

## **HEALTHIER SELECT COMMITTEE**

### **MINUTES OF THE MEETING HELD ON THURSDAY, 7 APRIL 2011**

**Councillors Present:** Geoff Findlay (Chairman), Tony Linden and Gwen Mason

**Also Present:** Jan Evans (Head of Adult Social Care), Sam Otorespec (Head of Partnerships, NHS Berkshire West) and Jo Naylor (Principal Policy Officer).

**Apologies for inability to attend the meeting:** Councillor Andrew Rowles, Councillor Julian Swift-Hook, Teresa Bell (Corporate Director, Community Services) and Bev Searle (Director of Partnerships and Joint Commissioning, NHS Berkshire West).

**Councillor(s) Absent:** Councillor Paul Hewer

#### **PART I**

#### **32. Minutes**

The Minutes of the meeting held on 20 January 2011 were approved as a true and correct record and signed by the Chairman.

#### **33. Declarations of Interest**

Councillor Geoff Findlay declared an interest in all agenda items as a Governor of the Royal Berkshire Hospital (RBH) and reported that as his interest was personal and non-prejudicial, he determined to remain to take part in the debate and vote on the matters.

#### **34. Delayed Transfers of Care**

The Committee considered a report (Agenda Item 4) regarding social care related delayed transfers of care from the Royal Berkshire Hospital (RBH). Mrs Jan Evans (Head of Adult Social Care) introduced this report and explained that this was a major issue the previous summer when it was very difficult to control the number of delayed discharges from the Royal Berkshire Hospital. This had been caused by a lack of available social care resources coupled with very high demand for services.

To help alleviate the problem the NHS Berkshire West provided in-year funding to support 20 care beds outside of the acute hospital setting, of these, 18 beds would remain until the end of March 2011. Provision had been made in the 2011/12 budget to ensure a sufficient number of community placements in the future.

Mrs Evans described how typically people were kept in their own homes for a much longer period and the elderly often became much frailer. In the event of a hospital admission this often resulted in greater concerns about the individual's ability to live independently afterwards and delays resulted when a care home placement needed to be found.

Sam Otorespec (NHS Berkshire West) described how the Primary Care Trust was looking into reablement measures within the hospital setting to allow patients to regain their mobility and independence. It was also explained how new Government money was now

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available for measures to prevent inappropriate hospital admissions and to ensure patients were more quickly discharged from hospital.

Mrs Evans described the opportunity to use 'Extra Care Housing' schemes as a genuine alternative to residential care places using the development of the old Waring Court site as an example. However, this type of accommodation was not suitable for those that required frequent nursing support.

It was described how residential care places were at capacity within West Berkshire and further dementia care services were also required. It was acknowledged that the District needed another new-build care home facility to meet future demand and discussions were now commencing to develop this capacity.

The Council was also considering purchasing care home placements out of area, for example in Wiltshire, in order to meet the demand. However, this was not always popular with patients or their families.

It was explained that West Berkshire Council had been fined by the RBH and North Hampshire Hospital as a consequence of delayed transfers of care. Previously, there had been a local agreement not to fine local authorities as the Delayed Discharges Grant was instead invested into community based services. However, this agreement was no longer in place locally. The NHS Berkshire West Primary Care Trust helped this year to provide additional funding to meet the need for community placements to ensure patient care was not compromised.

Currently there were only two delayed discharges at the RBH attributable to social care; one was waiting a nursing home place and the other a care home placement.

Members asked about the views of the other health organisations involved in caring for older people, including the Ambulance Service, Accident and Emergency doctors, General Practitioners, etc. It was explained how the biggest healthcare costs were for provision of services at acute hospitals. A lot of work had been done on modelling doctor referral patterns and considering alternative care pathways to prevent inappropriate hospital admissions.

A discussion took place about the nursing homes and care homes that made the highest number of emergency calls. Work had been done to ensure nursing skills were improved, to provide nurses with greater skills and confidence to deal with end of life patients.

**RESOLVED** that the update regarding delayed transfers of care at the Royal Berkshire Hospital be noted.

### 35. **Work Programme and Recommendations for the Future**

The Committee considered a report (Agenda Item 5) which covered the Committee's Work Programme. The Chairman noted the Executive Committee had already agreed the Child Poverty Strategy in March 2011 for addressing child poverty within the District.

It was discussed how maternity services should be removed from the list of future health scrutiny topics due to the unlikelihood of ever obtaining a midwifery led service from the West Berkshire Community Hospital.

Delayed transfers of care would remain on the work programme and Mrs Evans (Head of Adult Social Care) agreed to attend and update the Committee on a future occasion.

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It was felt that Child Poverty should remain on the work programme for monitoring purposes and that Councillor Joe Mooney's details as Portfolio Holder, should be included alongside this work programme item.

**It was resolved that:**

- (i) **Maternity services should be removed from the work programme.**
- (ii) **Delayed discharges from the RBH and child poverty remain as future work programme topics to be considered in the subsequent Municipal Year.**

### 36. Health and Wellbeing Boards

The Committee considered a report (Agenda Item 6) in relation to Health and Wellbeing Boards. The Chairman described how the Health and Social Reform Bill gave Health and Wellbeing Boards significant power in relation to the planning and commissioning of health and social care services which were distinctly separate from the responsibilities of Health Scrutiny Committees.

The Council, Public Health, Children's Services, Healthwatch representatives and the voluntary sector would all be involved within the local Health and Wellbeing Board. This Board would also be linked to the local GP commissioning groups.

Members discussed how the GP commissioning groups might in the future have broader representation with elected Members, social care officers and nurses included. However, many elements remained somewhat unclear at the present time until the full national consultation process had been completed.

A discussion took place about local GP consortia and their views on the new proposals. It was described that all four local GP consortia had achieved 'Pathfinder' status and had demonstrated their willingness to establish commissioning groups and to work within any proposed new legislation.

Jan Evans updated the Committee on the groups being approached to help develop a 'Healthwatch' organisation locally.

**It was resolved** that the update be noted and that more information be received when further details on Health and Wellbeing Boards were agreed.

*(The meeting commenced at 6.30 pm and closed at 7.25 pm)*

**CHAIRMAN** .....

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

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