

## **HEALTH SCRUTINY AND PERFORMANCE PANEL**

**Tuesday, 24 April, 2012 at 6.00 p.m.**

**Conference Room, Council House, Walsall**

### **Panel Members Present**

Councillor M. Longhi (Chair)  
Councillor I. Robertson  
Councillor E. Russell  
Councillor H. Sarohi

### **Officers present**

Paul Davies, Executive Director (Social Care & Inclusion)  
Richard Kirby, Chief Executive (Walsall Healthcare NHS Trust)  
Isobel Gillis, Director of Public Health (Walsall PCT)  
Andy Rust, Head of Vulnerable Adults and Joint Commissioning  
Sue Hartley, Director of Nursing  
Marsha Ingram, Director of Corporate Development and People (Dudley and Walsall Mental Health Trust)  
Sue Crabtree, Head of Palliative and End of Life Care (Walsall Healthcare NHS Trust)  
Michael Hurt, Dementia Care Programme Manager (Joint Commissioning Unit)  
John Leach, Head of Communities and Partnerships  
John Batchelor, Local Health Watch Co-ordinator  
Ian Baines, Director of Finance, IT, Estates and Deputy Chief Executive (Dudley and Walsall Mental Health Trust)  
Jan Scott, Head of Old People's Service (Dudley and Walsall Mental Health Trust)  
Craig Goodall, Scrutiny Officer

### **155/12 Apologies**

Apologies for absence were received from Councillors S. Fletcher-Hall, R. Martin and D. Turner.

### **156/12 Substitutions**

There were no substitutions for the duration of the meeting.

### **157/12 Declarations of interest and party whip**

There were no declarations of interest or party whip for the duration of the meeting.

## 158/12 Minutes

### Resolved

**That the minutes of the meeting held on 5 March, 2012, copies having previously been circulated be approved as a true and accurate record.**

## 159/12 End of Life Care and Liverpool Care Pathway Implementation with Walsall Healthcare NHS Trust

The Panel considered issues relating to the practical implementation of the Liverpool Care Pathway (LCP) at Walsall Healthcare NHS Trust (the Trust) together with details of a recent audit into the use of the LCP.

The Head of Palliative and End of Life Care provided Members with further information on:-

- The implementation plan for improving end of life care services;
- The audit of bereaved relatives;
- Use of the LCP;

Members also received updates on issues raised by the Panel following the community audit:-

- Patient 5 had been incorrectly placed on the LCP by a GP. Use of the LCP was stopped the same day following a review by a specialist palliative care nurse;
- Patient H had been an extremely complex case and use of the LCP had been regularly reviewed.

The following were the principal points from the ensuing discussion:-

- More planning around end of life was required;
- Currently the majority of people die in a hospital, despite a survey showing that 70% of people would prefer to die at home;
- The capacity within the Trust's Palliative Care Team had been increased;
- It was necessary for death and dying to become less of a taboo subject so that patients and families could prepare.

In closing the item, the Chair explained that he felt further work around end of life services was required and suggested that the Panel look into this further during 2012/13.

### Resolved

**That end of life services and strategy be considered in more detail in 2012/13.**

## **160/12 Update on development of Joint Strategic Needs Assessment for Walsall 2012**

Members were informed on progress to date in the development of Walsall's Joint Strategic Needs Assessment (JSNA) 2012.

The Director of Public Health introduced the JSNA explaining that it was a strategic document aimed to set out the issues the Borough needed to tackle in order to address its health needs.

The Chair commented that it was important that the JSNA led to actions to tackle the large scale health inequalities that existed in Walsall.

The Executive Director (Social Care and Inclusion) explained that this would be the case adding that, in order to tackle these health inequalities, wider scale problems such as the local economy and housing standards would need to be addressed. These problems required a partner wide approach.

A Member suggested that to improve health in the long term, key messages needed to be delivered to young people so that they understood their health was in their hands.

### **Resolved**

**That the Joint Strategic Needs Assessment be noted.**

## **161/12 Dementia Programme**

The Panel received an update on the Dementia Programme for Walsall.

The Dementia Care Programme Manager gave a presentation on the Dementia Care Programme (annexed) highlighting:-

- The current situation and latest developments;
- Future work;
- Challenges for the memory service.

