

MINUTES OF A MEETING OF THE HEALTH OVERVIEW AND SCRUTINY COMMITTEE HELD ON 8 MARCH 2017 FROM 7.00 PM TO 9.05 PM

Committee Members Present

Councillors: Ken Miall (Chairman), Kate Haines (Vice-Chairman), Laura Blumenthal, Richard Dolinski, Clive Jones, Abdul Loyes and Chris Smith

Others Present

Madeleine Shopland, Principal Democratic Services Officer
David Cahill, Locality Director, BHFT
Mimi Konigsberg, Interim Head of Adult Social Care and Safeguarding
Dr Johan Zylstra, Wokingham CCG
Mette Jakobsen, Managing Director, Optalis
Lorna Willis, Service Innovation Manager
Dr Minoo Irani, Medical Director, BHFT
Karen Cridland, Director of Children's, Young People and Family Services, BHFT
Colin Archer, Head of Learning Disability Services, BHFT

41. APOLOGIES

Apologies for absence were submitted from Councillors Parry Batth, Philip Houldsworth and Bill Soane.

42. MINUTES OF PREVIOUS MEETING

The Minutes of the meeting of the Committee held on 8 November 2016 were confirmed as a correct record and signed by the Chairman.

43. DECLARATION OF INTEREST

Councillor Kate Haines declared a Personal Interest in Item 46 Community Mental Health Services as she was a service user.

44. PUBLIC QUESTION TIME

There were no public questions.

45. MEMBER QUESTION TIME

There were no Member questions.

46. COMMUNITY MENTAL HEALTH SERVICES

Members received an update on community mental health services.

During the discussion of this item the following points were made:

- David Cahill, Director - Wokingham Locality, Berkshire NHS Foundation Trust, informed Members that the Common Point of Entry (CPE) provided a single point of entry for a number of BHFT mental health services including; all new referrals for Adult Secondary Care mental health services, all new referrals to Child and Adolescent Mental Health Services (CAMHS), all new referrals to Older People's Mental Health Services, all new referrals to Learning Disability services and all new referrals to Specialist Services.
- The CPE was based in The Old Forge, Wokingham.
- Referrals were received from various sources. All referrals were triaged; red (urgent), amber (semi urgent) and green (lower level need). Councillor Blumenthal

- questioned how many patients had been referred under each category. David Cahill commented that between 75 and 80% were signposted to other services.
- Councillor Blumenthal queried how Wokingham compared to its Berkshire neighbours with regards to referrals. David Cahill stated that a greater number of referrals to primary mental health services were made in Wokingham.
 - Members requested further information on the types and acuity of referrals.
 - All referrals for adult mental health services were assessed by the CPE multi-disciplinary team to identify whether secondary mental health services were required.
 - Approximately 4,000 new referrals out of a total of approximately 12,000 referrals had been received for Wokingham for the year. This was slightly above average for Berkshire.
 - Members noted referral activity by GP practice. Dr Zylstra commented that bigger practices would expect higher referral rates due to having larger patient numbers.
 - Councillor Miall referred to a report produced by Healthwatch Wokingham Borough which detailed several individuals' somewhat negative experiences of Wokingham Community Mental Team following a mental health crisis. David Cahill stated that training was provided to staff. It was often difficult for staff to pick up cues as to how someone was feeling over the telephone. Calls were recorded so staff could go back and later review them. In addition support and debriefings were provided to staff when required as it was a stressful environment.
- Karen Cridland- Director of Children's, Young People and Family Services, Berkshire Healthcare NHS Foundation Trust updated Members on the CAMHS.
 - Berkshire CAMHS was a specialist child and adolescent mental health service providing support, advice, guidance and treatment for children and young people up to the age of 18 with severe or moderate mental health difficulties, whose symptoms had a significant impact on their day to day lives.
 - The service was made up of:
 - CAMHS Common Point of Entry;
 - Autism Assessment Team;
 - ADHD Pathway;
 - Cognitive Behaviour Therapy Service for Anxiety and Depression;
 - Locality Specialist Community Team for young people with more complex difficulties;
 - Berkshire Adolescent Unit providing acute in-patient assessment and care.
 - The Committee was informed that the wait time for CPE for CAMHS was approximately 3 weeks.
 - Members were pleased to note that the CAMHS Urgent Response Pilot, which provided swift mental health assessments for young people presenting in crisis and short-term intensive community interventions to prevent crisis, had been extended for at least another year.
 - Karen Cridland outlined the early intervention work undertaken in partnership with the Council, schools and other organisations.
 - In response to a question regarding the availability of the Young SHaRON, Karen Cridland indicated that the ambition was for it to be available 5 days a week.
 - Councillor Dolinski queried whether the third sector had had an input into the development of Young SHaRON. He was told that this was the case.
 - The Committee considered some of the challenges to the CAMHS.
 - Whilst waiting times for the Autism Assessment Team had reduced from 2 years to approximately 39 weeks, this was still too high. Councillor Jones asked what the

Trust would like to see the waiting time reduce to. Karen Cridland indicated that it would like to see a reduction to 12 weeks.

- Members were reminded that the service for autism was purely diagnostic.
- Councillor Blumenthal questioned how the number of inappropriate referrals made in Wokingham compared with other areas. She was told that it was roughly comparable.
- Councillor Jones went on to ask what the average waiting time was for the ADHD pathway and was informed that it was 10 weeks.
- Locating qualified staff to fill key roles was a national problem, particularly for short-term roles.
- Members were notified that further coordination of the council offer at Tier 2 early intervention level would assist in reducing the number of referrals that would be better placed with these services.
- The Committee considered the forthcoming opportunities for the CAMHS including having only one telephone number for the children and young people and families Health Hub.
- The Committee was updated on Tier 4 provision in response to a request from Councillor Haines.

RESOLVED: That the update on community mental health services be noted.

47. UPDATE ON LEARNING DISABILITY SERVICES

The Committee was provided with an update on services for those with learning disabilities.

During the discussion of this item the following points were made:

- Colin Archer, Head of Learning Disability Services, Berkshire Healthcare NHS Foundation Trust, indicated that the Community Team for People with Learning Disabilities provided advice, support, assessment, treatment and therapies to support adults with learning disabilities with their specialist health related needs.
- The team worked with people and their families, Optalis, the Council, local GP's, acute hospital staff, private providers, and the Learning Disability Partnership Board.
- Colin Archer outlined challenges and opportunities that were faced. For example, those with learning difficulties tended to have poorer health than the general population.
- Members were notified of the Transforming Care programme which sought to ensure people were supported in their community. Nationally there was an aim to reduce the frequency and length of admissions to specialist hospitals. A national service model had suggested that Berkshire needed to reduce its specialist beds by between 40-50%.
- The Committee was informed of the Confidential Inquiry into premature deaths of people with learning disabilities. In response to a question from Councillor Loyes, Colin Archer explained that locally there was also an internal mortality review process in place.
- Councillor Dolinski questioned how the Community Team coordinated with the acute services when required and was informed that there was a Learning Disability Liaison Officer based at the Royal Berkshire Hospital who liaised closely with the Community Team.
- The Committee noted likely future service provision.

- Mimi Konigsberg, Interim Head of Adult Social Care and Safeguarding updated Members from a social care point of view.
- It was noted that people with a learning disability were referred to the Adult Assessment Team to discuss their care and support needs. If they met the eligibility criteria, a Personal Budget would be set so that a bespoke package of care could be arranged.
- Councillor Loyes asked about the allocation of direct payments and how the eligibility criteria was set. Lorna Willis, Service Innovation Manager, explained that the eligibility criteria was based on that set out in the Care Act. With regards to allocations the aim was to make allocations quickly following assessment.
- Support was also provided with regards to employment and housing. Members were informed of the advocacy services available.
- Wokingham had an active Learning Disability Partnership. Members questioned what issues were frequently raised at the Partnership. Housing and access to health services were recurring topics of discussion.
- The Committee discussed transition from child to adult services. Services that people with learning disabilities had when they were children were often different to those they received when they reached adulthood and it was important to manage expectations. Mimi Konigsberg commented that it needed to be made clear at an earlier stage that services provided could be different when the person transferred to adult services.
- Mimi Konigsberg clarified that those with learning disabilities up to the age of 25 received services from children and young people's services.
- Councillor Smith questioned whether the total Learning Disability budgets of £18,931,030 related to Wokingham Borough only. Lorna Willis confirmed that this was the case.
- Councillor Smith went on to question the underspend relating to the Learning Disability Registered Residential. Lorna Willis explained that nationally there was a move away from placing individuals within registered residential provision where possible.
- In response to a question from Councillor Blumenthal about the number of individuals with learning difficulties who were living with elderly parents within the Borough, Lorna Willis commented that this was a challenge.
- It was noted that it was difficult to find housing solutions in the local area due to the high cost of housing. Councillor Dolinski queried what impact employment had on housing. Mette Le Jakobsen indicated that whilst employment had a positive effect on health and wellbeing in general it did not affect housing availability and the complexities of which individuals were able to live together.

RESOLVED: That the update on learning disability services be noted.

48. MEETING THE NEEDS OF THE GROWING CARE HOME POPULATION

Dr Zylstra provided a presentation on how the needs of the growing care home population were being met.

During the discussion of this item the following points were made:

- The local population was expected to increase by 15% by 2039 to 183,600, with the most significant change expected in older adults aged 85 years and over.
- Dr Zylstra explained that there were three types of care home; residential home/care home, nursing home/care home and dual homes.

- There were 22 care homes within the Borough; 13 were residential homes, 8 were nursing homes and 1 dual. It was noted that 10 of the 13 GP practices provided GP support to these care homes.
- There were a total of 1017 beds; 455 residential beds, 461 nursing home beds and 101 dual care home beds. Members were informed that 50% of the care home beds within Berkshire West were located within the Wokingham Borough. Many residents came from outside of the area.
- Patients could choose to stay with their registered GP if local when moving to a care home or to register with the care home GP, if different.
- Care homes ensured that all patients were registered with a GP and contacted the GP practice when required during working hours. Some care homes had one GP practice looking after residents and others had several practices.
- The Care Home Support Team aimed to increase the skills of the care home staff by building their knowledge, skills, confidence and professionalism.
- The Rapid Response and Treatment Team was a multidisciplinary service comprising of a community geriatrician, advanced nurse practitioners, registered nurses and was available 7 days a week, 9am – 7pm. The Team helped prevent unplanned acute hospital admissions. The number of non-elective admissions to hospitals from Wokingham was reducing.
- £1.5million had been allocated for the Rapid Response and Treatment Team for Berkshire West and the team had been in place for 5 months. In response to a question from Councillor Smith as to whether it was anticipated that the service would generate savings, Dr Zylstra commented that a saving of £2million for 12 months had been allocated against this service. Currently, the service was breaking even so achieving the £2million saving was unlikely, but it was hoped that a £1million saving would be made.
- Outside of working hours support was provided by Westcall.
- Nationally 57% of all elderly care home residents contributed to their care with 43% receiving free care. However, in the Borough approximately 80% of care home residents paid for their own care.
- Dr Zylstra explained that the NHS made a contribution for nursing care provided to all patients, including self-funders. The assessment was made on a per capita basis. Wokingham was perceived to have a healthier population and as such its figure was lower than many other areas.
- Councillor Smith questioned how many beds would be needed in future in light of the growing ageing population and increase in those with more complex health needs. Dr Zylstra commented that there was an increasing focus on keeping people out of hospital. Councillor Haines expressed concern that this may lead to some people not being picked up at a sufficiently early stage.
- Councillor Blumenthal enquired how many available beds there was currently within the Borough and was informed that it was unlikely to be more than 10.
- Councillor Smith asked about waiting lists for care homes. Dr Zylstra indicated that delayed transfer of care levels in Wokingham were low.

RESOLVED: That the update on how the needs of the growing care home population were being met was noted.

49. HEALTHWATCH UPDATE

The Committee considered the update report from Healthwatch Wokingham Borough.

During the discussion of this item the following points were made:

- Councillor Miall questioned whether Healthwatch had received a response from the Council in relation to their query on Personal Independent Payment assessments.
- Councillor Blumenthal asked what the outcome of the meeting with Berkshire Healthcare NHS Foundation Trust regarding CAMHS, had been.
- The Principal Democratic Services Officer would seek a response from Healthwatch Wokingham Borough and feed back to the Committee.

RESOLVED: That the update on the work of Healthwatch Wokingham Borough be noted.