

# HEALTHIER SELECT COMMITTEE

## MINUTES OF THE MEETING HELD ON TUESDAY, 12 OCTOBER 2010

**Councillors Present:** George Chandler (Substitute) (In place of Andrew Rowles), Paul Hewer, Tony Linden, Gwen Mason and Julian Swift-Hook (Vice-Chairman)

**Also Present:** Julia Waldman (WBC Service Manager) and April Peberdy (Head of Partnerships – West Berkshire, NHS Berkshire West) and Jo Naylor (WBC Principal Policy Officer).

**Apologies for inability to attend the meeting:** Councillors Geoff Findlay and Andrew Rowles. Councillor George Chandler substituted for Councillor Rowles. In Councillor Findlay's absence, Councillor Julian Swift-Hook chaired the meeting.

### PART I

*(Councillor Julian Swift-Hook in the Chair)*

#### 16. Minutes

The Minutes of the meeting held on 6<sup>th</sup> July and 9<sup>th</sup> September 2010 were approved as a true and correct record and signed by the Chairman.

#### 17. Declarations of Interest

Councillor Julian Swift-Hook declared an interest in relation to all items on the Agenda that related to West Berkshire Mencap, as he was the Chairman of this organisation. He reported that the interest was personal and non prejudicial, he determined to remain to take part in the debate and vote on the matters.

#### 18. Urgent Items

Councillor Julian Swift-Hook requested that Members consider a proposal to look at delayed discharges from the Royal Berkshire NHS Foundation Hospital and the West Berkshire Community Hospital as an urgent item at the next meeting.

Members of the Select Committee were supplied with the background on this issue including a copy of Councillor Swift-Hook's question to Council on 23<sup>rd</sup> September and the detailed response provided by Councillor Joe Mooney (Portfolio Holder for Adult Social Care) which clarified the numbers and extent of delayed discharges.

Members relayed concerns about fines that were being reported in other neighbouring local authority areas and considered this an important item.

**RESOLVED that the issue of delayed hospital discharges affecting residents within West Berkshire be considered as a priority for this Select Committee at the next meeting.**

#### 19. Scrutiny of Deprivation and Family Poverty in West Berkshire

Mrs Julia Waldman (WBC, Service Manager) introduced Item 5 (Agenda Item 5) and gave an overview of the work underway to tackle deprivation and family poverty in West Berkshire. She described specifically the statutory duty placed on the local authority in relation the Child Poverty Act and how a Needs Assessment had to be completed by March 2011.

## HEALTHIER SELECT COMMITTEE - 12 OCTOBER 2010 - MINUTES

The focus for the current work on family poverty only addressed families with children under 19 years of age and not the entire population. Work was being undertaken by the Prevention and Early Intervention sub-group of the West Berkshire Children's Trust. Mrs Waldman described the Government's stance of allowing local authorities the flexibility to develop appropriate strategies according to their own local needs.

Mrs Waldman described the requirement for a robust Needs Assessment Tool that would highlight what poverty actually meant and welcomed the toolkit supplied by the Improvement and Development Agency (IDeA). She explained the complex process of using a wide range of data; e.g. Joint Strategic Needs Assessment (JSNA), Sustainable Community Strategy (SCS) and local data, etc. She explained that Lambourn and Greenham were both identified as 'place based' areas of deprivation within the District. She described how both 'place based' and 'people based' research methods would need to be used to identify families at risk.

Members asked about whether the Family Poverty Strategy should also consider the needs of the elderly living in poverty. Mrs Waldman explained the specific remit of the existing work was with families with children under 19 years of age. Mrs Peberdy described how data sampling methods could be revised to collect this type of information from local General Practitioners (GPs).

Members enquired as to the role of the Select Committee assisting in this agenda. Mrs Waldman replied that it would be helpful for the Select Committee to comment upon the Needs Assessment Tool once this had been developed.

A question was asked about the extent to which health issues caused family poverty or whether health related complaints were more a consequence of poverty? It was explained how substance misuse issues, mental health or physical disabilities were all often associated with a decline into poverty.

Members enquired about the differences between family poverty in rural areas and more urban areas. It was explained that typically in rural areas, the major risk factors for poverty included lack of transport, lack of employment opportunities, lack of training for jobs, affordable housing availability and accessibility of West Berkshire Council services. In the urban areas, it was more likely that the factors were those associated with disadvantaged communities such as crime, being a victim of crime, antisocial behaviour, etc.

Members discussed the large divide between those living in poverty and the general affluence of the rest of the District. It was also mentioned how even in some urban housing estates there could be a large degree of isolation and detachment from basic shops and services.

Members also discussed poverty in rural Lambourn and the low wages that were often associated with jobs in the racing community. Equally an attainment gap existed within West Berkshire, with deprivation linked to poorer outcomes in academic achievement.

It was suggested that the Family Poverty Strategy must include intelligence from Ward Councillors to receive their perspective on the issues in their communities.

Equally some Members enquired whether Greenham Common Trust grants might be available for the most deprived families to ensure children that attend school had the necessary Physical Education (PE) kit to undertake sports activities at school.

Members felt that the approach and Family Poverty Strategy should come back to the Select Committee for further consideration.

**RESOLVED** that a progress report be received in the new year on the Needs Assessment Tool and work underway to develop a Family Poverty Strategy for the District.

