

HEALTH SCRUTINY AND PERFORMANCE PANEL

Tuesday, 21 June, 2011 at 6.00 p.m.

Conference Room, Council House, Walsall

Panel Members Present

Councillor Longhi (Chair)
Councillor Woodruff Vice-Chair)
Councillor Carpenter
Councillor Murray
Councillor Robertson
Councillor Russell
Councillor Sarohi
Councillor Turner

Portfolio Holders present

Councillor McCracken - Social Care and Health
Councillor Arif - Business support services

Other Members Present

Councillor C. Perry - Chair of Health Scrutiny, Staffordshire County Council

Officers present

Paul Davies - Executive Director for Social Care and Inclusion
Peter Davis - Head of Community Care (Walsall Council)
Andy Rust - Head of Vulnerable Adults (Commissioning)
Yvonne Thomas - Director of Partnerships (NHS Walsall)
Mike Browne - Acting Quality Manager (Walsall Healthcare Trust)
Sue Hartley - Director of Nursing (Walsall Healthcare Trust)
Amir Khan - Medical Director (Walsall Healthcare Trust)
Richard Kirby - Chief Executive (Walsall Healthcare Trust)
Anne Baines - Director of Strategy and Partnerships (Walsall Healthcare Trust)
Nikki Gough - Scrutiny Officer

70/11 Apologies

Apologies for absence were received on behalf of Councillors Martin and Fletcher-Hall.

71/11 Substitutions

Councillor J. Murray substituted for Councillor R. Martin for the duration of the meeting.

72/11 Declarations of Interest and Party Whip

Councillor Longhi declared an interest as a non-Executive Director of Walsall Manor Hospitals NHS Board in previous years, although he had not held this position for at least a year.

Councillor V. Woodruff declared an interest as an employee of Walsall Healthcare NHS Trust.

73/11 Minutes

Resolved

That the minutes of the meeting held on 28 April, 2011, a copy having previously been circulated, be approved as a true and accurate record.

The Panel agreed to receive Item 7 prior to Item 5.

74/11 Work programme items 'Mortality rates at Walsall Healthcare Trust' and 'Care Quality Commission report on Dignity and Nutrition'.

Members considered the work programme items 'Mortality rates at Walsall Healthcare Trust' and 'Care Quality Commission report on Dignity and Nutrition'.

The reports were tabled at the meeting:-

(see annexed)

The Chief Executive of Walsall Healthcare Trust explained that through the public inquiry at Stafford Hospital, it was claimed that figures on hospital standardised mortality rates relating to the Manor Hospital had been misleading. The panel were informed that during the period discussed, the Trust started making high use of palliative care codes, patients were treated as terminally ill, this had the effect of removing deaths from mortality rates over a period of more than six months. However, the panel were re-assured that hospital standardised mortality rates (HSMR) were just one of the measures that was reported to the Trust Board, who also considered the raw number of deaths.

A graph on palliative care was tabled:-

(see annexed)

Members were re-assured that the increase in coding of palliative care did not hide higher mortality rates. Members asked what the HSMR would be if the effect of the coding error was removed. The Chief Executive of Walsall Healthcare Trust explained that this was still being worked through.

Trust officers stated that they had expressed concern that the hospitals HSMR was too good but the Trust were re-assured by the Dr Foster organisation that data was clean. Over a period of time, the Trust looked for an explanation but failed to find one as it was a complex system. It was re-iterated that the impact of this error on the ground was negligible.

The portfolio holder thanked Trust officers for attending and observed that the hospital had fell foul of a complex system and the issue had been highlighted prior to investigation.

The Chair welcomed Councillor Kath Perry (the Chair of Health Scrutiny at Staffordshire County Council) to the meeting. Councillor Perry explained that patients from Staffordshire received treatment at the Manor Hospital. Councillor Perry queried whether the increase in the number of palliative care patients was as a result of an influx of patients from Staffordshire. Trust officers clarified that the error was due to the way the code was used and not an increase in patients.

Dr. Amir Khan agreed to provide Councillor Robertson with the percentage of corrective artery surgery done on stroke surgery.

