

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, 28 February 2011

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

Mr M Coleman, Chairman of Bedfordshire LINK
Mrs J Ogley, Director of Social Care, Health & Housing

Substitutes: Cllr Mrs D B Gurney (In place of Cllr J Kane)

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

Officers in Attendance: Mrs M Clampitt – Committee Services Officer
Mr N Murley – Assistant Director Business & Performance
Miss C Powell – Overview and Scrutiny Officer
Mr E Thompson – Assistant Director, Adult Social Care

Others in Attendance Ms G Chapman – Lead for NHS Continuing Care/Funded Nursing Care NHS Bedfordshire
Mr M McColl – Interim Chief Executive, Bedfordshire NHS
Ms A Stenning – Implementation Manager, Horizon Health Commissioning Ltd

The Vice-Chairman informed the Committee that the meeting considered the direction of travel with Healthwatch. It was noted that Councils were at different stages in the establishment of Healthwatch. Central Bedfordshire Council could not afford to drop behind on this issue. It was acknowledged that the Council's elections in May 2011 would impact on progress.

The Vice-Chairman thanked the Overview and Scrutiny Officer for the informative briefing note which had been prepared in time for this morning's meeting. Copies had been given to the Committee.

SCHH/09/245 Petitions

The Chairman announced that no petitions had been received for this meeting.

SCHH/09/246 Questions, Statements or Deputations

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

SCHH/09/247 Call-In

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

SCHH/09/248 Requested Items

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

SCHH/09/249 Portfolio Holders' Update

The Chairman requested an update from each Portfolio Holder in attendance be provided to the Committee:-

Cllr Mrs Carole Hegley, Portfolio Holder for Social Care and Health informed the Committee that the following had occurred since the last meeting:-

- Maria Miller, Minister for Disabled People had visited Priory House to gather information on disabled living allowance. Officers had provided information on people in care homes, and working with disabilities. In addition, information was provided regarding the various ways people used their allowance. A copy of the personalisation DVD was to be forwarded to the Minister. The Minister was shown one of Central Bedfordshire's Care Homes.

- The Portfolio Holder had attended an Ageing Well Course which had been provided by the Local Government Improvement (formerly the IDeA). The course focused on 50+ ageing well. It provided examples of preparing for ageing and well being. Manchester Council were leading the way with a huge campaign in the centre of the city which had been controversial as it showed a 50+ couple in an embrace. It was a useful course and a lot of people had been met and it showed benchmarking across the councils.
- East of England – Lead members meeting was an opportunity to exchange ideas and benchmarking in relation to reablement services. The Assistant Director for Adult Care Services had been asked to provide a document to the East of England on the advances being made by Central Bedfordshire Council in this area.
- Tuesday 1 March 2011 – to attend a meeting regarding self funders and how to help them when their money has run out and they are reliant on the Council.
- The Member Reference Group – Adult Social Care had met last week and were making good progress with the improvements identified through Phase 2.

Cllr Mrs Rita Drinkwater, Portfolio Holder for Housing informed the Committee that the following had occurred since the last meeting:-

- Had attended the Self Financing Proposal seminar in London. There would be another to be held in March 2011. It was doubtful that any announcement of a service being available until April 2012 would be received.
- The Portfolio Holder would be visiting the Wixams Development on Tuesday 1 March 2011.
- The National House Building Federation met to discuss how councils should go forward with developments for 55+ people. It was noted that most developments were aimed at families but the 55+ had to be provided for.
- Homelessness was still under pressure but Officers were dealing with very well with any instances.

SCHH/09/250 LINK Update

The Committee received and noted the update from Bedfordshire LINK.

SCHH/09/251 Diabetes Care in Central Bedfordshire

The Committee received and considered the briefing notes relating to the Integrated Diabetes Model of Care and the Integrated Chronic Obstructive Airways Disease (COPD) Model of Care.

The Implementation Manager for Horizon Health Commissioning at NHS Bedfordshire explained to the Committee that she was the lead on the services redesign for two of the leading long term conditions within Bedfordshire. The reason for the redesign was with an ageing population and more people becoming unhealthy the NHS could not afford to provide treatment at the current level. In 2010 the NHS spent £6.9m and it was estimated that by 2030 the amount spent would be £11.5m on treatment for Diabetes.

A meeting would take place on 1 March 2011 with Bedford Hospital and the Luton & Dunstable Hospital to receive formally the redesign of the service provision of COPD and Diabetes. The goals of the redesign were to teach preventative health, people to learn and become better educated about diet and exercise and to have people become more self caring.

Another goal was to move people from acute care to GP care, supported by a specialist team including a podiatrist, dietician and specialist nurses. The new service provision would replace the thought process that hospital visits were a necessity. Primary care staff would begin a training programme which would be updated every 18 months. The training was not currently happening and staff were welcoming of the opportunity.

Supporters of the scheme included Dietary UK and Breathe Easy. The redesigns would be made available from October 2011 across the whole of Bedfordshire.

The Committee asked a number of questions in relation to the costing of the projects, how many teams would there be and what would happen to existing staff in some GP surgeries. The Implementation Manager assured the Committee that the financial implications had been taken to and considered by the Clinical Executive who had agreed with the suggestions and confirmed that funding would be available from April 2011 to allow the scheme to be implemented. The staffing issues would be covered through an eight week consultation process which would begin on 1 March 2011. Bedford Hospital and Luton & Dunstable Hospital through managed dialogue the options available and provided with eight weeks to determine if they wanted to be part of the implementation. The Committee noted that both hospitals had been involved in the redesign process since the beginning.

The Implementation Manager agreed to provide an update at the October 2011 Social Care Health and Housing Overview and Scrutiny Committee. The scheme will have launched at the beginning of the month.

RESOLVED

that the briefing notes for Integrated Diabetes Model of Care and the Integrated Chronic Obstructive Airways Disease (COPD) Model of care be noted.

SCHH/09/252 Continuing Health Care

The Committee received and considered the report which provided a background to NHS Continuing Healthcare and the current assessment process, activity for Central Bedfordshire and actions arising from the East of England review which was funded by the Joint Improvement Partnership. The Action Plan arising from the review was attached to the report.

The remit of the review was to ascertain why the East of England had a low take up of Continuing Care. It was noted the NHS Bedfordshire was the lowest. The review had recognised a number of recommendations to increase the number of people entering the system. It was noted that both the system and the accuracy were improving. The NHS was now carrying out regular dialogues with Local Authorities. Training was being provided to help raise awareness of people needing Continuing Care.

The Committee noted that the number of people accessing the NHS Bedfordshire website had risen and there had been a 19% increase in Central Bedfordshire to 3.88 people per 10k of population. The National average was 10 people per 10k of population thus Bedfordshire was ranked 143 out of 150 but the NHS were confident of improvement.

The Committee asked a number of questions relating to the assessment mode, timing of assessments, self funders and what neighbouring authorities were doing to get better results. The Lead on Continuing Care and the Interim Chief Executive, NHS Bedfordshire provided the following answers:-

- The NHS needed to make sure that assessments were being carried out at the correct time for both reablement and continuing healthcare. It was acknowledged that conditions change and patients could reach goals which could change their requirements.
- Self funders had be kept in the loop and made aware of options available and be made of aware of when to approach for assistance. Also making sure the GPs were aware of services and help available.
- Neighbouring Authorities were performing better with Bedford Borough on 4.2 people per 10k of population. The NHS was hoping to learn from the work being carried out by this and other neighbouring authorities.

The Assistant Director for Adult Care Services confirmed that there was no one factor which was impacting the low level for Central Bedfordshire. Part of the difficulty originates from putting the legislation into practice. Partnership working was a very important part of this process.

The Committee expressed concern that the hard to reach groups of people particularly ethnic minorities were not aware of what help was available. NHS Bedfordshire acknowledged that this can be an area of concern but as you cannot force people to complete the ethnicity questionnaire accurate figures can be difficult.

It was noted that the Council's website would be adding a link to the relevant area of the NHS Bedfordshire website. The existing link dealt specifically with National information and ties to end of life care. The public information booklet "NHS continuing healthcare and NHS-funded nursing care" will be circulated to libraries and doctors surgeries as points of information access. The Committee were asked to notify the Overview and Scrutiny Officer with any other areas which they felt would benefit from having the booklets. The Overview and Scrutiny Officer would liaise with the NHS for distribution.

RESOLVED

that the Continuing Healthcare report be noted.

SCHH/09/253 Update on the Revised Fair Access to Care Services Eligibility Criteria for Adult Social Care

The Committee considered a report which highlighted the impact of the new policy on new service users. The new policy was first considered by the Committee at their meeting in February 2010 (Minute No. SCHH/09/106 refers). At that meeting the Committee agreed that the threshold should be lowered from *substantial* to *moderate* and that an update be provided.

The Assistant Director Business & Performance informed the Committee that the data contained within the report showed the number of referrals received up to September 2010. It was noted that whilst the number of approaches had reduced the actual number of substantial cases had risen. The Moderate cases had not had a real change in number. The cases being referred were more complex and impacted on budgets as a result. Pressure has been factored into the budgets to try and mitigate this increase for 2011/12.

The Committee noted that the Officers had been working on improving the first point of contact. People contact Customer Services and answer questions which allow referrals to Social Services with sufficient information for assessments to be carried out and help to be provided at the right level from the beginning. Social Services are offering the support and service to prevent conditions deteriorating by helping sooner. It was noted that there had been an increase in Mental Health assessments and these were referred to SEPT.

Compliments had been received from the Occupational Therapists service and the reablement areas at the new approach being offered. The Assistant Director Adult Care Services confirmed that when people left reablement they were asked to complete a satisfaction questionnaire.

The Portfolio Holder for Social Care and Health confirmed that the council having taken a leap of faith lowering the threshold had not opened the floodgates and through the new focus on reablement had begun a positive way forward. Other Local Authorities were tightening their thresholds.

RESOLVED

that the report on the revised fair access to care services Eligibility Criteria for Adult Social Care be noted.

SCHH/09/254 Work Programme 2010 - 2011 & Executive Forward Plan

Members considered the Committee's work programme and noted that the following items would be moved within the programme following Chairman's Briefing which was held after the issuing of the agenda:-

- 1) NHS Bedfordshire Estates Strategy: 6 months progress report would be moved to the autumn to allow the GP Consortia and the NHS to determine sites for the GP hubs.
- 2) Acquiring Acute Services would be moved to the 13 June 2011 meeting.

RESOLVED

that the work programme as amended above be noted.

SCHH/09/255 Date of Next Meeting

The next meeting of the Social Care, Health and Housing Overview and Scrutiny Committee will be held on Monday 28 March 2011 in Room 15, Priory House, Monks Walk, Shefford starting at 10.00am.

(Note: The meeting commenced at 10.00 a.m. and concluded at 12.10 p.m.)

Chairman

Dated