

## CENTRAL BEDFORDSHIRE COUNCIL

At a meeting of the **SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE** held in Room 14, Priory House, Monks Walk, Shefford on Thursday, 8 April 2010

### PRESENT

Cllr Miss A Sparrow (Chairman)  
Cllr A M Turner (Vice-Chairman)

Cllrs Mrs J Freeman  
Mrs R B Gammons  
Mrs S A Goodchild

Cllrs Ms A M W Graham  
P Rawcliffe

Apologies for Absence: Cllrs P Freeman  
J Kane

Members in Attendance: Cllrs D Bowater  
Mrs R J Drinkwater  
Mrs C Hegley,

Officers in Attendance: Mr Z Awan – Tenant Involvement Manager  
Mrs M Clampitt – Democratic Services Officer  
Mr D Jones – Transformation Project Director  
Mrs J Ogley – Director of Social Care, Health and Housing  
Miss C Powell – Overview and Scrutiny Officer  
Ms C Rooker – Head of Housing Management

Others in Attendance Mr S Burton – Premises Development, NHS Bedfordshire  
Dr P Geoghegan – Chief Executive South Essex Partnership University NHS Foundation Trust (SEPT)  
Mr D Jacob – Director of Mental Health South Essex Partnership University NHS Foundation Trust (SEPT)  
Mr D Levitt – Head of Public Engagement and Communications, NHS Bedfordshire  
Mr E McIntyre – Director of Inpatient & Emergency Services South Essex Partnership University NHS Foundation Trust (SEPT)  
Mr A Morgan – Chief Executive: NHS Bedfordshire  
Mr C B Rushe – Service Director, South Essex Partnership University NHS Foundation Trust (SEPT)

Mr H Shoebridge	– Senior Mental Health Commissioner NHS Bedfordshire
Mr B Smith	– Acting Chairman and Finance Officer, Bedfordshire LINK
Mrs L Willis	– Internal Commissioning Consultant, NHS Bedfordshire

#### SCHH/09/129 **Minutes**

##### **RESOLVED**

**that the Minutes of the meetings of the Social Care, Health & Housing Overview and Scrutiny Committee held on 4 February 2010 and 2 March 2010 be confirmed and signed by the Chairman as a correct record.**

#### SCHH/09/130 **Declarations of Interest**

(a) **Personal Interests:-**

There were no declarations made.

(b) **Personal and Prejudicial Interests:-**

There were no declarations made.

(c) **Any Political Whip in relation to items on the agenda:-**

There were no declarations made.

#### SCHH/09/131 **Chairman's Announcements and Matters of Communication**

The Chairman asked the Vice-Chairman to provide an update on the meeting of the East of England Regional Health Overview & Scrutiny Committee Chairs Forum – 26 March in Chelmsford.

At this meeting Members received a presentation from the East of England Ambulance Service Chief Executive, Hayden Newton. He provided an update on the service, how it saw the future and moving to the new Corporate HQ in Camborne (summer 2010) as follows:-

- The Ambulance Service was predicted to receive a 'good' overall rating from the Care Quality Commission (CQC) for 2009/10 compared to the 'fair' rating in 2008/09.

- The regional pilot scheme running in three locations, one of which was Luton, was to start using 111 as a non-emergency number as from September.
- A plea was made to all HOSCs to ensure the current winter gritting policy was reviewed due to the high volume of slips, trips and falls due to the bad weather and the problems with vehicle access on non major roads. It was noted that the Central Bedfordshire Council policy would be reviewed in June 2010 by the relevant Portfolio Holders and Director.
- An open invitation was given to anyone who wished to visit the 999 call service centres.

#### SCHH/09/132 **Petitions**

The Chairman announced that no petitions had been referred to this meeting.

#### SCHH/09/133 **Public Questions, Statements and Deputations**

The Chairman announced that no questions, statements or deputations had been received.

#### SCHH/09/134 **Disclosure of Exempt Information**

There were no disclosures of exempt information.

#### SCHH/09/135 **Call-in**

The Chairman announced that no call-ins had been referred to this Committee.

#### SCHH/09/136 **Requested Items**

The Chairman confirmed that no requests for agenda items had been received.

