

HEALTH AND WELL BEING OVERVIEW AND SCRUTINY COMMITTEE

Thursday, 19 January 2012

Present: Councillor P Glasman (Chair)

Councillors	S Clarke	D Roberts
	P Doughty	J Walsh
	M Hornby	G Watt
	C Povall	P Williams

Deputy: Councillor M Johnston (in place of A Bridson)

Co-opted: S Lowe (Service users under OPP age group)
L Reece Jones (Carers – deputy for S Wagener)
A Sullivan (OPP – deputy for S Wall)

Apologies D Hill (LINKs) S Saagar (BME)

40 MEMBERS' CODE OF CONDUCT - DECLARATIONS OF INTEREST / PARTY WHIP

Members were asked to consider whether they had a personal or prejudicial interest in any matters to be considered at the meeting and, if so, to declare them and state what they were.

Members were reminded that they should also declare, pursuant to paragraph 18 of the Overview and Scrutiny Procedure Rules, whether they were subject to a party whip in connection with any matter to be considered and, if so, to declare it and state the nature of the whipping arrangement.

No such declarations were made.

41 MINUTES

Members were requested to receive the minutes of the meeting of the Health and Well Being Overview and Scrutiny Committee held on 8 November, 2011.

Councillor Mrs P M Williams referred to minute 27 (Providing Excellence in Healthcare into the Future) and expressed her concern regarding dehydration of patients in hospitals. Gary Doherty, Acting Chief Executive, Wirral University Teaching Hospital NHS Foundation Trust, commented that the Trust was doing quite a lot of work in addressing this issue and he would be happy to speak to Councillor Mrs P M Williams and pick up any specific concerns.

Resolved – That the minutes be approved as a correct record.

VASCULAR SURGERY - UPDATE REPORT ON CONSULTATION PROCESS

Further to minute 29 (8/11/11) Kathy Doran, Chief Executive, NHS Cheshire, Warrington and Wirral (Primary Care Trust Cluster) submitted a report which updated the Committee on the consultation plan on changes to vascular services across Cheshire and Merseyside and built upon already extensive engagement with patients, the public and stakeholders on the principles involved in the Vascular Services review. Martin McEwan, Director of Communications and Engagement, NHS Cheshire, Warrington and Wirral, presented the report and outlined the three consultation phases envisaged as part of the engagement plan:

- Pre-consultation as part of the development of recommendations.
- Active consultation on the actual recommendations.
- Post-consultation on how the decision is being implemented.

A formal consultation would begin on 23 January 2012 for a period of 12 weeks. The consultation would ask for views on two arterial centres as the preferred option, agreed by the Project Board and the Commissioning Groups. These would be the Countess of Chester for the south of the Mersey and the Royal Liverpool Hospital for the north and operate as centres of arterial networks for the area.

A comprehensive consultation plan had been drawn up, including the latest draft of the formal consultation document. Comments on earlier drafts had already been received by LINKs and patient representatives, and amendments incorporated. A planning meeting with the local LINKs had taken place and a series of public meetings to specifically include LINK members would be taking place during the formal consultation process. Four main events would take place at a range of locations in Liverpool, Warrington, Wirral and Western Cheshire in January /February 2012, the first of these being in Wirral at Hulme Hall, 3pm-8pm on Tuesday 24 January.

Further engagement opportunities would take place at the main hospital trusts involved, as well as other public places such as other health sites and shopping centres, with exhibition materials being produced for this purpose.

Martin McEwan responded to comments from the Committee, and stated that although the consultation period was a minimum of 12 weeks, he would be happy for it to be extended beyond the May local elections. He referred to the National Clinical Advisory Team (NCAT) review which took place in December, 2011, when an independent clinician from London had interviewed all those involved in the review; the formal report was expected this month. He outlined a whole range of methods which would be used to capture people's views during the consultation. This would include a combination of closed questions along with the opportunity for more descriptive responses. Stakeholder groups and representatives of patient groups would also be involved in the consultation.

Mr McEwan stated that an advertisement had appeared in the Wirral Globe on 18 January regarding the consultation event at Hulme Hall on Tuesday 24 January, as it was felt that a week in advance was the best time to publicise an event such as this. He would be happy to arrange another consultation event in Wirral later on during the consultation period and would consult with the Chair over this.

The Chair referred to a petition of some 583 signatures opposing changes to vascular services and this would be forwarded onto NHS Cheshire, Warrington and Wirral.

The Chair invited Mr R Chandrasekar, Consultant at Arrowe Park Hospital, to address the Committee on his concerns regarding the consultation. He commented upon the need for the correct information to be given in the consultation document and referred to the map of the areas involved. Mr McEwan, in response stated that he would be happy to double check the accuracy of the mapping information.

Resolved – That the consultation plans be noted with the addition of an extra public meeting to be held in Wirral.

43 **AKA REPORT - ANY OTHER URGENT BUSINESS APPROVED BY THE CHAIR**

The Chair agreed to consideration of an item of urgent business in view of the seriousness of the issues which needed to be considered.

It was moved by Councillor C Povall and seconded by Councillor S Clarke –

“In view of the report produced by AKA into the appalling culture and practices of the Adult Social Services Department of this Council for over a decade, we request that a special meeting of this Committee be convened. The Health and Well Being O&S Committee is the one responsible for the scrutiny of this department and until this Committee has got to the bottom of the problems identified we cannot possibly demand the fundamental changes that need to be made.

Despite the Peer Review and the CQC Improvement Plan members of this Committee need to be assured that these practices are no longer in operation.

This meeting shall be to discuss this report exclusively.”

Councillor Hornby suggested that each member of the Committee be provided with an un-redacted copy of the AKA report, as it would be impossible to scrutinise the department not knowing which employees were still in Council employment and their former and current responsibilities. In addition the Committee needed to know the identity of the external service providers and their former and current contractual arrangements.

The Director assured the Committee that there would be a detailed investigation of those instances of abuse and a report on actions taken and plans in place.

The Director of Law, HR and Asset Management’s representative informed the Committee that AKA had taken independent legal advice in respect of the redactions. The Director’s representative commented that she would pursue this with the Director and the Committee would be provided with as much information as could legally be provided.

The Committee, having also discussed a possible date for the proposed special meeting, then -

Resolved (unanimously) –

(1) That in view of the report produced by AKA into the appalling culture and practices of the Adult Social Services Department of this Council for over a decade, we request that a special meeting of this Committee be convened. The Health and Well Being O&S Committee is the one responsible for the scrutiny of this department and until this Committee has got to the bottom of the problems identified we cannot possibly demand the fundamental changes that need to be made.

(2) That despite the Peer Review and the CQC Improvement Plan members of this Committee need to be assured that these practices are no longer in operation.

(3) That this meeting shall be to discuss this report exclusively.

(4) That the special meeting be held at 5.00pm on Monday 6 February, 2012.

44 **CORPORATE PLAN 2012/13**

In accordance with Council minutes 77 and 78 (12 December, 2011), the Committee considered those parts of the Corporate Plan within its remit. The Committee had also had sight of a motion which had been referred to all Overview and Scrutiny Committees by the Council at its meeting on 12 December, 2011 (minute 76 refers) and which was considered in connection with the Corporate Plan.

The Draft Corporate Plan and report of the Chief Executive which had been considered by Cabinet at its meeting on 8 December were considered by the Committee and the Chair invited comments from the Committee.

Responding to comments from Members the Director of Adult Social Services stated that more detail would be provided in a Departmental Plan which would include targets and indicators. The Corporate Plan's aim was to provide a holistic picture of how the Council would meet the needs of its residents in a strategic manner. With regard to criticism of poor quality reports, the Director assured the Committee that this would be addressed and there would be adequate opportunity for the Committee to drill down into issues at whatever level of detail was required.

A Member suggested that if the Plan provided too much detail it would become unwieldy and would be less likely to engage the public.

Members made the following suggestions for inclusion in the Corporate Plan:

- In the goal, 'Enhance the quality of life of the people of Wirral who have care and support needs', the sentence, 'Providing integrated, high quality services.....' should state how this would be measured and therefore how it could be scrutinised.
- Need to mention work carried out with Carers' Associations.
- In the goal on 'safeguarding' there was no mention of the AKA Report, this could be incorporated as an addendum with the actions arising from it.
- There was a need to see where the Department was currently and how it was going to move on.

- There was a need to refer to the Alcohol Scrutiny Review as a reduction in alcohol harm needed to be a target.
- There was a need to refer to the duties that the Council would have under Public Health.
- There was no mention of:
 - Affordability of social care
 - An increasing elderly population
 - Personal Budgets
 - Empowerment
 - Continuing public consultation
- One reference to regaining independence but no reference to retaining independence.

Resolved – That the comments of the Committee be referred to the Cabinet.

45 HEALTH AND SOCIAL CARE SERVICES FOR PEOPLE WITH AUTISM

The Director of Adult Social Services submitted a report which provided an update on the progress in Wirral against the expectations of the Statutory Guidance on the Autism Act 2009 as at December 2011. The Statutory Guidance (which also applied to NHS bodies as if they were Local Authorities) was published in December 2010 and set out the responsibilities for Local Authorities and NHS Bodies.

Rick O'Brien, Head of Access and Assessment, introduced the report and together with Russell Grant, Integrated Commissioning Manager, NHS Wirral gave details of the work being done, areas for development and the implications for social care and health provision. The cost and resource implications to the Council of funding autism services would be significant. There were currently two specialist providers of services for people with autism in Wirral, Autism Initiatives and Wirral Autistic Society. The combined revenue cost within the DASS budget of this provision covering supported living, day care, domiciliary care and day care was £3,060m. This figure precluded the wider expenditure on services for adults with autism in other areas such as local day services and supported living.

Linda Jones, a carer of an adult son with autism, addressed the Committee and spoke of her family's experience.

Both Rick O'Brien and Russell Grant responded to comments from Members and expanded on the numbers of people with autism being supported through both specialist services and day services. The Wirral Autistic Society did provide some free training and a Member referred to the excellent level of training undertaken at Foxfield School. There was a need for more work to be done on the prevalence of older people with autism (who may previously have had an incorrect diagnosis of a learning disability) and also those adults not in education, employment or training.

A Member suggested that it would be useful to see the progress report and action plan on autism in Wirral which had been received by Wirral's Learning Disability Partnership Board in October 2011.

Resolved –

(1) That the progress on the development of services in response to the Statutory Guidance arising from the Autism Act 2009 be noted.

(2) That the potential resource implications on public sector agencies and the challenge of commissioning services in this area be noted.

(3) That this Committee receives a further report on progress in a year.

46 LINK TRANSITION TO A LOCAL HEALTHWATCH ORGANISATION

The Director of Adult Social Services submitted a report on the progress towards establishing a local HealthWatch organisation as directed by the Health and Social Care Bill which was currently progressing towards Royal Assent.

It was agreed that as Diane Hill, LINKs representative on the Committee had sent her apologies, this item be deferred to the next meeting on Monday 12 March, 2012.

47 SELF EVALUATION / PEER CHALLENGE

The Director of Adult Social Services submitted a report on the outcome of the Peer Challenge carried out in late November/early December 2011. The Peer Challenger considered a “Self Evaluation” prepared by the Department which was informed by a report considered by Committee in November 2011 (minute 36 refers).

These documents had been used to produce the Department of Adult Social Services Draft “Local Account” which was a way of demonstrating and describing performance in adult social care to local people. Committee’s views on the Local Account were sought as part of the consultation process.

