

## CENTRAL BEDFORDSHIRE COUNCIL

At a meeting of the **SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE** held in Room 15, Priory House, Monks Walk, Shefford on Monday, 5 March 2012.

### PRESENT

Cllr Mrs R J Drinkwater (Chairman)

Cllr N J Sheppard (Vice-Chairman)

Cllrs A L Dodwell  
Mrs R B Gammons  
Mrs S A Goodchild

Cllrs K Janes  
I A MacKilligan  
M A Smith

Apologies for Absence: Cllrs Mrs D B Gurney

Substitutes: Cllrs D Bowater (In place of Mrs D B Gurney)

Members in Attendance: Cllrs P N Aldis  
Mrs C Hegley  
M A G Versallion  
Executive Member for  
Social Care, Health &  
Housing  
Executive Member for  
Children's Services

Officers in Attendance: Mr N Murley – Assistant Director Business &  
Performance  
Mrs J Ogley – Director of Social Care, Health and  
Housing  
Mr J Partridge – Scrutiny Policy Adviser

Others in Attendance Mrs C Bonser – Bedfordshire Local Involvement  
Network  
Mr M Coleman – Chairman, Bedfordshire LINK  
Mr A Cooke – Head of Medicines Management,  
NHS Bedfordshire  
Mr N Gausden – NHS 111 Project Manager  
Mr D Levitt – Deputy Director Communication  
and Public Engagement, NHS  
Bedfordshire

### SCHH/11/85 Minutes

Further to Minute SCHH/11/80 the Committee were circulated with an update in relation to telecare services. The Committee were informed that prior to the introduction of charges there were 865 customer registered as using the telecare service. A total of 109 'flat rate clients' had ceased use of the service for various reasons following the introduction of charges. The Council had received no response from a further 116 flat rate clients, which may affect those numbers. The Committee would be provided with a full update at their

meeting in July 2012. The Council was not currently aware if any customers who had ceased their use of the Council's service had migrated to using a different service.

## **RESOLVED**

**That the minutes of the meeting of the Social Care, Health and Housing Overview and Scrutiny Committee held on 23 January 2012 be confirmed and signed by the Chairman as a correct record.**

### **SCHH/11/86 Members' Interests**

#### **(a) Personal Interests:-**

- Cllr D Bowater as a governor of the South Essex Partnership University NHS Foundation Trust (SEPT);
- Cllr K Janes as his family run care homes in Central Bedfordshire.

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

None.

#### **(c) Political Whip:-**

None.

### **SCHH/11/87 Chairman's Announcements and Communications**

The Chairman informed the Committee that the first informal meeting of the Joint Health Overview and Scrutiny Committee had been arranged for 8 March 2012.

The Committee were also informed that local quality accounts would be circulated separately to Members. Members were requested to provide any comments to the Chairman or the Scrutiny Policy Adviser so that they could be raised at a future meeting of the Committee prior to submission to relevant authorities.

### **SCHH/11/88 Petitions**

No petitions were received from members of the public in accordance with the Public Participation Procedure as set out in Part D2 of the Constitution.

### **SCHH/11/89 Questions, Statements or Deputations**

No questions, statements or deputations were received from members of the public in accordance with the Public Participation Procedure as set out in Annex 1 of Part A4 of the Constitution.

**SCHH/11/90 Call-In**

The Panel was advised that no decisions of the Executive had been referred to the Panel under the Call-in Procedures set out in Appendix "A" to Rule No. S18 of the Overview and Scrutiny Procedure Rules.

**SCHH/11/91 Requested Items**

No items were referred to the Committee for consideration at the request of a Member under Procedure Rule 3.1 of Part D2 of the Constitution.

**SCHH/11/92 Executive Member Update**

Councillor Mrs Carole Hegley, Executive Member for Social Care, Health and Housing updated the Committee on the following:-

- A safeguarding conference in Bedford and a stakeholder forum as part of the Healthier Together review in Milton Keynes that she had recently attended.
- A project relating to the harmonisation of housing needs that was currently underway.
- A public health conference she had recently attended hosted by the Local Government Association. The conference advised Councils on preparing for public health responsibilities. A Member briefing was to be provided to all Councillors.
- Events that had taken place in relation to the Ageing Well Programme and funding that was sought to develop a pilot scheme in Arlesey.
- The launch of the Diamond Jubilee Task Force by Mr Ken Lynch, a community volunteer service initially providing gardening services for the elderly.

**SCHH/11/93 LINK Update**

The Committee received a report from Charlotte Bonser, Bedfordshire LINK Operations Manager highlighting issues in relation to the lack of provision for adults on the autistic spectrum and out of hours services. In particular the Committee were informed that residents on the autistic spectrum could be precluded from accessing specialist support because they have a high IQ or because autism does not fall within learning disabilities or mental health provision. It was felt that more needed to be done to ensure that autism was diagnosed and that support could be provided to minimise the negative effect on a person's health, social and working life.

The Committee considered the issue and commented as follows:-

- A full briefing on the issue should be presented to a future meeting. The briefing should include the Central Bedfordshire approach to commissioning services.

- The lack of a clear pathway for GP referrals led to a lack of support for those on the autistic spectrum. The development of a clear pathway and increased knowledge and training for GPs may improve services.
- The particular importance of providing support to children on the autistic spectrum and of appropriate diagnosis and referral at a young age. The Committee was informed that there had been a vast improvement in this area.

