# MINUTES OF A MEETING OF THE HEALTH/NHS OVERVIEW AND SCRUTINY COMMITTEE HELD ON 7 APRIL 2010 AT 10AM AT COUNTY HALL, CHELMSFORD

### Membership

**County Councillors:** 

### District Councillors:

\* Councillor N Offen
 \* Councillor M Maddocks
 Vacancy
 - Colchester Borough Council
 - Rochford District Council
 - Tendring District Council

(\* present)

The following officers were present in support throughout the meeting:

Sophie Campion - Committee Officer

David Moses - Head of Member Support & Governance

John Carr of Essex and Southend LINk also participated in the discussion with the agreement of the Chairman.

### 27. Apologies and Substitution Notices

The Committee Officer reported apologies from Councillors E Johnson, S Hillier, R Gooding and C Riley (one of the named substitutes).

The Chairman welcomed Councillor Maddocks from Rochford District Council to his first meeting of the Committee. The Committee was advised that confirmation of the Councillor from Tendring District Council to be co-opted to the Committee was still awaited.

#### 28. Declarations of Interest

The following standing declarations of interest were recorded:

Councillor Graham Butland Personal interest as Chief Executive of the

East Anglia Children's Hospice.

Personal interest due to being in receipt of an

NHS Pension.

Councillor Nigel Offen Personal interest due to being in receipt of an

NHS Pension.

#### 29. Minutes

The minutes of the meeting of the Health Overview and Scrutiny Committee held on 3 March 2010 were approved as a correct record and signed by the Chairman.

### 30. Questions from the Public

The Chairman invited questions from the Public on any matters falling within the remit of the Committee. There were no questions raised.

## 31. Quality Accounts update

The Committee considered report (HOSC/15/10) from Graham Redgwell, Governance Officer, providing an update on Quality Accounts.

David Moses, Head of Member Support and Governance, introduced the documents which had been provided to Members for their information and retention. It was reported that a Quality Accounts stakeholder best practice event has been organised by NHS North East Essex to be held on 12<sup>th</sup> May 2010 at Weston Homes Stadium in Colchester. The programme would be sent out when it had been finalised. There were four spaces available to the Committee for this event. The Governance Officer had indicated his wish to attend on behalf of the Committee if a space was available.

Councillor Knapman commented that he had concerns regarding the point of all this information and that resources should instead be put into addressing various issues. Councillor Offen agreed and indicated his intention to make these views known at the event.

The Committee **Agreed** that the following Members and officers would attend the event:

- Graham Redgwell, Governance Officer
- Councillor N Offen
- Councillor J Knapman
- Councillor G Butland

# 32. Youth Scrutiny Committee Report

The Committee considered the final report of the Youth Scrutiny Committee (HOSC/16/10). The Committee was invited to endorse Recommendation 12 to the Primary Care Trust Chairmen.

David Moses, Head of Member Support and Governance, explained that the Youth Scrutiny Committee had undertaken a good piece of scrutiny on antibullying and come up with 12 recommendations. As the gateway Committee for information to the health services, HOSC was asked to endorse Recommendation 12 – The Health Care in School, South Essex Pilot Scheme should be recommended as an example of best practice to the other Primary Care Trusts in Essex.

During the discussion the following points were made:

- Members considered it to be an excellent report which they felt should be endorsed.
- A Member commented on Recommendation 4 regarding CCTV. It was considered that although this may be a good measure it would need to be handled sensitively and would need to be of good quality which would cost more. In response it was reported that the young people had been very enthusiastic about the idea of CCTV at schools and on buses.

 A Member felt that Recommendation 6 regarding the training of new teachers and professionals was a very good measure.

David Moses advised the Committee that a premier of the 15 minute DVD produced by the Youth Scrutiny Committee had taken place and this would be going to all schools with a teaching pack. The anti-bullying coordinator had had an impact on schools through highlighting issues.

### The Committee Agreed that:

- 1. The Committee welcomed the report and endorsed Recommendation 12 to go to the Primary Care Trusts.
- 2. A letter would be sent to the Chairman of each PCT bringing Recommendation 12 to their attention for a response.

### 33. Regional Health Chairs Forum

The Committee received report (HOSC/17/10) from Graham Redgwell, Governance Officer, outlining the main items of discussion for the Regional Health Chairs Forum meeting held on 26 March 2010.

The Chairman advised the Committee that the main purpose of the meeting had been to discuss the East of England Ambulance Service. The debate had been kept to the main issues and had resulted in a frank and open discussion. It was suggested that the presentation slides be circulated to Members and it was also noted that there had been an open invitation for Members to visit the new Control Centre in the future. The Ambulance Service recognised the need to improve but considered that some progress had already been made. The Chairman reported that there had been some interesting figures quoted regarding the turnaround times at hospitals which the Committee may wish to take up. The turnaround time for an ambulance at the Luton and Dunstable Hospital was 8 minutes compared to over an hour at some Essex Hospitals. There had also been some interesting discussion around the integration of the Air Ambulance.

