

# HEALTH SCRUTINY COMMITTEE

13 JULY 2016

## PRESENT

Councillor J. Harding (in the Chair).

Councillors Mrs. P. Young (Vice-Chairman), Mrs. J.E. Brophy, Mrs. A. Bruer-Morris, M. Cawdrey, Mrs. D.L. Haddad, A. Mitchell, K. Procter, L. Walsh, Mrs. V. Ward and M. Young (ex-Officio)

### In attendance

Stephen Gardner - Director of Strategic Projects, CMFT  
Gina Lawrence - Chief Operating Officer, Trafford CCG  
Dianne Eaton - Director of Integrated Care (Pennine Care and Trafford Council)  
Ann Day - Chairman of HealthWatch Trafford  
Maria Slater - Child and Adolescent Mental Health (CAMH) service Manager, CMFT  
Sue Heatley - Matron / Palliative & End of Life Care (Adults) Lead, CMFT  
Jane Grimshaw - Head of Nursing, Trafford Hospitals, CMFT  
Chris Gaffey - Democratic and Scrutiny Officer

## 1. MEMBERSHIP OF THE COMMITTEE 2016/17, INCLUDING CHAIRMAN AND VICE-CHAIRMAN.

RESOLVED: That the Membership of the Committee for the 2016/17 Municipal Year, as appointed at the Annual Meeting of the Council held on 25 May 2016 and set out below, be noted:

Councillors Jane Brophy, Mrs Angela Bruer-Morris, Mark Cawdrey, Mrs. Denise Haddad, Joanne Harding (Chairman), Alan Mitchell, Kevin Procter, Sophie Taylor, Laurence Walsh, Viv Ward, Michael Young (Ex- Officio), Mrs. Patricia Young (Vice Chairman).

## 2. TERMS OF REFERENCE

RESOLVED: That the Committee's Terms of Reference, as agreed at the Annual Meeting of the Council held on 25 May 2016, be noted.

## 3. DECLARATIONS OF INTEREST

The following personal interests were declared;

- Councillor Bruer-Morris in relation to her employment within the NHS.
- Councillor Mitchell in relation to holding a Governor position with a Mental Health Trust.
- Councillor Brophy in relation to her employment by Lancashire Care Foundation Trust.
- Councillor Harding in relation to her employment by a mental health charity, as well as being on the Board of Trustees for Trafford Carers.

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**4. MINUTES**

Referring to minute 48, the Director of Strategic Projects for Central Manchester Foundation Trust advised he would look into CMFT's plans to move TB services from Altrincham to Trafford General Hospital and get back to the Committee to confirm.

Members enquired as to when they would receive the Safeguarding training mentioned in minute 46. Members also sought clarification on when they could expect the findings from the CAMHS consultation mentioned in minute 47 to become available.

RESOLVED: That the Minutes of the meeting held on 29 March 2016, be approved as a correct record and signed by the Chairman.

**5. SINGLE HOSPITAL SERVICE**

The Committee received a report of the Executive Member for Adult Social Services and Community Wellbeing providing a short summary of the current progress and status of the Single Hospital Service Review.

Members were sceptical as to whether the suggested service changes could be achieved by the target date of April 2017, and the Committee agreed that an extraordinary meeting would be scheduled to discuss the Single Hospital Service Review once more information became available.

RESOLVED:

(1) That the report be noted.

(2) That the Single Hospital Service Review be monitored and revisited at a future meeting.

**6. TRAFFORD CARE COORDINATION CENTRE**

The Committee received a presentation of the Chief Operating Officer, Trafford Clinical Commissioning Group (CCG) providing an update on developments of the Trafford Care Coordination Centre (TCCC).

Members were presented with the statistical outcomes of the first five months' TCCC referrals, which showed positive results. Basic errors in referrals had declined rapidly and 135 diagnostic tests had been arranged, reducing the need for follow up appointments. Work was ongoing on discharge management referrals, with an average of 30 patients being process through the system on a daily basis. Patient feedback had been positive, and the recently completed patient satisfactory surveys would be brought to a future Committee meeting for information.

