

AT A MEETING of the HEALTH AND ADULT SOCIAL CARE SELECT (OVERVIEW AND SCRUTINY) COMMITTEE of the COUNTY COUNCIL held at The Castle, Winchester on Monday, 22 June.

PRESENT

Chairman:
p Councillor Roger Huxstep

Vice-Chairman:
p Councillor Chris Carter

Councillors:

p Ann Briggs	p David Keast
p Graham Burgess	a Martin Lyon
p Rita Burgess	p Fiona Mather
p Charles Choudhary	p Andy Moore
p Alan Dowden	a George Ringrow
p Jacqui England	a Steve Rippon-Swaine
p David Harrison	p Frank Rust
p Marge Harvey	p Bruce Tennent
p Tony Hooke	p Martin Tod

Co-opted Members:

Councillors:
p Tonia Craig
p Alison Finlay
a Yvonne Weeks
a Dennis Wright

In attendance at the invitation of the Chairman:

Councillor Liz Fairhurst, Executive Member for Adult Social Care
Councillor Patricia Stallard, Executive Member for Health and Public Health

55. **BROADCASTING ANNOUNCEMENT**

The Chairman announced that the press and members of the public were permitted to film and broadcast the meeting. Those remaining at the meeting were consenting to being filmed and recorded, and to the possible use of those images and recording for broadcasting purposes.

56. **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Cllrs Lyon, Ringrow and Rippon-Swaine and Co-opted Members Cllrs Yvonne Weeks and Dennis Wright.

57. **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 Personal interest in a matter being considered at the meeting they considered whether such interest should be declared, and having regard to Part 5, Paragraph 4 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 Chris Carter declared a general Personal interest as his family are involved with the Gosport War Memorial League of Friends.

Councillor Jacqui England declared a general Personal interest as she is the Chairman of the Lymington Hospital League of Friends.

Councillor Fiona Mather declared a Personal interest in Item 8, as she is a Member of the Advisory Committee for Trinity Winchester.

Councillor Frank Rust declared a Personal interest in Item 7, as he is a Member of the Wessex Clinical Senate and has considered the initial stages of the Dorset Clinical Services Review.

Councillor Martin Tod declared a general Personal interest, as he is the Chief Executive of the Men's Health Forum, which receives funding from Public Health England and the Department of Health. He also declared a Personal interest in Item 8, as he is a donor to Trinity Winchester, and occasional volunteer at the Winchester Night Shelter

58. **MINUTES**

The Minutes of the meeting of the Health and Adult Social Care Select Committee (HASC) held on 10 March 2015 were confirmed as a correct record, and signed by the Chairman.

There were two matters arising in relation to the minutes:

Ambulance conveyance to Frimley Health

Confirmation had been received that Medisec provide conveyance for those individuals detained under Section 136 of the Mental Health Act 1983 in the areas covered by Southern Health and Solent NHS Trusts. Individuals requiring conveyance in North East Hampshire had this service provided to them by South East Coast Ambulance Service.

Systems Resilience

The terms of reference had been requested and would be shared after the meeting.

Terms of Reference to be circulated.

59. **DEPUTATIONS**

No deputations were received at this meeting.

60. **CHAIRMAN'S ANNOUNCEMENTS**

The Chairman made two announcements:

New Members

The Chairman welcomed the new Members of the Committee, which included Councillor Ann Briggs and Tony Hooke, following changes made at County Council, and Councillor Yvonne Weeks, who had been appointed to the Committee by Hampshire and Isle of Wight Local Authorities in order to fill the vacant district/borough representative position.

Move of Meeting

Members' attention was brought to the move of the Select Committee meeting to the 17 September in order to review the proposals for 'Transformation to 2017'.

61. **HEALTH: INQUIRIES RECEIVED AND ACTION TAKEN**

University Hospital Southampton NHS Foundation Trust: Care Quality Commission inspection report

The Chief Executive and representatives of University Hospital Southampton NHS Foundation Trust presented the findings of the Care Quality Commission's (CQC's) inspection of the Trust's services (see Item 6 in the Minute Book).

Members were informed that the overall outcome of University Hospital Southampton Foundation Trust's inspection was 'requires improvement', which was disappointing but in line with the outcome expected. The Trust were however pleased to report that there had been

no improvement or enforcement notices given during the inspection, and no 'inadequate' ratings in the inspection outcome.

The CQC's findings reflected what was communicated by the Trust prior to the inspection, although compounded by the inspection taking place in the week that the NHS recorded substantial issues with capacity and attendance at Emergency Departments. Despite this, the Trust had received a 'good' rating for every category of care, and the quality and commitment of staff was highlighted in the report, although areas of development had also been noted.

Three key issues raised by the Care Quality Commission for action included: the capacity of services to cope with increased demand and patient flow; staffing shortages and the ability of the Trust to manage vacancies; and the estate footprint and ability to modernise and expand buildings to meet business need.