#### SCHH/09/137 **Local Involvement Networks (LINK) Update**

The Committee received an update from the Acting Chairman and Finance Officer which highlighted local health matters influencing LINK activity as defined by the Health and Social Care Act 2001.

The Committee noted that recently work had been done to increase the contact with young people and the communications people had been interviewed by Diverse FM. In addition, involvement with the Bedfordshire Youth Parliament was being arranged.

On the 18 March, a surgery had been held for patient group care.

## **RESOLVED**

**that the updates be noted.**

### **SCHH/09/138 Overview of Mental Health**

The Committee received and considered a report and presentation from South Essex Partnership University NHS Foundation Trust (SEPT), which provided an overview of mental health services developed and provided by the trust, and the vision for Mental Health going forward.

The Chief Executive (SEPT) provided the Committee with the governance arrangements for SEPT and requested Members take into account:-

- The Trust was established in January 2010.
- SEPT has recruited four thousand public members, of which fifteen hundred are residents to the Central Bedfordshire region.
- A recruitment programme has begun to elect 3 non-executive directors in Luton, Central Bedfordshire & Bedfordshire. The non-Executive Directors will work alongside 5 Public Governors, of which independent elections are being held.
- Cllr Bowater to represent Central Bedfordshire Council as one of six appointed Governors representing:- Luton Borough Council, Central Bedfordshire Council, Bedford Borough Council, Essex County Council, Thurrock Council and Southend-on-Sea Borough Council.
- Constituency meetings will be introduced in the Central Bedfordshire Region and will be used as an additional consultative forum with members of the public and service users, offering an option to speak privately with staff and commissioners. This type of meeting would require greater knowledge of the geographical area in order to commission effective services and could be achieved by basing meetings on local problems. It was mentioned that carers and neighbours might raise issues or concerns. Presentations and demonstrations from SEPT staff would also be delivered at this forum.

- The intention to establish a Young People's Forum for those aged between 12 – 16 years of age was also suggested. Having established four similar services in Essex, SEPT officers are able to go into schools to discuss various topics with Young People affected by Mental Health issues. This may range from drug misuse to having a parent affected by Mental Health issues.

The Chief Executive (SEPT) described the desired state of Mental Health Services and the need of a fundamental change in public attitude if there was to be a significant transformation in the structure, function and governance of the current state of Mental Health Services on offer. Members were informed of the necessity to champion a service users Recovery in terms of re-thinking the design of Long Term and Acute Care. Community and Primary Care Services as well as Safeguarding and services for high risk clients and their families. It was also stressed the importance of providing Value for Money whilst delivering high quality services. This would mean working smarter with colleagues at NHS Bedfordshire, within the Council's Adult Social Care Directorate as well as GP's delivering Primary Care Mental Health Services.

It was noted that prior to the implementation of Oakland Court & Weller Wing the average length of stay for patients was up to a week and a half. In a unit that was most probably outside of the region. This would most likely hamper any effective recovery as patients were often more confused having being taken out of familiar surroundings and away from family and friends. Both Oakland Court and Weller Wing offer therapy in the community and with the average patient stay reduced to 72 hours illustrates the benefits of keeping patients in their own environment as an additional aid to their rehabilitation.

Section 136 suites have been established in order that Police may have a suitable unit to bring people with issues / a history of Mental Health and may be classified as a danger to either themselves or the public. A training programme has been established for Police Trainees to work day and night shifts in the acute assessment clinics. SEPT has received positive feedback from many of the trainees who stated, they had a greater understanding of mental health issues. The police trainees also felt this type of training would enable them to make appropriate contacts in the health service for the future.

1 in 4 of people experience a mental illness and helping people recover is a main priority. Also getting people retrained and, if necessary, deskilled and ready of employment is important. It was noted that SEPT has University status and therefore was able to establish links with Barnfield and Bedford College. SEPT was working with NHS Bedfordshire to help update the services available especially with personalised care, housing and leisure carers.

It was noted that SEPT was passionate about employment being used as an aid to recovery. The Chief Executive (SEPT) informed the Committee that by leading by example a number of posts within South Essex

Partnership University NHS Foundation Trust are allocated to be filled by people who have had some Mental Health issue. The Chief Executive (SEPT) also informed the Committee that he hosts a number of business with business leaders to help dispel the myths associated with mental health. It was noted that this has been successful in Essex and was hoped to be replicated in Bedfordshire & Luton.

