as wide as possible coverage of evidence is gained in order that there could be meaningful challenge across the health and social care system.

Members requested a briefing note on the outcome of the home to assess pilot, giving details of numbers involved, key monitoring data and feedback received.

## **6. In depth task group**

- 6.1. The Task Group on Housing, Demand, Supply and Affordability will be reporting its findings to a meeting of the Cabinet in May 2016. The next Task Group will be on dementia and will specifically address the question:
- How far has Medway gone in becoming a dementia friendly community?
- 6.2. In line with established practice the Committee is asked to agree that the membership of the Task Group should be five Councillors (in the ratio 3 x Conservative: 1 x Labour and 1 x UKIP). If this is agreed Group Whips will be approached for the nomination of Members of this Committee to serve on the Group. It is envisaged that an initial scoping meeting to agree key lines of enquiry will be held in late May/early June.

## **7. Financial and Legal Implications**

7.1. There are no specific financial or legal implications arising from this report.

## **8. Recommendations**

8.1. Members are asked to consider whether any changes need to be made to the work programme attached at Appendix 1 to the report noting the additions referred to in paragraph 3.2 above as follows:

- the Adult Social Care Strategy should be programmed for 21 June 2016 meeting
- to agree that an all Member briefing on dentistry be set up
- to note that a briefing note would be circulated to the Committee by the Chief Clinical Officer, NHS Medway CCG in relation to acute inpatient mental health beds following the publication of a Kent Health Scrutiny paper on 25 February as set out in 3.2
- to note that a future report would be brought to the Committee in relation to the proposed closure of St Bartholomew's Hospital in Rochester

8.2. Members are asked to determine whether or not to comment on the Care Quality Commission inspection of South East Coast Ambulance Trust;

8.3. Members are asked to note the outcome from the meeting with the Leader of the Emergency Care Improvement Programme in relation to potential areas of future scrutiny, and further report to the Committee as set out in paragraph 5.5 above;

8.4. The Committee is asked to agree that the next Task Group on "how far has Medway gone in becoming a dementia friendly community" should be set up with a membership drawn from this Committee in the ratio of 3:1:1 as set out in paragraph 6.2 of this report

### **Lead officer contact**

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### **Appendices:**

Appendix 1 – work programme

### **Background papers:**

none