

OVERVIEW AND SCRUTINY COMMITTEE
(HEALTH AND SOCIAL CARE)

Overview
& Scrutiny



MEETING HELD AT THE TOWN HALL, SOUTHPORT
ON TUESDAY 6TH JANUARY, 2015

PRESENT: Councillor Page (in the Chair)

Councillor Dams (Vice-Chair)

Councillors David Barton, Jo Barton, Burns,
Dawson, Gatherer, Grace, John Joseph Kelly and
Lappin

Also Present: Roger Hutchings, Healthwatch
Brian Clark, Healthwatch
Councillor Cummins, Cabinet Member – Older
People and Health
2 members of the public

41. APOLOGIES FOR ABSENCE

No apologies for absence were received.

42. DECLARATIONS OF INTEREST

The following declaration of personal interest was received:-

<u>Member</u>	<u>Minute No.</u>	<u>Reason</u>	<u>Action</u>
Councillor David Barton	50 – Cabinet Member Report	Personal – he is a Senior Manager at a nursing home in Southport	Stayed in the room, took part in the consideration of the item and voted thereon.

43. CHAIR'S ANNOUNCEMENT

The Chair reported that the Council, at its meeting held on 20 November 2014, had appointed Councillor Dams as the new Vice-Chair of this Committee.

44. MINUTES

A Member of the Committee requested the inclusion of additional wording within the Minutes.

Matters arising from the Minutes – Minute No. 32 – Care Act 2014 – A

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Member of the Committee referred to the need for Members to be provided with case scenarios and requested that they be provided as soon as possible.

RESOLVED: That

- (1) subject to the inclusion of the following, the Minutes of the meeting held on 21 October 2014, be confirmed as a correct record:-

Minute No. 32 – NHS England – Provision of GP Services in Sefton – the penultimate paragraph of the preamble be amended to include the following additional words at the conclusion of the sentence reading "The NHS England representatives responded to the concerns raised and indicated their intentions to meet with Sefton Healthwatch to go through the issues identified":

"but this did not allay any of the concerns held by Members of the Committee."; and

- (2) the Director of Older People be requested to provide the case scenarios referred to as soon as possible.

45. TRANSFORMING SECURE CARE PATHWAYS - MEDIUM SECURE SERVICES - POSSIBLE SUBSTANTIAL VARIATION

The Committee considered the report of the Director of Corporate Services submitting information to the Committee received with regard to "Transforming Secure Mental Health Services", which was provided by Mersey Care NHS Trust, and to formally request determination whether the proposals submitted by Mersey Care NHS Trust constituted a substantial variation in services. The report included criteria to be considered in determining whether a proposal was substantial.

A report submitted by Mersey Care NHS Trust was attached to the report, together with the following documentation:-

- Transforming Medium Secure Service – The Case for Change; and
- A letter from Mersey Care NHS Trust to the Chair of the Committee.

In essence, the proposals outlined a case for transferring the service currently provided at the Scott Clinic, Rainhill, St. Helens, by Mersey Care NHS Trust to a new unit to be constructed on Trust land at the Ashworth Hospital site in Maghull, as a result of the need to increase capacity and also to meet the latest guidance and legislation around medium secure care and environmental standards.

The process would be for a Joint Health Scrutiny Committee to be established if both Sefton MBC and St. Helens MBC agreed that the proposals were a substantial variation in services and the results of the joint process would be reported back to both Councils.

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Jacqueline Robinson, Head of Patients and Public Voice, Senior Consultant Engagement and Involvement Service, North West Commissioning Support Unit; Ann Kenwright, Director of Transformation, Mersey Care NHS Trust; Dr. Owen Haeney, Consultant Forensic, Psychiatrist; Elaine Wilkinson, Strategic Project Manager, Mersey Care NHS Trust, were in attendance to present the matter and respond to questions raised by Members of the Committee.

