

## 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, 22 January 2018.

### PRESENT

Cllr P Hollick (Chairman)  
Cllr P Downing (Vice-Chairman)

Cllrs P A Duckett  
K Ferguson

Cllrs Mrs S A Goodchild  
G Perham  
A M Turner

Apologies for Absence: Cllrs Mrs A Barker  
Mrs D B Gurney  
Ms C Maudlin  
Cllr B J Spurr

Substitutes: Cllrs C C Gomm

Members in Attendance: Cllrs Cllr S Dixon Executive Member for Families,  
Education and Children and Lead  
Members for Children's Services  
Mrs C Hegley Executive Member for Adults, Social  
Care and Housing Operations (HRA)  
Mrs T Stock Deputy Executive Member for Health

Officers in Attendance: Mrs P Everitt Scrutiny Policy Adviser  
Mrs J Ogley Director of Social Care, Health and  
Housing

Others in Attendance Dr R Jayalath General Practitioner, BCCG  
Dr A Low Chair, Bedfordshire Clinical  
Commissioning Group  
Dr C Marshall General Practitioner, BCCG  
Mr M Miller Director of Finance, BCCG  
Mr D Simpson Interim Chairman Central  
Bedfordshire Healthwatch  
Mr A Street Turnround Director, BCCG  
Ms S Thompson Accountable Officer, BCCG

SCHH/17/54. **Minutes**

**RESOLVED** that the Minutes of the meeting of the Social Care Health and Housing Overview and Scrutiny Committee held on 27 November 2017 be confirmed and signed by the Chairman as a correct record.

SCHH/17/55. **Members' Interests**

Cllr Duckett declared an interest at item 13 – Primary Care in Central Bedfordshire, in his role as a part time domiciliary care worker.

SCHH/17/56. **Chairman's Announcements and Communications**

The Chairman advised the Committee of recent news and events that included:

- The recent Central Government changes that saw Social Care responsibilities moved to the Department of Health.
- A Joint Health Overview and Scrutiny would take place on 24 January 2018 in Milton Keynes.

SCHH/17/57. **Petitions**

None.

SCHH/17/58. **Questions, Statements or Deputations**

None.

SCHH/17/59. **Call-In**

None.

SCHH/17/60. **Requested Items**

None

SCHH/17/61. **Executive Members Update**

The Executive Member for Adults, Social Care and Housing Operations (HRA) advised the Committee of the revised portfolio responsibilities. Cllr Steve Dixon had responsibility for all matters relating to Children's Services and Cllr Eugene Ghent had responsibility for Assets and Housing Delivery.

The Executive Member raised concerns about the growing trend that saw developers not delivering the requirement of affordable housing and rentable properties because schemes became unviable. In response to concerns from the Committee, the Executive Member for Assets and Housing Delivery was invited to attend the March meeting to advise Members how the Council planned to ensure affordable housing was delivered in Central Bedfordshire.

In response to a question on the proposed cap on HRA borrowing potential, the Executive Member advised Government guidance was not yet available, however, the Council had reduced the amount it repaid on HRA capital to release £9m of funds so schemes like Houghton Regis Central and Crescent Court could begin.

**SCHH/17/62. Bedfordshire Clinical Commissioning Group Financial Position update**

The Accountable Officer for Bedfordshire Clinical Commissioning Group (BCCG) gave a verbal update on its financial position that had seen the BCCG return to special measures by NHS England. Although some progress had been made by the BCCG, it had not achieved its control total and NHS England continued to provide support and expertise to enable the BCCG to attain and sustain a surplus position of £11.4m in 2018/19.

In response to a question regarding the allocations of funds to the BCCG, the Chairman of BCCG, advised its allowance was a national calculation and budgets had continued to be stretched by acute hospital costs and unplanned admissions. This position was exacerbated by planned QIPP savings that had not been realised. The growth in population and the time lag in funds being received to cover this growth continued to cause a pressure on finances.

The BCCG was fully supported by GPs and represented some of the lowest referring areas in the Country. Commitment towards the new models of working with Social Care and partners was fundamental in delivering a viable financial position in the future.

**RECOMMENDED the Committee: -**

- 1. While understanding the national picture, the challenges and progress made locally, there is concern at the changing financial goals, recognition of the need in Central Bedfordshire and underfunding leading to a return to special measures.**
- 2. Looks to see the current financial goal being achieved and plans laid for the £11.4m surplus in 2018/19.**
- 3. Recognise the desire of the BCCG to create care between GPs and hospitals and this appears to be in line with CBC's own strategic plan to create integrated care provision and hubs.**

**SCHH/17/63. Mental Health Crisis Care Service Update**

Dr Roshan Jayalath, Clinical Lead for Mental Health Services at BCCG advised crisis care mental health services, managed through ELFT, were being delivered at Primary Care service level. Following two public engagement sessions, the provision of services at GPs' surgeries was supported by service users. The addition of four secondary care Mental Health link workers enabled residents access to local, and if required, specialist care appointments. Residents were also able to receive professional support through the 111 telephone service that aimed to provide 24/7 support in 2018. Feedback had been positive on the new model of service and the introduction of wellbeing cafes and early help sessions had been welcomed and had made an immediate impact.

Carolyn Kurzeja advised the street triage pilot scheme that saw care provided by police, social and mental health professionals to residents in crisis, had come to an end. The success of the scheme would be evaluated to ensure the service had provided the right care in the right place and that funding for the service could be met.

Members acknowledged that early access of the street triage service had relieved pressure on secondary care, however, funding was the issue going forward. The Committee requested details of the evaluated street triage scheme when completed.

A Member referred to Police and Crime Commissioner's Victim hub and proposed some joined up working to help residents in crisis.