**20. Care for the Future: A developing vision of healthcare for Berkshire and Buckinghamshire**

April Peberdy (Head of Partnerships for West Berkshire, NHS Berkshire West) attended as a substitute for Beverley Searle (Director of Partnerships and Joint Commissioning) she described that "Care for the Future" was a transformational programme to reform service and enable the NHS to keep up with the increased demand on health services, whilst still improving quality and driving down costs.

The changes included transferring hospital care to the community setting wherever possible and she explained that comments were being sought by 31<sup>st</sup> October 2010. Mrs Peberdy explained how generally patients preferred receiving care closer to home as this prevented the need to journey to acute hospitals.

Mrs Peberdy described that Specialist Services would be delivered in particular hospitals as centres of excellence. She described that patient choice was a significant consideration as well as educational measures to allow patients the ability to manage their own conditions better. This was particularly important for those with Chronic Obstructive Pulmonary Disease (COPD) in order to prevent frequent hospital admissions.

Members asked about the "Choose and Book" policy of the NHS and how this might influence services in relation to "Care for the Future".

Members welcomed the introduction of the Community Matron role but enquired about the timescales, the need for training of staff and the risk to patients unless all agencies involved in health and social care were working efficiently together and provided a seamless service. It was noted that the system sometimes fails the patient and that the changes presented a particular challenge to achieve joint working by 2012.

Mrs Peberdy described the work underway mapping patient pathways in order to improve the patient experience and clarify all the constituent parts of the healthcare system that had to identified and work properly together.

Members asked whether there would be greater investment within community services, including small General Practitioner (GP) surgeries in the rural areas. It was described how preventing acute hospital admissions should save a significant sum of money as costs of acute hospital beds were in the region of £2-3k per patient per week. It was further explained that GPs in the future would have a far greater service commissioning role and would receive money to support this service delivery.

Treatment at local GP surgeries was also seen as advantageous in terms of preventing the need to travel and causing less stress for the patient.

Members described certain hospital centres which were already acknowledged for their specialist services; including Royal Berkshire Foundation Trust for cardiology services and the John Radcliffe in Oxford for burns, neurology and cancer care.

Members discussed the need for large enough GP surgeries to be available to undertake additional treatment procedures. A concern was raised that delays might occur as a consequence of the planning process.

Mrs Peberdy explained that although the overall funding to the NHS was increasing this was not keeping up with the increase in demand for services.

## HEALTHIER SELECT COMMITTEE - 12 OCTOBER 2010 - MINUTES

Members raised a point about how the new GP commissioning arrangements might work and if former NHS Berkshire West employees would be employed to undertake the commissioning functions. Mrs Peberdy explained it was not clear how the new structures would work, as yet, but that within a set allocation of money it was still possible to drive up performance.

Members were concerned about the natural linkages with Buckinghamshire area as they argued there were quite different urban and rural areas within this geographical boundary.

A point was also made in relation to previous mergers with Buckinghamshire for example when South Central Ambulance Trust formed. This resulted in an overall drop in performance than when Berkshire was a separate Ambulance Trust. Concerns were raised as to the potential risk of the same negative impact on performance occurring.

The fact that NHS patients occasionally received treatment at non-NHS Trusts within the area was also made.

It was requested that in the New Year a progress report to keep abreast of the key milestones be brought to the Committee.

### **RESOLVED that:**

- (1) The “Care for the Future” debate at this meeting becomes the basis of the Healthier Select Committee’s submission to the NHS Berkshire West.**
- (2) An update be provided in the new year on the progress of the “Care for the Future” proposals.**

## **21. Work Programme**

The Vice-Chairman introduced the Work Programme (Agenda Item 7) which outlined the existing work items agreed for the Municipal Year.

It was recommended that the item on Local Area Agreement targets be renamed but some progress against existing health related performance indicators was still required.

Members felt further scrutiny of maternity services was needed to determine if the number of births was putting pressure on the maternity unit at the Royal Berkshire NHS Foundation Hospital. A written report was requested for the next meeting.

Members felt that the issue of adult social care was still important. Some felt this was broader than just exploring criteria for eligibility but understanding the preventative nature of services and the impact of the Putting People First Transformation Programme. It was agreed that Mrs Jan Evans (Head of Adult Social Care) be invited to attend the next meeting to update on the current position.

Members were aware that some patients were experiencing technical problems with booking system of consultant appointments at the Royal Berkshire NHS Foundation Hospital Trust. It was requested than an investigation occurred to determine if the problem still existed and depending on the outcome, this might become an item for the next agenda.

### **RESOLVED that:**

- (1) Delayed hospital discharges of patients from West Berkshire be explored as an urgent item at the next meeting.**

**HEALTHIER SELECT COMMITTEE - 12 OCTOBER 2010 - MINUTES**

- (2) West Berkshire health performance indicator information be received at the next meeting.**
- (3) An update be provided at the next meeting as to the current position in relation to Adult Social Care in West Berkshire, including access to care, prevention and the impact of the National Care Review findings.**
- (4) The Royal Berkshire NHS Foundation Hospital (RBH) be asked to confirm data on the current number of deliveries at the maternity unit and describe if the maternity unit is suitable for meeting the current and future demands.**
- (5) Investigations be made to determine whether reported problems with the electronic booking system for consultant appointments at the Royal Berkshire NHS Foundation Hospital (RBH) had now been resolved.**

*(The meeting commenced at 6.35 pm and closed at 8.06 pm)*

**CHAIRMAN** .....

**Date of Signature** .....