

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, 12 May 2014.

PRESENT

Cllr Mrs R J Drinkwater (Chairman)
Cllr Mrs D B Gurney (Vice-Chairman)

Cllrs R D Berry
Mrs G Clarke
P A Duckett

Cllrs C C Gomm
Mrs S A Goodchild
M A Smith

Apologies for Absence: Cllrs N J Sheppard

Members in Attendance: Cllrs P N Aldis
Mrs A Barker Chairman of Children's Services
Overview and Scrutiny Committee
C Hegley Executive Member for Social Care,
Health & Housing
A M Turner Deputy Executive Member for Social
Care, Health & Housing

Officers in Attendance: Mrs P Everitt – Scrutiny Policy Adviser
Mr D Jones – Interim Consultant, Adult Social Care
Mr T Keaveney – Assistant Director Housing Services
Mrs J Ogley – Director of Social Care, Health and
Housing

Others in Attendance

Mrs J Archer	East & North Herts NHS Trust
Mrs J Evans	Head of Quality and Patient Safety, East & North Herts Trust
Ms R Featherstone	Chair - Healthwatch Central Bedfordshire
Mrs N Fraser	Director of Nursing and Patient Services, Bedford Hospital
Mrs A Lathwell	Head of Strategy & Corporate Planning, Bedfordshire Clinical Commissioning Group
Ms V Parsons	Head of Quality Development (Luton and Dunstable Hospital NHS Foundation Trust)
Mr P Rix	Associate Locality Director for Mental Health Central Bedfordshire
Mrs H Smart	Director Integrated Adult Services & Lead Nurse, SEPT Integrated Services
Mr R Winter	Executive Director Integrated Services Bedfordshire & Luton (Community Service)

SCHH/14/1 **Members' Interests**

Cllr Mrs G Clarke declared an interest as a family member worked for the Clinical Commissioning Group. Cllr Mrs D Gurney also declared an interest as a member of the North Hertfordshire Trust Panel.

SCHH/14/2 **Minutes**

RESOLVED that the minutes of the meeting of the Social Care, Health and Housing Overview and Scrutiny Committee held on 12 May 2014 be confirmed and signed by the Chairman as a correct record.

SCHH/14/3 **Chairman's Announcements and Communications**

The Chairman announced that a briefing session was planned for Members of the Committee on Mental Health Procurement and the Domiciliary Care Framework at 2pm on 24 June 2014. An all Member briefing on the Review of Healthcare Services in Bedfordshire was planned for 13 June, 2014. Further details would be sent to Members on the two briefings.

SCHH/14/4 **Petitions**

None.

SCHH/14/5 **Questions, Statements or Deputations**

None.

SCHH/14/6 **Call-In**

None.

SCHH/14/7 **Requested Items**

None.

SCHH/14/8 **Executive Member Update**

The Executive Member for Social Care, Health and Housing updated the Committee on issues that were not included on the agenda, these included:-

- Attendance at a Two Tick Forum for employees of people with disabilities.
- Attendance at the Houghton Regis Helpers Annual General Meeting.
- Visits to Tottenhoe Parish Councils as part of the Investment Plan regarding estate improvements and to Dunstable and Houghton Regis to view garage blocks. A further visit to Leighton Buzzard was planned.

- Arrangements for two Member briefings on Public Health and the Investment Plan prior to Council on 12 June 2014.
- Attendance at an Ivel Valley Caring Together meeting to discuss improvements in the locality.
- A visit to a new homelessness service based at the Black Horse Public House in Leighton Linlade.

SCHH/14/9 **East and North Hertfordshire NHS Trust Performance Presentation**

The Chairman welcomed Jacqui Evans, Head of Quality & Patient Safety and Jude Archer from the North and East Hertfordshire NHS Trust, who provided an update on the Trust's Quality Account 2013/14.

The Trust had improved facilities on its four main sites and shared their plans for further expansion with the Committee. Priorities for 2013/14 included improvements to services by reducing the numbers of falls, pressure ulcers and medication incidents, improve its stroke and mortality numbers as well as improve communications with patients and carers. The Trust had been successful in its training and development of staff and achieved a good staff satisfaction rate and low sickness levels.

