CENTRAL BEDFORDSHIRE COUNCIL

At a meeting of the SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE held in Council Chamber, Priory House, Monks Walk, Shefford on Monday, 29 July 2013.

PRESENT

Cllr Mrs R J Drinkwater (Chairman) Cllr N J Sheppard (Vice-Chairman)

Cllrs R D Berry Cllrs Mrs S A Goodchild
Mrs G Clarke Mrs D B Gurney
P A Duckett M A Smith

Mrs R B Gammons

Members in Attendance: Cllrs P N Aldis

Mrs A Barker Chairman of Children's

Services Overview and Scrutiny Committee

D Bowater Vice-Chairman of the

Council

C Hegley Executive Member for

Social Care, Health &

Housing

Officers in Attendance: Mrs P Everitt – Research and Business Support

Officer

Mr N Murley – Assistant Director Business &

Performance

Mrs J Ogley – Director of Social Care, Health and

Housing

Mr J Partridge – Scrutiny Policy Adviser Mr B Queen – Interim Head of Operations -

Housing Service

Ms E Saunders – Assistant Director Commissioning

Mrs S Tyler – Acting Assistant Director, Operational Services, Children's

Services

Others in Mr R Brand East of England Ambulance Service

Attendance

Mr S Conroy Acting Chief Executive, Bedford

Hospital NHS Trust

Ms R Featherstone Chair - Healthwatch Central

Bedfordshire

Mr C Hartley East of England Ambulance Service
D Landman Parent Governor Representative

Mrs M Luther Tenant Representative

Mr A Morgan Chief Executive: East of England

Ambulance Service

Mr J Rooke Chief Operating Officer Bedfordshire

Ms S Shaw Mr M Titcomb Clinical Commissioning Group Stakeholder Officer Programme Director, East of England Ambulance Service

SCHH/13/30 Minutes

RESOLVED

That the minutes of the meeting of the Social Care Health and Housing Overview and Scrutiny Committee held on 10 June 2013 be confirmed and signed by the Chairman as a correct record.

SCHH/13/31 Members' Interests

- Cllr Mrs Clarke declared an interest as a family member worked for the Clinical Commissioning Group.
- Cllr Mrs Goodchild declared an interest as a member of her family was a service user.

SCHH/13/32 Chairman's Announcements and Communications

The Chairman had recently attended a Centre for Public Scrutiny regional workshop to support the development of relationships between health scrutiny, NHS England and Public Health England. A regional workshop of Health Scrutiny Chairs would be arranged to further develop this initiative.

Members of the Committee were invited to visit Biggleswade Hospital and the Greenacre 'step up, step down' facility. A Member requested the short stay medical unit facility in Houghton Regis also be included in the tour.

SCHH/13/33 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/13/34 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/13/35 Call-In

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

SCHH/13/36 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/13/37 Executive Member Update

The Executive Member for Social Care, Health and Housing updated the Committee on the closure of the Meppershall Care Home.

Tribute was paid to everyone involved in the re-homing of 68 residents from Meppershall Care Home. Care Quality Commission had raised several concerns leading to the closure of the home which included the failure of management to implement an improvement plan and concerns for patient safety. The Committee were informed the and professionalism of CBC staff, SEPT and BCCG had ensured a successful transition for all concerned.

Members of the Committee wished to add their thanks and appreciation to those of the Executive Member and Director of Social Care, Health and Housing and requested that a letter be sent to council staff to say thank you.

Members sought clarification on the roles and responsibility of the Council in relation to care homes. The Director of Social Care Health and Housing explained that officers carried out contract compliance reviews of homes but the Council was not a regulator and therefore did not have the power to close a home. Officer reports were passed to the Care Quality Commission to follow up. The Council adhered to a framework for residential care to drive up standards, and ensure better care. Officers would review the lessons learnt from closure of the Meppershall Care Home and would bring a report back to the Committee. It was also suggested that a training session be provided to Members relating to the powers of the local authority in relation to inspections.

SCHH/13/38 East of England Ambulance Trust Turnaround Plan

Andrew Morgan, Chief Executive of the East of England Ambulance Service NHS Trust (EoEAS) introduced the turnaround plan to Members that set out how to deliver better services for patients.