**RECOMMENDED the Committee**

- 1. Welcomes improvements to crisis care Mental Health provision giving patients direct access to care at both primary and second stages.**
- 2. Seeks feedback on the results of evaluation and how the BCCG will achieve the national target for access to services.**
- 3. Emphasises the importance of patients' voices and in listening to family and friends.**

**SCHH/17/64. Non-Emergency Patient Transport Update**

Alan Streets – Turnaround Director, BCCG, gave an update on the emergency measures put in place by the BCCG that had resulted in the continued provision of non-emergency patient transport to residents, delivered by the East of England Ambulance Service Trust (EEAST). A new contract had subsequently been signed in December 2017 by the EEAST to continue to run the service.

In general, Members were able to report an improvement in this service through the feedback from residents. It was noted, however, there had been a consequential cost pressure as a result of the emergency situation in 2017/18 that would be carried forward in 2018/19.

**RECOMMENDED the Committee: -**

- 1. Congratulated the East of England Ambulance Services providing the non-emergency patient transport following the demise of the then contract.**
- 2. Feedback on the newly contracted service be provided in June 2018.**

**SCHH/17/65. Primary Care in Central Bedfordshire update**

Dr Chris Marshall, GP in Leighton Buzzard, advised of the new model of working by the remaining three practices in the area. Transformation funding had been awarded to enable a primary care home concept to be introduced. The Practices had favoured the Multi Disciplinary Team (MDT) approach to care for patients and regular development sessions continue to be held together with mental health, social care and community services and GPs' services. The pilot would allow the surgery to work in a collaborative way and skilled services would be shared throughout the area. The eye specialist was an example of a shared service and would avoid the need for patient visits to hospital.

A Member workshop was planned on Friday, 16 February 2018 to discuss primary care workforce issues and how the BCCG would address specific concerns and pressure points in Central Bedfordshire.

In response, Members welcomed the Leighton Buzzard initiative to create a virtual hub for residents. It also supported the provision of care services for frail and elderly residents in care homes. Dr Low also advised that skilled teams outsourced by the Luton and Dunstable Hospital provided care for long term conditions like diabetes in care home settings.

The Acting Chairman, Healthwatch, raised his concern that residents are not being told about the changes and it was imperative to educate them in this regard.

The Chairman of BCCG advised checks on the health and wellbeing needs of the population in Central Bedfordshire included those with learning disabilities and the frail and elderly and formed part of the preventative approach being implemented in the Primary Care setting. This approach and the sharing of specialist skills would seek to ensure scarce resources are used in the most appropriate way.

**RECOMMENDED the Committee: -**

- 1. Welcomes the collaborative approach adopted in Leighton Linslade involving skill mix among GPs and Social Care colleagues to meet the changing needs of the local population and the provision of an integrated health and social care service.**
- 2. Expect a clear and positive line of communication with patients, including those with learning difficulties, to understand their views as to how services are being delivered.**
- 3. Notes the pressures of increasing housing and the consequent population, the pressures on GPs and their desire to develop areas of interest, and that this brings further pressures on General Practice.**
- 4. Will welcome the feedback from planned workshops and the work programme.**
- 5. Notes plans for a collaborative approach in other areas across Central Bedfordshire.**

**SCHH/17/66. Stop Smoking Service Remodel**

The Assistant Director Public Health and the Principal Stop Smoking Manager delivered a presentation that outlined the current Stop Smoking Service provided primarily as a successful face to face basis for the Central Bedfordshire, Bedford Borough and Milton Keynes council areas. In order to take advantage of virtual opportunities and provide budget efficiencies, the Assistant Director welcomed the Committee's views.

As part of the review, models of good practices would be considered as well as group sessions provided on tablet or phone devices. The views of service users would also be requested, and it was proposed a new style service would be provided in 2019.

The Committee supported the use of e-cigarettes as an alternative to smoking as well as group sessions and advice in schools on the damage smoking does to health.

**RECOMMENDED the Committee: -**

- 1. Welcomes the work of the Stop Smoking service and its contribution to the improved health of individuals.**
- 2. Emphasises the need to highlight the role of vaping and its health contribution to Stop Smoking.**
- 3. Commends a group approach to helping quitters as well as working with schools to deter youngsters from starting to smoke.**
- 4. Looks forward to a reduction in the cost of service as its success is demonstrated.**

**SCHH/17/67. Customer Relations Adult Social Care Annual Report 2016/17**

The Assistant Director Resources introduced the Customer Relation Adult Social Care Annual Report that outlined the complaints and compliments received by the Directorate. Services continued to perform well and Members were reassured that complaints were investigated and, where appropriate, staff training sessions held both internally and externally to learn from services failure.

The Assistant Director advised that consistency of services was important, and it was vital for officers to manage expectations and engagement with residents, so they are in no doubt about the service they will receive from us.

**RECOMMENDED**

- 1. The Committee welcomes the way in which the service performs and the key improvements to the services as well as the low financial redress incurred following investigation.**
- 2. Expects an eye to be kept on service performance but especially on complaints regarding quality of care, poor customer care and communication.**
- 3. If there is a training issue that this be implemented.**

**SCHH/17/68. Work Programme 2017/18 and Executive Forward Plan**

**RECOMMENDED that the work programme be agreed subject to the following amendments: -**

- 1. Introduction to the new Community Health Service provider, ELFT – deferred to June 2018**
- 2. CCG delegated commissioning role – deferred to June 2018**
- 3. Update on the Non Emergency Ambulance Service provided by the East of England Ambulance Service Trust – June 2018.**

(Note: The meeting commenced at 10.00 a.m. and concluded at 1.20 p.m.)

Chairman.....

Dated.....