Ms. Robinson confirmed that public consultation events on the matter would be taking place and reported that St. Helens MBC's Health and Adult Social Care Overview and Scrutiny Panel had considered the matter at its meeting held on 5 January 2015 and had considered the proposals to constitute a substantial variation in services.

Members of the Committee raised a number of issues and questions, and responses provided were outlined as follows:

- Limited bed capacity – some patients were currently having to be placed out of area for treatment which created difficulties with treatment;
- Number of employees – some 180 people were currently employed at the Scott Clinic in St. Helens, with the potential of some 50 new jobs being created as a result of the proposals;
- Third party providers of service – arrangements were currently in place with Calderstones NHS Trust to manage a ward within a medium secure setting;
- Potential for increase in traffic in the Maghull area – this was likely to be of concern to local people in the area. Arrangements would be made to transport domestics, etc. A plan would be produced once public consultation had been held and traffic issues would be addressed within it;
- Number of beds provided – the number of beds provided had reduced from those provided some years previously;
- Concerns that staff working at Ashworth may reside in the Maghull area and the potential risk of some patients meeting them in the community – restrictions and boundaries often applied as to which locations patients were permitted to visit, but there was always a possibility of patients or former patients meeting staff in the community. Community plans based on risk were produced;
- The number of patients transferred from Ashworth to the Scott Clinic – there had been two the previous year;
- The use of Calderstones Hospital by the Trust – some beds were located there for use;
- Numbers of visitors to see patients – these were fairly limited;
- Results of public consultation on the proposals – if established, a joint scrutiny function would consider whether any decision taken was in the best interests of the patients, and the final decision would be communicated to the public via press releases and other mediums; and
- Would the construction of the new unit on the Ashworth site be

subject to a planning application – yes it would.

On request by the Chair, a show of hands indicated that the Committee considered the proposals to be a substantial variation in services by a majority vote of 8 for and 2 against. There were no abstentions.

RESOLVED:

That this Committee considers that the proposals submitted by Mersey Care NHS Trust, in terms of transforming secure mental health services, constitute a substantial variation in services, and a Joint Health Scrutiny Committee be established.

46. LITHERLAND DARZI EQUITABLE ACCESS CENTRE, LITHERLAND TOWN HALL

The Committee considered a report submitted by NHS England on the current position of the Litherland Darzi Equitable Access Centre Contract and next steps to be taken. The report indicated that the historical crossover in service delivered by Litherland Darzi and the Litherland Town Hall Walk-in Centre had produced a duplication of effort which was not considered effective for the two respective Commissioners of each service. The current Litherland Darzi Equitable Access Contract was provided by Liverpool Community Health Trust and the contract was due to expire on 31 March 2015. The report outlined the background to the matter and advised that a public consultation would be undertaken as an additional measure of evidence that would be used to inform the future of the Centre Contract. Appendices were attached to the report as follows:-

- Appendix 1 - A heat map showing non-registered patient attendance rates for 2013/14, by GP practice, using a rate per 1,000 patients;
- Appendix 2 - A breakdown of patient postcodes attending the registered service; and
- Appendix 3 - A breakdown of patient ages attending the registered service.

Jacqueline Robinson, Head of Patients and Public Voice, Senior Consultant Engagement and Involvement Service, North West Commissioning Support Unit; Jan Hughes, Commissioner, NHS England (Merseyside); and Anthony Leo, Director of Commissioning, NHS England (Merseyside) were in attendance to present the report and respond to questions posed by Members of the Committee.

The representatives explained that the Centre provided services for both registered and non-registered patients, but that it was not proving to be cost-effective and that a decision had been made not to re-commission it, subject to patient consultation. Commissioners were currently trying to understand what patients used the Centre for; that a survey indicated

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there was high patient satisfaction with services provided there; that the majority of users travelled less than three miles to access services; not everyone who used the Centre decided to register; and that children featured amongst the highest user group.