The hospital would be working on those areas that are within their immediate control, such as reducing delayed transfers of care in conjunction with partners, exploring measures such as looking to increase step-down bed availability with Solent NHS Trust. It was hoped that this would free up capacity by enabling those patients no longer requiring acute care to leave the hospital and receive services based in the community. Additionally services were focusing on getting medically fit patients 'home for lunch', in order to facilitate planned timely discharges.

Within the Trust, agency and locum nurses had been utilised to ensure that staffing was at or above minimum safe levels, and the Trust would be working hard to ensure that planned levels were also achieved. The shortage of nurses was a nationally recognised issue, with the Trust being one of many to seek nursing staff from abroad. The number of people in nurse training had increased, but these individuals would take three years to become fully qualified. The Trust noted that there is also a current national shortage of radiographers, and would be working with this department to address this issue, alongside cultural issues picked up as part of the inspection.

In relation to estate, it was explained that the Trust is landlocked by other buildings, which prevented the expansion of the site any further, although there was still considerable space on site which could potentially be further expanded. The Trust were open about some areas of estate not being in line with modern standards, presenting issues in relation to privacy and dignity, as well as incidents of electrical failure. It was explained that the modernisation of the estates was restricted by budget

limitations, as well as the need for continuity of safe patient care. However, plans were in place to address issues where possible.

A detailed action plan had been drafted and would be signed off at a round table summit planned for the Autumn to review progress.

In response to questions, Members heard:

- The action plan would see phased improvement over the next two to three years.
- Waiting times are currently meeting the national standards, with the exception of the target on patients being treated within 62 days of GP urgent suspected cancer referral.
- It was explained that there are two kinds of discharge from the Trust; a simple discharge which takes place under the control of the Trust, and a complex discharge which involves an outside agency such as social care or another NHS service. The Trust has increased morning discharge by 25%, but this should be up to one third to meet national levels. The Trust was seeking to improve planning to ready patients for discharge the night before, and ensure that complex drug needs are communicated to the pharmacy in advance.
- The CQC did not find any dissatisfied patients throughout their inspection, and they had rated the care from services as 'good', despite the significant pressures experienced during inspection week.
- That a new End of Life Care model had been introduced across the Trust's 72 wards, and this was taking time to embed, a fact which had been shared with the CQC. Therefore the findings in relation to this topic were expected. The Trust did admit that it can do more to improve end of life care, and can use the expertise from Countess Mountbatten Hospice to assist with this.
- That there is to be a continued use of agency staff which is linked to the NHS's national issue regarding staffing. The retention of staff was important to tackle this issue, and resultantly the Trust had regularly surveyed staff leavers to monitor reasons for leaving the employment of the Trust. It had been found that the largest percentage of staff surveyed had left for career progression reasons, with only a small percentage dissatisfied with University Hospital Southampton as an employer.
- Following recent national news stories, the Trust would be continuing to support their foreign workers; most of the staff working for the Trust from abroad were from within the European Union, but there are a number of staff members from further afield. Plans in

place to increase staffing levels were beginning to demonstrate improvements, which it was hoped would be aided by the Trust was recently being voted one of the best places to work with the NHS, reaching the top five nationally. Portsmouth Hospitals Trust had also performed well in this list.

- The CQC did not look into the Trust's finances as these areas do not fall within their remit.
- The Trust had picked up issues from the inspection regarding falls and have risk assessed across the Trust to improve outcomes, which had significantly improved in the previous few months. The NHS has a different view to CQC on the benchmarking of falls with comparators, but regardless of this the Trust has been able to demonstrate improvement.
- The issues in relation to timely access to equipment had already been addressed and the Trust had undertaken an equipment audit across the hospital.
- One of the key issues highlighted by the Trust and CQC related to capacity are delayed transfers of care for patients who are medically fit enough to leave acute care, with up to two hundred patients per day medically fit for discharge. There were concerns regarding the number of Hampshire residents who were delayed in the hospital, and it was understood that there were issues with the care market in parts of Hampshire which made timely discharge more difficult. It was agreed that a briefing would be sought on this area
- The introduction of the Better Care Fund and other opportunities to shift demand from hospitals to primary care would have a financial impact on the Trust, but this was supported as long as demand on acute services reduced as a result.
- The Trust offered discounted long term parking to those who regularly visited the site for treatment or to visit dependent relatives. Disabled car owner paid the full rate, but there are national schemes for reimbursement of hospital car parking for those on low income or in receipt of benefits.

The Committee agreed that they should take a monitoring and oversight role in relation to the progress of the actions, and agreed to add this to their work programme. The Committee were mindful that the action plan would also be reviewed by the Southampton Health Scrutiny Committee, and therefore suggested an update in six to nine months time.