The Trust had developed a single action plan that incorporated actions from the turnaround plan and recommendations from a governance review. The single action plan recognised the need to improve services to patients and build better staff engagement and empowerment. The proactive measures included:

- The recruitment of more staff;
- · The reduction of sickness absence;
- Performance management and quarterly reviews to discuss outturn and local accountability;
- Improving internal and external engagement;

In response to the report and the further clarification provided the East of England Ambulance Trust representatives, the Committee discussed the following:-

• The challenge of managing expectations was a major concern for the Trust. The Trust saw itself as a care provider, with more paramedics on board it would provide both 'hear and treat' and 'see and treat' services with the best clinicians and nurse practitioners in the control rooms.

- Whether the closure of the paediatric ward at Bedford Hospital had caused additional strain on the Ambulance service. The Chief Executive of EoEAS commented that due to the close proximity of alternative hospitals, this had not caused them any difficulties to date.
- Whether the size of the East of England region hindered the ability of the Trust to deliver its services in such a big area. The Chief Executive of EoEAT responded that the regions had merged to cut duplication and bureaucracy and there was no appetite to revert back.
- Further detail regard the percentage of cardiac patients who survive to discharge was necessary
- The challenge that develop for performance of the Trust if there were problems in handover of patients to A&E.

Members acknowledged the plan was a transparent and honest assessment of the Trust's position and its commitment to significant change. The performance of the Trust in the Central Bedfordshire area remained good, however, difficulties still existed in other areas. Members wished to be updated on the measures to improve the service and it was agreed that a report be brought back to Members in 2014.

The Chairman thanked the representatives for their attendance and helpful contribution to the debate at the meeting.

Noted the East of England Ambulance Service NHS Trust's turnaround plan and that an updated be provided to the Committee in January 2014.

SCHH/13/39 Interim changes to Paediatric Services at Bedford Hospital

The Chairman welcomed Stephen Conroy, Chief Executive of the Bedford Hospital Trust, who provided a verbal update to the Committee on the closure of the paediatric ward at Bedford Hospital.

Members were informed of the decision by the Dean of Health Education England to withdraw seven junior doctors from the paediatric ward over concerns of inadequate levels of supervision by consultants. Emergency admissions and overnight stays had ceased and interim arrangements had been put in place to ensure patients received the best care at other hospitals.

At the beginning of September, two reviews were to be undertaken by an independent reviewer. The first review would investigate why this issue has occurred and the second would consider the robust training requirements the hospital needed to put in place to ensure Bedford Hospital provided a full paediatric service. The Bedford Hospital Board would agree the terms of reference for each review, which were expected that the reviews would take up to two months to complete.

In light of the update Members discussed the following:-

 Whether Consultants based at the hospital or the current management were at fault for the issues. The Chief Executive, Bedford Hospital Trust commented that the reviews would consider who was at fault for the issues.

- The potential for hospital mergers and whether the closure of the paediatric ward would lead to services being delivered in Milton Keynes in the future.
- Issues relating to staff retention the Chief Executive, Bedford Hospital Trust
 explained that Bedford Hospital had a small paediatric ward and to get the
 best doctors working at the Hospital, it would be necessary to change the
 way the service was provided and look to work in partnership with another
 acute provider. It was commented that all current staff had been asked to
 stay and that Bedford Hospital would take the opportunity to train staff and
 the day services would continue to be provided on the ward.
- John Rooke, Chief Operating Officer, Bedfordshire Clinical Commissioning Group, commented that although the Deanery had removed the seven junior doctors, the posts had been retained. Every effort would be made to satisfy the Deanery that the training of junior doctors and services should be reinstated. The Overview and Scrutiny Committee and Health and Wellbeing Board on would be consulted on the proposals to change services.
- The consequential change to the interim arrangements on other hospitals.

Noted the update and requested that the Chief Operations Officers at Bedfordshire Clinical Commissioning Group consult the Committee on the proposed paediatric services change at Bedford Hospital be considered at a future meeting.

SCHH/13/40 Implications of The Francis report

John Rooke, Chief Operating Officer, Bedfordshire Clinical Commissioning (BCCG) gave a presentation explaining the new structure for health, the challenges facing the NHS and the opportunities for change. Locally, strong relationships and leadership had been developed in addition to good quality primary care. This had provided a great starting point to deliver good quality services to residents.

The Chief Operating Officer, BCCG, also provided an update on the outcome of the Francis Report included 290 recommendation for change and five key themes. In response to the Report, the BCCG had developed an action plan called 'A culture of care; our plans to implement the recommendations of the Francis Report'.