Members of the Committee raised a number of issues and questions, and responses provided were outlined as follows:-

- Alternative provision of services – a GP practice was available on the same site where patients could register if they wished;
- Use of facility if services at the Centre were withdrawn – the walk-in Centre at the former Litherland Town Hall site would remain;
- Primary care availability in the area – there were eleven GP practices within a two mile radius of the Centre, patients had a choice as to if and where they registered and that there was a need to strengthen the provision of primary care;
- Reasons for low usage of the Centre – full reasons were not known until an exploration took place; there were alternative GP practices in the area; the Centre was not currently providing good value for money; there was a need to ensure provision of services remained within south Sefton; and
- Number of GPs at the Centre – three full-time equivalent salaried GPs.

The representatives also provided a comparison with another GP practice with a budget of £600,000 in that the expected total number of patient contacts would be in the region of 21,000, whereas the Darzi Centre had achieved 6,816.

RESOLVED: That

- (1) the current position in relation to the Litherland Darzi Equitable Access Contract be noted; and
- (2) the intention of NHS England (Merseyside) to undertake a public consultation, as an additional measure of evidence to that specified in the report and that the public consultation outcomes will be used to inform future plans and provision regarding Litherland Darzi Equitable Access Contract, due to expire and close on 31 March 2015, be noted.

47. PROJECT TO REDUCE VARIATION AND IMPROVE OUTCOMES IN MATERNITY SERVICES FOR CHESHIRE AND MERSEYSIDE

The Committee considered a report submitted by NHS Halton Clinical Commissioning Group providing information on work progressing across Cheshire and Merseyside to sustain and develop maternity services. The report indicated that Cheshire and Merseyside Clinical Commissioning Groups had agreed to undertake a review of maternity services across the sub-region, with the support of provider organisations and the Cheshire and Merseyside Strategic Clinical Network. The review would explore how

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outcomes could be improved, variations reduced, high quality services delivered, and maternity provision sustained and developed across the region. The intention would be to remain close to the national agenda as set out in the NHS “Five Year Forward View” and explore future options for sustainable maternity services. Work was currently underway to develop a baseline understanding of the nature and shape of maternity services in Cheshire and Merseyside. The next phase of work would be to develop options for improvement and any options for change would be subject to engagement and consultation with patients and the public in Cheshire and Merseyside.

Simon Banks, Chief Officer, Halton Clinical Commissioning Group, was in attendance to present the report and respond to questions posed by Members of the Committee.

Members of the Committee raised issues and questions, and responses provided were outlined as follows:-

- Midwifery visits to premature babies, small for age, etc. - there was a statutory requirement for midwives to visit such babies until 28 days of age;
- Liverpool Women's Hospital – high use in the region and tendency for higher cost cases to use the Trust;
- Models of care – much of the base work around quality of services had already taken place; and
- Inclusion of post-natal depression within the baseline understanding of services – arguably this was already included within clinical outcomes.

RESOLVED:

That the report be noted.

48. SOUTHPORT AND ORMSKIRK HOSPITAL NHS TRUST – UPDATE REPORT

The Committee considered an update report by the Deputy Chief Executive Officer / Finance Director, Southport and Ormskirk Hospital NHS Trust, on current issues impacting on the Trust. The report outlined details of the following:-

- Mortality rates at Trust premises;
- Chief Inspector of Hospitals – Visits by the Care Quality Commission;
- Performance, including Accident and Emergency;
- Financial pressures; and
- Children’s Diabetes Services.

Further to Minute No. 34 (3), the update report also included an overview of the current status of the Phlebotomy Service provided in the north of the

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Borough.

Damian Reid, Deputy Chief Executive and Finance Director, Southport and Ormskirk Hospital NHS Trust, and Rob Gillies, Executive Medical Director, Southport and Ormskirk Hospital NHS Trust, were present from the Trust to present the update report to the Committee and respond to questions put by Members.

Damian Reid reported that the previous week had been very difficult for the Trust in terms of performance due to the scale of admissions to the Accident and Emergency Department; that lack of available beds and speed of discharge of patients had been factors; and that there could be further issues such as the cancellation of elective operations.

