Health and Wellbeing Scrutiny Committee - 11/01/17

HEALTH AND WELLBEING SCRUTINY COMMITTEE

Wednesday, 11th January, 2017 Time of Commencement: 7.00 pm

Present:- Councillor Dave Jones – in the Chair

Councillors Bailey, Bloor, Gardner, L Hailstones,

Holland, Loades, Walklate and Wright

Officers Jayne Briscoe - Scrutiny Officer

Also in Marcus Warnes (Accountable Officer

Attendance CCG)

Anna Collins (Head of Communications

and Engagement)

Sue Baknak (Engagement Manager

Healthwatch)

Councillor Mark Holland (representing

Councillor Northcott)

Apologies Councillor(s) Northcott and Spence

1. **DECLARATIONS OF INTEREST**

Councillor Loades declared an interest as a Staffordshire County Council Cabinet Support Member for Social Care and Wellbeing.

Councillor L. Hailstones declared an interest as a District Nurse employed by SSOTP.

2. MINUTES OF PREVIOUS MEETING

Resolved: That, with the inclusion of apologies from Councillor L

Hailstones the minutes of the meeting held on 18 November

2016 be agreed as a correct record.

3. MINUTES FROM THE HEALTHY STAFFORDSHIRE SELECT COMMITTEE

Resolved: That the minutes of the Health Staffordshire Select Committee held on 2 December 2016 be noted.

4. MY CARE MY WAY- ENGAGEMENT BRIEFING

Anna Collins (Head of Communications and Engagement) and Marcus Warnes (Accountable Officer) from the CCG presented a report concerning My Care, My way, Home First. The presentation set out the current position at the community hospitals in North Staffordshire with some beds temporarily closed to new admissions. a final decision had not been made by the Board and that this would follow the 12 week formal consultation period at the end of February 2017.

The CCG officers set out the engagement principles together with the assurance and governance framework. They reinforced the key messages with regard to the beds

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which had been commissioned to provide sub-acute medical care with the current model not resulting in best use of public money. They reported that feedback had been overwhelming in response to the engagement undertaken during November and this would be used to inform the next stage of the formal consultation process.

Councillor Gardner expressed concerns that alternative provision should be operating safely prior to the removal of the provision at Bradwell. In response, although acknowledging there were challenges around provision for specific cohorts with challenging behaviour, Marcus Warnes was confident that by the end of March 2017 there would be an exit plan for all 64 of the patients who were occupying the commissioned beds. The rest of the services would continue to operate from Bradwell Hospital until the end of March. Continuing Marcus Warnes reported that the difficulties experienced by Stoke on Trent City Council in commissioning sufficient care providers had been helped by additional funding and were now resolved. A total of 173 community beds would be retained to provide for rehabilitation or assessment. He added that no-one was waiting longer than 3 days, when medically fit, to be discharged.

Councillor Holland questioned the outcome from the consultation and how to ensure that the information generated was useful to inform future plans. Anna Collins hoped to achieve a co-production and co-design mechanism by asking questions such as "what services would be appropriate in your area". Each of the community hospital sites were different and so may have different options, the optimum would be to achieve the best service model for each community.

Councillor Hailstones pointed out that patients would be discharged prior to March and felt that decisions had already been made and that the difference between beds and hospital needed to be clearly stated in consultations

Councillor Hailstones was also concerned that all palliative care beds had been commissioned by Stoke on Trent City Council and she strongly argued that local provision should be available within the Newcastle under Lyme area for its residents. Marcus Warnes explained that there was most need for a home based model for end of life care. Councillor Hailstones pointed out that rural areas suffered from a lack of nursing care provision, adding that funding was the not the most difficult issue to solve. Marcus Warnes stated that the CCG payed a premium to the providers AMG and Teesdale to provide this support.

Councillor Loades raised the issue of the difference between medical care and social care at home during consultation

The Chair asked how the ongoing engagement would link into the Sustainability and Transformation Plan (STP) consultation and Marcus Warnes explained that although the consultation process had begun prior to publication of the STP the two were linked.

