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, 21 March 2016.

PRESENT

Cllr P Hollick (Chairman)

Cllrs	N B Costin	Cllrs	C C Gomm
	P A Duckett		Mrs S A Goodchild

Apologies for Absence:	Cllrs	R D Berry	
		P Downing	
		Mrs D B Gurney	
		G Perham	
Substitutes:	Cllrs	Mrs A Barker	
		Mrs T Stock	
Members in Attendance:	Cllrs	C Hegley	Executive Member for Social Care and Housing
		J G Jamieson	Leader of the Council and Chairman of the Executive
		M R Jones	Deputy Leader and Executive Member for Health
		M A G Versallion	Executive Member for Education and Skills

Officers in Attendance:	Mrs P Everitt	– Scrutiny Policy Adviser
	Mr N Murley	– Assistant Director Resources
	Mrs C Shohet	– Assistant Director of Public Health
	Mrs N Sinden	– Public Health Co-ordinator
Others in Attendance	Mr A Cook	Bedfordshire Clinical Commissioning Group
	Mr C Goodson	Senior Locality Manager
	Mr C Hartley	East of England Ambulance Service
	Dr H Jopling	Public Health Registrar, Bedfordshire Clinical Commissioning Group
	Mr A Moore	Chief Operating Officer, Bedfordshire Clinical Commissioning Group
	Mr R Smith	Chairman Central Bedfordshire Healthwatch

SCHH/15/76. **Minutes**

RESOLVED that the Minutes of the meeting of the Social Care Health and Housing Overview and Scrutiny Committee held on 25 January 2016 be confirmed and signed by the Chairman as a correct record.

SCHH/15/77. **Members' Interests**

There were no Members' Interests declared for the meeting. However, although not a member of the Committee Mrs C Shohet registered an interest at item 12 because of a medical condition.

SCHH/15/78. **Chairman's Announcements and Communications**

The Chairman advised the Committee of his attendance at the opening of the Rosewood Court Care Home in Dunstable. The Chairman and Cllr Goodchild also attended an event hosted by the Centre for Public Scrutiny in Peterborough that had focussed on Health inequality, the reconfiguration of Health services, Health and Wellbeing Boards and integration of CCGs and GPs.

The Chairman informed the Committee of a collaborative approach to setting the work programme for next year, agreed at a meeting of the Chairs and Vice-chairs of Overview and Scrutiny. Focusing on the 5-Year Plan, the process would allow Members, co-optees and a range of partners to meet and determine items in the coming year.

The Chairman requested the BCCG to include details on the affect on hospitals of the recent junior doctors' strike in their Winter Resilience report to be considered by the Committee in June.

SCHH/15/79. **Petitions**

None.

SCHH/15/80. **Questions, Statements or Deputations**

None.

SCHH/15/81. **Call-In**

None.

SCHH/15/82. **Requested Items**

None.

SCHH/15/83. **Report by the Local Government Ombudsman**

The Director of Social Care Health and Housing introduced a report that outlined the Local Government Ombudsman (LGO) findings into a complaint made by Ms J. The Council had accepted all recommendations in the LGO's ruling and actions had been put in place that included the development of a more robust record keeping system that included every interaction with a client. Staff would be trained on this case along with key partners to ensure that lessons learnt were embedded into good working practices.

The LGO found that Ms J had made complaints over a number of years to different areas of the Directorate and the Council had not followed its complaints procedure. Going forward a chronology of complaints would be recorded in one place. The Director had apologised to Ms J, arranged the compensation payment recommended by the LGO and arranged for an independent social worker to review her case.

The Council had not managed Ms J's direct payment arrangements properly and the service would explore a move to a payment card system. This would enable the monitoring of payments on a regular basis and issues would be picked up and dealt with sooner. A new direct payment leaflet for customers had also been produced. The Director had also increased the number of colleagues working in the direct payments team.

In light of the report, Members of the Committee raised the following concerns:-

- Whether Mrs J was happy with the outcome and support plan. The Director advised that Mrs J was satisfied and had declined the support of an independent advocate.
- How this would have been managed in the case of a client in receipt of a direct payment and subsequently taken into hospital. The Head of Integrated Services advised the team would review the care plan and discuss any changes to the direct payments with the person, family members and significant others. However, the onus was on the customer to advise the Council of changes. Those customers with high balances would be contacted as part of the regular monitoring of direct payments.

In conclusion the Committee supported the idea of pre-payment cards and agreed that the new arrangements put in place by the Director would have a good impact for our customers.

RECOMMENDED:-

1. **That the importance of our professional staff giving clear and precise explanations to clients and to ensuring records are kept of each and every interaction with clients be stressed;**
2. **That an assessment be made as to whether any training, or any further training is required, which, if so, be formulated and implemented.**
3. **That it be noted the recommendations of the Local Government Ombudsman have been accepted and acted upon and that the Directorate confirm it has taken action within three months of the date of the report.**

SCHH/15/84. **Executive Members Update**

The Executive Member for Social Care and Housing advised the Committee of a regional meeting on the Syrian refugee position. Many councils including Central Bedfordshire were ready to receive Syrian families, however, few had arrived in the region. The Committee were also informed a small housing development had been opened at Creasy Park in Dunstable and Priory View was on track to open to residents on 18 April 2016.

The Executive Member for Health advised that the contract for the 0-5 children's services would be extended for a further 2 years. During this time

officers would work along side the BCCG to improve the Community Services Contract. The work would culminate in a revised contact for 0-19 Children's Services.

SCHH/15/85. **East of England Ambulance Trust Performance Report**

The Head of Communications at the East of England Ambulance Trust introduced a performance report that highlighted there continued to be a pressure on the ambulance service, along with increased handover delays, and more patients with more serious conditions. A new recruitment plan had been put in place, although the full benefit would not be realised just yet; especially as the 750 student paramedics recruited over the last 18 months are still completing their training and education.

A new Chief Executive, Robert Morton, had started to build a new leadership team and strategy. The Trust was moving towards a mix of skills within the workforce that included clinical support by GPs in the control room, in order that a patient can be assessed and put on the right care pathway.

In light of the update, Members raised the following issues:-

- Whether it was feasible to merge Fire and Ambulance stations in close proximity to each other. In response the Senior Locality Manager advised that in many cases it was not possible to merge as space was often fully utilised.
- Whether defibrillators available in the community had made a difference to the service. The Senior Locality Manager advised there had been some good results following the distribution of over 200 defibrillators in the area. The first responders initiative had also proved successful.

In respone to questions from Members the Director of Communications advised the targets shown were national, however, the EEAST hoped to improve targets in remote areas with the community first responders and fire fighters trial.

RECOMMENDED:

1. **That the Committee noted the service had moved forward and was striving to meet the needs of the public.**
2. **That the Committee welcomed the stability in the management team and a successful recruitment process in the north of Bedfordshire.**
3. **That the Committee noted the pressures on the service but emphasised the need to set and strive to achieve realistic targets in conjunction with partners.**
4. **That the Committee would welcome future comment on potential blue light collaboration.**

SCHH/15/86. **BCCG Value Based Elective Commissioning**

The Chief Operating Officer, Bedfordshire Clinical Commissioning Group (BCCG) introduced a report that outlined service changes being considered by the BCCG during a period of pre-engagement. Feedback gathered would be reported to the BCCG Board in April 2016 on whether to withdraw investment

in specialist fertility treatment, gluten free food and over the counter medication prescriptions and to recommend the commencement of a public consultation.

A Member requested that consideration be given to the high cost of gluten free food in supermarkets that make some products unaffordable for some low income families.

The Executive Member for Social Care and Housing suggested that the BCCG share information with the public regarding back office cuts as well as the proposed service cuts and where reinvestment would take place in services. The BCCG was urged to consider those financially disadvantaged and that safeguards be put in place for patients.

RECOMMENDED:-

1. **That the Committee emphasised the importance of clear explanations to the public on the proposals going forward.**
2. **That there should be consultation on limiting or ceasing funding in respect of specialist fertility services, the prescription of gluten-free foods and over-the-counter medicines which are prescribed for short, self-limiting illnesses.**
3. **That BCCG emphasise the need to further educate the public on the advice available from pharmacists, not least of all in respect of using lower cost, over-the-counter medication.**
4. **That the Committee expresses its wish that account is taken of the cost implications for low income families.**

SCHH/15/87. **BCCG Primary Care Strategy**

The Locality Business Manager, BCCG introduced a report that advised of the formal joint commissioning of Primary Care services by NHS England and Clinical Commissioning Groups from April 2016.