In light of the presentation, Members raised a number of issues, which were addressed by the Trust's representatives:

- By what method had the Trust had achieve such a low sickness level for staff? In response Jacqui Evans explained that the Trust had analysed its sickness records and improved its management of long term sickness. There was a good team working ethos in place and the combination had lead to the improvement.
- Concerns regarding high mortality figures. The Trust acknowledged the number was high and explained there was a complicated methodology to work out the number of patients the hospital expected to die. The numbers were skewed because of the Hospice service attached to the Trust. Members were reassured that all case notes on deaths were reviewed to ensure all had been done to help the patient.
- Whether the current number of consultants for the orthopaedic and stroke services allowed the services to operate at a safe level? There was a concern that patients had to wait longer to be discharged and waiting times had increased. Jude Archer advised that additional cover had been arranged and the Trust was actively recruiting a stroke consultant. The Trust agreed to provide an update to future Committee on:
 - consultant cover and recruitment for Orthopaedics and Stroke services;
 - the number of patients discharged into Central Bedfordshire;
 - the Trust's policy on using Stanmore Hospital for paediatric services

RECOMMENDED that the presentation be noted and the North and East Hertfordshire NHS Trust inform the Committee of the additional information as requested.

SCHH/14/10 **Quality Accounts**

Bedford Hospital

The Chairman welcomed Nina Fraser, Director of Nursing at Bedford Hospital NHS Trust who introduced the Trust's Quality Account 2013/14 and provided an overview of the achievements in the last year and priorities for 2014/15.

These included:-

- Improved performance in patient safety. The Trust had implemented a new successful method to isolate patients with suspected infections on arrival at Hospital.
- A variety of methods would be used to collate data for the performance measure 'to improve the areas of most concern to patients'. The use of mobile text messaging had not proved to be a successful method.
- Clinical effectiveness to prevent avoidable deaths figures had been affected by specific incidences. A mortality review process had been introduced to improve awareness.
- Reference to the Care Quality Commissions' Inspection last year and the turnaround of the Hospital to meet the standards expected. The General Medical Council had agreed that Junior Doctors would return to Bedford Hospital in summer 2014.

In light of the update, Members raised a number of issues including:-

- Improvements in care that had resulted in the decrease in falls and whether good practice was shared with other care providers. Mrs Fraser responded that a forum to share good practice existed and was used for this purpose.
- The need to enhance awareness of new superbugs. Bedford Hospital had included information in a care bundle on the rising incidence of new antibiotic-resistant bacteria (CPE) as well as the signs of septicaemia. GPs and Commissioners received regular updates.

Luton and Dunstable Hospital

Victoria Parsons, Trust Board Secretary at the Luton and Dunstable Hospital introduced the Trust's Quality Account 2013/14 and provided an overview of the achievements and priorities for 2014/15. The Hospital had achieved all of its priorities and would strive to continue this upward trend.

The Hospital had introduced specialist clinical nurses to all wards, reduced falls and improved treatment of pressure ulcers. The quality of responses to complaints had improved with a low number of complainants unhappy with their response.

Following the improvements made to the outpatient facilities, patients had seen their appointments rescheduled and car parking had become a big issue. Administrative staff had received NVQ training in customer care to improve performance.

The Luton and Dunstable hospital had improved performance on hospital mortality across the fractured neck of femur priority with previous results putting them amongst the worst in the country.

In light of the presentation, Members raised questions in relation to car parking. The Trust Board Secretary acknowledged the problem and announced plans for a new staff car park close by. It was queried whether patients and staff used the new busway. It was confirmed this data was not collected at present.

South Essex Partnership University Foundation Trust (SEPT)

Richard Winter, Executive Director, South Essex Partnership University Foundation Trust (SEPT) and colleagues Helen Smart and Paul Rix presented the Trust Quality Account. Mr Winter referred to the success of the Trust's performance which had seen a reduction in the number of suicides, a successful mystery shopper exercise and a reduction in the number of pressure ulcers and falls. Mrs Smart referred to areas of innovation in care, especially the work on acute pathways and the redirection of patients from hospital and moved to appropriate care. From November 2011 the Trust had ensured no patient experienced a delay in their transfer and SEPT was the only Trust to achieve this.

Paul Rix referred to achievements in the care of mental health patients and the Learning Disability Service. The Trust had successfully developed screening and access programmes to help adults and children in need. A programme of work to help dementia patients was also underway.

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

- The low number of patients aged 75 years and over admitted to hospital was a great accomplishment. The Trust hoped to target the next age group in the same way.
- The suicide rate figures had reduced and work to combat the more vulnerable group of 35-55 year old men was planned. SEPT would undertake a survey on this issue and agreed to bring the information to the Committee for their consideration at a future date.

The Committee agreed that in all three Quality Accounts the priorities matched those of the public and patients and that the public had been involved in the production of the Quality Account.

RECOMMENDED

- 1. Bedford Hospital NHS Foundation Trust Quality Account 2013/14 be noted and a statement from the Committee be incorporated that the Committee were satisfied with the evidence provided.**
- 2. The Luton and Dunstable Hospital University Foundation Trust Quality Account 2013/14 be noted and a statement from the Committee be incorporated that confirmed they were satisfied with the evidence provided.**
- 3. The South Essex Partnership University Foundation Trust (SEPT) Quality Account 2013/14 be noted and a statement from the Committee be incorporated that confirmed they were satisfied with the evidence provided.**
- 4. That SEPT brief Members on the results of the suicide survey.**

SCHH/14/11 Bedfordshire Plan for Patients 2014/16

The Head of Strategy and System Redesign (Bedfordshire Clinical Commissioning Group [BCCG]) introduced the Central Bedfordshire Plan for Patients 2014-16. The Plan had been approved by the Health and Wellbeing Board and Members' attention was drawn to the engagement undertaken with participation groups to help develop the plan. Central Bedfordshire Council had been a key partner in its development. The Committee's attention was drawn to the progress made to improve services and ambitions for the next two years.

In light of the update, Members discussed the following:-

- Whether voluntary sector and patient groups in the community had been included in the engagement progress. The Head of Strategy and System Redesign, BCCG, confirmed the voluntary sector had been represented at meetings.
- That savings achieved by the BCCG from £1.9m to £11m was not the result of cutting or reducing services. The savings had in fact been achieved through transaction cost efficiencies.
- Whether the recent launch of the campaign 'Choosing Well' had been successful. The Head of Strategy and System Redesign, BCCG advised it was too early to measure the results of the campaign, however, education of the system change was paramount and the Better Care Fund would help bring the changes about.

The Director of Social Care Health and Housing thanked the BCCG for the Plan for Patients 2014/16 that was specifically focussed on Central Bedfordshire.

NOTED the report.

SCHH/14/12 Better Care Fund Report

The Chairman agreed that this item be deferred to the next meeting of the Committee scheduled on 23 June 2014.

SCHH/14/13 Allocations Policy

The Assistant Director Housing introduced a report on the draft Housing Allocations Policy. The report was the culmination of two years work led by Members following the introduction of the Localism Act 2011. Proposals in the draft policy responded to issues and priorities identified by Members to ensure local housing was prioritised for local people and supported low paid working households.

The report outlined evidence collated during the review, the aims of the new policy and the potential benefits that included the alignment to the Council's Tenancy Strategy, the prohibiting of cross-border mobility, and the opportunity given to the Council to make the best use of the housing stock.

The key policy changes were included in a presentation to the Committee and if adopted the Policy would see the Housing Service focus on the needs of residents who the Council had a duty to assist. Operational changes to the Housing Service would include a move to on-line housing applications and self-assessment tool and a personalised housing options plan. Housing officers would offer help to tenants looking for work.

A full consultation had been undertaken and responses were in general supportive of the proposed changes. A full equality impact assessment had been completed and close monitoring of the impact of the policy would be made to determine whether there was evidence of discrimination against residents. In addition, the Assistant Director Housing reported a further four week consultation would be undertaken on the proposal to prioritise older people living within 2 miles of an advertised property so that they could continue to benefit from existing support networks.

In light of the report and presentation Members discussed a number of issues and concerns:-

- Whether a resident, able to meet the cost of rented accommodation would be excluded from the register. The Assistant Director Housing explained that if circumstances changed for a resident, an application could be made. However, to manage expectations these residents would not meet the proposed criteria.
- Concern that workers in the voluntary sector would not be able to supply a contract of work to housing officers. Volunteers were provided with an agreement and it was proposed the wording be amended.
- Whether Housing Officers would continue to support vulnerable residents in need of housing. The Assistant Director Housing reassured Members that the Council had a good supply of accommodation and residents not in work would not be disadvantaged. It was envisaged that the offer of incentives to residents to find employment would make a positive impact.
- That Officers closely monitor the impact of the new policy on residents and report to a future meeting of the Committee.

Members commended the Policy as an innovative piece of work.

RECOMMENDED that the report be noted and the impact on residents as a result of the implementation of the new Housing Allocation Policy be closely monitored with concerns reported to the Committee.

SCHH/14/14 **Draft Housing Investment Plan**

The Chairman agreed to defer this item to a future meeting of the Committee.

SCHH/14/15 **Work Programme 2014-15 and Executive Forward Plan**

The Chairman agreed to defer this item to the next meeting of the Committee.

(Note: The meeting commenced at 10.00 a.m. and concluded at 1.55 p.m.)

Chairman

Date