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Wiltshire Council

# HEALTH SELECT COMMITTEE

# DRAFT MINUTES OF THE HEALTH SELECT COMMITTEE MEETING HELD ON 23 SEPTEMBER 2014 AT KENNET ROOM - COUNTY HALL, TROWBRIDGE BA14 8JN.

# Present:

Annette Ball, Cllr Chris Caswill, Cawley, Cllr Mary Champion, Cllr Christine Crisp (Chair), Cllr Mary Douglas, Diane Gooch, Cllr Bob Jones MBE, Cllr Gordon King, Cllr John Knight, Irene Kohler, Cllr Helena McKeown, Cllr John Noeken (Vice Chairman), Cllr Jeff Osborn, Cllr Nina Phillips, Maggie Rae, Cllr Pip Ridout, Cllr John Walsh and Steve Wheeler

## Also Present:

James Cawley (WC), Maggie Rae (WC) and Cllr Sheila Parker

# 67 Apologies

Apologies were received from Dr Stephen Rowlands and Debbie Fielding of Wiltshire Clinical Commissioning Group.

## 68 Minutes of the Previous Meeting

The minutes of the previous meeting held on 15 July 2014 were presented.

### Decision:

To sign and agree the minutes of the previous meeting as a true and accurate record.

## 69 **Declarations of Interest**

Cllr Dr Helena McKeown declared a non-pecuniary interest due to her position as a GP, the Vice-Chairman of the Wiltshire Medical Committee and a member of the British Medical Association Council.

Cllr Douglas also declared a non-pecuniary interest as her husband is a nurse in a stroke ward at Salisbury District hospital.

## 70 Chairman's Announcements

It was announced by the Chair that BBC Radio Wiltshire was in attendance and had been granted permission by the Chairman to record the meeting's

procedures in relation to item 7 (Care Quality Commission Inspection Report : Mears Help to Live at Home Wiltshire).

# Health Peer Challenge

The Chair announced that this was a voluntary and flexible process commissioned by the council and the local health and wellbeing system to aid their improvement and learning. It was stated that it would involve a small team of peers giving up their time to spend time in another system to provide challenge on their practice and share learning. The process was explained to involve a wide range of people and the findings would be delivered immediately.

The Committee was informed that the Peer Review was due to take place over 4 days on site at County Hall, Trowbridge and aimed to look at how the whole health and wellbeing system fits together including scrutiny.

An agreed focus has been agreed to include the inter-related themes of:

- Prevention and upstream preventative activity; reducing health inequalities
- Support for communities
- Diversionary activity.

# 71 **Public Participation**

It was noted that member of the public, Mr Adrian Higher, would speak before item 7 (Minute No. 73 Refers).

# 72 Non Emergency Passenger Transport Service

The Committee welcomed Andrew Jennings and Ed Potter of ARRIVA who presented their performance update report.

It was explained by Mr Jennings that issues were present early in their contract and that they were now working through them. It was stated that the time delay in picking up patients was the area in which there was the greatest need for improvement.

It was highlighted that there was a good degree of performance at Great Western Hospital, an improving degree of performance at Salisbury Hospital, and a poor degree of performance at Royal United Hospital. It was noted that better KPI performances were seen on days with lower levels of activity.

The Committee heard that there had been a challenging couple of opening months. Mr Jennings explained that they had seen a good improvement and would expect to see this again over the next two months and meet all their performance indicators. It was stated that a patient survey had been conducted.

In response to concerns over the 100 Day Challenge Mr Jennings stated that they recognised their key role as a transport provider and would tailor the service accordingly. It was also explained that they had a daily dashboard running for real time performance information.

In response to questions Mr Jennings explained that transport bookings can be made at any time, and for the patient to be declared ready later that day. The Committee heard that problems were caused by the previous variety of services. It was explained that due to the complexity of different journeys provided and recorded in different ways it was extremely difficult to gather comprehensive data from them.

# **Resolved:**

To receive a written report from ARRIVA at the next meeting.

# 73 Care Quality Commission Inspection Report : Mears Help to Live at Home Wiltshire

Member of the public, Mr Adrian Higher, spoke about his experience with MEARS.

James Cawley, Associate Director – Adult Care Commissioning, Safeguarding and Housing then addressed the Committee. It was heard that MEARS were appointed just over a year ago. Mr Cawley explained that they were looking to move away from zero-hours contracts and towards encouraging small to medium sized suppliers, and that MEARS stood out above everyone else.

The Committee asked whether the Council would have found out about the multiple failings had it not been for the review of the contract. It was explained that it was Wiltshire Council that instigated the review in response to complaints received and concerns raised. It was heard that MEARS and the Council would resolve the problem together.

In response to questions it was heard that issues arose within June/July 2014. It was explained that prior to this there was no involvement with MEARS, and that they would not bring in a new supplier overnight. It was also heard that moving to four main suppliers had brought with it daily reports and given a more robust knowledge of what was going on.

The Committee thanked Mr Adrian Higher for his attendance and sharing his first-hand experience.

The Committee welcomed Mr Alan Long and Miss Bernadette Walsh who were in attendance to discuss the recent Care Quality Commission Inspection Report in respect of the Mears Help to Live at Home service.

Apologies were expressed to those who had seen the service deteriorate over the past year, some 40 cases. It was explained that after the acquisition of Careline, the majority of staff left without notice, including 2 managers. It was explained that the recruitment of new care staff was a challenge, and that the low staff levels placed huge pressure on the branch, and that they were only just starting to recover. The Committee heard that there were now 168 members of care staff and that recruitment was at the heart of their plan.

It was explained that in the three months prior to May 2014 there were no complaints. During May it was heard that this reached 28 complaints. It was noted that currently the complaints were at single figures, and that they hoped to see them go back to zero.

Members of the Committee were invited to visit their branch and speak to staff.

In response to questions over how much of a surprise the drop in service quality was it was explained that what caught them out was the quantity of staff that left in May and the level of disruption caused.

In response to questions over the level of support for workers it was explained that they were given a basic introduction. The Committee heard that what was needed was introduction to MEARS. It was also heard that staff had previously not had sufficient training, but that this has been actioned to be put right, and that staff are currently being put through re-training and refreshers.

The Committee asked questions on their action plan and how well they were on delivering the list of actions. It was heard that they were on track and confident that they would meet the requirements set out. It was heard that i-connect systems had been put in place along with daily meetings, 1-2-1's, and spot checks.

In response to questions on recruitment it was stated that making care work more attractive is a national issue and a long-term piece of work. It was also heard that there was an apprenticeship programme being developed with the YMCA in order to promote careers as a carer to young people.

In response to questions over the possibility of other providers learning from the MEARS action plan it was stated that they have had a meeting with other providers and will take specific problems out of the context of their unique situation.

The witnesses and member of the public were thanked for attending and answering questions.

# **Resolved:**

1. To note that the situation with Mears was one of great urgency and to express concern over the issue.

# 2. To carefully monitor the ongoing situation and receive the reinspection report from the Care Quality Commission.

# 74 Care Quality Commission Inspection Report : Westbury Court Care Home

Cllr King introduced the CQC inspection report on Westbury Court Care Home. Concerns were expressed over multiple failings in the care home including the number of qualified people in the home, the safeguarding of residents, and the looseness of the system. It was also mentioned that they had been asked to provide an action plan by 21 August, but one had not yet been presented.

James Cawley then addressed the Committee. Mr Cawley stated that there is a rigorous process to deal with these issues at an officer level and asked that if Councillors have any concerns after visiting care homes that they let them know. Mr Cawley acknowledged an issue over when to engage scrutiny and local members, it was stated that this would be looked at and that the Committee would be notified in the future.

Mr Cawley explained that this was a relatively brand new care home experiencing some difficulty which was to be expected with new management. It was stated that permission should be granted for the Committee to see their action plan.

It was stated by the Committee that as a Council they need to make it better for people to become carers.

James Cawley answered the Committee's concerns over response times to issues of improperly administered medications. Mr Cawley assured the Committee that as soon as they are made aware of such problems they take immediate action.

The Committee heard that there will be a follow-up CQC inspection within three months for the care home to demonstrate how they have responded to the initial inspection report.

In response to questions over how to report concerns with care homes it was heard that Councillors should contact James Cawley with any issues. It was also heard that they could contact Healthwatch.

# **Resolved:**

- 1. To receive the Westbury Court Care Home action plan when available.
- 2. To provide the Committee with a seminar on the management of care home contracts.

# 75 AWP/Dementia Task Group Final Report

The Committee welcomed Dr Celia Grummitt and Cllr Noeken who introduced the task group report.

Cllr Noeken drew attention to the scheme to provide dementia care beds in the homes of the Order of St. John Care Trust. It was heard that there are currently three homes to be rebuilt in the future. Cllr Noeken also drew attention to the excellent work commissioned over the past few months with regards to dementia awareness, and the scale of enthusiasm demonstrated towards addressing the problems.

Cllr Noeken emphasised the importance of early intervention by clinical services and GP's and stated that the number of those diagnoses each week with dementia had increased. Cognitive stimulation therapy was heard to be an important service which should be provided for those with mild to moderate stage dementia. It was heard that Cllr Noeken was encouraged by support groups and acknowledged that importance of signposting patients to services they may require.

Cllr Noeken thanked Maggie McDonald for her great work and assistance.

The Committee welcomed Dr Celia Grummitt who commented on the report. Dr Grummitt described the triangle of patient, therapist, and carer as the three key aspects of importance in dementia. It was heard that rates of dementia diagnosis were rising and that work was continuing to improve this. It was also heard that there were issues of elderly becoming stuck in hospital beds as there was not adequate care at home for them to go to.

The Committee thanked the Chair of the task group for the excellent job he had done.

The Committee raised the issue of rural isolation and questioned whether there should be a link with the Better Care Plan and Dementia Care. Irene Kohler stated that she would be happy to bring the Swan Pilot Report to the Committee.

The Committee stated that in regards to paragraph 49 it welcomed the work being done in hospitals and that it would be good to expect a response in six months addressing them specifically. The Committee heard from James Cawley that as with all scrutiny reports it will be forwarded to Cabinet.

The Committee stated that when moving money from long term treatment to addressing issues care needs to be taken that those with long-term symptoms do not suffer. James Cawley stated that a care pathway was being produced to highlight who has which responsibility.

# **Resolved:**

- 1. To endorse the report's recommendations and receive comments from Cabinet and CCG.
- 2. Comment: The Committee questioned whether recommendations can be managed within the current framework, or if more funding is necessary.

# 76 AWP Care Quality Commission Inspection

The item was agreed to be deferred to the next meeting when an action plan and more time was available.

# 77 Charging for GP Services

The item was agreed to be deferred to the next meeting.

# 78 Adults Safeguarding Annual Report

The Committee welcomed Margaret Sheather who introduced the annual Wiltshire Safeguarding Adults Board report.

Miss Sheather stated that since the Better Care Act was in place she welcomed the equality of status with children's safeguarding. It was also mentioned that the Committee might like to receive reports back on the implications of the Better Care Act throughout the year.

Miss Sheather outlined some of the key issues listed in section four of the report. It was stated that the findings of the report revealed no malice or wilful neglect, but did discover a lack of awareness. It was heard that there was a continuing increase in the volume of safeguarding work coming through, and that the assessment of people's needs under the mental capacity act was creating a bigger workload for safeguarding.

It was heard that the board had given their final review of the report and that it was to be signed off subject to comment from the Committee. It was also heard that it will be taken forward to the Health and Wellbeing Board in November 2014

Questions were asked on the increase in numbers in the care home sector which were not mentioned in the report. It was heard that there was a dramatic increase in alerts, and that about 28% of alerts were converted into strategy actions. James Cawley stated that care homes were discouraged from making alerts as they were flooded with safeguarding issues every time they rung up for advice.

The Committee queried the logic used with regards to the increased volume and suggested that it could not be proven either way whether things have stayed the same or had gotten worse. Miss Sheather stated that an increase was likely a result of awareness being raised.

# **Resolved:**

# The Committee noted the report.

# 79 **Draft Joint Mental Health & Wellbeing Strategy**

The Committee welcomed Cllr Sheila Parker who introduced the Draft Joint Mental Health and Wellbeing Strategy.

The Committee heard that the strategy's aim is to create communities and an environment in which good mental health and recovery for those with mental health problems is provided, along with reductions in discrimination.

It was explained that they were currently working with Communications and the Mental Health Team in order to create an approach, contact had also been made with the Wiltshire/Swindon Network.

The timeline was described having been considered by Cabinet in September. It was heard that the draft strategy would go back to the board in November, and the consultation was to launch on 10 October 2014 to coincide with Mental Health Day.

The Committee commented that they were looking at the strategy after it had been to Cabinet, and that it would have been more useful if it had been brought to them before this.

# **Resolved:**

- 1. The Committee welcomed the strategy.
- 2. The Committee noted that it was hard to find out who was in charge of which, that joint working was important and that it hoped this would be flagged in the action plan.
- 3. The Committee noted that there was not much in the strategy in relation to alcohol and drugs, and that there were difficulties in knowing whether alcohol agencies or the AWP should be involved.
- 4. It was agreed that an official comment from the Committee would be written and sent along with the draft strategy.

## 80 **Public Health Annual Report**

The item was agreed to be deferred to the next meeting.

# 81 **Report on Health Scrutiny Guidance**

The item was agreed to be deferred to the next meeting.

# 82 Task Group Update

There were no comments on the task group updates.

# 83 Forward Work Programme

The Committee noted the forward work plan.

# 84 Urgent Items

There were no urgent items.

# 85 Date of Next Meeting

The date of the next was confirmed as Tuesday 18 November 2014, at 10.30am and would be held in the Kennet Room at County Hall, Trowbridge, Wiltshire BA14 8JN.

(Duration of meeting: 10.30 am - 2.30 pm)

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