The protocols for Regional Joint Overview and Scrutiny Committees (JOSC) and Regional Good Working Practice had been agreed and would be circulated to Members.

The role and priorities of the East of England Specialised Commissioning Group (SCG) had also been discussed and it was suggested that these also be circulated to Members.

During the discussion the following points were made:

- John Carr, LINk, commented that representatives from the LINk had felt able to participate and get involved in the discussion.
- David Moses suggested that all Members needed to be kept informed of Regional Scrutiny Committee activities, particularly cross-border issues, and have the opportunity to feed their views into the scrutiny reviews.
- Concerns were raised regarding ambulance waiting times at hospitals. It
  was commented that this had been an on-going issue for some time and
  there were reasons why hospitals did this but it was considered that it
  should be stopped.

### It was **Agreed** that:

- 1. The report be noted.
- 2. Presentation slides from the East of England Ambulance Service item be circulated to the Committee.
- 3. The invitation to attend the Ambulance Service Control Centre be considered for a future visit.
- 4. The Committee consider looking into the ambulance waiting times at Essex hospitals compared to those across the Region.
- 5. The regional JOSC protocols be circulated to the Committee.
- 6. The roles and priorities of the SCG be circulated to the Committee.

# 34. Review on preparing for the Dementia explosion

The Committee received an update from Councillor Baugh on the Conference on Dementia Services and potential issues for discussion during the review.

It was noted that Councillor Baugh would chair the Task and Finish Group. Councillor Baugh circulated a note of the key points taken from the conference he had attended on Dementia Services. Councillor Baugh outlined each of the presentations at the conference and highlighted any key issues taken from each presentation:

### National Audit Office – Interim Report (2009/10)

- Lack of progress since the Government's Dementia UK Report Feb 07.
- No real incentives for Primary Care Trusts (PCTs) to take action. No funding and very little set up money.
- The low profile amongst health services led to late and expensive interventions, leading to poor value for money.
- The Strategy lacked local data to inform decisions.

### Association of Directors of Adult Social Services

### <u>Dr Donald Lyons – Mental Health Commission, Scotland</u>

- Rigorous set up of laws and safeguards.
- Joint visits to care homes multi-agency.
- There was a fine line between privacy and the provision of information to those who need to know.

# <u>Dr Jim Eccles (Leeds Teaching Hospitals NHS Trust, consultant physician) - Nuffield Council on Bioethics</u>

# NHS Commissioning Support for London (implementation in London) – David Jobbins

- NHS Commissioning Report for London including a map of London Boroughs predicting an increasing demand in outer boroughs and little or no growth in inner boroughs.
- There was a need for a local plan.

### Brian Hills – United Carers for Dementia

- This provided a more personal view.
- Highlighting the short comings of information provision and everyday problems leading to stress.

The positive input from Admiral Nurses.

### Kathryne Tearne - Clinical lead Admiral Nurse SW Yorks NHS Foundation Trust

### <u>Dr Mervyn Eastman – Practitioner Alliance Against Abuse of Vulnerable Adults</u>

### Dr Linda Patterson – East Lancs PCT – Consultant Physician, Older People

Councillor Baugh summarised the lessons learnt which were similar to those learnt through the Child and Adolescent Mental Health Study (CAMHS):

- Try to reduce hospital admissions and high level interventions
- · Provision balanced against need.
- The need for a comprehensive approach involving Carers and GPs etc.
- The need for a promise and delivery of joined up services which would save money and allow planning.
- A single point of contact similar to the 'Memory Clinic' used in Scotland.
- Support for Carers who provide a valuable source of support and need to be helped. Studies could be used to see what can help Carers.
- · Safeguarding.
- The Government efficiency savings to fund implementation costs it would be necessary to identify potential areas of saving and point out to those taking the lead.

In terms of how these issues could start to be taken forward by the Task and Finish Group it was proposed that:

- Local mapping of services (Gap Survey) could be undertaken particularly looking at whether there are senior clinical leads at hospitals.
- A comprehensive 'Memory Clinic' could be looked at.
- GP competency be reviewed.
- A single point of access be considered.
- The importance of early diagnosis be looked at.
- A Carers perspective be sought.
- Expert publicity be looked at.
- Input regarding safeguarding be sought.

The Chairman had spoken to the Chairman of the Community Wellbeing & Older People Policy and Scrutiny Committee about forming a joint Task and Finish Group on this issue and invite the two mental Health Trusts to nominate a non-executive member to participate as a joint approach to the review.

The Chairman advised that the Committee would consider how best to involve the Essex and Southend LINk in this review.

### It was **Agreed** that:

- 1. The Task and Finish Group would be made up of the Chairman, Councillor Baugh, 2 HOSC Members, 2 Community Wellbeing & Older People Policy and Scrutiny Committee Members and 2 non-executive members, one from each, of the Mental Health Trusts.
- 2. Councillor Mrs Hutchon was appointed to the Group [Post Meeting Note Councillor Maddocks also agreed to join the Group]

- 3. A joint letter would be sent to the Chairmen of the Mental Health Trusts inviting them to appoint a non-executive member to the Task and Finish Group.
- 4. The Committee would consider the work programme and timetable for the Task and Finish Group at the June meeting.