Proposals were focussed on two main areas to sustain and support practices and to offer stabilised high quality services.

The new models of care formed part of the Health Care Review and work was underway in Dunstable and Biggleswade to provide a care hub and feasibility studies were being developed.

In light of the report Members raised the following concerns:-

- Whilst the Committee supported the principle of hubs and the proposal to share back office functions, there was a concern at the speed at which the changes would happen. In response the Chief Accountable Officer advised that GP's would hear from a Birmingham GP brand that had successfully opened 20 GP practices in 2 years.
- The steps that could be taken to support GP's in the interim. The Locality Manager advised that work behind the scenes to support GP Practices and premises would continue.

The BCCG officers present were requested to report back on the progress made to imbed the strategy.

RECOMMENDED That the Committee recognised an ambitious programme to develop a primary health care strategy and the work being carried out around GP Hubs.

1. **That a report be presented to the Committee within nine months showing constructive progress especially in relation to the development of a first Hub.**
2. **That the Committee recognised a strategy being put forward by the BCCG as well as one being put forward by the Council to the Executive and looks to some common working.**

(Meeting adjourned at 11.50am and reconvened at 12 noon)

SCHH/15/88. **Excess Weight Services Strategy and Contract**

The Executive Member for Health introduced the Excess Weight Services Strategy that outlined a partnership approach to tackle the high levels of excess weight. The Assistant Director Public Health advised that 70% of adults weighted more than was healthy and excess weight affected emotional wellbeing too.

The Strategy's action plans would be measured quarterly and aimed to achieve a 1% reduction year on year to bring down the average in Central Bedfordshire. The National Strategy was yet to be published, however, the Council's Strategy would be updated in line with any new advice.

A Member asked how Town and Parish Councils could be made aware of the Strategy. In response the Executive Member for Health would look to include an item at the Town and Parish Conference event.

Members also queried whether there should be healthy eating events to teach children and parents the importance of eating healthily to steer them away from takeaway outlets. The Assistant Director advised that school nurses would reinforce the healthy eating message and also support those children under eating, and other associated problems. School Governors would also be asked to relay in schools the message on healthy eating and exercise. Restricted opening times were also imposed on take away outlets near schools.

The Executive Member for Education and Skills advised the Committee that food technology had been reinstated on the schools curriculum and gave some opportunity for schools to teach healthy eating.

RECOMMENDED:-

1. **That the Committee recognised it is the responsibility of all (including parents in respect of their children) to ensure a good diet and exercise are the foundations for a healthy life.**
2. **That the Executive Member encourages schools to be even more proactive in tackling excess weight through the curriculum and sport.**
3. **That a further report be submitted in 12 months in relation whether the Council has achieved success**
4. **That the Strategy be shared with the BCCG.**
5. **That Town and Parish Councils be informed about this work.**

SCHH/15/89. **Q3 Budget Monitoring Reports**

The Assistant Director Resources introduced the Q3 budget monitoring report that drew attention to the current forecast revenue outturn for Social Care Health and Housing which was overspent by £0.468m, an improvement on the previous quarter. Care packages for older people continued to dominate the overspend positon. However, with the BCCG's support, continuing health care was having a positive impact.

In light of the update, a Member raised concern regarding the number of people not receiving care at home. The Assistant Director advised there was a number of causes and would provide the Committee with additional information.

RECOMMENDED:-

1. **That the pressures on the revenue budget and the steps taken to mitigate such be noted.**
2. **That the Committee was pleased to note that the forecast spend on Priory View remains on budget albeit noting a loss of income from its delayed opening.**
3. **That the balanced budget in Public Health be noted.**

SCHH/15/90. **Work Programme 2015/16 and Executive Forward Plan**

The committee considered the current work programme and agreed that the following items be included:-

- Primarily care strategy
- Hubs
- Blue light collaboration
- Weight strategy

The Members discussed proposals for a briefing on the Housing Strategy and the need for more affordable housing.

The Executive Member for Social Care and Housing would ensure an Affordable Housing briefing was arranged.

RECOMMENDED that subject to the addition of those items noted in the minutes, the work programme be approved.

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

Chairman……..

Dated……..