

4.0 APPOINTMENT OF VICE CHAIR FOR THE MUNICIPAL YEAR

The following appointment for the municipal year was agreed unanimously:
Vice Chair Cllr Wendy Clements (Proposed Cllr Moira McLaughlin;
Seconded Cllr Treena Johnson)

5.0 NOTES FROM THE PREVIOUS PANEL MEETING HELD ON 16th MARCH 2016

The notes from the previous meeting, held on 16th March 2016, were approved by members.

6.0 CQC INSPECTION OF WIRRAL UNIVERSITY TEACHING HOSPITAL (WUTH) – ACTION PLAN: UPDATE

Overview

The Chair welcomed Carole Self to the meeting. Members were aware that the Care Quality Commission (CQC) had carried out a planned inspection of WUTH in September 2015. The inspection report was published in March 2016, resulting in the agreement of an Action Plan to drive forward the required improvements. Carole informed members of the significant number of improvements which have been made since the last inspection, notably in the following areas:

- The reduction in wait times for diagnostic results
- The provision and monitoring of resuscitation trolley equipment
- Critical care - infection prevention and control compliance; leadership and risk management
- Safeguarding training
- End of Life Care
- Maternity including staffing
- Staffing levels across a wide range of skills

As an overall comment, Carole described the organisation as now feeling different with improved staff retention and a turnaround in culture. A further meeting between the Trust and CQC was planned for 10th November 2016, with a re-inspection probable in the early part of 2017.

Discussion

During discussion with members, a number of issues emerged:

- A member asked how the impact of the changes was measured and how CQC monitors the effectiveness. Members were informed that intelligence is gained from internal inspections carried out within the Trust. In addition, wider intelligence is also provided to CQC, for example, directly from staff. Board members also visit wards and listen to the views of staff. The three key priorities for the Trust are currently:
 - The outcomes and response to the CQC inspection
 - Improving the response times in A&E
 - The impact of the Trust's financial plans
- A member raised the concerns of CQC regarding the systems to determine staffing levels in children's and young people's services not being robust. The member asked what procedures were in place to improve staff levels. Carole Self commented that there were no known concerns currently relating to children's services staffing levels but would provide further information following the meeting.

- Regarding infection prevention and control, a member queried a CQC finding that “not all staff in critical care were washing their hands or using antiseptic hand gel as appropriate...”. Members were informed that, at the time of the inspection, some staff had felt disengaged. However, members were reassured that, subsequent to the inspection report, there had been a complete and fundamental turnaround in staff engagement and practice.
- A member questioned the Trust’s response to the CQC judgement that “safeguarding children’s training was not provided in line with best practice guidance”. The member asked for reassurance that enough staff are trained in each geographical area to provide an adequate response. Further details will be forwarded to members after the meeting.

Conclusion

The Chair thanked Carole Self for attending the meeting and providing members with the update. Carole undertook to provide a briefing paper regarding the queries on staffing data and on safeguarding training.

7.0 SOCIAL CARE ANNUAL COMPLAINTS AND CUSTOMER FEEDBACK REPORT – 2015/16

Overview

Simon Garner and Alison Carey provided members with an overview of the key issues identified in the annual report:

- Members had previously raised the consistency of DASS’s reporting of complaints which had been made directly to the providers of commissioned services. Members had felt that they had previously not seen a complete picture of complaints across all services. Steps have been taken to ensure more effective reporting of complaints data by providers to DASS. Although it is generally a requirement for all providers to provide DASS with complaint data, approximately 50% of the providers are doing so. Although positive steps have been taken, it is accepted that this aspect of the reporting needs to improve further.
- It was noted in the report that the response times for complainants have increased compared to previous years. Also, the percentage of complaints fully responded to within 6 months had reduced from 98% in 2014/15 to 89% in 2015/16. Actions have been put in place to ensure an improvement during 2016/17.
- Members were informed of steps being put in place to ensure that there is wider learning gained from complaints.

Discussion

During discussion with members, a number of issues emerged:

- A member expressed support for the steps already taken to improve the compliance of commissioned providers in supplying complaint information to DASS. However, only approximately 50% of providers have met this requirement. Further steps will be taken to ensure higher compliance in the future.

- Changes in providers of domiciliary care had occurred during the summer leading to a concentration of a number of contracts with one supplier (Premier Care). Concerns had also been raised regarding the service quality and working practices of another provider. It was agreed that a report regarding domiciliary care, including the re-shaping of the market, be provided to the next meeting of the Panel.
- A member expressed concern that service users do not realise that the Local Authority, as commissioner of the service, have a role in raising the standards of home care services. Members noted that more needs to be done to raise the understanding of clients regarding the responsibilities of the Local Authority.
- It was suggested that, in future reports, it would be helpful to receive a breakdown of complaints based on the gravity or seriousness of the complaint. However, members were reassured that the most significant issues are often dealt with under HR procedures and these are low in number. The number of complaints referred to the ombudsman is also low.

Conclusion

The Chair thanked Simon Garner and Alison Carey for attending the meeting and providing members with the update. It was agreed that a six monthly update on DASS complaints will be provided to the Panel.

8.0 FEEDBACK FROM THE VISIT TO CGL, HELD ON 23rd JUNE 2016

The current provider for the Wirral Integrated Substance (Alcohol and Drugs) Misuse Treatment and Recovery service is CGL (Change, Grow, Live). The local service is branded Wirral Ways to Recovery. Towards the end of the previous municipal year, members of the Health & Care Performance Panel agreed that a visit to local offices should be arranged. As a result, a visit to the Wallasey offices of CGL (formerly known as CRI) was arranged to which all members of the former Families & Wellbeing Policy & Performance Committee were invited.

Councillor Alan Brighthouse introduced a report which summarised the key findings from the visit. Councillor Brighthouse informed the Panel that the visit was very informative but stressed that it was not possible to formulate a view about the effectiveness of services provided from such visits. Nevertheless, Members received useful information about the different types of issues dealt with by CGL and the profile of current service users. The strong use of peer support and self-help groups was evident.

Subsequent to the visit, the local media had reported an ongoing investigation into deaths of people in contact with the drug and alcohol treatment services. It was anticipated that the investigation report would be available for the People Overview & Scrutiny Committee meeting to be held on 28th November.

Concern was expressed that, as mental health services are commissioned by Wirral CCG while drug & alcohol services are commissioned by public health, there was a danger of some clients falling between the different services.

9.0 QUALITY FRAMEWORK AND PERFORMANCE MEASURES FOR THE HEALTH SECTOR IN WIRRAL

Lorna Quigley introduced Wirral's health & care quarterly performance report for Quarter 1 (2016/17). The report illustrates a series of high level indicators which are measures of performance across the health and care sector. Key issues identified included:

- The percentage of patients referred to treatment (RTT) and admitted within the target time period is not being achieved on a consistent basis (Q4 2015/16 and Q1 2016/17).
- There has been an improvement in the level of diagnostic testing achieved within the target period.
- There was one reported case of MRSA (in the community) in Q1 2016/17 (against a target of zero).
- A&E waiting times at Arrowe Park are consistently below target.
- Waiting times at the walk-in centres are above target.
- The response rates for the Friends & Family Test (FFT) are very low leading to the accuracy of some of the data being questionable.

Lorna Quigley was thanked for the report.

10.0 SUICIDE RATES

Lorna Quigley introduced a series of documents related to suicide rates. Data shows that Wirral is mid-ranking in England for suicide rates. Members requested a further report to the next meeting which would include gender, a comparison in rates over a number of years and whether the individual was in receipt of any services.

Lorna Quigley was thanked for the report.

11.0 FUTURE ARRANGEMENTS AND WORK PROGRAMME FOR THE PANEL

Items for the agenda of the next Panel meeting on 7th December were confirmed:

- Care homes scrutiny review – review of recommendations
- Quality and availability of home care (domiciliary & reablement)
- Commissioning and quality of Intermediate care
- Continuing Healthcare funding
- Member visits to care homes - update
- Suicide rates - update

It was agreed that no report on the Sustainability & Transformation Plan is required for the Panel as this item will be reported to the People Overview & Scrutiny Committee.

12.0 SUMMARY OF ACTIONS ARISING FROM THE MEETING

The following actions arose from the meeting:

1. Carole Self will provide a briefing paper regarding the queries on staffing data and on safeguarding training at Wirral University Teaching Hospital.

2. Alan Veitch to arrange for a six monthly update on complaints to be included on the work programme.
3. Lorna Quigley to provide a further report to the next meeting on suicide rates which would include gender, a comparison in rates over a number of years and whether the individual was in receipt of any services.

13.0 RECOMMENDATIONS FOR APPROVAL BY THE PEOPLE OVERVIEW & SCRUTINY COMMITTEE

There were no specific recommendations to be made to the People Overview & Scrutiny Committee.

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