Members of the Committee considered the matter to be of great concern.

Councillor Cummins, Cabinet Member – Older People and Health indicated that the Council's social workers were doing everything possible to assist with the prompt discharge of patients from the Trust and that the numbers of social workers had increased recently, although numbers remained a national problem.

Fiona Clark, Chief Officer for NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group, presented the commissioner perspective in that additional beds had been provided for the Trust and a community response team had been funded. In response to a question by a Member of the Committee on managing the situation, she indicated that the CCGs' strategic board was aware of the matter and of the need to consider the model of care required. In response to a comment by a Member of the Committee on the issue of the culture of A and E by society, she reported that general practice could be accessed 24/7 in that out of hours service providers were available. In response to questions on advising the public of available services, she indicated that the use of social media was useful in this respect.

Rob Gillies stated that the Trust would not be lowering its standards, despite the pressures. In response to a question by a Member of the Committee on numbers of age related acute cases, he acknowledged that largely due to the demographics of the area, the scale of admissions of older people to the Trust, was a factor in the current difficulties.

Janet Atherton, Director of Public Health, reported that take-up for flu vaccinations by people aged over 65 had been good, but was still too low in those with “at risk” conditions. Weekly figures for flu data were received and she stated that there had been an increase in cases but that they were not at epidemic levels.

With regard to financial pressures, Damian Reid reported that the Trust could enter the new financial year in deficit. He also indicated that following visits by the Care Quality Commission, a draft report was anticipated by the end of February 2015 and that this could be shared with

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the Committee.

With regard to mortality rates at Trust premises, Rob Gillies acknowledged that figures at the Trust could be improved upon and emphasised that investigations to understand possible reasons for higher than anticipated mortality figures needed to be clinically led.

RESOLVED: That

- (1) the update report from the Southport and Ormskirk Hospital NHS Trust be received; and
- (2) the concerns raised, particularly in relation to strains on the Accident and Emergency Department at the Trust, be noted.

49. 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:-

- Examine Your Options this winter;
- New Asperger service launched;
- Alcohol Recovery Centre piloted over festive party period;
- Big Chat 4 – strategy into delivery;
- Breathe well in south Sefton;
- Breast care services for Southport and Formby patients;
- Out of Hours Pharmacy at Litherland; and
- CCGs awarded for inspiration and improving lives.

Fiona Clark, Chief Officer for NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group, was in attendance from the CCGs to present the update report to the Committee and respond to questions put by Members of the Committee.

Fiona Clark reported on breast care services for Southport and Formby patients. In response to comments from a Member of the Committee about possible disgruntlement from Aintree University Hospital NHS Trust on the impact of the closure of services at Southport and the corresponding knock-on effect at Aintree, she indicated that the impact at Aintree and also in the West Lancashire area was being closely monitored. She also stated that it was unlikely that a surgical service would be reinstated at Southport.

A Member of the Committee asked whether discussions on breast care services with patients, the public, Healthwatch, etc. would form a consultation or a conversation, and emphasised the need to be honest with residents.

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Fiona Clark indicated the need to hold honest dialogue in moving forward and also the need for services to be of the highest quality and safety for patients in considering what could be provided at a local level.

A Member of the Committee considered that in moving the situation forward, there was a need to include the current provision of services; consideration of how meaningful conversations with the public could be held; and the timescales involved, in that conversations were due to end by mid February 2015. He also indicated that Healthwatch Sefton had been involved in conversations on the breast care services.

Rob Gillies, Executive Medical Director, Southport and Ormskirk Hospital NHS Trust, reminded the Committee of the reasons behind the decision to close breast care services – that there was no link to the plastic surgery unit; no screening service was provided; the lack of specialist surgeons; and the national shortage of radiologists. He also considered that the important relationship with breast care nurses had now been lost.

With regard to the Out of Hours Pharmacy at Litherland, consultation was taking place concerning possible closure of the Pharmacy and an analysis of commonly prescribed medicines obtained had taken place. It was emphasised that this was not related to the review on the Darzi Centre. A Member of the Committee requested feedback on the outcome of the consultation as the facility was within her Ward, and the CCG representatives undertook to facilitate this.

RESOLVED: That

- (1) the joint update report submitted by the Clinical Commissioning Groups be received and the CCGs be thanked for the update report.
- (2) the Clinical Commissioning Groups be requested to provide information on the outcome of the consultation on the future of the Out of Hours Pharmacy at Litherland, as outlined above.

50. CABINET MEMBER REPORT

The Committee considered the report of the Director of Corporate Services submitting the most recent report by the Cabinet Member - Older People and Health for the period November to December 2014. The Cabinet Member Update Report outlined information on:-

Adult Social Care:

- Day Care Opportunities; and
- Care Act 2014.

Public Health:

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- Health Champions (Linked to Making Every Contact Count);
- Sefton's Annual Flu Campaign; and
- Ebola.

Councillor Cummins, Cabinet Member – Older People and Health, was present at the meeting and outlined the main issues within the Update Report. He reported that the consultation on the "Remodelling Day Opportunities" was a modernisation programme and not a closure programme. He also indicated that a lot of work had been undertaken with regard to the Care Act and that this was likely to be reported within the next update report.

Janet Atherton, Director of Public Health reported on Sefton's annual flu campaign. Uptake amongst those people who were aged over 65 and front line health care workers had been good, but improvement was needed in those with long term conditions. A Member of the Committee commented on the high number of residential and nursing homes for older people, particularly within the north of the Borough and a representative from the Clinical Commissioning Groups indicated that GP services had been commissioned to attend such homes to provide immunisations, as there were issues with training for nurses to provide immunisations.

RESOLVED:

That the Cabinet Member report be received.

51. JOINT WORKING PROTOCOLS

The Committee considered the report of the Director of Corporate Services submitting draft joint working protocols between the Committee and other local health bodies. In response to the document produced by the Department of Health entitled "Local Authority Health Scrutiny: Guidance to Support Local Authorities and their Partners to deliver Effective Health Scrutiny", and in order to demonstrate that clear understanding on respective roles between the health scrutiny function and other health bodies existed in Sefton, draft joint working protocols had been produced and were attached to the report at Appendices A, B and C.

The Senior Democratic Services Officer reported on the status of each protocol.

A Member of the Committee suggested that Alder Hey Children's Hospital NHS Trust might be included within Appendix C.

Members of the Committee discussed the possibility of holding an informal meeting of the Committee to discuss future agenda items and the focus of this Committee.

RESOLVED: That

- (1) the draft Joint Working Protocol between this Committee and Sefton

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Healthwatch as set out at Appendix A to the report be approved;

- (2) subject to approval of the Council's Health and Wellbeing Board at its meeting on 21 January 2015, the draft Joint Working Protocol between this Committee and the Health and Wellbeing Board, as set out at Appendix B to the report, be approved;
- (3) the draft Joint Working Protocol between this Committee and NHS organisations / health providers in Sefton and surrounding areas that provide services to residents of Sefton, as set out at Appendix C to the report, be approved in principle, and the final version be submitted to the Committee on completion;
- (4) the Senior Democratic Services Officer be authorised to seek guidance from the Overview and Scrutiny Committee (Children's Services) on the possible inclusion of Alder Hey Children's Hospital NHS Trust in the relevant draft protocol; and
- (5) an informal meeting of this Committee be arranged, to be held at 6.30 p.m., for no longer than two hours, at a mid-point venue within the Borough, to discuss future agenda items and the focus of this Committee.

52. SCRUTINY OF DRAFT QUALITY ACCOUNTS - PROCESS TO BE UNDERTAKEN DURING 2015

The Committee considered the report of the Director of Corporate Services seeking approval of the process to be undertaken for the scrutiny of a number of Quality Accounts from NHS Trusts during May / June 2015.

The Committee was requested to approve an option for the preferred process to be undertaken.

A review of the processes undertaken by neighbouring local authorities had been carried out and brief explanations of the results received were outlined within the report for comparison purposes. The timescale for the consideration of the Quality Accounts was also set out within the report.

RESOLVED:

That discussion on the scrutiny of draft Quality Accounts and the process to be undertaken during 2015 be held at an informal meeting of this Committee, as outlined within Minute No. 51 (5) above.

53. MONITORING OF ACCIDENT AND EMERGENCY SERVICE

The Committee considered the report of the Director of Corporate Services submitting the latest information regarding the monitoring of Accident and Emergency Services. The report set out the background to the matter and attached recent information provided on local Accident and Emergency Services performance by the Merseyside Area Team. The information

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illustrated the latest weekly performance, including the year to date performance, against requirements to deliver at 95%.

The report invited the Committee to consider the information provided on Accident and Emergency Services, in relation to the Aintree University Hospital NHS Foundation Trust and the Southport and Ormskirk Hospitals NHS Trust, and comment, as appropriate.

Information was also provided within the report on ambulance turnaround times.

It was suggested that the Committee might wish to include the monitoring of accident and emergency services at the informal meeting of this Committee, as outlined within Minute No. 51 (5) above.

RESOLVED: That

- (1) the information regarding monitoring of Accident and Emergency Services, together with ambulance turnaround times, be received; and
- (2) discussion regarding monitoring of Accident and Emergency Services be held at an informal meeting of this Committee, as outlined within Minute No. 51 (5) above.

54. WORK PROGRAMME KEY DECISION FORWARD PLAN

The Committee considered the report of the Director of Corporate Services submitting the latest Key Decision Forward Plan and seeking the views of the Committee on its Work Programme for the remainder of the Council Year 2014/15.

There were five items within the current Key Decision Forward Plan which fell under the remit of the Committee, on this occasion and the Committee was invited to consider items for pre-scrutiny.

The work programme of items anticipated to be submitted to the Committee during the remainder of 2014/15 was attached to the report, at Appendix B.

A number of meetings of the Joint Health Scrutiny Committee for Cheshire and Merseyside, in relation to consideration of proposed changes to the provision and location of services provided by the Clatterbridge Cancer Centre had taken place.

The Chair and Vice-Chair of the Committee, as representatives of this Authority on the Joint Health Scrutiny Committee, were invited to report back to the Committee on progress. The Chair expressed her satisfaction with the review undertaken on cancer services, together with the outcomes of the review.

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Further to Minute no. 40 (5) of 21 October 2014, the Chair of the Committee had met with the Manager of Sefton Healthwatch to discuss a possible topic for review. Although it was considered that it was not appropriate to refer any issues for a possible working group review, a number of issues had been discussed and Sefton Healthwatch had agreed to submit quarterly updates to the Committee on progress made by the organisation on issues.

Further to Minute No. 11 (6) of 1 July 2014, the Committee had requested site visits to certain health providers during 2014/15 and the status of each was indicated within the report. Members of this Committee had visited Buckley Hill ambulance station in July 2014 and Aintree University Hospital NHS Foundation Trust in December 2014. In addition, requests had been made to The Walton Centre NHS Foundation Trust and Ormskirk and District General Hospital for possible site visits during 2014/15 and dates identified were outlined within the report.

RESOLVED: That

- (1) the contents of the Key Decision Forward Plan for the period 1 January – 30 April 2015 be accepted;
- (2) the latest work programme of items anticipated for the remainder of 2014/15 be received;
- (3) the latest position regarding the Joint Health Scrutiny Committee for Cheshire and Merseyside be received;
- (4) the outcome of the meeting between the Chair of the Committee and Sefton Healthwatch be noted; and
- (5) the latest position regarding site visits during 2014/15 be received.