In response to the presentation and the approach being taken to implement the Francis Report recommendations by the BCCG, Members discussed the following points:-

- Concerns that the CCG would not respond to or learn from concerns. John Rooke responded that BCCG would introduce a complaints system to ensure complaints were listened to and lessons learnt. Learning would be circulated around the organisation to ensure similar incidents were not repeated. Members would be given the opportunity to assess the BCCG's strategic risk register if they felt it necessary.
- Following this discussion the Committee invited the Chairman of Healthwatch to present a report on the work of the organisation and to highlight the issues of current concern in Central Bedfordshire.

• The importance of the overview and scrutiny arrangements that challenge partners and enhance the patient voice.

Noted the update and requested the Bedfordshire CCG performance against the action plan be reported to a future meeting.

SCHH/13/41 Biggleswade Hospital

John Rooke, Chief Operations Officer at Bedfordshire Clinical Commissioning Group (BCCG) introduced a report that outlined the recommendations with implications for Biggleswade Hospital Community Bed Review including:

- The criteria for admission to Biggleswade Hospital be amended to reflect the need to cater for people recovering from ill health, including those that are non-weight bearing.
- The new service should mirror that provided at both Houghton Regis Short Stay Medical Unit and the Step up, Step down reablement service at Greenacre.
- The two units hosting 29 beds are remodelled to provide the necessary accommodation to support rehabilitation and reablement.

In response to the report, further clarification was provided by the Chief Operations Officer (BCCG) and Members of the Committee discussed the following:

- Concern as to why the maximum number of beds had not been filled at Biggleswade Hospital. The Chief Operations Officer, BCCG, explained the reasons were being looked into with partner organisations. However, by remodelling the unit it was envisaged that usage would be increased with GP's referring their patients to the facility.
- The legal position regard the Biggleswade Hospital premises and whether the asset had been held in trust. The Chief Operations Officer, BCCG, would investigate the position and report back to Members.
- The outcome of discussions with SEPT regarding the implementation of the model and recommendations to be reflected in the 2013/14 contract be reported to the Committee

Noted the update and requested that comments of the Committee be considered by the Chief Operations Officer, Bedfordshire Clinical Commissioning Group, when agreeing contractual arrangements with SEPT for Biggleswade Hospital.

SCHH/13/42 Review of Sheltered Housing

The Interim Head of Housing Operations introduced a report on the Sheltered Housing Review. The report proposed changes to the way that Council owned sheltered housing schemes were used and that an agreed standard be used to assess the investment needs of existing housing. The report proposed a further review regarding the investment needs and options appraisals for a small number of sheltered housing schemes that had potential for substantial improvement. The sites included:-

- Baker Street, Leighton Buzzard
- Bedford Street, Leighton Buzzard

- Croft Green, Dunstable
- Tudor Court, Leighton Buzzard and
- · Finch Crescent, Leighton Buzzard

Margaret Luther, representing the Sheltered Tenants' Action Group (STAG) welcomed the review and the introduction of an agreed standard, but raised concerns that people of 55+ were eligible to live in sheltered schemes

The Committee welcomed the proposed sheltered housing standard and the proposal to re-designate some schemes where the stock consisted of two and three floor properties without lift access to 55+ residents.

RECOMMENDED

- 1. That the introduction of a sheltered housing scheme standard be supported
- 2. That further investigation be undertaken into the proposal to segment some schemes to be re-designated to 55+ Housing
- 3. That the Committee support the major review of the five sites as discussed in the minutes and that other schemes be reviewed to raise the quality and amenity on an individual basis to the proposed Sheltered Housing Standard.

SCHH/13/43 Quarter 4 Performance Monitoring Report

The Committee received the Quarter Four Performance Monitoring Report which highlighted the performance for the Social Care Health and Housing Directorate for Quarter 4 of 2012/13.

Noted the report.

SCHH/13/44 General Fund Revenue Budget Monitoring Outturn 2012/13

The Committee received the General Fund Revenue Budget Management Report for 2012/13 for Social Care, Health and Housing, which set out the financial position at the end of 2012/13.

Noted the report.

SCHH/13/45 Capital Budget Management 2012/13

The Committee received the Capital Budget Management 2012/13 report that provided information on the Directorate General Fund Capital Outturn position for 2012/13.

Noted the report.

The Committee received the 2012/13 Housing Revenue Account Outturn Report, which provided information on the 2012/13 outturn revenue and capital position.

Noted the report.

SCHH/13/47 Work Programme 2013-2014 & Executive Forward Plan

The Committee considered its current work programme and the latest Executive Forward Plan.

RESOLVED

That the work programme be endorsed subject to the amendments detailed in the body of the minutes.

(Note: The meeting commenced at 10.00 am and concluded at 13.40 pm)