The Director of Social Care, Health & Housing informed the Committee that she and the Shadow Portfolio Holder had visited the BPLT 18 months ago and had been concerned about what they had been presented with. However, she and the current Portfolio Holder had been staggered by the improvements in the short period of time since SEPT had taken over.

### **RESOLVED**

**that the presentation from SEPT be received.**

#### **SCHH/09/139 National Dementia Strategy**

The Committee received and considered a report and presentation from the Senior Mental Health Commissioner at NHS Bedfordshire. The essence of which set out the progress that had been made within Central Bedfordshire of the implementation of the National Dementia Strategy and its 17 objectives, launched in February 2009.

There were four main themes contained within the National Dementia Strategy are:-

- Raising awareness and understanding
- Early diagnosis and support
- Living well with dementia; and
- Making the change

The seventeen objectives were contained within these four themes and attached at Appendix 'A' to the report as the self assessment baseline exercise.

Stakeholder events were held in July, November and December 2009. There were 60 stakeholders in attendance in July and 120 stakeholders in November and December. Attendees included service users and carers and workshops outlined what the priorities were.

There currently were two memory clinics one in Luton (South Beds) and Bedford, both facilities were available to residents of Central Bedfordshire. It was noted that capacity planning was being looked at. A long term goal was to have a mobile memory clinic which would be available through GP surgeries.

Central Bedfordshire's residential and in-patient care was to be reviewed. Currently it had base line work for early diagnosis and advice but the journey was very fragmented. Early identification and support was needed to identify what services were available.

One major area of concern was for people who wished to remain in their homes aligned with the PCT's 'end of life' strategy. This had to ensure that people had what they wanted for care at this time. It was acknowledged that there were gaps in the service and there was a huge issue of training for primary care as this was seen as arbitrary in meeting patients needs. The NHS was aware of the needs required when providing care for patients with dementia and the range of provisions, but there is an inherent need to develop its workforce and establish good working relationships with the right skill levels.

It was noted that there was a Countywide steering group and two implementation groups. Luton had not wanted to be involved however, all service areas must be linked.

The 'Dementia Executive' tool had been purchased by NHS Bedfordshire. The illustrates a range of demographic based measurements and projections such as the amount of people suffering with dementia and the areas within the region where dementia is prevalent. This allows for the PCT with colleagues to commission appropriate community based services. The tool allowed for information to be broken down by age group and by dementia type. It was noted that there were 'Organic Mental Health' issues which were brain tumour or dysfunction of the brain and 'Functional Mental Health' issues such as depression, anxiety and similar conditions.

By understanding the demographics within the region the Senior Mental Health Commissioner informed Members that commissioning services would be able to allow for what assistance was needed and how it would impact on existing services, future service plans and the projected number of service users. It was noted that this could not be an arbitrary process. The patient had to have the choice of how they received treatment wherever possible. The Director of Social Care, Health and Housing confirmed that the Council would need to disinvest to reinvest to make the service work around the needs of the community. In this instance it was agreed that an honest an open relationship would need to be cultivated between the Council and the PCT in order to continue to develop services that are fit for purpose.

The Senior Commissioner agreed to provide a live demonstration of the Dementia Executive Tool to the Committee in six months time.

## **RESOLVED**

- 1. that the progress made thus far in implementing the National Dementia Strategy, be supported.**
- 2. that the way forward in developing the local priorities and service developments necessary to meet the requirements of the National Dementia Strategy, be supported.**

3. **that a presentation of the 'Dementia Executive' Tool is provided to the Committee in six months.**

#### **SCHH/09/140 NHS Bedfordshire Estates Strategy**

The Committee received a presentation in relation to the NHS Bedfordshire Estates Strategy. It was noted that the Strategy had been refreshed in 2009 and approved by the NHS Board at their meeting on the 24 March 2010.

The strategy aimed to provide 'one stop' medical services in Town Centres. The NHS had recently highlighted five areas which were priorities for receiving the new medical services and were liaising with the Council and the Town Centre Management projects to make sure that the best possible locations were found. The five priority sites are:-

- Biggleswade
- Dunstable
- Leighton Buzzard
- Bedford North / Town Centre; and
- Bedford South (including Station Quarter).

#### **RESOLVED**

**that the presentation in relation to the NHS Bedfordshire Estates Strategy be noted.**

#### **SCHH/09/141 NHS Bedfordshire Work Programme**

The Committee received a presentation from NHS Bedfordshire which gave an overview of the strategic challenges being faced in a 0% growth year and the impact on the funds available.

It was noted that the original budget for Bedfordshire in 2010/11 was £658m but this had been reduced to £585m which was a reduction of £73m.

It was noted that it was not currently possible to provide a breakdown between Bedford spend and Central Bedfordshire spend, however; it was acknowledged that the Total Place pilot project had made it possible to begin to disaggregate spend.

NHS Bedfordshire confirmed that they were revisiting the proposed works for the coming year and business cases would be required for consideration prior to funds being allocated.

#### **RESOLVED**

**that the work programme presentation from NHS Bedfordshire be noted.**



**SCHH/09/142 Supporting Excellence: An Adult Social Care Workforce Strategy for Central Bedfordshire**

The Committee received and considered the report of the Portfolio Holder for Social Care and Health which requested consideration be given to the proposed Adult Social Care Workforce Strategy, 2010 – 2011, prior to being presented to the Executive in July. The intention was to develop the action plan through the establishment of a Strategic Workforce Board in order that a revised strategy could be adopted during 2011. Through the receipt of funding from the Deputy Director, Social Care & Local Partnerships, East of England, Central Bedfordshire Council Officers worked with a consultant, Tony Smith, and created the basis for the attached strategy.

The Transformation Project Director informed the Committee that there had not been a workforce strategy available through the legacy authority. The strategy was a statutory requirement and over the next 18 months would be made fit for purpose alongside a deliverable action plan. It was noted that the Director of Social Care, Health and Housing would be the Chairman at the work force meetings.

The Strategy is applicable for all social care staff, as well as Central Bedfordshire Council staff. The Directorate were working closely with Bedfords College to devise the Health & Social Care NVQ (Levels 2-4).

**RESOLVED**

- 1. that the proposed Workforce Strategy as attached at Appendix 'A' to the report of the Portfolio Holder for Social Care and Health, be endorsed.**
- 2. that the Executive be asked to consider the requirements needed for the staff to deliver the Strategy including changes to the personalisation agenda, a monitoring process and the need for communication skills and conflict resolution skills.**

**SCHH/09/143 Introduction to the Tenants Services Authority (TSA)**

The Committee received the report and presentation from the Head of Housing Management which provided Members with an initial briefing on the new Tenant Services Authority (TSA) regulations. The TSA is the body responsible for regulating local authority housing services as from 1 April 2010. It also provided a position statement on where Central Bedfordshire was in terms of meeting each standards, and its preparations for the new regulatory requirements.

It was noted that there were six national standards which outlined the outcomes the TSA required all Social Housing providers to achieve and specific expectations on providers. They are as follows:-

- Tenant involvement and empowerment
- Home
- Tenancy
- Neighbourhood and community
- Value for money
- Governance and financial viability

It was noted that currently there are a number of ways in which the Council engages with its tenants. These include the Way Forward Group and the Housing Sounding Board. More recently the STAUS survey informed the Council that tenants prefer to be notified of changes to Council Housing services by letter, as such a number of updates have been provided to Council Tenants this format. It was acknowledged that the TSA would encourage all Social Housing Providers to support increased tenant involvement in the decision making process.

#### **RESOLVED**

- 1. that the new role and requirements of the Tenant Services Authority be noted.**
- 2. that the content of the first annual report to tenants and the TSA be received and further reports on the proposed scrutiny function of tenants and Members be received.**
- 3. that a further report on the options available for the inclusion of tenants in the Council's decision making process be received by the Committee.**

#### **SCHH/09/144 Date of Next Meeting**

The next meeting will be held on 20 May 2010 in Room 15, Priory House starting at 10.00am.

(Note: The meeting commenced at 10.00 a.m. and concluded at 1.30 p.m.)

Chairman:.....

Date:.....