

## **HEALTH SCRUTINY AND PERFORMANCE PANEL**

**Thursday, 24 April, 2014 at 6.00 p.m.**

**Conference Room, Council House, Walsall**

### **Panel Members Present**

Councillor M. Longhi (Chair)  
Councillor D. James (Vice-Chair)  
Councillor O. Bennett  
Councillor M. Burley  
Councillor M. Flower  
Councillor E. Russell

### **Officers Present**

Dr. Anand Richie - GP, Walsall Clinical Commissioning Group Urgent Care Lead  
Andy Rust - Head of Joint Commissioning Unit  
Keith Skerman - Interim Executive Director, Social Care and Inclusion  
Nikki Gough - Committee Business and Governance Manager

### **325/14 Apologies**

Apologies were received on behalf of Councillor V. Woodruff.

### **326/14 Substitutions**

There were no substitutions for the duration of the meeting.

### **327/14 Declarations of interest and party whip**

There were no declarations of interest or party whip.

### 328/14 **Local Government (Access to Information) Act, 1985 (as amended)**

#### **Resolved**

That the public be excluded from the meeting during consideration of the items set out in the private agenda for the reasons set out therein and Section 100A of the Local Government Act, 1972.

### 329/14 **Minutes**

#### **Resolved**

The minutes of the meeting held on 11 March, 2014 were approved as a true and accurate record.

### 330/14 **Better Care Fund**

The Panel were informed that statutory guidance had been issued on 20<sup>th</sup> December, 2013 that set out Government intentions for the implementation of a Better Care Fund (BCF) from April, 2015. Local health and social care systems were required to plan for a higher level of integration as part of a five year strategy.

Officers emphasised that there was no requirement for a single organisation but there was a requirement for a pooled budget. Work was underway to integrate services in four main service areas:-

1. Integration of Community Services;
2. Integration of intermediate care services;
3. Recommissioning SWIFT unit;

#### 4. Quality of care in nursing homes.

Members expressed concern that more reliance would be placed on family members if capacity did not exist in the health and social care system. Officers stated that there was a risk this may happen but it was hoped that by being more integrated that the system would work more quickly. Members agreed that the Panel should monitor the implementation of the fund.

Members expressed concern that safeguards should be put in place to ensure that people are not left at risk. The Executive Director agreed and explained that specialist rehabilitation units were designed as a step down from hospital; however, in a system that was overloaded this may not work.

It was agreed that there should be consideration of capacity in family. Officers stated that there was a new requirement to access family careers to better support them, this was funded though the pooled budget.

The Head of Joint Commissioning explained that Community Services were not working as effectively as they could so people ended up at Accident and Emergency (A and E), this placed pressure on A and E. The whole hospital was then driven by what was happening in A and E, meaning that quick discharge became important. Capacity problems at Walsall Healthcare Trust were a risk to the overall plan for integration.

#### **Resolved**

That the programme of the 'Better Care Fund' should be monitored by the Health Scrutiny and Performance Panel over the next 12 - 18 months.

## 331/14 The Urgent Care Review Update

The Urgent Care Lead introduced himself to Members and gave the context for the review. Key messages from the 'listening exercise' had been collected and it was clear that access to services was important to people.

Members asked if geographical boundaries had been considered in the review. Officers stated that GP's had been asked to keep their boundaries open for patients. However, boundaries for visiting patients could be created.

When considering the options development it was clear that the Emergency Urgent Care Centre (EUCC) needed to be at the front of Accident and Emergency, this was a primary care led walk in centre. Members were informed that an immediate change and a long term change was required.

Members asked for re-assurance that Walsall would continue to have Walk in Centre. Officers were clear that there had been a series of papers and officers had not prejudged the outcome at all. It was also clear that there needed to be an improvement in GP services too. Officers stated that the consultation was for what Walsall would have in April, 2015 and to ask the people of Walsall what they think about the future vision.

Officers explained that often where people live close to another Authority they may access other urgent care sites, it was noted that people living closer to the Walk in Centre accessed it more.

The Urgent Care lead stated that the Walk in Centre was important and the review is about the best urgent care for people of Walsall. The walk in centre site must be moved and the consultation will ask people where they want the service to be sited.

Members supported the consultation commencing.

**Resolved**

That the progress of the Urgent Care Review should come back to the Health Scrutiny and Performance Panel in the future.

**332/14 Work Programme 2013/14**

The Work Programme 2013/14 was noted.

**333/14 Date of next meeting**

The date of the next meeting would be confirmed at Annual Council.

**Termination of meeting**

There being no further business, the meeting terminated at 7.30 p.m.

Signed: .....

Date: .....