

SOCIAL CARE AND HEALTH SCRUTINY AND OVERVIEW COMMITTEE

Thursday, 2 JULY, 2015 at 6.00 p.m.

Conference Room, Council House, Walsall

Panel Members Present

Councillor M. Longhi (Chair)
Councillor E. Russell (Vice-Chair)
Councillor A. Clarke
Councillor E. Hazell (arrived at 7.05pm)
Councillor A. Hicken
Councillor I. Shires
Councillor P. Smith
Councillor D. Coughlan
Councillor R. Burley

Portfolio Holders Present

Councillor E. Hughes – Care and Safeguarding

Officers Present

Richard Kirby – Chief Executive of Walsall Healthcare Trust.
Keith Skerman – Executive Director (Social Care and Inclusion).
Andy Rust - Head of Joint Commissioning Unit.
Nikki Gough – Committee Business and Governance Officer.

1/15 Apologies

Councillors E. Hazell, J. Rochelle, I. Robertson, T.Jukes gave their apologies for the duration of the meeting.

2/15 Substitutions

Councillor R. Burley substituted for Councillor I. Robertson for the duration of the meeting.

3/15 Declarations of interest and party whip

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

4/15 Minutes of Previous Meeting

The minutes of the previous meeting held on 28 April 2015 were approved as a true and accurate record.

5/15 Health and Social Care System in Walsall

The Head of the Joint Commissioning Unit gave a presentation on the health and social care system in Walsall (annexed). The role of commissioners was explained including the need to understand the needs of the population and commission services accordingly. A discussion around supported living was held and Members expressed concern that 'personal assistants' were unregulated. Officers assured Members that if personal assistants were recognised they were tracked and training was provided. Members agreed that this should come back to the Committee in the future and that the Cabinet Member for Care and Safeguarding agreed to give it due consideration.

Resolved that; -

The regulation of personal assistants is taken to a future meeting of the Committee.

6/15 Walsall Healthcare NHS Trust Improvement Plan for 2015/16

The Chief Executive of Walsall Healthcare Trust introduced the report (annexed) and explained that it had been a difficult 12-18 month period for the Trust which had been driven by a big increase in demand from the local population, but also from the populations of Staffordshire and Sandwell. Disruption had been caused by the implementation of a computer system failure, which had had an impact on front line staff and change to clinical leadership. The Trust had also spent heavily and the Board was clear that it had to improve.

The calculation of mortality rates was described. Members were informed that hospital mortality rates had started to rise, currently at 1.07 and it was hoped that it would be 1 or below. It was stressed that this was still within the expected range.

Officers were asked for reassurance that patients were not sent home prematurely in order to reduce the hospital mortality rate. The Committee were assured that this was not the case and that if someone died at home shortly after leaving hospital it would still be included in the hospital mortality rate it was also noted that the hospital were not paid when patients were readmitted.

The following discussion ensued about the improvement plan; -

- The Trust was investing £3.5million in extra nurses between now and September to meet national standards
- There had been backlogs in outpatient and elective surgery with too many people waiting for outpatient treatment
- Cancer pathways were now working
- The Care Quality Commission would be inspecting the hospital between 8-11 September

The Committee was informed that the Trust had reviewed those on waiting lists to ensure that those in the most clinical need were seen as a priority. The CCG had commissioned capacity at other hospitals and within the private sector. This was mostly charged at the national NHS tariff.

The Committee agreed that it would be useful to receive feedback from the CCG on Walsall patients using other hospitals in the West Midlands. Officers agreed to bring this information to a future meeting.

The Chief Executive concluded that the stated improvement actions would take the rest of the financial year and would include getting the emergency system working and ensuring sustainable services moving forward.

The Committee were informed that the Hospital Trust was receiving support from the Department of Health to assist the Trust financially.

Resolved that; -

- Progress on the improvement plan is taken to the next Committee meeting, to include backlogs
- An update on mortality rates is taken to the next Committee meeting
- The CCG is asked to provide a report which gives information on Walsall patients using other hospitals in the West Midlands at a future meeting.

7/15 Review of Overview and Scrutiny in Walsall

Officers spoke to the report (annexed) and explained that the report stated that the Social Care and Health Scrutiny Committee were quoted as being a good example of scrutiny. Key points of the report were discussed including; -

- The distinct roles of the Health and Well-Being Board and the Scrutiny Committee
- The way the Committee was organised
- Resources available to the Committee
- The relationship between Cabinet Members and Executive Directors

Members agreed that they supported all of the recommendations of the report, except for recommendation number 5, as this was no longer relevant.

8/15 Areas of Focus

Members were asked to agree their terms of focus. The following items were discussed and added to the work programme for the municipal year;

- Healthwatch Walsall
- An impact assessment of the welfare cuts on the council
- The Aids and Adaptations Working Group
- The circulated list of 'areas of focus' carry over items (tabled)

9/15 Contract with Black Country Partnership Foundation NHS Trust for specialist health learning disability services Cabinet report.

The Chair explained that he had placed this item on the agenda as there had been some concerns about the wording of the report the Chair had attended Cabinet and had been provided with reassurance that the proposals were robust. Members were made aware that there was only one service provider, the Chair was satisfied that this was the case, but requested more evidence to support such claims in the future. A discussion was held around the delegated authority relating to this report. Officers

and Members agreed that this item would be received at the next scrutiny meeting to consider how next year's contract could be adapted.

Resolved that; -

The Contract with Black Country Partnership Foundation NHS Trust for specialist health learning disability services is considered at the next meeting of the Committee.

Termination of Meeting

There being no further business, the meeting terminated at 8.30 p.m.

Signed:

Date: