

## **BATH AND NORTH EAST SOMERSET**

### **WELLBEING POLICY DEVELOPMENT AND SCRUTINY PANEL**

Friday, 16th May, 2014

**Present:-** Councillors Vic Pritchard (Chair), Sarah Bevan, Lisa Brett, Eleanor Jackson, Anthony Clarke, Bryan Organ and Brian Simmons

#### **1 WELCOME AND INTRODUCTIONS**

The Chairman welcomed everyone to the meeting.

#### **2 EMERGENCY EVACUATION PROCEDURE**

The Democratic Services Officer drew attention to the emergency evacuation procedure.

#### **3 APOLOGIES FOR ABSENCE AND SUBSTITUTIONS**

Councillors Cherry Beath, Sharon Ball and Kate Simmons had sent their apologies to the Panel. Councillor Brian Simmons was a substitute for Councillor Kate Simmons.

Councillor Lisa Brett was the Vice-Chair of the Panel for this meeting.

Councillor Simon Allen, Cabinet member for Wellbeing, also had sent his apologies for this meeting.

#### **4 DECLARATIONS OF INTEREST**

Councillor Eleanor Jackson declared an 'other' interest as a Council representative on Sirona Care and Health Community Interest Company.

Councillor Vic Pritchard declared an 'other' interest as a Council representative on Sirona Care and Health Community Interest Company.

#### **5 TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIRMAN**

There was none.

#### **6 ITEMS FROM THE PUBLIC OR COUNCILLORS - TO RECEIVE DEPUTATIONS, STATEMENTS, PETITIONS OR QUESTIONS RELATING TO THE BUSINESS OF THIS MEETING**

The Chairman informed the meeting that the Panel received a statement from Pamela Galloway related to the Hydrotherapy Services agenda item. The Chairman also said that points raised in the statement might be considered later on the agenda, during the debate on this matter.

## **7 MINUTES**

The Panel confirmed the minutes of the previous meeting as a true record and they were duly signed by the Chairman.

## **8 CABINET MEMBER UPDATE (10 MINUTES)**

The Chairman informed the meeting that Councillor Allen had sent his apologies to this meeting.

The Chairman suggested to the Panel to consider Cabinet Member Update now and if there were any questions, or queries, that needed to be answered, then those would be included in the next update.

The Chairman invited Jane Shayler (Deputy Director for Adult Care, Health and Housing Strategy and Commissioning) to give an update to the Panel (attached as appendix to these minutes).

Councillor Jackson commented that one Sunday morning she was walking by the Bath Abbey and counted seven rough sleepers around the Abbey.

The Chairman suggested that the next Cabinet Member update should include a joint response from the Cabinet Member for Wellbeing and also the Cabinet Member for Homes and Planning, with the support from Housing Services, on current position regarding rough sleepers in the area.

## **9 CLINICAL COMMISSIONING GROUP UPDATE (10 MINUTES)**

The Chairman invited Dr Ian Orpen (Clinical Commissioning Group – CCG) to give an update to the Panel.

Dr Orpen updated the Panel with current key issues within the BANES CCG (attached as appendix to these minutes).

The Panel made the following points:

Councillor Bevan asked if the CCG had been collecting feedback from the public exhibitions they organised and what had been done with it.

Dr Orpen responded that if the CCG's Communications Team had been collecting the feedback and used the same either to communicate with specific groups or service providers.

Councillor Brett asked if the Referral Support Service would help addressing the issue of signposting.

Dr Orpen responded that the Referral Support Service would help addressing the issue of signposting to some extent, though the Referral Support Service was more about supporting people with the 'Choose and Book' service.

Councillor Clarke commented that the Council signed up to look after military/ex-military personnel and veterans and asked if the CCG responsibility was to give priority to veterans. Councillor Clarke asked this because servicemen had had trouble navigating the RUH in particular, and if the CCG would undertake some monitoring on this matter.

Tracey Cox responded that she would be happy to take away comments from Councillor Clarke and discuss with the relevant providers.

Councillor Jackson commented that the CCG's roadshows should have been publicised better to attract more public. Councillor Jackson also said that the Panel should keep an eye on the interface between the Council's public health responsibilities and how it fits with the CCG's remit.

Councillor Jackson added that mental health issues had been underestimated and ought to be one of the CCG's priorities.

Dr Orpen replied that the CCG would have a review of their roadshows and they would be looking to attract more public to it. Dr Orpen agreed with Councillor Jackson about her views on the public health within the Council and the CCG.

Dr Orpen also said that mental health had not been singled out as one of the CCG's priorities because it has been crossing over other areas. Nevertheless, Dr Orpen took on board comment from Councillor Jackson.

The Chairman thanked Dr Orpen for an update.

## **10 HEALTHWATCH UPDATE (10 MINUTES)**

The Chairman invited Pat Foster and Ann Harding to introduce the report.

The Panel unanimously welcomed new format of the report. The Panel felt that the report was accessible and easy to understand with a lot of useful information on what the Healthwatch B&NES did to date. Some Members of the Panel commented that the report could be slightly shorter next time.

Pat Foster took these comments on board.

The Panel asked if the Healthwatch had had a contact with the Patient Liaison Services from the RUH.

Pat Foster responded that the Healthwatch had been recently to visit the Patient Liaison Services from the RUH and that they were hoping to build stronger relationship.

The Chairman thanked Healthwatch representatives for an update.

## 11 THE ROLE OF CQC – CHANGES TO REGULATION (20 MINUTES)

The Chairman invited Daniel Lloyd (Inspection Manager) to introduce the report.

The Chairman also informed the meeting that he had sent procedural briefing (on how the CQC operates) to the Panel in advance of the meeting.

