



OVERVIEW AND SCRUTINY COMMITTEE
(ADULT SOCIAL CARE AND HEALTH)

MEETING HELD AT THE TOWN HALL, BOOTLE
ON TUESDAY 17TH OCTOBER, 2017

PRESENT: Councillor Page (in the Chair)
Councillors Burns, Carr, Linda Cluskey, Lynne
Thompson and Marianne Welsh

ALSO PRESENT: Mr. Brian Clark, Healthwatch
Mr. Roger Hutchings, Healthwatch
Councillor Cummins, Cabinet Member – Adult Social
Care
Councillor Moncur, Cabinet Member – Health and
Wellbeing
Councillor Maher

20. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors Jones, McGuire and Owens.

21. DECLARATIONS OF INTEREST

No declarations of interest were made.

22. MINUTES OF THE PREVIOUS MEETING

RESOLVED:

That the Minutes of the meeting held on 27 June 2017, be confirmed as a correct record.

**23. SOUTHPORT AND ORMSKIRK HOSPITAL NHS TRUST –
UPDATE REPORT**

Further to Minute No. 15 (2) of 27 June 2017, Karen Jackson, Interim Chief Executive, Southport and Ormskirk Hospital NHS Trust, attended the meeting to update the Committee on recent developments at the Trust.

A sheet illustrating "Care for You" and outlining the bodies set up to consider and monitor care, based on local population needs, produced in

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conjunction between the Trust, NHS West Lancashire Clinical Commissioning Group and NHS Southport and Formby Clinical commissioning Group, was circulated for the attention of the Committee.

Ms. Jackson indicated that she had been in post since April 2017 and had set the following priorities with staff:-

- Internal governance within the Trust – a full review was being conducted;
- Organisational development and engagement with staff – a Strategy was being developed, underpinned by a new communication strategy and work undertaken around behaviours; and
- Organisation – work was underway on greater collaborative working with commissioners and a clinically-based focus.

In addition to the above, Ms. Jackson indicated that she also wanted to carry out work on the following:-

- Financial position – driving efficiencies;
- Activity – links to performance and looking at patient flow; and
- Performance, e.g. stroke services.

Fiona Taylor, Chief Officer for NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group, indicated that Mersey Care would also be involved with the bodies set up to consider and monitor care, based on local population needs, and that consideration was being given to services that should only be delivered within a hospital setting.

Members of the Committee raised the following issues and a summary of the responses provided is outlined below:-

- Following a visit by Committee Members to the stroke unit during October 2015, concerns had been raised regarding rehabilitation facilities, in particular.
Reconfiguration of the site above A&E was to take place prior to Christmas 2017 for the relocation of the stroke ward, providing more single bays and direct access that would permit the Trust to better meet required standards, as the organisation was now recognising the external challenges to be faced. Plans could be shared with Committee Members.
- How had communications improved within the Trust, particularly with regard to the staff?
Ms. Jackson toured the hospital on a daily basis and was attempting to engender a learning culture within the Trust, making senior management more visible and approachable. Listening events took place and both formal and informal processes took place, including monthly meetings and an open door policy.

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- Are staffing levels acceptable and how are good staff retained?
The Trust was attempting to drive quality improvements and staff had good ideas on possible progress. All staff wanted to deliver good patient care. Staffing levels had generally improved, although there were specific problems in speciality areas, such as paediatrics, dermatology and anaesthetics. A number of staff had been employed by the Trust for some years and were very loyal to it. In those areas where there were national shortages of staff, the Trust was attempting to work with other providers.
- What was the future of the Trust, as part of the bigger picture?
Southport and Formby definitely needed hospital provision, particularly given the aging population in the north of the Borough. Certain services, such as stroke provision, might need to be considered in terms of where best provision could be met, particularly given the critical nature of the first 72 hours, and transparent conversations might be required in moving forward with provision. It was not always possible to provide all services at every locality.
- How could the image of the Hospital be improved?
It was acknowledged that press reporting tended to be negative in nature and it was necessary to engage the local community and staff in changing perceptions and celebrate the innovative work undertaken by staff. The key was in improving performance at the Trust.
- Reference was made to the exclusion of the Executive Medical Director, pending investigation, during August 2017, and whether that process had been completed.
There was an on-going process and investigation and Ms. Jackson was unable to comment further.
- Did the Trust communicate and collaborate with Aintree University Hospital NHS Foundation Trust regarding stroke services?
Communications with external partners was improving and a pathway was being developed with Aintree for addressing the critical first few hours. Stroke services was a good example of services where the use of technology and planning were changing and conversations could be held as to the future provision of services, North West Ambulance Services to be included in such conversations.

Ms. Jackson extended an invitation for Committee Members to visit hospital premises, to provide challenge and to meet staff and this invitation could be taken up in the near future.

