

HEALTH AND SOCIAL CARE SCRUTINY AND PERFORMANCE PANEL

Thursday, 17 July, 2014 at 6.00 p.m.

Conference Room, Council House, Walsall

Panel Members Present

Councillor M. Longhi (Chair)
Councillor I. Robertson (Vice-Chair)
Councillor D. Coughlan
Councillor J. Fitzpatrick
Councillor M. Flower
Councillor E. Hazell
Councillor L. Rattigan
Councillor E. Russell
Councillor D. Shires

Officers Present

Andy Rust - Head of Joint Commissioning
Keith Skerman - Interim Executive Director (Social Care and Inclusion)
Dan Mortiboys – Senior Finance Manager (Head of Schools Finance)
Salma Ali - Accountable Officer, Walsall Clinical Commissioning Group
Isabel Gillis – Director of Public Health
Anne Bains – Acting Chief Executive, Walsall Healthcare NHS Trust
Neil Picken - Senior Committee Business and Governance Manager

334/14 Apologies

None received.

335/14 Substitutions

There were no substitutions for the duration of the meeting.

336/14 Declarations of interest and party whip

There were no declarations of interest or party whip.

337/14 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.

338/14 Minutes

The Chair welcomed Members to the first meeting of the newly formed Health, Social Care and Inclusion Scrutiny and Performance Panel

The Chair advised that since the Health and Social Care & Inclusion Scrutiny and Performance Panels had been merged, there were a number of sets of Minutes which needed to be considered from both Panels, as follows:-

- Health Scrutiny – 9 and 24 April, 2014
- Social Care Scrutiny – 8 May, 2014

In closing, the Chair thanked Isabel Gillis, on behalf of the Panel, for her work since being appointed and wished her well on her retirement.

Resolved

1. That the minutes of the Health Scrutiny and Performance Panel meetings held on 9 and 24 April, 2014 be approved as a true and accurate record;
2. That the minutes of the Social Care and Inclusion Scrutiny and Performance Panel meeting held on 8 May and 24 April, 2014 be approved as a true and accurate record.

339/14 Change in the order of business

The Chair sought the Panel's approval to consider item 9 – Social Care and Inclusion Financial Outturn for 2013/14 as the next item.

Resolved

That the order of business be changed to allow item 9 to be considered as the next item.

340/14 Social Care and Inclusion Financial Outturn for 2013/14

The Senior Finance Manager presented the revenue and capital outturn position for services under the remit of the Health and Social Care Scrutiny and Performance Panel. In doing so he advised that the accounts were being audited by an external company.

Members noted that the 2013/14 yearend financial position was a revenue overspend of £441k against budget of £72.246m (net use of earmarked reserves/carry forwards), and a capital under spend of £405k (net of approved carry forwards into 2014/15).

The Chair considered that whilst the £441k was relatively small in comparison to the overall budget, in isolation, it was still a significant amount. He expressed concern that had the approved carry forwards from Public Health not been included, the over spend for the services within the Panels remit would have been considerably higher.

In response, the Senior Finance Manager explained that should Public Health be removed from the equation the over spend would have been in the region of £4.6m. He stressed however that the use of reserves was planned and part of the budgeting process. Looking ahead, it was anticipated that a balanced budget would be set for 2014/15.

The Interim Executive Director (Social Care and Inclusion) advised that the budget for Public Health was separate in 2014/15. The forecasted budget would replace the £4.5m and also achieve further savings of circa £6.5m. It was anticipated that this could be achieved so long as targets were kept to.

The Chair sought clarity on the controllable budget for 2014/15 to which it was advised that the budget was roughly £60m.

A member asked what the variances related to. In response, the Interim Executive Director (Social Care and Inclusion) advised that the variances related to some projects not being delivered on time; some savings not being achieved and some income and other elements not being accounted for. More widely he accepted that in previous years budgeting was not as well managed as it could have been which is why Professor Bolton had undertaken a root and branch review. He referred Members to appendix 1 of the report which provided further detail. He also suggested that Members contact him should there be any specific areas that they wished to consider further.

