

**MINUTES OF A MEETING OF THE
HEALTH OVERVIEW AND SCRUTINY COMMITTEE
HELD ON 23 MARCH 2015 FROM 7.00 PM TO 9.05 PM**

Committee Members Present

Councillors: Ken Miall (Chairman), Tim Holton (Vice-Chairman), Mark Ashwell, Kay Gilder, Nick Ray, Malcolm Richards, David Sleight and Wayne Smith

Others Present

David Cahill, BHFT

Jim Stockley, Healthwatch

Nicola Strudley, Healthwatch

Justin Wilson, BHFT

Stuart Rowbotham, Director of Health and Wellbeing

Steve Cross, Health Integration Finance Lead

Madeleine Shopland, Principal Democratic Services Officer

51. APOLOGIES

An apology for absence was submitted from Councillor Philip Houldsworth.

52. DECLARATION OF INTEREST

There were no declarations of interest made.

53. MINUTES

The Minutes of the meeting of the Committee held on 19 January 2015 were confirmed as a correct record and signed by the Chairman.

54. PUBLIC QUESTION TIME

There were no public questions received.

55. MEMBER QUESTION TIME

There were no Member questions received.

56. CONSULTATION ON CHARGES FOR ADULT SOCIAL CARE SERVICES

The Committee considered the Council's consultation on charges for Adult Social Care Services which was due to close on 5 May. Results would be taken to the June Executive meeting.

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

- The consultation was seeking views on the following:
 - how the Council can best support people to make informed choices about residential and non-residential care;
 - support for carers and whether carers should be charged for their services (if they can afford to pay);
 - charging administration fees for arranging services for people who can afford to pay for their own care delivered at their home (self-funders);
 - charging fees and setting an interest rate for Deferred Payment Agreements;
 - Setting a maximum amount to charge for care that is best met in own home.
- The Care Act introduced new duties on the Council regarding carers which would create additional financial pressure.

- There was no proposal to charge for carers services in 2015/16. The Council was consulting on the premise of charging for carers' services in future.
- It was not known how many carers would come forward to request services. The Committee asked how many carers there were in the Borough and were informed that numbers available varied. The Council supported approx. 600 whilst 13,902 identified themselves as carers (2011 Census). There were 14 known young carers although the Census identified 110. Members expressed concern that this presented a different picture to that presented in the Healthwatch survey on emotional health and wellbeing. Nicola Strudley commented that there was not a list of young carers available.
- Councillor Gilder commented that some families might not be known to social services and not be aware of what services might be available to them.
- The Care Act allowed Councils to charge interest on the deferred fees, so that they could cover the cost of running the Deferred Payments Scheme and support more people to use it. The national maximum interest rate set by government for deferred payments would be based on the cost of government borrowing and could change every six months. The Department of Health had published information that the maximum interest rate from 1st April to 30th June 2015 would be 2.65%. However, Councils could choose to set a lower interest rate.
- Members were informed that there was a FAQ sheet on the website.
- Councillor Ray asked how many self-funders were anticipated. Steve Cross commented that again this was not entirely known but Wokingham was a wealthy area and the Council was a minority purchaser of residential home beds in the Borough. Stuart Rowbotham indicated that it was difficult to predict the number of self-funders as in the past they had not come to the Council for support. The Council did not have information on self-funders finances unless they shared it with the Council.
- Nicola Strudley commented that the Council had a duty to inform and consult people on the Care Act and went on to ask how the Council was managing demand in terms of rolling out information. Steve Cross stated that the information on the website was updated as and when required, the voluntary sector was working with the Council and providers were kept informed. The recent Borough News had contained an article on the Care Act.
- The Committee discussed how quickly a change in a person's finances and situations could be recognised.
- It was confirmed that the Council would not charge for advice and guidance.

RESOLVED: That

- 1) the consultation on charges for Adult Social Care Services be noted.
- 2) Members send any additional comments they may have to the Principal Democratic Services Officer to enable the formulation of a response to the consultation from the Committee.

57. BETTER CARE FUND

The Committee received a presentation on the implementation of the Better Care Fund from the Director of Health and Wellbeing.

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

- The Better Care Fund was not new money and was taken from existing Clinical Commissioning Group budgets and ring fenced for health and social care integration.
- It created a local single pooled budget to incentivise the NHS and local government to work more closely around people and care services.
- The Fund was about moving away from a 'sickness service' and moving towards a focus on enabling people to live independently within the community. It aimed to reduce demand on the acute sector and less avoidable admissions, faster discharge and reduced care home admissions.
- Locally the Better Care Fund was £9.56million, of which £1.2million was added Council funding. Councillor Miall questioned whether this was an annual amount and was informed that it was meant to be recurrent but was currently set at one year only.
- There were 9 schemes in total, 4 of which were Wokingham schemes and 5 of which were being delivered across Berkshire West level.
- Stuart Rowbotham outlined the 9 schemes:
 - 01 Health and Social Care Hub (Berkshire West scheme) – a single point of access across health and social care.
 - 02 Integrated Short Term Health and Social Care Team - teams were collocated at The Forge.
 - 03 Step Up/Step Down Beds – accommodation for intense reablement support for a short period of time, 2/3 weeks. 2 pilot one bedroom flats in Alexandra Place were due to open shortly. It was confirmed that support would be 24 hours.
 - 04 Domiciliary Plus – more intensive home care especially at night.
 - 05 Hospital at Home Service (Berkshire West Scheme) – this was going through a reiteration.
 - 06 Enhanced Care and Nursing Home Support (Berkshire West Scheme).
 - 07 Connected Care (Berkshire West Scheme) – connected IT systems in health and social care.
 - 08 Neighbourhood clusters, Primary prevention and Self-Care – congregating services into neighbourhood sized services based around GP clusters.
 - 09 Access to General Practice (Berkshire West Scheme) - enhanced services.
- Each project had an implementation group which fed into the Wokingham Integration Strategic Partnership, which in turn reported to the Health and Wellbeing Board.
- The Department of Health regularly monitored the Plan.
- The Fund was subject to various conditions which were outlined by Stuart Rowbotham. It was noted that the element of the fund linked to non-elective admissions reduction target would be released into the pooled budget proportional to performance. The Committee was informed that Wokingham had one of the lowest non elective levels in the country so the target would be difficult to achieve. Members were assured that this element had not been allocated to any of the projects.
- The Committee was informed that the Better Care Fund would mean improved health outcomes for residents, a focus on prevention and admission avoidance, more integrated, joined up services and potential reduced overall spending as shift from acute to community takes place.
- In response to a question regarding the Step Up/Step Down Beds, Stuart Rowbotham indicated that people were not charged for using the service and that

the costs associated with the Step Up/Step Down Beds were four times less than a hospital bed for the same period of time.

- A Member questioned how long someone had to live in the Borough before they became the Council's responsibility. He was informed that this was dependent on the Ordinary Residents Regulations and if the individual's move was intended to be permanent.
- A member of the public asked whether additional staff had had to be employed to implement the schemes. Stuart Rowbotham stated that some staff had been seconded or released from their day job. Three consultants had also been employed.
- Councillor Ray asked which of the 9 schemes were the highest priority and was informed that the Integrated Short Term Health and Social Care, Neighbourhood Clusters, Enhanced Domiciliary Care and Step Up/Step Down Beds, were.
- Stuart Rowbotham explained the concept of the Neighbourhood Clusters.
- Members were assured it was hoped that the Step Up/Step Down Beds would have 8 flats in total. Councillor Gilder questioned whether the facilities at Woodley Age Concern could be used and was informed that it was important that the environment was right and that the Woodley Age Concern was a residential care home, not a home environment.

RESOLVED: That the presentation on the Better Care Fund be noted.

58. HEALTHWATCH UPDATE

Members received an update on the work of Healthwatch Wokingham Borough from Nicola Strudley.

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

- Healthwatch had run a survey on young people's emotional health and wellbeing. Over 1000 young people had participated and 20,906 pieces of data had been collated.
- The Committee were shown an animation which presented highlights of the results.
- The Committee was surprised to hear that at least 1 in 10 young people had identified themselves as having caring responsibilities. The Headteacher had been aware of 4 carers in the school.
- Of those with caring responsibilities higher rates of emotional distress, including sleep problems, anxiety and depression, were reported. Carers reported feeling lower emotionally. Fewer Carers than Non Carers knew how to find help at school. Carers did access support more, however they found it less helpful than Non Carers. Young people that took part in regular physical activity reported feeling better emotionally. Where issues had been identified the 12-14 year old age group regularly had the highest numbers.
- Stress and pressure was a notable theme. Young people were asking for support in being able to cope with the stress, demands and expectations.
- 1 in 3 had spoken to professionals.
- 20% said that they did not feel that they were being listened to.
- In order to signpost young people Healthwatch had taken a page of one school's planners or journals for next academic year.
- Healthwatch was working on a general report to publish in order to share the data.
- Healthwatch would go back to the school before the exams began to present its findings. Young people would be given an option about what Healthwatch should

focus on; young carers or coping with stress, depression & anxiety. Healthwatch would then co-design a project focusing on the 11-14 year old age groups.

- Members were concerned that 17 young people had said that they had experienced violence in the home and asked whether these had been followed up. Nicola Strudley commented that the young people did not have to give their names but Healthwatch had flagged up cases to the Headteacher where safeguarding issues had been identified or reference had been made to drugs and sex.
- Councillor Miall asked whether Healthwatch would repeat the survey in future. Nicola Strudley indicated that the Headteacher wanted to repeat it annually. It was on Healthwatch's agenda but there were no immediate plans to repeat it in the future.
- Members felt that the additional comments were a useful source of information.
- Councillor Holton proposed that the report be sent to the Children's Services Overview and Scrutiny Committee for information.

RESOLVED: That

- 1) the update from Healthwatch be noted.
- 2) the report be sent to the Children's Services Overview and Scrutiny Committee for information.

59. IMPLEMENTATION OF THE CARE ACT 2014 TASK AND FINISH GROUP REPORT

The Chairman presented the final report of the Implementation of the Care Act 2014 Task and Finish Group.

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

- Members' attention was drawn to the terms of reference and the review conclusions. The Task and Finish Group had focused in particular on the implementation of the Council's duties in relation to Prevention and early intervention, Wellbeing and Information, advice and guidance.
- The Task and Finish Group had made the following recommendations:
 - That the Health Overview and Scrutiny Committee is updated on the implementation of the elements of the Care Act 2014 which are due to come into effect on 1 April 2015, in 3 months' time (June 2015).
 - That the Health Overview and Scrutiny Committee monitors the progress of the implementation of the next phase of changes due to come out of the Care Act 2014.
 - That Members are sent a copy of the generic letter that will be sent to social care customers regarding the changes which will come about as a result of the Care Act 2014 and that a Question & Answer sheet is produced for Members to assist them should residents come to them with simple queries regarding the Care Act 2014.
 - That training on the forthcoming changes coming out of the Care Act 2014 is provided to Members and that all Members are encouraged to attend at the earliest opportunity.
- The Principal Democratic Services Officer informed Members that the Task and Finish Group's recommendations had been sent to the Director of Health and Wellbeing and the Executive Member for Health and Wellbeing for their comments. Both had been satisfied with the recommendations. Several of the

recommendations had had now been completed. Members had been sent a copy of the generic letter and links to a Question and Answer Sheet. A training session for Members on the Care Act was scheduled for 2 April.

- The Committee agreed that it should monitor the implementation of the second phase of the Care Act and that it would be helpful to receive an update on the implementation of the first phase, at its next meeting in June. Councillor Holton suggested that consideration be given to particular areas Members wished the update to focus on.
- Councillor Holton questioned why the Task and Finish Group's concerns were not brought out more in the report. It was noted that it was still difficult to entirely accurately predict the financial impact of the Care Act, as the number of those who would be affected was still unknown.
- The Chairman thanked the members of the Task and Finish Group for their hard work and the witnesses for their involvement.

RESOLVED: That the report of the Implementation of the Care Act 2014 Task and Finish Group be noted.

60. DRAFT QUALITY ACCOUNTS BERKSHIRE HEALTHCARE NHS FOUNDATION TRUST

The Committee received the Berkshire Healthcare NHS Foundation Trust draft Quality Accounts 2015.

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

- Members were reminded that the Possible Implications for Scrutiny of the Francis Report Working Group had recommended that on receipt of Quality Accounts from the Royal Berkshire NHS Foundation Trust, Berkshire Healthcare NHS Foundation Trust and South Central Ambulance NHS Foundation Trust, the HOSC be divided into three groups and that each group focuses on a specific set of Quality Accounts and formulates a response. Each response should be circulated to the full Committee for agreement. This was agreed at the Committee's November meeting.
- The Draft Quality Account used data up to Q3 (December).
- Further clarification was sought on the number of complaints recorded. Councillor Sleight asked how many complaints had been taken to the Ombudsman and Dr Wilson agreed to provide that figure.
- In response to a question regarding complaint analysis, Dr Wilson commented that complaints were analysed and annual and quarterly report produced.
- With regards to the 2014 National Staff Survey it was noted that whilst performance against the following questions was better than comparator Trusts, performance had decreased from the previous year; 'My organisation treats staff who are involved in an error, near miss or incident fairly (agree or strongly agree)' and 'My organisation encourages us to report errors, near misses or incidents.' Reporting errors was a key focus for the Trust.
- It was noted that the national average for harm free care was 93.7% for the past 12 months to December 2014. The average monthly percentage for the Trust over the 12 months to December 2014 was 91.5%. The Trust had a lower number of harm free patients due to the significant number of 'acquired' pressure ulcers. When compared nationally the data showed that compared to all organisations BHFT had a higher percentage of pressure ulcers reported. The number of community pressure ulcers had reduced in quarter 3, however. Members were informed that

lots of progress had been made in reducing pressure ulcers especially Categories 3 and 4.

- The Committee noted that the Trust would deliver its priority to become smoke free across all sites in 2015/16. Members questioned whether this would apply to visitors.
- With regards to the CAMHS service, Nicola Strudley questioned how there could be a variation in the quality across Berkshire. Dr Wilson commented that there were differences in commissioning arrangements and local authority provision.

RESOLVED: That Berkshire Healthcare NHS Foundation Trust draft Quality Accounts 2015 be noted.

61. WOKINGHAM CLINICAL COMMISSIONING GROUP PERFORMANCE OUTCOMES REPORT MARCH 2015.

Members considered the Wokingham Clinical Commissioning Group Performance Outcomes Report January 2015.

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

- Members expressed concern that the performance indicators relating to 'Ambulance Response Times' and 'Ambulance Handover and Crew Clear Delays' continued to show as red.
- The Chairman asked for an update on the number of MRSA cases.
- Members were informed that the Chairman and Vice Chairman had attended a meeting of the West Berkshire Overview and Scrutiny Commission which had looked at Maternity Services at the Royal Berkshire Hospital.

RESOLVED: That the Wokingham Clinical Commissioning Group Performance Outcomes Report March 2015 be noted.

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