Ms. Jackson asked how she could present information to Committee Members in the future and a number of different options were mooted, including the use of presentations and informal meetings, were necessary.

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The Chair also emphasised the need for the Committee to be kept informed regarding any major changes and developments in the future.

RESOLVED:

That the verbal update provided by Karen Jackson, Interim Chief Executive, Southport and Ormskirk Hospital NHS Trust, be noted and Ms. Jackson be thanked for her attendance.

24. HEALTH CHECKS

The Committee considered the report of the Head of Health and Wellbeing informing the Committee of progress made in the design and implementation of a new delivery model for the NHS Health Checks programme on Sefton.

The report set out the background to the matter, indicating that the NHS Health check programme was a national programme designed to identify early signs of heart disease, stroke, kidney disease, type 2-diabetes or dementia and aimed to help find ways of for individuals to lower their risk. Public Health within the Council commissioned GPs to provide the service and the Council was currently pursuing a delivery model that moved away from GP based delivery to incorporate a wider network of providers. This was driven by both concerns over the current performance and the current cost of delivering the service. The current contract would run until 31 March 2018 and was funded through the Public Health Grant.

The report set out information on Health Check performance data; engagement with GP surgeries; wider engagement; and proposals to progress the new delivery model for the new NHS Health Check programme in Sefton by enhancing the services provided by Active Sefton and Living Well Sefton

Members of the Committee raised the following issues and a summary of the responses provided is outlined below:-

- How was it possible to get patients to attend health checks, particularly when there was a fear factor involved?
Health checks could possibly be combined with consultations and could possibly be delivered in different settings.
- Were the quality aspects of health checks consistent?
There was a need to be absolutely sure of the quality of health checks and for conversations with Public Health England to be held regarding this aspect.
- Patients could not always get time off work, etc. to attend health checks.

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There were opportunities to explore innovative approaches to the current delivery model, such as the use of on-line appointments, etc.

RESOLVED:

That the progress made against previously approved action and the work being undertaken to design and implement a new delivery model for the NHS Health check programme in Sefton, be noted.

25. SEFTON CLINICAL COMMISSIONING GROUPS - UPDATE REPORT

The Committee considered the joint update report of the NHS South Sefton Clinical Commissioning Group and the NHS Southport and Formby Clinical Commissioning Group (CCG) providing an update about the work of the CCGs. The report outlined details of the following:-

- Annual assurance ratings announced;
- High ratings for Sefton GPs in latest patient survey;
- Joint action plan for Special Educational Needs and Disability Services (SEND);
- New provider for children's community audiology service in Southport;
- Contracts extended with providers at Freshfield and Hightown Village surgeries;
- Make Sefton voices count in two national consultations;
- Commissioning policy review;
- Consultation on orthopaedics and Ear Nose and Throat (ENT) services in Liverpool;
- Annual review meets Big Chat 9;
- Preparing for winter;
- Sefton residents urged to get their flu jab;
- Sefton in Mind;
- Report highlights the impact of the CCGs investment to the Voluntary, Community and Faith (VCF) sector; and
- Next governing body meetings.

Fiona Taylor, Chief Officer for NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group, was present from the CCGs to present the update report to the Committee.

RESOLVED:

That the joint update report by the Sefton Clinical Commissioning Groups be received.

26. SEFTON CLINICAL COMMISSIONING GROUPS - HEALTH PROVIDER PERFORMANCE DASHBOARD

The Committee considered the joint report of NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group (CCG), providing data on key performance areas and the Friends and Family Test for both Southport and Ormskirk Hospital NHS Trust and Aintree University Hospital NHS Foundation Trust.

Fiona Taylor, Chief Officer for NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group (CCG), was in attendance to present the data, highlight key aspects of performance, and respond to queries from Members of the Committee.

With regard to the Ambulance Category A (Red 1) 8 minute response time, Mrs. Taylor indicated that the targets had changed and that she would provide additional information at a future meeting.

Members of the Committee raised the following issue and a summary of the response provided is outlined below:-

- There had been anecdotal evidence during the summer of 2017 that issues had arisen in the operating theatres at Aintree Hospital, possible relating to the roofing, which had caused illness in staff and operations to be halted.
Mrs. Taylor had not been informed of any particular concerns and was only advised of major incidents at hospitals, rather than any day to day issues.

RESOLVED:

That the information on Health Provider Performance be noted.

27. RESIDENTIAL AND CARE HOMES WORKING GROUP - FINAL REPORT

The Senior Democratic Services Officer reported that the report of the Head of Regulation and Compliance had not yet been finalised and requested the item to be deferred to the next meeting of the Committee, to be held on 9 January 2018.

RESOLVED:

That the item be deferred to the next meeting of the Committee, to be held on 9 January 2018.

