

CENTRAL BEDFORDSHIRE COUNCIL

At a meeting of the **JOINT HEALTH SCRUTINY COMMITTEE** held at Room 15, Priory House, Monks Walk, Shefford on Thursday, 30 July 2009

PRESENT

Cllr (Chairman)
Cllr (Vice-Chairman)

Cllrs Mrs S Goodchild
P Rawcliffe
J Brandon

Cllrs Miss A Sparrow
A M Turner
M Yasin

Apologies for Absence: Cllrs Cunningham, Ellis and Meader

Substitutes: Cllrs Yasin

Members in Attendance: Cllrs D Bowater, Assistant to the Portfolio Holders Social Care and Health and Housing
S F Male, Portfolio Holder Culture and Skills & Portfolio Champion for Business Transformation

Members of Public Bill Hamilton –

JSC/08/19 **Apologies for Absence**

Apologies for absence were received from Councillors Cunningham, Ellis and Meader, all from Bedford Borough Council. Councillor Yasin was present as substitute for Councillor Meader.

JSC/08/20 **Election of Chairman**

Councillor Sparrow, Central Bedfordshire Council, was duly elected as Chairman of the Joint Committee.

JSC/08/21 **Election of Vice-Chairman**

Councillor Cunningham, Bedford Borough Council, was duly elected as Vice-Chairman of the Joint Committee.

JSC/08/22 **Declarations of Interests**

There were no declarations of interest at the beginning of the meeting.

During the course of the meeting Councillor Goodchild mentioned matters in relation to her personal circumstances but indicated that these did not amount to a personal interest.

JSC/08/23 **Statutory Basis of the Joint Committee**

The Committee received a report and noted the statutory basis of the Joint Committee.

JSC/08/24 **Composition and Size of the Joint Committee**

The Committee received a report regarding the composition and size of the Joint Committee.

RESOLVED to note:-

1. that the Committee comprises four members from Bedford Borough Council and four members from Central Bedfordshire Council as the relevant Social Services authorities in the area served by the East of England Strategic Health Authority;
2. named substitutes are permitted if the nominated member is indisposed;
3. the quorum of members is set at four, representing one half of the Committee, two of whom should be from Bedford Borough Council and two from Central Bedfordshire Council.

JSC/08/25 **Terms of Reference of the Joint Committee**

The Committee received and noted the Terms of Reference of the Joint Committee.

JSC/08/26 **NHS Bedfordshire's Response to the Joint Committee's Report**

The Committee received a report of Andrew Morgan, Chief Executive of NHS Bedfordshire, providing Members with the collation, analysis and response of NHS Bedfordshire to the public consultation on its five year strategic plan, *A Healthier Bedfordshire*. The report also asked for a response from the Joint Committee to the decisions taken by NHS Bedfordshire in reply to the consultation.

The Committee noted that the report summarised the process and outcomes of the 12-week public consultation together with appendices which set out the consultation questions; the report of the Joint Overview and Scrutiny Committee; NHS Bedfordshire's response to the Joint Committee's recommendations; and a summary of the letters received from organisations.

Members noted that the consultation process had prompted views, comments and suggestions from 454 people.

The Committee also noted that taking into account all of the views expressed, NHS Bedfordshire would:-

1. retain the three strategic priorities that underpin *A Healthier Bedfordshire*;
2. refresh the Strategy in light of the responses received, the responses to the recommendations of the Joint Health Overview and Scrutiny Committee and the need to update the financial scenarios based on the anticipated future financial situation. The final updated strategy would go back to the Strategy Committee and the NHS Bedfordshire Board in September 2009;
3. ensure that public and clinical involvement continued to inform and shape the content and implementation of the Strategy;
4. take forward the implementation of the Strategy without delay, through the *A Healthier Bedfordshire* Programme Board, overseen by the Strategy Committee.

The Committee considered NHS Bedfordshire's response to each of the recommendations which the Committee had made in its report. The report was attached as an appendix. Overall Members welcomed the PCT's response to the report.

The Committee was advised that a consultancy, Chaucer, had been commissioned to look critically at the financial aspects of the Strategy and also to consider carefully whether targets were sufficiently SMART (specific, measurable, achievable, realistic, timely).

Dianne Meddick, NHS Bedfordshire advised that considerable work had taken place on the Strategy since the Joint Committee had provided its report. She added that work with both the local authorities in the area would be ongoing. A timetable would be developed with the Overview and Scrutiny Managers of the constituent councils to ensure that each council received for consideration the refreshed strategy (in autumn 2009) and progress reports thereafter at future meetings.

The Committee considered each of the recommendations in turn and made comments on a number of them.

Recommendation 2 – the excellent response was welcomed.

Recommendation 6 – Members commented that a fair funding allocation for NHS Bedfordshire should be pursued and agreed that a recommendation should be made to the Executives of the constituent councils in relation to this matter.

Recommendation 14 - it was noted that data came from areas of varying size, sometimes postcode, ward or larger but more usually ward level. A point was made that correlation of data could be confused with cause and effect and it was noted that this had been recognised and the problem was starting to be addressed.

Recommendation 16 – a comment was made that it was recognised that differences in ethnicity could be associated with particular health conditions and these were addressed. That being the case it was illogical to consider that earlier mortality in men could not be addressed. Members noted Dianne Meddick's offer to address this matter more explicitly, raising the question of what the genetic differences were which lead to earlier death and why they could not be addressed.

Recommendation 17 – a discussion arose as to clarifying the meaning of Lower and Middle Super Output Areas. The term Super Output Area was in regular use by Councils and Government departments, but the meaning of Lower and Middle Super Output Areas was unclear. Members requested an explicit definition to be provided to each Committee for their information.

Recommendation 22 – concern was expressed that there was not a higher proportion of money going into preventive work. It was noted that if additional funds were obtained preventive services would be a priority growth area and this was welcomed.

Recommendation 23 – it was noted that the category shown as "other" related mostly to personal medical services such as dentists and opticians. This would be made more transparent in the Strategy.

Recommendation 25 – Members were assured that the need for a risk register was being addressed in the work being carried out by Chaucer Consultancy and that the information would be included in the refreshed Strategy.

Recommendation 27 – Members asked for that an annual review of aspects of the Strategy to be included in the Work Programmes of the Overview and Scrutiny Committees.

Recommendation 29 – Members welcomed the introduction of an additional local indicator for smoking cessation at 52 weeks, and noted that the data was gathered by recording the information and following up for a year.

Recommendation 32 – Members noted that the respective Directors from Bedford Borough Council and Central Bedfordshire Council, Frank Toner and Julie Ogle, were currently in discussion with the PCT regarding arrangements for mental health work and were ensuring alignment and complementing of plans between the two local authorities.

Recommendation 35 – Members noted that the stretch targets currently being developed for addressing inequalities and vulnerable groups in relation to Maternity and Newborn would be included in the refreshed Strategy.

Recommendation 41 – a request was made that the issue of planned care provision be reported periodically to each Council's Health Overview and Scrutiny Committee.

Recommendation 44 – a comment was made in the context of the broader strategic framework of this recommendation. In the short term Members were encouraged to receive a global PBC review relevant to each PBC area. This

would lead to five intermediate care reviews relevant to the demographics of Central Bedfordshire Council as well as Bedford Borough Council.

Recommendation 48 – a comment was made that the impact of developments to reduce hospital admissions should be monitored by the Overview and Scrutiny Committees as eventually it was possible that a hospital could be closed as a consequence. Members were advised that pressures on the NHS were increasing with more and differing health needs as people lived longer . A further comment was made that the Overview and Scrutiny Committees might care to deliberate the benefits for patients being treated at the place of expertise for their condition which might not be the local hospital.

Recommendation 55 – Members noted that the Government would be introducing a new approach in due course regarding payment for care for elderly people in relation to social and medical care. A comment was made that it might be appropriate for the Overview and Scrutiny Committees to review this matter. Comments were made about the importance of assessments being carried out correctly and completely to ensure that the right decisions were made regarding care for patients. Comments were also made about the need for the training and development of staff administering care assessments to be robust and ongoing.

Recommendation 57 – a comment was made that NHS Bedfordshire's response did not adequately address the need for speed in decision making in relation to a terminally ill person, with the capacity for a change of decision to be implemented quickly where necessary.

The Joint Committee noted that the refreshed Strategy would be sent to the Overview and Scrutiny Managers of Bedford Borough Council and Central Bedfordshire Council to co-ordinate any further work arising that the respective Committees may wish to carry out.

RESOLVED:-

1. to note the contents of the report
2. to note NHS Bedfordshire's response to the recommendations of the Joint Committee and to the overall themes that emerged during the consultation process;
3. to note the decision of the Board of NHS Bedfordshire to:
 - a. retain the three strategic priorities that underpin its strategic plan
 - b. refresh the strategy in the light of the responses received
 - c. ensure that public and clinical involvement continues to inform and shape the content and implementation of the strategy
 - d. take forward the implementation of the strategy without delay;
4. to agree that the decisions taken by NHS Bedfordshire in response to the feedback received during the consultation were appropriate and in the best interests of the residents of Bedfordshire;

5. that the following matters be considered for inclusion on the Work Programmes of the Councils' Health Overview and Scrutiny Committees:-
- (i) an annual update regarding the Strategy's implementation by NHS Bedfordshire
 - (ii) an approach for securing the issue of a fair NHS funding allocation for NHS Bedfordshire being reconsidered in Whitehall;
 - (iii) monitoring of progress on planned care provision based in the community;
 - (iv) an explanation of the Choose and Book system and evaluation of the success of its implementation;
 - (v) consideration of the benefits to patients of being treated at a centre of expertise;
 - (vi) review of the payment arrangements for medical and social care of patients in light of Government changes.

RECOMMENDED TO THE EXECUTIVES of the constituent Councils that lobbying through the Chairmen of Overview and Scrutiny Committees and other bodies in the area such as the Local Strategic Partnership and Government Office East be carried out with a view to obtaining a fairer and improved financial settlement for Bedfordshire PCT.

Chairman.....

Date.....

(Note: The meeting commenced at 2.00 p.m. and concluded at 3.45 p.m..)