The following were the principal points from the ensuing discussion:-

- Serious concern was expressed that Walsall was ranked 159th out of 169 PCTs for diagnosing dementia. Members were informed it took at least six months currently to diagnose a person with dementia;
- The stigma surrounding dementia needed to be tackled;
- The number of people living with dementia in the community will grow in the future as the number of older people increase. To tackle this future challenge, investment and service redesign was taking place, including six more dementia cafés, dementia advisors and dementia support workers to work with a new older people's mental health liaison team at the hospital ;

- Further training is being developed to improve awareness of dementia in Walsall.
- The first pilot as part of dementia friendly communities is being planned. This will involve training supermarket staff in dementia awareness

### **Resolved**

**That progress with the Dementia Care Programme and the Dementia Diagnosis Ranking be considered at a future meeting.**

## **162/12 Local Healthwatch**

The Panel received an update on the latest situation with the development of a Local Healthwatch Organisation.

The Head of Communities and Partnerships provided Members with an overview of the role of Healthwatch and the next steps that would take place to establish the Walsall branch.

The Local Healthwatch Co-ordinator highlighted that the organisation was required to be a social enterprise. He explained that consultation would take place with stakeholders to establish local preferences for Walsall's healthwatch.

The Chair requested that the Panel be allowed to comment on the tender document of the Local Healthwatch before the start of the procurement process.

### **Resolved**

**That the Panel review and comment on the Healthwatch tender documentation before the start of the procurement process.**

## **163/12 Walsall Healthcare NHS Trust - Foundation Trust consultation**

The Panel received a presentation and participated in the consultation regarding Walsall Healthcare NHS Trust (WHT) becoming a Foundation Trust (FT).

The Chief Executive of WHT gave a presentation (annexed) explaining:-

- WHT's vision and priorities;
- WHT's promises to patients;
- WHT's promises to colleagues;
- What an FT was;
- FT Members and Governors;
- FT public and staff constituencies;
- The role of the FT Council of Governors and its relationship with the Board of Directors;
- Next steps in the FT application process.

The Chief Executive added that the process needed to be completed by April, 2014. The earliest date on which the WHT could expect to be a FT was April, 2013. It would be a challenge moving forward to reduce cost, maintain standards and reduce mortality rates. He added that WHT's recent patient experience feedback showed significant improvement.

The Chair congratulated WHT on the improved patient experience feedback noting the significance of improved current performance compared to that in the past. He added that he felt the Panel had been adequately consulted and that Members were comfortable with the FT proposals presented to them.

### **Resolved**

**That Walsall Healthcare NHS Trust's application to become a Foundation Trust be supported.**

### **164/12 Dudley and Walsall Mental Health Trust - Foundation Trust Application Update**

The Panel was informed of the latest situation with regard to the Dudley and Walsall Mental Health Trust (DWMHT) becoming a FT.

The Director of People and Corporate Development gave a presentation (annexed) to Members highlighting:-

- The journey including public consultation and Council of Governors formulation;
- Tri-partite formal agreement;
- The FT assessment process, including what was tested and how the assessment took place;
- Quality governance assessment.

She also explained that once the application was submitted, the timescales for approval were in the hands of the Department of Health and MONITOR (the independent regulator for Foundation Trusts). Additional challenges had also arisen regarding new financial assumptions that the Trust was required to take into account.

She added that the DWMHT had recently agreed a patient experience strategy which the Panel were welcome to consider.

### **Resolved**

**That the Panel consider the patient experience strategy for the Dudley and Walsall Mental Health Trust at a future meeting.**

**165/12 Work Programme 2011/12 and Forward Plan**

**Resolved**

- (1) That the Work Programme 2011/12 be noted;**  
**and;**
- (2) That the Forward Plan be noted.**

**166/12 Date of next meeting**

It was noted that the date of the next meeting would be agreed by annual council on 23 May, 2012.

In closing the meeting, the Chair thanked all Members and officers for their hard work during the previous Municipal Year.

**Termination of meeting**

The meeting terminated at 8.40 p.m.

Signed: .....

Date: .....