Members asked for assurances that cut backs would not affect mortality rates. The Trust Chief Executive explained that the Healthcare Trust was facing a challenging financial settlement and a programme of efficiencies focused on back office staff rather than clinical teams. It was stressed that impact assessments were completed for all proposals.

Trust officers informed Members that the long term trend for HMSR had been significant improvement and the mortality rate has halved over the previous ten years.

It was agreed that the hospital standardised mortality rate be added to the work programme of the panel.

The Panel considered the Work Programme item 'Care Quality Commission report on Dignity and Nutrition'. Trust officers stated that the Care Quality Commission had completed a number of unannounced visits to Trusts inspecting standards relating to dignity and respect. The Director of Nursing informed the Panel that this report was available on the CQC website. The visit involved the CQC inspecting two wards where the elderly population were nursed, the CQC talked to patients, staff and carers.

Although the hospital were disappointed with issues identified, there were areas which were acknowledged as positive such as the 'snack trolley'. Members were assured that immediate action had been taken and an action plan would be produced. A Member asked whether there were any issues raised by CQC about pressure sores. The Director of Nursing explained the CQC stated that without exception, every patient was clean and looked after. The Chair stated that he welcomed the report and considered looking after the elderly population to be important.

It was agreed that care of the elderly be added to the work programme of the panel.

**RESOLVED;
That**

The following items are added to the work programme of the Health Scrutiny and Performance Panel; -

1. Hospital standardised mortality rate at the Walsall Healthcare Trust
2. Care of the elderly at the Walsall Healthcare Trust

75/11 An Introduction to Health Scrutiny

The Executive Director for Social Care and Inclusion presented to the panel on an introduction to Health Scrutiny, including the powers and legislation behind health scrutiny:-

(see annexed)

76/11 The NHS in Walsall

The Head of Vulnerable Adults presented on the NHS in Walsall. This included arrangements for delivering NHS services in Walsall, in light of significant changes in the NHS, and the governance and monitoring of GPs in the new proposed commissioning arrangements. Officers confirmed that GPs would be held to account by the National Commissioning body.

77/11 Work Programme 2011/12

The Chair of Health Scrutiny and Performance Panel asked Members to confirm the work items for consideration.

It was agreed that the following items would be added to the Work Programme:-

1. Mortality rates at Walsall Healthcare Trust.
2. Care of the elderly (vulnerable) at Walsall Healthcare Trust.

3. PCT system plan - distilled into meaningful sections and circulated prior to the meeting.
4. A Joint Committee with Dudley was established to consider the Mental Health Trust with the following membership:-

Councillor Woodruff
Councillor Longhi
Councillor Russell
Councillor Robertson
Councillor Martin (with confirmation by e-mail)

If Councillor Martin is not able to participate on the Working Group, Councillor Carpenter agreed to fill the vacancy. It was agreed that the Chair would write to the Health Scrutiny Chair at Dudley Council to inform her of the panel's resolution.

5. Health and Social Care Bill.
6. Vascular surgery.
7. West Midlands ambulance response times.

In considering quality accounts, it was agreed that the Chair considers correspondence relating to timescales of quality account publication.

In consideration of Working Group establishment, it was agreed that this would be decided once the panel had received the PCT system plan at the next Health Scrutiny and Performance Panel.

It was agreed that Councillor Robertson would represent the panel on the Children and Young People Scrutiny and Performance Panel Obesity Working Group.

RESOLVED

That; -

1. It was agreed that Councillor Robertson would represent the panel on the Children and Young People Scrutiny and Performance Panel Obesity Working Group.
2. It was agreed that the following items would be added to the Work Programme:-
 1. Mortality rates at Walsall Healthcare Trust.
 2. Care of the elderly (vulnerable) at Walsall Healthcare Trust.
 3. PCT system plan - distilled into meaningful sections and circulated

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5. Health and Social Care Bill.
6. Vascular surgery.
7. West Midlands ambulance response times.

77/11 Date of Next Meeting

It was noted that the date of the next meeting would be 25 July, 2011 at 6.00 p.m.

Termination of meeting

There being no further business, the meeting terminated at 8.00 p.m.

Signed:

Date: