

AT A MEETING of the HEALTH OVERVIEW AND SCRUTINY COMMITTEE of the COUNTY COUNCIL held at The Castle, Winchester on Tuesday, 24 September 2013.

PRESENT

Chairman:
p Councillor Pat West

Vice-Chairman:
p Councillor David Keast

Councillors:

p Ray Bolton	p Tony Hooke
p Graham Burgess	p Martin Lyon
p Rita Burgess	p George Ringrow
p Charles Choudhary	p Frank Rust
a Jacqui England	p Bruce Tennent
p David Harrison	p Martin Tod
p Marge Harvey	p John Wall

Co-opted Members:

Councillors:

p Tonia Craig
p Alison Finlay
p Tim Southern
p Dennis Wright

In attendance at the invitation of the Chairman:

Councillor Liz Fairhurst, Executive Member for Health and Wellbeing (Public Health)
Councillor Jonathan Glen, Chairman of Policy and Resources Select Committee
Councillor Anna McNair Scott, Executive Member for Adult Social Care
Councillor Patricia Stallard, Chairman of Safe and Healthy People Select Committee

9. **APOLOGIES FOR ABSENCE**

Apologies were received from Councillor Jacqui England.

10. **DECLARATIONS OF INTEREST**

Members were mindful that where they believed they had a Disclosable Pecuniary Interest in any matter considered at the meeting they must declare that interest at the time of the relevant debate and, having regard to the circumstances described in Part 3, Paragraph 1.5 of the County Council's Members' Code of Conduct, leave the meeting while the matter was discussed, save for exercising any right to speak in accordance with Paragraph 1.6 of the Code. Furthermore Members were mindful that where they believed they had a Non-Pecuniary interest in a matter being considered at the meeting they considered whether such interest should be declared, and having regard to Part 5, Paragraph 2 of the Code, considered whether it

was appropriate to leave the meeting whilst the matter was discussed, save for exercising any right to speak in accordance with the Code.

Councillor Martin Tod declared a non-pecuniary interest as he is the Chief Executive of the charity 'Men's Health Forum', which receives funding from NHS England and Public Health England.

11. **MINUTES**

The Minutes of the Meeting of the Committee held on 30 July 2013 were confirmed as a correct record, and signed by the Chairman.

12. **CHAIRMAN'S ANNOUNCEMENTS**

Provision of Therapies for Disabled Children Project Board

The Chairman reported that the Committee had previously undertaken a joint review with the Children and Young People's Select Committee on Therapy Provision for Children with Special Educational Needs. It was heard that one of the outcomes of this review had been for two Members from the Health Overview and Scrutiny Committee (HOSC) and Children and Young People Select Committee (C&YP SC) to sit on the Project Board, and through this to provide a local Member perspective on actions around this service. As the previous representatives of the project board had not been returned following the County Council elections in May, the Chairman invited interest from the Committee.

It was noted post meeting that one Member of the HOSC would be sought to become a representative on the Board, as Councillor Roz Chadd, in her capacity as a Member of the Children and Young People Select Committee, would continue to represent this Committee on the Board.

The Chairman agreed that Councillor Rita Burgess would become the second representative on the Board.

Hampshire Hospitals

The Chairman reported to the Committee that the item on the work programme concerning the future provision of services across the Hampshire Hospitals NHS Foundation Trust site had been delayed on the work programme. The Committee noted that the Trust would provide detailed proposals before the Committee, in partnership with Commissioners, when available.

Update on 'Adult Mental Health' Section 136 Working Group

The Vice-Chairman reported that the Section 136 working group had recently held its first meeting to review relevant evidence received to date by the HOSC, and to also consider recent national evidence. The Vice-Chairman highlighted that some of the recent issues raised in a recent Panorama television programme on this aspect of mental health had been discussed by the working group.

The Committee heard that a further verbal update would be received at the November meeting of the HOSC after the second meeting of the group.

13. **HOSC WORK PROGRAMME**

The Director of Policy and Governance presented the Committee's work programme (see Item 6 in the Minute Book).

Following discussions, Members heard:

- That in relation to vascular services, specialised service specification derogation plans were currently in the process of being agreed by NHS England and proposals would become public once agreed.
- That the topic of Fluoridation of drinking water supplies remained on the work programme, but that it would not be included on the agenda for a future meeting of the Committee until legal clarification had been received from the Department of Health on the validity of the current scheme.
- That the Committee would receive a future item on the Joint Strategic Needs Assessment (JSNA).

RESOLVED:

That the Committee's work programme be approved.

14. **PROPOSALS TO DEVELOP OR VARY SERVICES**

The Director of Policy and Governance presented a report on proposals to develop or vary health services in the area of the Committee (see Item 7 in the Minute Book). The report was presented in three parts which comprised items for action required by the Committee to respond to proposals from the NHS to substantially change or vary NHS services, items for monitoring which informed the Committee and items for noting which alerted the Committee to forthcoming proposals from the NHS to vary or change services.

Under items for action details were provided on:

Surrey and Borders Partnership NHS Foundation Trust: Adult Mental Health Services – proposals to move service location

A representative of Surrey and Borders Partnership NHS Foundation Trust presented to the Committee proposals to move an Adult Mental Health Wellbeing Centre from Frimley Children's Centre to a location in North East Hampshire (see Appendix 1 to Item 7 in the Minute Book). The Committee had requested, following the previous meeting of the HOSC in July, that the Trust return to update Members once firm proposals relating to the final location of the centre, and the outcomes of the equality impact assessment and the travel time assessments had been finalised.

The Committee heard that the Trust had confirmed that the preferred location for the move of the Adult Mental Health Wellbeing Centre would be the Aldershot Centre for Health as the main base, supported by satellite clinics in the Fleet area.

The Trust reported that the proposed model of service supported by commissioners would see community mental health recovery services co-locate with the wellbeing service in the Aldershot Centre for Health. The proposed move of the Hollies recovery service wouldn't impact on travelling times, given its current location in Aldershot, but it was noted that Hampshire residents who use the Conifers Community service in the Cove area may experience a slight increase in travelling time. The Trust would be committed to new satellite clinic arrangements to reduce any impact on these individuals. The Trust reported that the majority of Hampshire users should experience overall a reduction in travel time.

In response to questions, Members heard:

- That of a total figure of 293 people using the wellbeing service, 75% were Hampshire based residents.
- That each adult mental health service user in North East Hampshire received a personalised care plan, which had been tailored to their needs by the appropriate adult mental health practitioner. The Trust reassured Members that the change in location will not alter this process, nor the way the service is delivered to service users.
- That the Trust would continue to engage with service users, staff and other stakeholders on the service location moves. Details were requested on the Trust's engagement plan for the move in these services.
- That frequent public transport links to the Aldershot Centre for Health made the services accessible for the majority of residents in North East Hampshire without access to a car.
- That satellite clinics based in Fleet would support residents in Cove and Hart.
- That the Trust had entered into discussions with Rushmoor Borough Council to determine whether other satellite clinics could be located in community facilities (e.g. leisure centres), and the financial impacts around these proposals.
- That the Trust had rolled-out a system of mobile working for staff to include access to electronic patient records which enabled greater flexibility to staff. Currently, 30% of staff utilised this method of working.

After questions, Members discussed whether they considered the proposals to be a substantial change in service. The Committee agreed that the proposed service relocation of the adult mental health wellbeing centre, together with the move and co-location of the adult mental health recovery services, would provide a more accessible service for the majority of North East Hampshire residents, but that the service provided would remain the same. Therefore they agreed that this would not be considered a substantial change in service.

RESOLVED

That:

1. Members do not consider Surrey and Borders Partnership NHS Foundation Trust's proposals relating to the move of the Adult Mental Health Wellbeing Centre to be substantial in nature.
2. The Committee receive details of Surrey and Borders Partnership NHS Foundation Trust's engagement plan for the move in services.
3. That the Committee receive a monitoring item on this topic in six months time.

Under items for monitoring details were provided on:

South Eastern Hampshire CCG: Chase Community Hospital – update on implementation of new model of care

A representative from South Eastern Hampshire Clinical Commissioning Group provided the Committee with an update on the new bed-based model of care in the Whitehill and Bordon area as requested at the July meeting of the HOSC (see Appendix 2 to Item 7 in the Minute Book). Members were informed that the project was on track, and the community based model of care had been fully implemented since the closure of the beds at Chase at the end of August.

Members heard that since the 2 September, the four nursing home beds commissioned at Wenham Holt Nursing Home were fully operational and transport had been provided to convey relatives and carers between the Whitehill and Bordon area and the nursing home located in Liss. It was noted that since the closure of the inpatient beds at Chase hospital, there had been one admission to the nursing home beds at Wenham Holt. Should demand increase, there would be provision to flex-up beds. Members noted that feedback so far from local GPs had been positive, and that most of the staff based at Chase hospital had been re-deployed elsewhere within Southern Health NHS Foundation Trust (the community health services provider).

It was noted that the release of capital funding for the project had been progressing well, and that discussions with the NHS England area team and the national lead in NHS Property Services were on-going. Members heard that it was anticipated that planning permission would be granted in December, with the completion of all building and renovation work in April 2015.

In response to questions, Members heard:

- That plans to monitor the bed-based model of care were on-going through engagement with stakeholder group representatives, the voluntary sector, elected members and representatives from patient groups.

- That an additional six members of staff had been recruited to ensure patient needs were met through the Integrated Community Team working extended hours, and nursing staff capacity would be continually monitored through the Chase Steering Group and Project Board.

RESOLVED:

That:

1. Members are satisfied with the actions of South Eastern Hampshire Clinical Commissioning Group in implementing the new model of care to date.
2. That the Committee receive a monitoring item on this topic in six months time.

Under items for noting:

None

15. **INQUIRIES RECEIVED AND ACTION TAKEN**

The Director of Policy and Governance presented a report on enquiries received, the source of each enquiry and the action taken (see Item 8 in the Minute Book). The enquires related to:-

Sussex Partnership NHS Foundation Trust and Hampshire County Council: Child and Adolescent Mental Health Services – overview of service

The Committee received an update regarding progress made in improving Child and Adolescent Mental Health Services (CAMHS) in Hampshire from a representative of Sussex Partnership NHS Foundation Trust (the provider of CAMHS) and the Deputy Director of Hampshire County Council Children's Services (one of the Commissioners of CAMHS) (see Appendix 1 to Item 8 in the Minute Book). A progress update had been requested by the Committee following an inquiry from a member of the public.

The Committee heard that following a change to the CAMHS contract in April 2011, Sussex Partnership NHS Foundation Trust were awarded the contract to deliver a single service across the Hampshire area. Members heard that the service had historically experienced numerous challenges, with eight of the nine area teams holding waiting lists of over 100 individuals, with an average approximate referral to treatment time of 26 weeks, (exceeding the NHS maximum waiting time of 18 weeks). It was noted that across the service, access to specialised expertise had proven to be limited, with some area teams having little or no access to such services.

Since the re-organisation of the CAMHS service post April 2011, positive relationships with local partners in both the statutory and third sector have been built as well as structuring the service to ensure quality and safety remain the central features of delivery. A fairshare approach in incorporating the deprivation indices allowed for skills to be shared fairly across the County and teams had greater access to specialities such as psychiatry and mental health therapy. Members noted that the service is currently meeting the waiting time target of 12 weeks for assessment and 18 weeks for treatment, and continuing to work towards the 4 week target for assessment. Members heard that additional and evening appointments had been implemented to better meet the needs of adolescents and their families. It was noted that work with Clinical Commissioning Groups was on-going in the development of clinical pathways for urgent cases.

The Trust asserted that robust procedures had been implemented in order to ensure a greater number of young people received more intensive treatment in their communities and homes, and the Trust were confident that initiatives such as the piloting of evening clinics and engagement in schools would help to access families who previously found engagement difficult.

The Trust noted that CAMHS was seeing a rise of 300+ new referrals a year, creating additional demand on the service. Discussions were ongoing with commissioners to ensure services could meet these pressures, as well as to develop a number of care pathways that would move towards a national model of a CAMHS service, whilst allowing local additions.

In response to questions, Members heard:

- That access to Tier 4 units for children and adolescents individuals with high risk mental illnesses, such as severe self-harmers and those actively trying to commit suicide, is through Leigh House in Winchester, however there is a capacity issue within this service. Members noted that access to Tier 4 services for under-18s is a nationally recognised problem.
- That access to Tier 4 services was part of a wider review of commissioning by NHS England and the Local Authority, and was on-going.
- That on average there are five private beds in use for adolescents with mental illnesses due to the fullness of beds at NHS-provided units, such as Leigh House in Winchester.
- That the transition for treatment between the CAMHS service and Adult Mental Health would commence after the age of 17 and before the age of 18, but if an individual was partway through CAMHS treatment when they reached 18, this treatment would be completed.
- That care plans are tailored to meet individual needs and requirements and intensive treatment can be progressed through either a community (e.g. youth centre) or home environment dependent on the needs of each individual.
- That all CAMHS service users are now assessed within 18 weeks, with the exception of those awaiting assessment for autistic spectrum disorder which is part of the work being undertaken by CCG Commissioners.

- That the waiting time for assessment under Section 136 for adolescents is 4 hours, in a police place of safety.
- That the treatment of children and adolescents with serious mental health needs always takes place in a young persons' unit rather than an adult unit, and Members were reassured that adult units would not be used for children.
- That the Trust were confident with the sustainability of the model of service, although discussions would continue around the demand and capacity of the service in relation to the leanness of capacity.
- That the wellbeing of staff within the CAMHS service has been a priority for the Trust and this has been aided by a recent wellbeing conference. Members noted that a number of staff performance issues inherited by the Trust when it took on the contract had mostly been resolved.
- That the effectiveness of the CAMHS service for individuals would need analysing when re-commissioning the service, and this process would commence in the forthcoming months.
- That the Trust would be considering piloting a mental health anti-stigma project in primary schools in Hampshire within a service development plan, following a successful pilot in primary schools in the Sussex region.
- That a number of local events in recognition of World Mental Health Day on 10 October would help to improve a greater understanding of illnesses such as Autism and Asperger's Syndrome in young people.
- That the possibility of a future Members Development Session on Mental Health to include the CAMHS service would be explored.

RESOLVED:

That:

1. The topic of Child and Adolescent Mental Health Services is suggested for addition to the Health and Social Care Member Development Session work-programme
2. The Chairman write to NHS England to clarify their commissioning intentions for Tier 4 Child and Adolescent Mental Health specialised services in Hampshire. That the Committee consider this topic at a future date once these intentions are known.

Chairman, 26 November 2013