Agreed: That the presentation be noted.

5. HEALTHWATCH STAFFORDSHIRE SUSTAINABILITY AND TRANSFORMATION PLAN UPDATE

Sue Baknak, Engagement Manager with Healthwatch gave a presentation to members and set out the role of the organisation in acting as an independent voice of local people, championing quality health and social care.

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Sue Baknak went on to explain the 5 year Sustainability and Transformation Plan (STP) and the role of community engagement to gain service user feedback, raise awareness of the key issues affecting local health and social care services and to recommend improvements. Continuing, Sue Baknak introduced 3 documents which helped to support the work of Healthwatch and the STP:-

Together We're Better: Guide to Engagement and Consultation Become an Ambassador Conversation Staffordshire and Stoke on Trent

The Chair referred to the engagement which had been carried out and which had not contained the detail of the STP because it had not been published at that time. The STP would bring about huge change and was full of jargon and he asked what strategy Healthwatch would employ to communicate this complex set of big changes.

In response Sue Baknak stated that the document was a summary of the case for change, it identified work streams that needed to be addressed and the funding gaps. There had been presentations and Healthwatch had facilitated table conversations together with a Q and A session from an informed panel. Healthwatch were also part of the communication group to ensure that the public were informed going forward.

Sue Baknak was asked how bias within reporting from the Ambassadors would be eliminated and she explained that all of the feedback was made via a template, the feedback was structured and was analysed alongside a survey.

Councillor Loades asked whether Healthwatch had been asked to look at the ambulance service and specifically how members of the public could help to alleviate pressure on the A and E department. Sue Baknak commented that the formal consultation was in the early stages and that the ambulance service would be included.

Continuing, Councillor Loades believed that district councils should use their powers to influence and improve public health. For example, the number of fast food outlets could be restricted under planning regulations. Similarly, by helping to ensure that provision for care facilities such as a doctor's surgery were included in the design stages for new housing estates. Licensing powers to restrict alcohol sales could also be brought into play. The Chair added that this area of scrutiny could be included within the work programme of this Committee.

In response to a question from Councillor Gardner Sue Baknak explained that the STP had been signed off by Health England and that it was the responsibility of the STP Programme to set out the timeline. The Healthwatch role was to facilitate engagement, consultation should be transparent about what could be influenced and changed. There was a statutory responsibility to consult but no corresponding responsibility to react.

In conclusion the Chair commented that Staffordshire Health Select Committee would be closely scrutinising the final detail of the STP and that the Select Committee had powers to refer to the Secretary of State.

Agreed: That the presentation be noted.

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6. TRANSFORMING HEALTH AND CARE FOR STAFFORDSHIRE AND STOKE ON TRENT

This item was considered within agenda item 6.

7. DEMENTIA FRIENDLY SWIMMING - PROPOSED VISIT

The Chair reported that prior to a presentation by Amateur Swimming Association a visit had been arranged on 20 January 2017 for the Chair and Vice Chair of this Committee to visit the Everybody Leisure Centre in Crewe to view a session of dementia friendly swimming.

8. PROPOSED SCRUTINY BRIEF

Councillor Gardner submitted a scrutiny brief relating to exercise referrals. The Chair noted that this area of work also fell within the scope of work of the Active and Cohesive Scrutiny Committee and he proposed a joint meeting with the Active and Cohesive Committee as the lead.

Agreed: That the Active and Cohesive Scrutiny Committee be asked to take the lead in a joint meeting with this Committee and to consider this scrutiny brief.

9. **PUBLIC QUESTION TIME**

There were no members of the public present.

10. URGENT BUSINESS

There was no urgent business.

11. DATE OF NEXT MEETING

The date of the joint meeting with the Active and Cohesive would be agreed and members informed as soon as possible. The next scheduled date for Health and Wellbeing Scrutiny Committee was 12 April 2017.

COUNCILLOR DAVE JONES Chair

Meeting concluded at 8.50 pm