Responding to comments from Members the Director outlined how the process would be kept fresh whilst being subject to external challenge. In respect of the Local Account he acknowledged that some of the targets needed to be more challenging and the language more ambitious. He suggested that all the targets would be reviewed so that they were robust and more stretching. The Director would also ensure that respect and dignity were more explicitly referred to and that any duplication of targets would be addressed.

With the permission of the Chair, Councillor A McArdle, Cabinet portfolio holder for Social Care and Inclusion, addressed the Committee and commented that having listened to the discussion she would be happy to discuss the issues raised with the Director and also how the Local Account could relate to the Corporate Plan.

Resolved –

(1) That the outcome of the Peer Challenge process be noted.

(2) That the Committee’s comments on the content of the Local Account be noted.

Fiona Johnstone, Director of Public Health, gave a presentation on the Annual Public Health Report for Wirral 2011. The report took a life-cycle approach to reviewing the health of people on Wirral. It looked at the different stages in people's lives, beginning before birth right through to older age, considered the challenges and opportunities to improve health and wellbeing and made a number of recommendations.

Having already achieved a great deal for the people of Wirral; the health of the population in general was improving, premature deaths from conditions such as heart disease were reducing and life expectancy was increasing. However, there were still considerable challenges ahead. 'Fair Society, Healthy Lives' showed that men living in Wirral's richest areas could expect to live nearly 15 years longer than those from the poorest parts of the borough and that in parts of Birkenhead deaths from heart disease were 15% higher than the national average.

There was no doubt that vast improvements in public health had led to people living longer, whereby more than four in five deaths now occurred after the age of 65. The nature of health threats had also changed dramatically, with most people now dying in old age and of noncommunicable diseases. The biggest threats to life today were diseases that usually occurred later in life or those brought on earlier by poor lifestyle choices.

Responding to comments from Members, the Director, with reference to 'the unsustainable nature of the long-term costs of ill-health' stated that in continuing to provide good treatment for all and supporting those in need, the key essence of the direction of travel needed to be to try and stop a health issue escalating into a crisis. A radical approach was needed to develop wellness services through the NHS and Social Care.

She outlined her current position as a joint appointment between the NHS and the Council and that she would be happy to bring her Departmental Plan to the Committee. Explaining the role and membership of the Health and Well Being Board, the Director informed the meeting that the Board, which was in shadow form at the moment, had met formally for the first time in December. The Board would become statutory in April 2013. She would be happy to make the minutes of the Board available to the Committee and there was a need to consider the Committee's relationship with the Board to ensure the Committee were aware of what the Board was doing.

With regard to the disappointing figures for breastfeeding within deprived areas, the Director outlined a number of reasons why this was so and stated that a comprehensive programme was in place to try and increase the numbers.

This minute was subsequently amended by the Committee on 12 March (minute 58 refers) to include the following:

The Chair thanked the Director of Public Health for her informative presentation.

Resolved – That the Annual Public Health Report and presentation be noted and this Committee endorses the recommendations contained within it.

49 **WORK PROGRAMME**

The Committee received an update on its work programme and Members were invited to consider whether any issues should be added to the schedule for the current municipal year.

The Chair suggested that changes to maternity services within the Hospital Trust be added to the work programme. In respect of the working group on the transformation of day services, which had been established at the November meeting (minute 32 refers) the Chair informed the Committee that a scoping meeting had now been held and it was felt that the working group would work more efficiently if it was slightly smaller so those co-opted members on the group be asked to give evidence, rather than be members of the group.

Resolved – That the work programme be noted with the above addition.

50 **FORWARD PLAN**

The Committee had been invited to review the Forward Plan prior to the meeting in order for it to consider, having regard to the Committee's work programme, whether scrutiny should take place of any items contained within the Plan and, if so, how it could be done within relevant timescales and resources.

Resolved – That the Forward Plan be noted.

51 **MINUTES OF THE CHESHIRE AND WIRRAL COUNCILS JOINT SCRUTINY COMMITTEE**

Resolved – That the minutes of the meeting of the Cheshire and Wirral Council's Joint Scrutiny Committee held on 10 October 2011 be noted.