

HEALTH SCRUTINY COMMITTEE

26 JUNE 2018

PRESENT

Councillor R. Chilton (in the Chair).

Councillors S. Taylor (Vice-Chairman), S.K. Anstee, Mrs. J.E. Brophy, Mrs. A. Bruer-Morris, A. Duffield, Mrs. D.L. Haddad, S. Longden, J. Slater and D. Acton (ex-Officio)

In attendance

Jill Colbert	Corporate Director Children Families Wellbeing
Jenny Hunt	Public Sector Reform Manager
Cathy Rooney	Director of Safeguarding and Professional Development
Diane Eaton	Director of Integrated Services, Trafford Council & Pennine Care
Karen Ahmed	Director of All Age Commissioning
Heather Fairfield	Chairman, HealthWatch Trafford
Peter Forrester	Head of Governance
Alexander Murray	Democratic and Scrutiny Officer

APOLOGIES

Apologies for absence were received from Councillors J. Bennett, Mrs. L. Evans and D. Western

1. CHAIRMAN AND VICE CHAIRMAN OF THE COMMITTEE 2018/19

RESOLVED: That the appointment of the Chairman and Vice Chairman be noted by the Committee.

2. MEMBERSHIP OF THE COMMITTEE 2018/19 MUNICIPAL YEAR

The Chairman drew Member's attention to the report that had been submitted with the agenda. The report listed the membership of the Committee for the 2018/19 Municipal Year as Councillors, Joanne Bennett, Anne Duffield, Steven Longden, Jane Slater, Mrs. Angela Bruer-Morris, Jane Brophy, Mrs. Laura Evans, Mrs. Denise Haddad, David Acton (Ex Officio), and one Vacancy. The Chairman informed the Committee that since the annual meeting of Council Councillor Stephen Anstee had been appointed to the vacant position.

RESOLVED: That the Membership of the Committee be noted by the Committee.

3. TERMS OF REFERENCE 2018/19 MUNICIPAL YEAR

The Committee received a report detailing the Health Scrutiny Committee's Terms of Reference. Members were advised that there had been no changes since the previous year.

RESOLVED: That the Terms of Reference be noted by the Committee.

4. MINUTES

Heather Fairfield and Councillor Haddad both requested that the minutes be amended to show their attendance at the meeting 13 March 2018.

RESOLVED: That subject to the above amendments regarding attendance the minutes of the meeting held on 13 March 2018 be agreed as an accurate record and signed by the Chairman.

5. DECLARATIONS OF INTEREST

The following declarations of personal interest were made;

- Councillor Brophy in relation to her employment by Lancashire Care Foundation Trust.
- Councillor Bruer-Morris in relation to her employment within the NHS.
- Councillor Chilton in relation to his employment by general medical council.
- Councillor Taylor in relation to her employment by the NHS.

6. CQC ACTION PLAN UPDATE

The Director of Integrated Services for Trafford Council & Pennine Care delivered a presentation to the Committee. The presentation covered the changes which had been made to Trafford Services in response to the CQC local system review conducted in October 2017. The presentation covered the Asset based approach, Ascot House and the structure of services, the Urgent Care Control Centre, Discharge to Assess Pathway, Stabilise and Make Safe Service (SAMS), and Discharge to Assess Beds.

The Committee were informed of the services that were at the Ascot House site and how those services were coordinated to support individuals. There were four social work teams across Trafford with one based in each locality. This meant that each team was near to where the individuals they worked with lived which helped them in a number of ways including being able to link their work with GPs.

The Committee were then told about the Urgent Care Control Room (UCCR). Trafford were the first area to implement a control room of this type. The UCCR was able to track every bed and service available within the community and all related services were based in the same building. The Director of Integrated Services explained the display and daily updates that enabled the UCCR staff to track the activity and coordinate services.

The Trafford discharge to assess pathways were then explained to the Committee. There were 5 pathways available for people to ensure that each resident received the correct amount of support for them. The presentation showed the staff members who were able to put individuals onto each pathway, the conditions which defined which pathway a person should be on, the personalised services available on each pathway, funding for services on each pathway, and additional services which could be accessed on each pathway if needed.

The Director of Integrated Services then described the new discharge to assess bed service that Trafford had implemented. This service involved the Council commissioning a number of beds at Care Homes that would be used to discharge

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residents to for a short period of time whilst they were assessed and long term decisions around their care were decided. Trafford had around 40 beds commissioned during Christmas 2017 and had 36 as of the meeting. The reduction in the number of beds was due to residents wanting to stay in at those residences for the long term. The discharge to assess beds were spread amongst 12 providers across the area. The impact of the development of these services had been that since Christmas 2016 Trafford had reduced the average number of delayed transfers of care from over 100 to 25. Whilst this represented a large improvement in the services it was still not in line with the target of 16 set by the CQC.

The Director of Integrated Services then gave the Committee a couple of case studies of people who had been supported by the system and showed how the various elements were now working together to support them. The Director of Integrated Services read out a letter that had been sent to the service by a resident. The letter thanked staff for providing the support and detailed the improvements that she had managed to achieve through reablement, whereby she went from not being able to move unassisted to being able to return to her home.

Following the presentation the Chairman asked whether it would be possible to arrange a visit to for Members to go to Ascot House. The Director of Integrated Services welcomed the proposal and asked officers to arrange dates.

The Chairman asked about the cost to the Council of continually holding the discharge to assess beds. The Director of All Age Commissioning responded that before the Council started this service they had around 100 vacancies on average and now they had 36 discharge to assess beds instead, so the service was saving money. The Director of Integrated Services added that due to new dynamic commissioning arrangements the Council had put in place, new places at care homes could be arranged within 3 days when needed.

Councillor Bruer-Morris asked whether people have to pay to stay in the discharge to assess beds. The Director of Integrated Services informed the Committee that the individuals were given three weeks within the placement free of charge and after that point it would depend upon their circumstances.

Councillor Taylor asked whether this work linked in with the Trafford Coordination Centre (TCC). The Director of Integrated Services told the Committee that the UCCR only linked into TCC when an individual had ongoing needs.

Councillor Anstee stated that the action plan was due to finish in December 2018 and he noted that there were many items still needing to be completed. Given his knowledge of the services, Councillor Anstee was aware of a number of points that had been completed but not updated on the action plan. Councillor Anstee requested for a more complete action plan be brought to a future meeting with additional plans listed against any outstanding actions.

Councillor Duffield asked whether any people were in homes which required improvement. The Director of All Age Commissioning answered that some residents had been placed at homes that required improvement. However, when such a placement was made the Council worked with the home to improve the service.

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Councillor Duffield asked what the ongoing challenges were to further reduce the number of delays. The Director of Integrated Services told the Committee that the service was revising the winter plan. Another area that was being looked into was how to support complex individuals to minimise the number of moves that they needed, as each move had a large negative impact upon their health. Trafford were also adding an extra Stabilise and Make Safe provider to the framework.

Councillor Duffield asked whether there were any issues with adaptations. The Director of All Age Commissioning responded that the Council had identified that it was taking a long time for major adaptations to be put in place. The Council were looking to commission places with providers for individuals to stay in whilst adaptations were made.

Councillor Brophy asked about staff vacancies and whether there were delays caused by staffing issues. The Director of Integrated Services stated that there had been a large improvement in staffing numbers and that the Council had worked hard to make Trafford a place where people want to work. Due to this work there had only been a couple of instances where delays had been caused by staffing shortages within Trafford.

Councillor Haddad asked whether there were any plans to help deal with issues around flu. The Director of Integrated Services responded that Trafford already had a plan in place for staff and were in the process of developing a flu plan for the area. In order to have a full update on the flu plan it was suggested that the Interim Director in Public Health attend the next Committee meeting.

RESOLVED:

1. That a visit to Ascot House for Committee Members be arranged.
2. That an updated Action plan be brought to the Committee showing which actions had been completed and containing details of plans for any ongoing actions.
3. That the Interim Director of Public Health attend the next meeting of the Committee to present an item on the Trafford flu plan.

7. TRAFFORD SAFEGUARDING BOARD

The Director of Safeguarding gave an overview of the new joint Safeguarding Board to the Committee. The reconfiguration of the Safeguarding Board had streamlined Trafford's approach and reduced the duplication of work. The changes included the addition of the Interim Director of Public Health to the Board's membership to help the Board take a community approach.

The Committee were told that the Board was to meet quarterly with the Sub Boards meeting more frequently. In the new structure the Sub Boards were to do most of the work to provide assurance and then report their findings to the Joint Safeguarding Board. The Director of Safeguarding informed the Committee of the different issues that came under Board's remit and how these different areas were dealt with by the Sub Boards. The Committee were told that the membership of each Sub Board consisted of experts with in depth knowledge which enabled them to deal with those issues effectively.

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Trafford were in the process of looking at how individuals and organisations could learn from safeguarding reviews. The review process for both adults and Children's was also being revised to ensure that it was the "Gold Standard". Trafford had applied to become an early adopter of a new safeguarding approach. If the application was successful it would lead to a small amount of additional funding which could be used to help evaluate the new model.

Councillor Bruer-Morris asked whether Trafford were the only Local Authority implementing a Joint Safeguarding Board. The Director of Safeguarding responded that there were not many other areas doing this at the moment which was why Trafford had taking such a slow and cautious approach.

Councillor Duffield asked whether all of the positions on the main and Sub Boards had been filled and if all people turned up to the meetings so far. The Director of Safeguarding told the Committee that the Corporate Director for CFW had been assisting in the appointments to the last couple of spaces on the Boards which was now complete. As the Board had not met since the new approach had been implemented the Director of Safeguarding was unable to answer the question regarding attendance.

Councillor Acton enquired as to where the expertise around online safeguarding was within the structure. The Director of Safeguarding answered that online safeguarding was covered under complex safeguarding. This was because online safeguarding involved complex external factors which used to select and affect individuals.

RESOLVED: That the report be noted by the Committee.

8. ONE TRAFFORD RESPONSE

The Public Sector Reform Manager described the process by which the one Trafford response model had been created. The design process had involved bringing together front line staff from various organisations where an overlap of users had been identified. Staff members were then looked at the obstacles within the current system and to think about how they could be overcome.

The One Trafford Response (OTR) programme was one of a number of reform pieces of work which looked at how Trafford Council's services collaborate with voluntary services and other organisations. A key focus of the model was to make sure that the approach integrated health and social care services and would work with the Local Care Organisation. The Public Sector Reform Manager advised councillors to look at an animated story board that was available on YouTube after the meeting. The video detailed the story of one man and his attempts to find help and how the OTR enabled him to get to a point where he is looking for employment.

The OTR tried to ensure that anyone who contacted a service within Trafford received the correct service for them. The Council needed to create a robust early help front door service as in the current model 75% of 1000 calls received by the MARAT team actually required early help. The approach also required case holders to attend weekly multiagency meetings to discuss cases and ensure that users were receiving the right support throughout.

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A chart was shown to the Committee which displayed the range of issues that the OTR team dealt with and a customer journey through the system. The customer journey highlighted how the OTR approach differed from other approaches and enabled the team to support people in new ways which reduced recidivism.

The pilot service was based in Stretford and Trafford were looking to roll out the model across the north of the Borough. The team had been working on building relationships with organisations in the area to make sure that they understood the new model prior to its implementation. A number of blockages within the system had been identified and the project team were working to resolve those issues so that the model could reach its full potential. One way to circumnavigate some of the blockages was to work collaboratively with organisations such as DWP and THT.

The Public Sector Reform Manager then described the training programme which was to prepare staff to adopt the new model. There were 3 tiers of training; the first was for all staff members, the second was for workers and leaders working within the place based model, and the third was specific training on asset based tools for relevant workers. The final slide of the presentation showed the next steps for the project. These were; Promote agile working from the Limelight Centre in Old Trafford, to recruit a Communication and Marketing Manager, to undertake a cost benefits analysis, to roll out the workforce development offer for staff, to begin the phased approach to implementing an All Age Front Door, and to continue to understand blockages and issues.

Councillor Anstee noted the apparent success of the pilot project and asked whether the technology was in place to enable this approach to be rolled out successfully and whether there were any GDPR issues. The Public Sector Reform Manager responded that the information governance team were working with the all age front door team so that when people contact any service they will have the correct conversation to ensure that their information will be handled in line with GDPR guidelines. There had been issues around the IT but they had been dealt with during the pilot project.

Councillor Brophy asked about what happened to those who do not give consent to share their information. The Public Sector Reform Manager answered that most people did give consent but when they do not the case worker still keeps the case and they gain support through general conversations between organisations.

Councillor Brophy asked what the programme had achieved and how deliverable it was. The Corporate Director for CFW answered that the OTR programme was one of the biggest changes in the way that public sector services were delivered across the country. Because it was such a great shift it would be hard to say how deliverable it was in any meaningful way at this point. However, all who were involved in the project knew that the new way of working that the OTR used was the way forward and the correct way for services to be delivered.

Councillor Taylor stated that she was in support of the programme and the wrap around services. She then asked how Councillors could help and refer individuals into the service and how did the OTR team work with the standard services.

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The Public Sector Reform Manager responded that it was members of the existing workforce who were part of the OTR Team but they were delivering the services differently. This meant that if a Councillor was aware of a person who was already receiving support and they knew who was providing the support then OTR could set up a multiagency meeting to arrange wrap around services. The OTR Team were still waiting for the initiation of the all age front door which would make referrals much easier to deal with.

The Chairman of the Committee noted that this was the last meeting which the Corporate Director of CFW would be attending before she left the Council. The Chairman thanked the Corporate Director of CFW on behalf of the Committee for all of her work over the years and for all she had done for the residents of Trafford.

RESOLVED:

- 1) That the Committee receive a further update in 3 months.
- 2) That the Committee thank the Corporate Director of CFW for all of the work that she has done for the people of Trafford.

9. SINGLE HOSPITAL SERVICE

As the Committee had received an update report for information Members were asked if they had any questions to be posed to the Single Hospital Service Project Team. The Chairman of the Committee noted that the acquisition of North Manchester Hospital was going to take longer than was initially planned. The Chairman also noted that, despite the reservations of Members, there were no plans for moving forward which did not involve MFT acquiring North Manchester Hospital. Councillor Duffield stated that the Committee needed to focus on the impact that the plans of the Single Hospital Service would have on Trafford residents and that this should be the focus of future updates. Councillor Mrs Bruer-Morris asked if staff members were going to be moved across the various hospitals within the trust and if they were how they felt about it.

RESOLVED:

- 1) That the report be noted.
- 2) That any further updates are to focus upon the impact upon Trafford residents.
- 3) That the question posed by Councillor Bruer-Morris be sent to the Single Hospital Service for a response.

10. NWAS UPDATE

The Committee had received an update report prior to the meeting and any questions were to be sent to NWAS for a response. The Chairman was disappointed with the level of performance within Trafford. The Chairman was aware that HealthWatch Trafford were going to look into the performance within Trafford and looked forward to seeing their findings. The Chairman wanted officers to arrange a meeting with NWAS to discuss the structure of the service in the area.

RESOLVED:

- 1) That the update be noted.
- 2) That a meeting be arranged between the Chairman and NWAS.

11. HEALTHWATCH TRAFFORD PERFORMANCE REPORT

The Chairman of HealthWatch Trafford presented the performance report from April – May 2018 to the Committee. The Chairman of HealthWatch Trafford focused on ongoing issues that had not yet resolved and new issues that had been raised during April and May. The ongoing issues were; nurse led bed based intermediate care, public consultation processes, and phlebotomy. The New Issues raised were concerning Dentistry and Personal Health Budgets.

HealthWatch Trafford had conducted a review of Ascot House (the main intermediate care facility within Trafford) and found that it was not being used as a step up service so people who needed low level care had to go into hospital. There was concern as the Department of Health had released a statement saying 25% of people who were in long term care would have to come out of hospital. Having looked at the capacity of intermediate care services in Trafford, HealthWatch had concluded that there were not enough beds to cope with the projected additional demand.

HealthWatch Trafford had started to look at phlebotomy first by working with the HealthWatch 100 and had then conducted a further piece of work which received over 300 responses. A report was due to be published within the next two weeks and the findings passed onto Trafford CCG. HealthWatch had also received complaints about children's phlebotomy which they were following up.

The Chairman of HealthWatch Trafford had met with the Chairman of the Local Dentistry Committee and had found out that 40% of the Trafford population were not signed up to a dentist. HealthWatch felt that the Bridgewater trust, which was an organisation set up to provide vulnerable people with dental care across Greater Manchester, was not doing all they could to support dentistry within Trafford and had spoken to the Interim Director of Public Health about this. Oral Health was becoming a concern in care homes across Trafford. Despite there being NICE guidelines in place relating to oral health a number of care homes within Trafford were unaware of them.

The Chairman of the Committee thanked the Chairman of HealthWatch Trafford for the report. The Chairman stated that he wanted the Committee to work closely with HealthWatch especially in relation to phlebotomy and dental services within Trafford.

The Executive Member for Wellbeing explained some of the issues of dental services within Trafford and informed the Board that the Health and Wellbeing Board were looking into this area. The Chairman requested that the Committee be kept up to date on the work of the Health and Wellbeing Board in this area.

Councillor Bruer-Morris asked why Trafford did not employ Health assistants at GP practices. The Chairman of HealthWatch Trafford did not know the answer and suggested that it should be asked of Trafford CCG.

Councillor Duffield asked whether HealthWatch had a proposal of what the nurse led intermediate care bed system should look like. The Chairman of HealthWatch Trafford responded that a proposal had been created the previous year which

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involved using the George Carnall facility for more intermediate care beds for both step up and step down care.

RESOLVED:

- 1) That the Chairman of HealthWatch Trafford be thanked for attending the meeting.
- 2) That the Health and Wellbeing Board keeps the Committee updated on the work relating to dentistry within Trafford.
- 3) That Councillor Bruer-Morris' question be sent to Trafford CCG for an answer.

12. COMMITTEE WORK PROGRAMME 2018/19

The Chairman asked the Committee whether they had any items that they wanted to add or remove from the work programme for the year. The Committee responded that they were happy with the work programme. The Chairman then told the Committee that there would be a number of task and finish groups over the course of the year and he asked each Member to email any suggestions for topics to officers by the end of the following week.

RESOLVED:

- 1) That the Committee work programme be agreed.
- 2) That Members are to email suggestions for task and finish group topics to officers by Friday 6 July.

13. HEALTH UPDATES

The Chairman informed the Committee that since being appointed he had attended very positive meeting with HealthWatch and had met with the Corporate Director for Children Families and Wellbeing.

The Vice Chairman informed the Committee that she was to be the Councils representative at the Greater Manchester Joint Health Scrutiny Committee.

RESOLVED: That the updates be noted.

The meeting commenced at 6.30 pm and finished at 8.56 pm