28. CALL-IN PROCEDURE

Further to Minute No. 6 of the meeting of the Overview and Scrutiny Management Board on 26 September 2017, the Committee considered the report of the Head of Regulation and Compliance on the proposed procedure to be adopted by the relevant Overview and Scrutiny Committee when considering a decision that has been “called-in”. The report indicated that the Overview and Scrutiny Committee (Regeneration and Skills) had referred the Procedure Note for “call-in” to the Overview and Scrutiny Management Board for it to consider. Appendix 1 to the report set out the current “Call-In Procedure Note”. The Overview and Scrutiny Management Board had suggested some changes to the Procedure Note and referred it to all four Overview and Scrutiny Committees for approval. Appendix 2 set out the proposed “Call-In” Procedure Note, as amended by the Overview and Scrutiny Management Board.

RESOLVED:

That the “Call-In” Procedure Note, as detailed at Appendix 2 to the report, be adopted as the procedure to be followed by the relevant Overview and Scrutiny Committee, when considering a decision that has been “called-in”.

29. CABINET MEMBER REPORTS

The Committee considered the report of the Head of Regulation and Compliance submitting the most recent Update Reports from the Cabinet Member – Adult Social Care, and the Cabinet Member – Health and Wellbeing, whose portfolios fell within the remit of this Committee.

The Cabinet Member Update Report - Adult Social Care, outlined information on the following:-

- Financial update;
- Integration;
- Community Equipment store;
- Sensory services
- Integrated Community Re-ablement and Assessment Team (ICRAS)

Councillor Cummins, Cabinet Member – Adult Social Care, was in attendance at the meeting to present his Update Report and highlight particular aspects of it.

The Cabinet Member Update Report – Health and Wellbeing outlined developments on the following aspects of Public Health:-

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- Swim Pilot:
 - Community visibility;
 - Swimming environment;
 - Session relevance and timetabling
- Minimum Unit Pricing (MUP) – reduction in alcohol harm;
- Mental resilience in school aged children;
- Health checks;

Councillor Moncur, Cabinet Member – Health and Wellbeing, was in attendance at the meeting to present his Update Report and highlight particular aspects of it.

RESOLVED:

That the update reports from the Cabinet Member – Adult Social Care and also the Cabinet Member – Health and Wellbeing be noted.

30. WORK PROGRAMME KEY DECISION FORWARD PLAN

The Committee considered the report of the Head of Regulation and Compliance seeking the views of the Committee on its Work Programme for the remainder of 2017/18; noting the progress to date by the Working Group established; noting the progress to date by the Joint Health Scrutiny Committee for Cheshire and Merseyside (Orthopaedic Services); and identification of any items for pre-scrutiny scrutiny by the Committee from the Key Decision Forward Plan.

A Work Programme for 2016/17 was set out at Appendix A to the report, to be considered, along with any additional items to be included and agreed.

Fiona Taylor, Chief Officer for NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group, suggested briefings could be invited from the North West Ambulance Service and new community providers, for Committee Members.

Further to Minute No. 27 above, the report of the Head of Regulation and Compliance, on behalf of the Working Group established to consider Residential and Care Homes, had not yet been finalised and a request had been made for the item to be deferred to the next meeting of the Committee, to be held on 9 January 2018.

It was reported that the issue of dentistry had been raised as a possible topic to be reviewed, once the Residential and Care Homes Working Group Final Report had been completed and considered by the Committee.

The first meeting of the Joint Health Scrutiny Committee for Cheshire and Merseyside (Orthopaedic Services) had taken place and site visits at both Broadgreen and Aintree Hospitals had been held. Members of the

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Committee reported on the site visits undertaken, together with progress made by the Joint Health Scrutiny Committee.

There were four Decisions within the latest Key Decision Forward Plan, attached to the report at Appendix B that fell under this Committee's remit, and the Committee was invited to consider items for pre-scrutiny.

RESOLVED: That

- (1) the Work Programme for 2017/18, as set out in Appendix A to the report, be agreed;
- (2) the Senior Democratic Services Officer be authorised to liaise with the Chief Officer for NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group, with a view to possibly obtaining briefings from the North West Ambulance Service and new community providers, for Committee Members;
- (3) the progress to date by the Residential and Care Homes Working Group be noted;
- (4) consideration be given at the next meeting on 9 January 2018 on the issue of dentistry as a possible topic to be reviewed, once the Residential and Care Homes Working Group Final Report has been completed and considered by the Committee;
- (5) progress to date by the Joint Health Scrutiny Committee for Cheshire and Merseyside (Orthopaedic Services) be noted; and
- (6) the contents of the Key Decision Forward Plan for the period 1 November 2017 to 28 February 2018 be noted.