Daniel Lloyd took the Panel through the report.

The Chairman commented that 73% of care homes had met the required standards. Although many issues that required improvements were minor, the CQC, in recognising these issues as non-compliant, all too often gave an adverse score.

The Chairman also commented that the CQC inspection outcomes go from 'good' to 'needing the improvement', which were quite profound divisions of assessment.

Daniel Lloyd explained that people should aim for 'good' or 'outstanding'. Some care homes, for example, would say 'it is only a minor thing' and those could be indicators that something had been happening which would need to be investigated,

The Chairman said that the public would make their perception of the service, especially when they see that compliance was not mainly 'good' or 'outstanding', and their perception might be different. For instance - they might go somewhere else. The Chairman said that the CQC also has a responsibility in addressing public perception.

Councillor Brett asked where complaints would go when received from the public or service users.

Daniel Lloyd explained that complaints go directly to the inspector who has been responsible for that service. Those complaints, which were suggesting breach of regulation, would be dealt via the CQC intelligence section.

Councillor Organ suggested that some sort of CQC publication, with ten bullet points written on it, should go to every household in the area.

Daniel Lloyd took this comment on board.

Councillor Brett commented that it would be much better if ratings were divided in categories (i.e. quality of care, administration, etc) so members of the public could feel comforted that even though a care home in question might have poor ratings in administration, they still had excellent ratings in quality of care.

Daniel Lloyd took this comment on board.

Councillor Bevan commented that some of unpaid carers were children and asked if there was any particular consciousness and awareness on that issue.

Daniel Lloyd responded that the CQC had been using experts and specialist to get the feedback from those children in terms of their needs.

The Chairman thanked Daniel Lloyd for the presentation/report.

It was **RESOLVED** to note the presentation and to invite the Care Quality Commission representatives with a further update/s at future meetings.

## **12 URGENT CARE UPDATE: BATH HEALTH COMMUNITY - WINTER REPORT 2013/14 (30 MINUTES)**

The Chairman invited Dominic Morgan (Urgent Care Network Programme Lead for NHS Bath and North East Somerset Clinical Commissioning Group) to introduce the report.

Members of the Panel welcomed the new approach in terms of the leadership, planning, management, monitoring and also to other changes to the whole Urgent Care System management.

The Panel also welcomed joint working between commissioners (Clinical Commissioning Group) and providers (Sirona and the RUH).

The Panel commented that Urgent Care would be experiencing most of the pressure in winter.

Dominic Morgan explained that finance and workforce for winter months had been, and would continue to be, the biggest challenge for Urgent Care.

It was **RESOLVED** to note the report.

## **13 BRIEFING ON THE DEVELOPMENT ON THE VASCULAR SERVICE (ADULTS) MODEL OF CARE (20 MINUTES)**

The Chairman invited Steve Sylvester (Head of special Commissioning) to introduce the report.

The Panel also had an opportunity to watch a video on YouTube, made by the NHS England, where Andy Weale, Consultant Vascular Surgeon at North Bristol NHS Trust, explained the proposed developments to specialised vascular services in Bath and Bristol.

The Chairman, on behalf of the Panel, felt that the proposals would be medically more efficient and also more financially effective.

It was **RESOLVED** to support Vascular Services (adults) proposals as printed.

## **14 HYDROTHERAPY SERVICES (15 MINUTES)**

The Chairman invited Mike MacCallam (Joint Commissioning Manager for Learning Disabilities) to introduce the report.

Following the debate between Members of the Panel and officers it was **RESOLVED** that the Panel would receive a further update report with the following information:

- 1) Number of people currently benefiting from hydro-therapy services;
- 2) How would the service be managed; and
- 3) What would be the realistic cost of the Writhlington pool adaptation?

## **15 HOMECARE REVIEW 2010 UPDATE (30 MINUTES)**

The Chairman invited Councillor Eleanor Jackson to introduce the report.

Councillor Jackson took the Panel through the report highlighting what had been happening with the Home Care since the review in 2010 and what her concerns were for some particular areas, as printed in the report.

Councillor Jackson and Clarke thanked officers and care providers who took part in this review and also who provided an up to date information for this report.

Councillor Jackson suggested that the Panel should revisit this matter in year 2017, just to keep a close eye on the issues which had been identified by this report and also by the CQC.

Councillor Bevan expressed her concerns that newly trained care staff might not be adequately prepared for clients with mental health issues, especially where there could be a case of language barrier.

Councillor Jackson said that the Task and Finish Group from 2010 did not look at issues around communication skills of clients who found it difficult to explain they had problems with stress, anxiety, etc. Some speakers of different languages were not getting the degree of care they needed. Councillor Jackson said that this was an area of concern for her.

Councillor Clarke said that domiciliary care service was in transition when the Task and Finish Group looked into this issue back in 2010. It now looks like a well-run service. Councillor Clarke also said that there had been a big turnover of people working in Domiciliary Care, though this is a national issue as these people are not the best paid workers in the country. Councillor Clarke summed up by saying that we were still getting good quality of staff and provide good service in this area

It was **RESOLVED** to note the report and to receive a further update in 3 years' time.

## **16 SOUTH WESTERN AMBULANCE SERVICE (NORTH AREA) JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE: COUNCILLOR MEMBERSHIP (5 MINUTES)**

The Chairman introduced the report.

It was **RESOLVED** that Councillor Vic Pritchard will be the third member representative from B&NES on the South Western Ambulance Service (North Area) Joint Health Overview and Scrutiny Committee.

**17 PANEL WORKPLAN**

The meeting ended at 1.30 pm

Chair(person) .....

Date Confirmed and Signed .....

**Prepared by Democratic Services**