Members were provided with the financial savings projections from the use of the referral and discharge managements systems, and a high level financial analysis could be brought back to the Committee at a future meeting.

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The Chairman welcomed the presentation and requested that an update on the TCCC be added as a standing item on the agenda. It was agreed that further visits to the TCCC would be organised for interested Members.

RESOLVED:

- (1) That the presentation be noted.
- (2) That the customer satisfactory surveys be included in a future TCCC update.
- (3) That an update on the TCCC be a standing item on the agenda.
- (4) That visits to the TCCC be organised for interested Members.

**7. ASCOT HOUSE**

The Committee received a presentation of the Chief Operating Officer, Trafford Clinical Commissioning Group (CCG) and the Director of Integrated Services for Trafford Council & Pennine Care, providing an update on intermediate care at Ascot House. It was noted that intermediate care beds were light in Trafford compared to national statistics, and that at any one time there was a number of patients delayed from entering the next stage of treatment.

The objective would be to convert Ascot House into a dedicated intermediate care facility, bringing a number of provisions under one roof. Members were advised of the opportunity to convert all of the current 36 beds to provide intermediate care, with potential for a further 9 beds.

Discussions were ongoing as to what would be the most appropriate delivery model, and Members were advised of the importance of a holistic approach to intermediate care. The preferred approach would be to have a mixture of both nurse and therapist led treatment, and the Chief Operating Officer CCG would bring Members more information on the scope of both models at a future meeting.

Officers confirmed that approximately 27 beds were currently operational, with the next 9 beds hopefully up and running in the next 6-8 weeks. The next phase would depend on recruitment, and a completion date for this phase had not been set for this reason. The intention would be to have as many beds as possible operational for winter.

Visits to Ascot House would be organised for interested Members, and the Committee would be provided with progress reports as the model grew in relation to staffing.

RESOLVED:

- (1) That the presentation be noted.
- (2) That visits to Ascot House be organised for interested Health Scrutiny Committee Members.

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- (3) That the Committee receive progress reports on the development of the service.

**8. CQC INSPECTION OF CMFT RESULTS**

The committee received a presentation of the Child and Adolescent Mental Health (CAMH) service Manager at CMFT. The service had been rated as "Outstanding" in the CQC assessment, and the various strengths that had contributed to the overall rating were described. The success of the services was attributed to good leadership, effective organisation, and high professional standards.

It was noted that the local CAMH service in Trafford was not provided by CMFT. There was currently a "patchwork" of provision of CAMH services across Greater Manchester, with variable standards of provision, and there may be potential for the new GM Devolution processes to address these inconsistencies.

The Committee also received a report of the Matron / Lead for Palliative & End of Life Care (Adults) and the Head of Nursing, CMFT, providing an update on End of Life Care (EoLC) for adult patients following the publication of the Care Quality Commission (CQC) report for Trafford Hospitals, June 2016. It was noted that Trafford General Hospital and Altrincham Hospital were both rated as "Good" in their own right.

The inspection rating for CMFT as a whole was 'good', with many individual areas receiving a rating of 'outstanding', however it was agreed that work needed to be done in the area of End of Life Care, which was rated as 'required improvement'. Members were disappointed with the inspection's findings in this area, particularly in respect of the lack of T34 Mechanical Infusion Devices and the lack of 7 day cover.

Since the inspection, CMFT had trained numerous members of staff in the use of T34 syringes, and the training had now been incorporated into medical devices study days. A T34 library had also been established on the Trafford Acute Medical Unit to ensure hospital wide access to pumps 24 hours a day, and a robust tracking system was now in place to ensure the syringes were returned to the library. To enable the service to provide 7 day cover, three new full time equivalent posts had recently been agreed by the service. The recruitment process was ongoing for a band 6 nursing post as well as a consultant post, but a band 7 nursing post had been successfully filled.