Discussion followed on the implementation and funding of the PARIS system. Members were advised that this was previously a project to be funded by prudential borrowing which would have involved paying interest. The implementation of the replacement PARIS system would now be met using the community capacity grant and was included within the budget.

A member raised a concern that should budget pressures continue the Council may reach a point where it is unable to meet its statutory obligations. The Interim Executive Director (Social Care and Inclusion) advised that the budget was demand led which always carried an element of risk. It had been delivered well to date and significant savings were proposed over the next 3 years. This would clearly carry risk. One area which required further work was benefit based charging and income collection. A dedicated project team had been established which had calculated the amount of outstanding income

was £2.7m and accumulating. It was further reported that the team was undertaking a fundamental review and redesign of the Policy.

Resolved

That the report be noted.

341/14 The Health and Social Care System in Walsall

The Panel received a presentation setting out an overview of services within the remit of the Panel. The Chair encouraged Members to consider the presentation and identify any particular areas which they would like to consider in more depth at a future Panel meeting.

The presentation focussed upon:-

- The Health and Social Care System from April, 2013;
- Walsall Clinical Commissioning Group;
- Walsall Primary Care Services;
- Walsall Healthcare NHS Trust;
- Dudley and Walsall Mental Health Partnership NHS Trust;
- West Midlands Ambulance Service;
- Walsall Council Adult Social Care Services;
- Care Homes and Home Care Services;
- Personal Assistants;
- Recent Scrutiny Items.

Members discussed the possibility of holding meetings in external venues such as care homes. It was further suggested that site visits be undertaken when it was felt that it would benefit debate and discussion. The Chair agreed that site visits would be valuable for certain matters.

Resolved

That the presentation be noted.

342/14 Walsall Healthcare Trust Update

The Acting Chief Executive, Walsall Healthcare NHS Trust presented the Annual Plan 2014/15. The presentation covered:-

- The 2013/14 outturn;
- The vision for first – class integrated care;
- Priorities for years 1 and 2;
- The financial plan;
- Longer term strategies and challenges;
- Key priorities.

Members were advised that capacity was an issue as the 4 hour target (the timescale in which all patients in emergency services should be seen) was not being achieved. There were a number of work streams underway to address this matter. It was also highlighted that the focus of the 'front door' was being changed together with the 'flow' of patients. The workforce had also been increased.

Following the presentation Members of the Panel raised a number of questions. It was asked whether the spend on agency staff had been reduced to which the acting Chief Executive advised that spend had reduced, however, further work needed to take place to reduce it further.

A member queried whether people from outside of the Borough that used services, such as the SWIFT ward prior to discharge were a cost to Walsall or the relevant Clinical Commissioning Group (CCG) from their own area? In response, it was explained that the relevant CCG should reimburse Walsall CCG. The Member expressed some concern that people from other areas were being taken into an already busy hospital. In response, the Acting Chief Executive, Walsall Healthcare NHS Trust advised that in respect of an emergency perspective the members view was understandable, however, there were many other areas of the hospital which increased income from treating patients from outside of the borough which could then be used to invest in services for Walsall people.

Discussion ensued as to the ability of the Trust to cope with demand for its birthing services, particularly within the midwife led centre. The Acting Chief Executive, Walsall Healthcare NHS Trust explained that the services within Walsall were good and so many people choose to travel from elsewhere. There are capacity issues and this was being addressed. There was also contingency planning taking place should Stafford close its maternity services. Members were assured that the hospital would never accept a level of capacity that it couldn't safely manage.

In response to a question put by a member of the public, the Acting Chief Executive, Walsall Healthcare NHS Trust agreed to circulate the figures relating to those born with cerebral palsy.

The Chair clarified with members that they had received a briefing note on the foetal remains and questioned whether they were now content that the matter had been resolved. Members agreed that this was the case.

The Chair then challenged the standard mortality rate figure of 81 as this appeared staggeringly low which gave rise to suspicion. This figure placed Walsall in the top five performing hospitals across the country. Given that the hospital had been at the lower end for a number of years the new position seemed impossible. He sought assurances that the figure was correct. In response, the Acting Chief Executive, Walsall Healthcare NHS Trust advised that she would be happy to bring this matter back to a future meeting to provide assurance that the figures were supported with evidence. Members

were assured that a detailed report was submitted to the quality and safety committee at the Trust and so they had been scrutinised.

Resolved

1. That the mortality rate figure be considered in more depth at the next Panel meeting scheduled to be held on 8th September, 2014;
2. That the presentation be noted.

343/14 Commissioning Winter Capacity

A report was submitted (annexed) which outlined the proposal to commission beds in care home settings as part of an overall Joint Capacity Plan for Winter 2014/15.

It was explained that the proposal aimed to bring stability to the urgent and emergency care system in Walsall which was experiencing continuing difficulties. The proposal would remove the need for the physical location of the Swift Discharge Suite within the Manor Hospital, instead providing the service through a number of care homes. This would release additional beds for the hospital to utilise which would assist them in achieving the 95% target for 4 hour waits in Accident and Emergency.

Members were advised that the proposed new system aimed to improve the flow of patients out of the Manor Hospital and to enable the individual and family members to have the time needed to make sometimes difficult decisions about what happens next.

Members considered the report commenting that it was critical to ensure that the quality of care using the revised system was up to scratch. Further, it was highlighted that many elderly people were fearful of care homes and work would be required to overcome this. It was also made clear that expectations needed to be managed so that individuals were made aware that it was a transitional, short term arrangement. The Interim Executive Director (Social Care and Inclusion) advised that the facilities were modern, well designed and comfortable with a hotel like environment. Each room had an on suite facility.

A member queried whether the beds would be fully utilised given that they would be booked en-bloc. Officers assured members that the beds would have high occupancy rates.

Further questions ensued as to whether individuals would have a choice as to which care home they were located at and also what monitoring would take place to ensure the service was being delivered effectively at each care home. It was also asked whether any care homes would be outside of the Borough. The Head of Joint Commissioning advised that two homes were slightly outside of the Borough as these were well situated for residents within

Walsall nearby. The beds would be spread across the Borough and so individuals would have a choice.

Discussion took place regarding the suitability of the care home environment for individuals as existing residents were in need of nursing care which may not be the case for individuals placed there temporarily. It was suggested that this may be detrimental to the recovery process. Members were advised that this way of operating worked successful in areas such as Shrewsbury. Additional staff would be employed and the role would be made easier as individuals would be located in fewer homes. The key to success was trained staff and the correct ratios.

The Chair questioned how the Panel, and Members would know if the new system was working well. He also echoed earlier comments that it was important to overcome mental barriers for individuals entering a home. The Head of Joint Commissioning advised that, in terms of performance management, the number of individuals placed back into their own home together with their experiences of the new process would be sought and monitored. Members were afforded the opportunity to attend a facility in Shrewsbury so they could see, first hand, the system working.

Members of the Panel were advised that they would be invited to attend a visit. There would be a further item on the next agenda for Members to provide feedback of their experiences.

Resolved

1. That commissioning winter capacity be considered by the Panel at its meeting to be held on 8 September, 2014;
2. That Members undertake a visit to Shrewsbury to witness the proposed system in operation and report their findings back to the Panel.

344/14 Information on the Urgent Care Review

A report was submitted (annexed) providing an overview on progress made towards the development of an Urgent and Emergency Care Strategy for the Borough of Walsall.

Resolved

That the report be noted.

345/14 Work Programme and Forward Plan 2013/14

The Panel considered a report (annexed) providing background information for Members to inform the development of a work programme for the 2014/15 municipal year.

Members considered the suggested items as detailed within the report which had been carried forward from the 2013/14 municipal year.

The Chair advised Members to notify him of any additional items they would wish to consider.

Resolved

That the suggested Work Programme 2013/14 as detailed within the report as submitted be noted.

346/14 Date of next meeting

It was noted that the next meeting would take place on 8 September, 2014 at 6.00 p.m.

Termination of meeting

There being no further business, the meeting terminated at 8.50 p.m.

Signed:

Date: