

HEALTH SCRUTINY PANEL

MINUTES OF THE MEETING HELD ON TUESDAY, 19 JULY 2011

Councillors Present: Dominic Boeck, George Chandler (Substitute) (In place of Tony Linden), Sheila Ellison, Carol Jackson-Doerge, Gwen Mason (Vice-Chairman), Julian Swift-Hook (Substitute) (In place of Alan Macro) and Quentin Webb (Chairman)

Also Present: June Graves (Head of Social Care Commissioning and Housing) and Nigel Owen (Quality & Performance Manager), Robert Alexander (Policy Officer) and Beverley Searle (NHS Berkshire West) and Rob Alexander (Policy Officer)

Apologies for inability to attend the meeting: Councillor Howard Bairstow, Councillor Tony Linden and Councillor Alan Macro

PART I

1. **Apologies for Absence**

Apologies for inability to attend the meeting were received on behalf of Councillors Tony Linden, Alan Macro and Howard Bairstow. Councillor George Chandler substituted for Councillor Tony Linden and Councillor Julian Swift-Hook substituted for Councillor Alan Macro.

2. **Declarations of Interest**

Councillor Carol Jackson-Doerge declared an interest in Agenda item 4, by virtue of the fact that she was once an employee of the Local area Involvement Network (LINK) for Slough. As her interest was personal and not prejudicial she determined to remain in the meeting and take part in the debate.

Councillor Julian Swift-Hook declared an interest, by virtue of the fact that he was the chairman of West Berkshire Mencap. As his interest was personal and not prejudicial he determined to remain in the meeting and take part in the debate.

3. **Urgent Items**

Councillor Quentin Webb asked if the Health Scrutiny Panel had any urgent items which required discussion.

Councillor Webb informed the group that as part of his commitment to Health Scrutiny, he was going to lose three stone in weight. Councillor Webb asked that this be minuted.

4. **West Berkshire LINK Annual Report**

(Councillor Carol Jackson-Doerge declared an interest in item 4, by virtue of the fact that she was once an employee of the Local area Involvement Network (LINK) for Slough. As her interest was personal and not prejudicial she decided to remain and take part in the debate.)

Councillor Quentin Webb invited Tony Lloyd to give a summary of the West Berkshire LINK annual report. Councillor Julian Swift-Hook proposed that it would be worthwhile, all Members agreed to this proposal. In accordance with paragraph 6.16.4 of the Constitution the Panel agreed to suspend standing order and permit Mr Lloyd to speak at the meeting.

Mr Lloyd informed the group that this was the penultimate report before the LINKs were disbanded in 2012/13. Mr Lloyd mentioned that the report showed the highlights of good

HEALTH SCRUTINY PANEL - 19 JULY 2011 - MINUTES

work carried out by the West Berkshire LINK and informed the Health Scrutiny Panel of the major project on Neurological Conditions, carried out in conjunction with the West Berks Neurological Alliance, which had interesting results.

Mr Lloyd said that he had hoped to do work with people suffering from long term conditions, focussing on the local health pressures. Mr Lloyd produced an example by stating that it was believed Berkshire West could benefit with a specialist epilepsy nurse in employment at the Royal Berkshire Hospital, but with the capacity to travel to community hospitals.

Mr Lloyd finished off by saying that the future for the LINK would be focussed on investigating what the upcoming Healthwatch priorities were, and encouraging the local health authorities to take note of it, and work in greater partnership.

Councillor Webb thanked Mr Lloyd for the presentation, and asked if Members had any questions. As there were no questions, Councillor Webb proposed that the contents of the report be noted. All Members agreed.

The Report was Noted.

5. Update on the Health Service in West Berkshire

Mrs Searle informed the group that, following the national listening exercise, Strategic Health Authorities (SHA) were being kept until 2013, however the geographical area was changing. Mrs Searle informed the group that there was going to be four SHA Clusters, with West Berkshire being in the South SHA. Mrs Searle said that the SHAs still had the same purpose, in that they were holding the PCTs to account and making sure they reached their targets. Mrs Searle mentioned that Berkshire PCTs had clustered together to form one PCT and that her new title was Director of Joint Commissioning, which also meant she was lead officer for Safeguarding and Equalities along with commissioning of mental health and learning disability services, and service for children and young people.

Councillor Quentin Webb asked how many officers there were now in the Executive team. Mrs Searle responded that there were 8, and further mentioned that although the Berkshire PCTs had clustered together, they were still separate statutory organisations with their accounts.

Councillor Julian Swift-Hook asked if there were separate accounts how management of financial performance was undertaken. Councillor Swift-Hook further questioned whether the cluster would solve the issues it was set up for. Mrs Searle responded that it would, by making best use of available management resources, and achieving required management savings, to ensure that areas such as safeguarding could be protected.

Councillor Carol Jackson-Doerge asked whether Mrs Searle felt there would be difficulty from a commissioning point of view, as Berkshire East and Berkshire West were different. Mrs Searle agreed they were, however she also noted that Berkshire West was very diverse. Mrs Searle said that in her team structure proposal she had proposed a Head of Joint Commissioning in both East Berkshire and West Berkshire. Mrs Searle mentioned that the continued good work with the local authorities would also play a key role.

Mrs Searle said that GP Commissioning groups would be confirming their commissioning support arrangements in the next year, in order to be established in shadow form from April 2012. Following a question from Councillor Webb, Mrs Searle replied that the PCT would be working in partnerships along with the GP commissioning groups however the Chief Executive of the PCT retains his role as chief officer until March 2013.

Councillor Dominic Boeck enquired what GPs attitudes were to the change. Mrs Searle responded that the Commissioning Group leads were positive and enthusiastic towards the changes suggested.

HEALTH SCRUTINY PANEL - 19 JULY 2011 - MINUTES

Councillor Gwen Mason asked Mrs Searle what would happen should a GP consortium and/or cluster straddle different counties? Mrs Searle advised that the national guidance stated that this should not normally happen. However, should it be the case, then it would be important for hospital and primary care colleagues to work together to ensure effective clinical pathways.

Councillor George Chandler asked whether the restructuring was going to lead to financial savings. Mrs Searle said it would, and although the National Health Service had not received a cut, health costs are continuing to rise, therefore savings are required to break even. Mrs Searle said the PCT was also working on preventative measures, such as public health work to reduce obesity and harm resulting from problem drinking. Mrs Searle informed the Panel of the four clinical commissioning groups in the Berkshire West area:

- 1) Wokingham
- 2) South Reading
- 3) North West Reading – this would incorporate areas of West Berkshire; including Pangbourne, Theale etc.
- 4) Newbury

However, as discussed earlier, the White Paper said there should not be a cross council boundaries.

Councillor Swift-Hook asked if there were any other health increase problems in West Berkshire that Members should be aware, apart from Over 85s, increase in obesity and alcohol problems. Mrs Searle said that with over 85s there was the increased risk of dementia and other age related health problems. Councillor Swift-Hook said that this could easily affect Local Authority services, as well as the health service.

Councillor Swift-Hook asked what the rate of health inflation was compared to normal inflation. Mrs Searle said she did not have the information to hand but would report back to Councillor Swift-Hook.

Mrs Searle commented that in regards to obesity, and diabetes resulting from obesity, a lot could be done to help. Mrs Searle also mentioned there was a good working partnership between the Local Authority (Social Care) and the health service in regards to reablement.

Councillor Sheila Ellison asked whether the NHS had any diabetes testing units, and further asked what work had been completed on readmittance to hospitals. Mrs Searle said that there was a financial incentive in acute hospitals to complete a full assessment before discharging a patient. Mrs Searle said that acute hospitals were not paid if a patient was readmitted in an emergency 30 days after being discharged. Locally the health service was good at discharge planning and avoiding readmission, however there was still improvements to be made.

Councillor Mason asked whether the problem with readmission and communication was still apparent. Mrs Searle said that this did not appear to be a problem any more due to regular conversations between GPs and the Local Authority.

Councillor Webb thanked Mrs Searle for her presentation.

Members noted the points raised.

6. Update on the Health and Wellbeing Board

Mrs June Graves updated the Health Scrutiny Panel on the Health and Wellbeing board explaining that the structure of the board was being worked on. Mrs Graves explained that a decision was taken last year to have a Health and Wellbeing Board in each unitary in Berkshire West, and that this would be reviewed in 2013. The membership comprised a representative from public health, Healthwatch, Portfolio Holders for Adult Social Care, Children, Environment and the Leader of the Council (as Chair). One meeting had been held in June, and the next one was due to place in August.

The role of the Health and Wellbeing Board in the next year would be to develop the Joint Strategic Needs Assessment as well as the Health and Wellbeing Strategy. A shadow board was hoped to be in place by April 2012.

Councillor Webb asked how the three unitaries would work together. Mrs Searle replied that there was currently a joint commissioning board which worked really well, and it was proposed that this would be retained.

Councillor Swift Hook asked that Mrs Graves supply a written summary of her verbal report, which was agreed.

Councillor Webb asked that a further update to be given at the autumn meeting.

Action: June Graves to produce a written summary of the “Update on the Health and Wellbeing Board”.

7. Review into Dignity of Care for Older People in Hospitals

Nigel Owen informed Members that the Review into Dignity of Care for Older People in Hospitals followed on from a national report published in 2010. That report had flagged up a number of issues including respect, dignity and understanding nutritional requirements. The Care Quality Commission (CQC) had made a commitment to go and review 100 hospitals. By the 19 July 2011, 97 hospitals had been reviewed, the Royal Berkshire Hospital was not one of them.

One of the early reports, from Luton and Dunstable was extremely poor and highlighted a number of concerns and simple standards being missed. Locally, the Great Western Hospital at Swindon had been reviewed and was found not to be compliant with regard to respect and dignity for older people, and there was another improvement required in respect of nutritional requirements.

The Basingstoke and North Hampshire Hospital had recently undergone the examination by the CQC and were found to be compliant.

It was proposed that West Berkshire Council facilitate a focus group to bring together voluntary groups, patients and families, to discuss their experiences of the care in the Royal Berkshire Hospital.

Councillor Boeck asked how objective the focus groups would be. Mr Owen responded that the focus group would be completely independent of the Health service, but people would be self selecting, and so the response would be qualitative rather than quantitative. It would highlight the themes and issues.

Councillor Jackson-Doerge commented that the proposed focus group might miss people, such as those who had moved into care homes, and people in their own homes without care. Mr Owen said he would seek to include them.

Councillor Mason said she was not surprised by Basingstoke and North Hampshire's results, as they were a very good hospital for care standards. She asked whether it was possible to ask the CQC to visit the Royal Berkshire Hospital. Mr Nigel Owen said that

HEALTH SCRUTINY PANEL - 19 JULY 2011 - MINUTES

unfortunately the programme was near completion, and he did not think CQC would have the resources to extend it.

Councillor Swift-Hook asked whether it was just acute hospitals that were being reviewed or if community hospitals were being included. The CQC review was just concerned with acute hospitals, but, because this review was being carried out by the Council it was possible to look at community hospitals as well. Councillor Swift-Hook questioned whether the review would just bring forward bad experiences, and therefore produce skewed results. Mr Owen replied that this might be the case, however bad experiences should not be ignored. The suggestion was for the findings to be reported back to the panel at their next meeting.

Councillor Ellison was very interested in this review, having had a family member experience problems whilst in hospital care.

Councillor Webb asked whether the Royal Berkshire Hospital had an internal scrutiny function. Mrs Searle replied that it did., and suggested it could be worthwhile asking the Royal Berkshire Hospital for compliments and complaints relating to Dignity in Care for Older People. Local hospitals would welcome the review taking place. It was also noted by Members that the Royal Berkshire Hospital had dignity champions. The dignity champions signed up to a code of conduct, and sought to improve dignity of people in the care of the hospital.

Councillor Webb brought Members attention to the proposed timescales in 4.1, he said that this seemed reasonable. He liked the idea of hearing experiences first hand. Mr Owen said that there were two key areas, respect and nutrition. Respect took into account dignity in care, as well as how involved the patient was, and how aware they were of what was going on. Nutrition took into account meals provided, and if they were substantial for the patient, and meeting their needs.

Councillor Swift-Hook supported these recommendations, but also suggested that the following were reviewed:

- Complaints; regarding dignity and respect in care
- Choice involving nutrition; making sure people can eat it.
- Management of Medicine.

Councillor Boeck said that although Councillor Swift-Hook's proposals were important he thought the proposals should be focussed.

Councillor Webb agreed and proposed that respect be used as an assessment, as well as Nutrition, which had the potential to be broader and encompass what Councillor Swift-Hook mentioned regarding nutritional requirements. Councillor Webb said that when explaining to the focus group, broader examples such as the other CQC Standards which overlapped with Respect and Nutrition should be used.

Councillor Webb proposed the following:

- That the timescale as set out in the report be kept to
- The headings of Respect and Nutrition be used as the focal point into the Review into Dignity of Care for Older People in Hospitals.

All Members present agreed.

Councillor Webb asked if Councillor Swift-Hook and Councillor Chandler as substitutes wished to be kept updated with the review. Councillor Chandler and Swift-Hook both asked to be kept up to date.

HEALTH SCRUTINY PANEL - 19 JULY 2011 - MINUTES

8. Health Scrutiny Panel Work Programme

Mrs Searle mentioned to the Health Scrutiny Panel, that no people with learning difficulties had been placed in a Winterbourne View home from Berkshire.

Mrs Searle also mentioned the possibility of organising a joint Health Scrutiny meeting across Berkshire West, when topics affect more than one area, and suggested bringing forward some proposals to see if it would be something that would be of interest to the Health Scrutiny Panel. Councillor Quentin Webb said it would be sensible to see the proposals.

Councillor Webb proposed that the Six Lives report be brought to the autumn meeting. Mr Owen said this would be possible.

(The meeting commenced at 6.30pm and closed at 8.45pm)

CHAIRMAN

Date of Signature