The Director of Strategic Projects for CMFT recognised that legitimate issues around EoLC had been raised in the CQC inspection, and agreed that improvements were required. He hoped that the report demonstrated to the Committee that these improvements were now ongoing, and advised of the importance of external inspections from bodies like the Health Scrutiny Committee and HealthWatch.

The Chairman thanked the CMFT staff for their presentation and report, and confirmed that the Committee would require a further update on EoLC in the future.

RESOLVED:

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- (1) That the presentation and report be noted.
- (2) That the Committee receive a further update on End of Life Care services at CMFT in future.

**9. HEALTHWATCH TRAFFORD ANNUAL REPORT**

The Committee received the 2015/16 Annual Report of HealthWatch Trafford. Members welcomed the report, and were impressed by the level of consultation work in which the organisation were engaged. The Chairman reminded Members of the importance of working and engaging with local communities.

The Chairman of HealthWatch Trafford confirmed that the 2016/17 work programme had now been agreed and could be circulated to Members. HealthWatch would be visiting Trafford General Hospital in November to review their End of Life Care provision, and also planned to visit CAMHS to investigate reports of issues with accessing their service.

RESOLVED:

- (1) That the report be noted.
- (2) That the HealthWatch Trafford 2016/17 work programme be circulated to Members.

**10. JOINT HEALTH SCRUTINY COMMITTEE UPDATE**

The Vice-Chairman of the Committee provided an update from the recent Joint Health Scrutiny Committee (JHSC) meeting on 5 July, 2016, where she was in attendance. The meeting focused primarily on the New Health Deal for Trafford.

The Vice-Chairman advised that CMFT were currently considering changes to the Urgent Care Centre and Walk in Centre at Trafford General Hospital. Consultations would focus on the two different models being considered; a nurse led minor illness and injuries service, and a more advanced model using extended nursing roles. The selected model would be taken to the next JHSC meeting in September, but the Committee had already indicated their preference of adopting the second model as this would provide a more comprehensive service.

RESOLVED: That the verbal update be noted.

**11. GREATER MANCHESTER JOINT HEALTH SCRUTINY COMMITTEE UPDATE**

The Vice-Chairman of the Committee provided an update from the recent Greater Manchester Joint Health Scrutiny Committee (GMJHSC) meeting on 13 July, 2016, where she was in attendance.

Members were updated on the Healthier Together programme, with four hospitals to be nominated as centres of excellence in dealing with surgery for high risk patients from April 2017. Members were also told that NHS England were considering the closure of Cladderstones – a site currently with 60 occupants, but a capacity of 223 beds – and would be looking to move patients into care in the community where possible. The Vice-Chairman had requested that each local

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authority's Health Scrutiny Committees be approached to discuss these matters individually, as these types of decisions would affect each locality differently.

RESOLVED: That the verbal update be noted.

**12. TASK AND FINISH GROUP FOLLOW UP**

Members received the reports of the Health Scrutiny Committee on Dignity in Care and Delayed Discharges, considered by the Executive on 20 June, 2016. The Executive would be required to provide a formal response to the recommendations set out in the reports in due course.

It was noted that the review of stroke services had not progressed significantly, and this would be revisited at a later date. Cllr Mrs Bruer-Morris would provide an update on the District Nursing review at the next meeting.

RESOLVED: That the update be noted.

**13. COMMITTEE WORK PLAN 2016/17**

The Committee received a report on the proposed Health Scrutiny work programme for the 2016/17 municipal year. Members agreed that two task and finish group reviews should be undertaken; one on Young People's Wellbeing within Trafford, and the other on End of Life Care within Trafford. Members were invited to register their interest in participating in each review with Democratic Services.

The Chairman advised that the work programme would need to be flexible to allow for any in year changes or additions.

RESOLVED:

- (1) That the report be noted.
- (2) That a task and finish group be formed to review Young People's Wellbeing within Trafford.
- (3) That a task and finish group be formed to review End of Life Care within Trafford.

The meeting commenced at 6.30 pm and finished at 9.16 pm