## **RESOLVED**

**That a report be presented to a future meeting of the Social Care, Health and Housing Overview and Scrutiny Committee relating to provision for adults on the autistic spectrum in Central Bedfordshire.**

## **RECOMMENDED**

**That a joint report in relation to diagnosis and provision of support for adults and children on the autistic spectrum in Central Bedfordshire be considered at a future meeting.**

### **SCHH/11/94 Bedfordshire Community Health Services: medicine management**

The Committee received a presentation from Andy Cooke, Head of Medicine Management for NHS Bedfordshire that informed Members of the aim to improve the safe and cost-effective use of medicines.

In response to issues highlighted in the presentation Members raised and discussed the following issues in detail:-

- The benefit of district nurses being able to provide dressings in the future without having to obtain a prescription from a GP.
- The importance of patients taking medication at the appropriate time of day.
- More frequent reviews of prescribed medicines were required to reduce those that were unnecessarily included on repeat prescriptions. The use of community pharmacies as well as GPs in undertaking this role was to be encouraged.
- Particular attention should be given to reviewing the prescribed medicines of those who were the subject of a long-term stay in hospital or those in care so as only those medicines that were necessary were taken.
- The spread of community pharmacies, the location of which could not be influenced by the NHS in some cases as a licence was not required for an NHS pharmacy that opened for less than 100 hours per week.
- The benefit of standardising the appearance of medicines and packaging, which was the responsibility of the Department of Health.

- The variation in cost for paracetamol when purchased on prescription or over the counter. The NHS had rationalised pack sizes to try and achieve savings.
- The need for strict quality control over drugs supplied in the UK.

### **NOTED the presentation**

#### **SCHH/11/95 NHS 111 Service**

The Committee received a presentation from Nigel Gausden, 111 Project Manager, regarding the implementation of the NHS 111 programme, a joint NHS and Department of Health programme to deliver a national phone service to provide access to urgent but non-life threatening healthcare.

In response to issues highlighted in the presentation Members raised and discussed the following issues in detail:-

- Concerns there were several reporting lines within the programme.
- The importance of NHS 111 call advisers having local knowledge so as callers could be advised appropriately.
- The benefit of planned 'warm transfers' that would mean callers would not have to wait for a call back to receive health advice or have to repeatedly answer the same questions.
- The implications of the new number for the NHS Direct service.
- The ability for call advisers to transfer callers from the 111 number to 999 and vice versa. If it was felt necessary an ambulance could be dispatched immediately to anyone who dialled 111.
- The importance of clear information relating to the NHS 111 number and the police non-emergency 101 number. There was potential for confusion if residents were not appropriately informed of the differences between the numbers. It was commented that the NHS and Bedfordshire Police should consider providing joint publicity to minimise confusion and that the two services should coordinate so that callers who did ring the wrong number could be transferred.
- The need to consider the relationship between the NHS 111 service and the Council's adult social care services. The NHS should communicate with the Council to ensure that callers could be transferred to local adult social care services where appropriate.

### **RECOMMENDED**

- 1. That the NHS and Bedfordshire Police consider producing joint publicity to make residents aware of the 111 and 101 numbers and the differences between them. The organisations should also**

**consider if the services could be linked so that callers could easily be transferred between the two if they dialled incorrectly.**

- 2. That the NHS consult with the Council regarding the need to include adult social care services in the directory of services so that callers can be transferred or advised appropriately.**

## **RESOLVED**

**That a further report on the NHS 111 service be presented to the Social Care, Health and Housing Overview and Scrutiny Committee in 6 months. The report should address the concerns of the Committee and comment on the interaction with other partners in establishing the NHS 111 service.**

### **SCHH/11/96 Local Account of Performance in Adult Social Care 2010/11**

The Committee received a report of the Executive Member for Social Care, Health and Housing informing the Committee of progress on the production of the Local Account for Adult Social Care. In addition to the report it was commented that there has been very little information relating to the prescribed format of the Local Account. It was hoped that guidance would be available to assist with the development of the 2011/12 Local Account.

In response to the draft Local Account Members raised the following comments in relation to the content and presentation of the 2010/11 format and possible improvements for 2011/12:-

- It was not clear who the intended audience of the 2010/11 account were. An executive summary of the document would help to make it more accessible to a range of audiences. It may be appropriate to draft two copies of the 2011/12 Local Account, one to be used as an evidence base and another to be more public-focused.
- The punctuation and flow of the 2010/11 Local Account could be improved.
- Web links contained within the 2010/11 Local Account were too long and needed to be shortened if they were to be included.
- Queries if the figure of 88% of assessments being completed within four weeks of the initial contact and the target for 11/12 were accurate.
- The importance of celebrating success and positive performance as well as reflecting on what we needed to improve.
- The importance of carers and the need to enhance access to information and advice in relation to care and support services.
- The value and importance of including specific case studies in the Local Account.

## **RECOMMENDED**

**That the Executive Member consider the comments raised by the Committee in relation to the 2010/11 Local Account and suggestions for the 2011/12 Local Account.**

### **SCHH/11/97 Draft Work Programme 2011/12 and Executive Forward Plan**

Members considered the draft work programme for 2011/12 and Executive Forward Plan and noted the following:-

- The report on improving the experience of people leaving hospital through more effective practice and partnerships would not be considered on 12 April 2012. This item would be rescheduled to an appropriate date. The Chairman commented on the importance of the Member Working Group to improve the quality of hospital discharges. It was commented the working group may also include representatives from the LINK
- A briefing on Ageing-Well would be considered at the meeting on 18 June 2012.

## **RESOLVED**

**That subject to the following amendments the draft work programme be approved:-**

- 1. Improving the experience of people leaving hospital through more effective practice and partnerships be considered in April 2012.**
- 2. A briefing on ageing-well be added to the work programme in June 2012.**

(Note: The meeting commenced at 10.00 a.m. and concluded at 12.04 p.m.)