Additionally, the Committee agreed to follow-up on the Chief Executive's agreement to consider discounted parking for disabled people.

Briefing on delayed transfers of care for Hampshire patients to be received.

Response to be received from the Trust on disabled parking.

RESOLVED

That:

1. The Committee request the final action plan being submitted by the Trust to the Care Quality Commission, which contains actions to be taken in relation to the recommendations outlined within the summary inspection report.
2. The Committee request a monitoring update from the Trust later in the year.

Southern Health NHS Foundation Trust: Anstey Ward, Alton Community Hospital - temporary closure of beds

Southern Health NHS Foundation Trust: Nightingale and Chichester Wards, Romsey Community Hospital - temporary closure of beds

These items were taken together (see Item 6 in the Minute Book).

The Committee noted the updates on both Alton and Romsey Community Hospitals, and agreed that the issues outlined merited a further report in July.

RESOLVED

That:

1. The updates are noted.
2. An additional report is requested for the 28 July HASC on actions being taken by Southern Health NHS Foundation Trust to remedy the issues outlined in the updates on Community Hospital beds.

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

Dorset CCG and West Hampshire CCG: Dorset Clinical Services Review

The Committee received and noted the Case for Change paper drafted by Dorset Clinical Commissioning Group (see Item 7 in the Minute Book).

Members discussed the scope of this review and the likely impact this may have on the population of South West Hampshire who travel into Dorset to receive health care services. After some short discussion, Members agreed that by determining that the proposals are likely to constitute a substantial change in service at this stage, it would enable

Action plan to be received.

Report to be received in July.

Members to be involved from the outset in the formation of the Joint Health Scrutiny Committee on the Dorset Clinical Services review.

Members requested a further report on how the proposals, when known, are likely to impact on the population of Hampshire, for their information.

RESOLVED

That:

1. The Dorset Clinical Services review proposals constitute, or are likely to constitute, a substantial change in service, for the population of Hampshire.
2. The Chairman and Vice Chairman are proposed to be appointed by County Council to the Joint Health Scrutiny Committee on the Dorset Clinical Services review.

Southern Health NHS Foundation Trust: Ravenswood House works – interim update

Members noted an interim update in the papers on the works being undertaken at Ravenswood House, and the temporary move of some patients to Woodhaven, located at Tatchbury Mount in Calmore (see Item 7 in the Minute Book).

Members noted the report and the indication that Southern Health NHS Foundation Trust would be reviewing the long-term future of Ravenswood House. It was agreed that any future proposals to permanently move medium secure patients would require significant engagement with stakeholders in order to reassure and educate local communities on proposals.

RESOLVED

That:

1. Members are content with progress to date on the improvement works to Ravenswood House, and the temporary move of some patients to Woodhaven.
2. The interim update is noted, and a further update is received once all works have been completed and the temporary move of patients has ended.
3. Proposals on the future of Ravenswood are received, when timely, and the scrutiny of this topic is added to the work programme.

Ravenswood House long-term proposals added to the work programme.

Councillors Tonia Craig and Alison Finlay left at this point in the meeting.

63. **ADULT SERVICES: SUPPORTING PEOPLE –
REMODELLING SOCIAL INCLUSION SERVICES**

Representatives of the Director of Adult Services presented the report setting out proposals for the future of Supporting People services for Social Inclusion (see Item 8 in the Minute Book).

Members were informed that there has been a delay with this part of the Supporting People proposals following decisions taken in July 2014; since this time further engagement work has taken place with stakeholders following consultation with the District and Borough Councils in Hampshire.

Hampshire County Council as part of the recommendations to be agreed by the Executive Member for Adult Social Care would retain a clear and on-going responsibility for preventative and early intervention services, with an overall approach to wellbeing. Hampshire County Council does not have a statutory duty to continue to provide Supporting People services, but the benefits in doing are clearly evidenced, include reducing the need for statutory services.

The proposals primarily related to the issue of homelessness, and prior to this work-stream the area had not been reviewed in-depth for a significant period of time. Resultantly, this review had picked up areas where tackling inefficiencies and duplication would bring about some of the savings required.

The aim of the review was to develop services within the existing budget envelope that were both efficient and met the needs of the county as a whole, with a conscious effort to get the best from the market. The previous social inclusion model was found to have too many stages, so part of the review's aims was to simplify services offered.

All stakeholders had been included in conversations on the development of the new model and this had been seen as a positive opportunity to contribute towards how services can better meet user's needs.

The HASC's Supporting People working group had been involved with the review throughout the process, and had met four times since December 2014 to review emerging proposals. The Vice Chairman informed the HASC that the Supporting People working group had given members the opportunity to question and scrutinise the approach being

taken and hear the views expressed by a range of stakeholders during the course of the review.

One Member of the working group outlined that they were originally concerned in regards to ensuring steps were in place to reduce the need for crisis support, but felt that the recommendations were a practical approach to reducing the budget, but still providing a model that met service user's needs. Another member of the working group noted that they still had concerns, but would monitor the implementation of the model.

In response to questions, Members heard:

- That Hampshire County Council do not have the responsibility for statutory homelessness, which rests with the District and Borough Councils.
- That one of the key risks highlighted by the report was that of landlords potentially refusing to have their buildings utilised under the new model proposed, which could lead to a reduction in the amount of accommodation and bases for support services available in the County. In order to try to mitigate against this, Hampshire County Council and the Districts and Boroughs had been working closely with landlords, but ultimately had no influence over the longer term strategic vision of some of these which may result in them not wishing to continue to provide services from their buildings. Should this risk be realised, Hampshire County Council will work with the relevant bodies to source solutions or alternatives.
- It was recognised through the review that there was not currently emergency accommodation support services within the Hart and Rushmoor for single homeless people. It was therefore proposed that Adult Services work with these Councils to develop service provision in this geographic area, as well as an additional £100k of funding to facilitate this.
- The Department would continue to monitor outcomes with the District and Boroughs to analyse post-decision how many people are being referred into the system, if people are being turned away and whether these numbers have changed.

RESOLVED

That the recommendations in the 'Supporting People – Remodelling Social Inclusion Services' report under section 17 (paragraphs 17.1 – 17.9) are endorsed to the Executive Member for Adult Social Care for decision.

64. **ADULT SERVICES: MAINTAINING CONTINUITY OF SERVICE AT JACOBS LODGE RESPITE UNIT**

Representatives of the Director of Adult Services presented the report setting out proposals for ensuring continuity of services at the Jacobs Lodge respite unit (see Item 9 in the Minute Book).

Members were informed that Jacobs Lodge is a six bed respite unit in the New Forest currently provided by Southern Health NHS Foundation Trust, in a building owned by Hampshire County Council. Approval was being sought from the Executive Member for Adult Social Care to take over the provision of this service from Southern Health, following the Trust's decision to withdraw from the contract.

Members heard that the continuation of the provision of this service would fit in with the other respite services currently offered by Hampshire County Council, especially given that there are no other respite services in the New Forest.

In response to questions, Members heard:

- That the continuation of the provision of respite services at Jacobs Lodge was likely to be near cost neutral, and there may be some scope for a small saving.
- That Hampshire County Council had been content with the provision of services at Jacobs Lodge by Southern Health, and the decision to withdraw from the contract was one taken purely by the Trust on the basis of financial viability.
- There is still consideration being given to moving Learning Disability day services, as the Department had a long term goal to ensure that service users are able to interact with local communities during day respite, which would not be possible from the Jacobs Lodge site. However there were no plans to move services immediately, and in the medium term day services will stay where they are.
- The respite service was strategically placed across the county as services are not accessed every day, and transport is provided for services users.
- Engagement has been ongoing with families and to this end letters had been sent to services users, their families and carers, on plans for Hampshire County Council to take over the running of the service. It is hoped that these communications would reassure any concerns around continuity.
- Currently, the occupancy rate for Jacobs Lodge is approximately 4.5 beds out of 6, and therefore there is no need for further capacity to be explored at this time.

RESOLVED

That the recommendation in the 'Maintaining continuity of service at Jacobs Lodge respite unit' report under

section 7 (paragraph 7.1) are endorsed to the Executive Member for Adult Social Care for decision.

65. **HASC: MENTAL HEALTH SERVICES**

Members were informed that the Terms of Reference (see Item 10 in the Minute Book) followed on from discussions at the March meeting on how to progress with the items currently on the work programme related to mental health services.

The Terms of Reference was reviewed and further suggestions were made on narrowing its scope, which would be considered as part of the initial meeting of the working group:

- Community Mental Health services and how in particular these are working to prevent elevation to acute service. This may include looking at Improving Access to Psychological Therapies and lower level mental health services.
- Suicide prevention.

The Chairman informed Members that he would be seeking expressions of interest for membership on the working group, and correspondence would be circulated requesting this after the meeting.

RESOLVED

That the terms of reference are agreed.

66. **WORK PROGRAMME AND ANNUAL REPORT**

The Director of Policy and Governance presented the Committee's work programme and annual report (see Items 11a and 11b in the Minute Book).

The Chairman requested that all suggestions for the HASC work programme be forwarded to himself or the scrutiny officer for consideration at her next agenda planning session.

The topic of 'air quality' was raised as a potential subject under the topic of public health. It was agreed that an outline briefing could be pursued initially, with a further follow-up item if an issue was identified for further scrutiny.

RESOLVED:

That the Committee's work programme be approved.

Membership of the working group to be confirmed.

Chairman, 28 July 2015