### 35. Response to Health for North East London Consultation

The Committee received an update from David Moses, Head of Member Support and Governance, on the final response to the consultation on the reconfiguration of hospital services in North East London. The issue had been discussed at the last meeting of the Committee and at the meeting of the West Essex Area Forum held on 9 March 2010.

David Moses advised that while a letter was being prepared in response to the consultation, a decision had been taken by the Joint HOSC to refer the matter to the Independent Reconfiguration Panel. David Moses suggested that the letter now be directed to the Panel to make them aware of the views expressed.

John Carr, LINk, advised that the Essex and Southend LINk had submitted a report in response to the consultation.

The Committee considered that in future it would be beneficial to have a Member of the HOSC to sit on Joint HOSCs and report back on a regular basis.

### It was Agreed that:

The letter of response to the consultation on the reconfiguration of hospital services in North East London, be directed to the Independent Reconfiguration Panel.

### 36. Your Choice of GP Practice

The Committee considered report (HOSC/18/10) a consultation by the Department of Health on how to enable people to register with the GP practice of their choice.

It was explained that the Committee had not been formally approached for comment but may feel that it has comments to submit in response to the consultation.

David Moses reminded the Committee that some issues had been raised in previous scrutiny reviews around the funding situation of new patients registering at a surgery. There was a significant delay of 2-3 years for the PCT to receive the funding for a newly registered patient. This was an issue which Members may wish to raise as part of the response regarding getting the funding situation right.

The Chairman drew Members attention to page 41 which stated that if a general election were called during the consultation period, the consultation would be extended to give everyone an opportunity to be involved. Members were asked to inform the Governance Officer of their comments which could then be summarised and presented to the meeting in June. John Carr asked if comments from the Essex and Southend LINk could also be included.

### It was **Agreed** that:

Members would submit their comments on the consultation to the Governance Officer who would summarise and present them to the June meeting of the Committee.

# 37. Scrutiny Towards Excellence – Action Plan

The Committee received the Scrutiny Towards Excellence Action Plan (HOSC/19/10). David Moses, Head of Member Support and Governance, advised that this had been circulated for Member information. The Scrutiny Board had signed up to the actions to help scrutiny move forward to excellent. One aspect of this for Committees to consider was to take evidence from a wide range of people and organisations and think through how evidence is taken, i.e. the video options used during some recent scrutiny reviews.

The Committee was also informed that the Member Support and Governance team was in the process of replacing the committee management information system. A contract was shortly due to be signed for a new system which would help to achieve the information actions.

The Committee considered its upcoming work and how it could meet the actions:

- The Chairman advised that the Child and Adolescent Mental Health Study (CAMHS) was continuing and evidence had been taken via teleconferencing for this review. David Moses was asked to circulate the date of the next meeting to Members of the Committee.
- The Dementia Task and Finish Group was due to start shortly.
- The Hospital Trust Chairmen from Colchester and Basildon were due to come back to the Committee regarding progress made on the issues raised by the CQC. It was suggested that this be scheduled for July. A Member felt that it would be useful to also hear from Broomfield Hospital. The Chairman suggested that a letter be sent to the Hospital's new Chairman regarding an update in June. A suggestion was made that evidence from the Hospital Trust Boards should be sought such as board papers.
- It was also suggested that the Committee consider the issue of community services and the future status of the PCT provider arms in June or July.
- A Member asked if a potential future review of the whole hospital discharge process could be considered. This had arisen from evidence collected during the Delayed Discharges review regarding the timing and organisation of the discharge process for patients. There had been instances of very late discharges and of people being discharged home with no facilities in place and no-one there. The Chairman proposed that a position statement be requested from each of the hospital trusts on the policy and procedure for discharging patients, including who has the final decision to discharge a patient. Once replies had been received the Committee could consider how to take this issue forward.
- Councillor Knapman raised an issue relating to the under-funding by West Essex PCT of children with language and learning difficulties in the West Essex area. The Chairman proposed that a letter be sent to the PCT requesting a response on this matter and asked that Councillor Knapman liaise with them on this.

### It was **Agreed** that:

- 1. The Scrutiny Towards Excellence Action Plan be noted.
- 2. The Chairmen of Colchester and Basildon Hospitals be asked to attend the July Committee meeting to update the Committee on the progress made at each hospital.
- 3. A letter be written to the Chairman of Mid Essex Hospital Trust requesting that an update on the hospitals plans be provided to the June meeting of the Committee.
- 4. An item on community services be scheduled for the meeting in June or July.
- 5. A letter be written to the Chairman of each Hospital Trust in Essex requesting information on their policy and procedure for discharging patients.
- 6. A letter be written to West Essex PCT requesting a response on the issue of funding for children with language and learning difficulties.

# 38. Date of Next Meeting

It was noted that the next meeting of the Committee would be held on Wednesday 2 June 2010.

There being no urgent business, the meeting closed at 11.01am.

Chairman