

ADULT SERVICES AND HEALTH OVERVIEW AND SCRUTINY PANEL

WEDNESDAY, 17 MAY 2017

PRESENT: Councillors Mohammed Ilyas (Chairman), Michael Airey (Vice-Chairman), Charles Hollingsworth and Lynne Jones

Also in attendance: Councillor Wisdom Da Costa, Jayne Rigg (Optalis), Jayne Reynolds (Berkshire Healthcare NHS Foundation Trust)

Officers: Andy Carswell, Alan Abrahamson, Alison Alexander and Hilary Hall

APOLOGIES

Apologies for absence were received from Cllrs Diment and Lenton.

DECLARATIONS OF INTEREST

There were no declarations of interest received.

MINUTES

The Minutes of the meeting held on March 16th were agreed as an accurate record.

BERKSHIRE HEALTHCARE NHS FOUNDATION TRUST REVIEW OF QUALITY ACCOUNT

The item was introduced by Jayne Reynolds, Deputy Director of Nursing at Berkshire Healthcare NHS Foundation Trust, who explained that each Trust is legally required to produce a Quality Account each year. She outlined the highlights of the Quality Account to Members.

Jayne Reynolds explained that satisfaction rates amongst patients had generally improved since 2015/16, with the exception being from mental health inpatients. She stated that she believed the lower rates of satisfaction came from patients who had used the Trust's smoking cessation services. She said that the Trust had had challenges in recruiting staff over the last year, particularly in the inpatients area at Prospect Park Hospital. She said that the Trust was currently operating with 20 per cent of posts vacant, although this was down from the previous figure of 35 per cent vacancies. She said that the Trust had managed to successfully retain staff, but was working on ways of improving the recruitment process.

Jayne Reynolds explained that the Trust had scored well across all areas on its most recent CQC inspection in December 2016 and all service areas were now considered compliant. At the previous inspection in 2015 some concerns had been raised in relation to inpatient safety at Prospect Park Hospital, which had been rated as requiring improvement.

Jayne Reynolds stated that the Trust had done particularly well in meeting its targets in relation to patient safety. It was noted that the number of incidents of pressure ulcers due to a lapse in care by the Trust and falls by inpatients was significantly lower than the annual targets that had been set. Jayne Reynolds explained that when an incident of pressure ulcer caused by a lapse in care was recorded, a learning event would also be created in order to improve future actions. The learning event would then be circulated across the whole of the Trust area. Jayne Reynolds stated that although there was no pattern in relation to pressure ulcers, there was an overall downward trend in their numbers. She confirmed that the figures

related to the number of patients with ulcers, rather than the number of individual ulcers recorded.

Jayne Reynolds stated that the Trust had met all of its targets in relation to NICE technology appraisals, and 84 per cent of all NICE guidance. She explained that examples where the Trust did not meet a piece of guidance might be choosing not to implement a particular type of medication due to unaffordability. She stated that the Trust's aim is to see a year on year increase in guidance implementation, rather than setting a target of meeting 100 per cent implementation.

Following a query from Cllr Jones, Jayne Reynolds stated that numbers in relation to incidents of falls in different unit rates and categories of pressure ulcers were fed back to the CCG and numeric figures specific to Royal Borough patients could be made available to Members.

The Chairman asked for more information on the Trust's Zero Suicide Project. Jayne Reynolds explained that crisis plans were created with individuals with mental health problems, whereby triggers to suicidal ideation could be identified and the patient would then know when to get in contact with services, using contact details that they would be supplied with. The patient details would then be uploaded into the Trust's systems. Jayne Reynolds explained that the target was for no suicides within the Trust's area because, while getting the number down was an achievable target, doing so gave the impression that it was considered acceptable for there to be some suicides. She added there had been 22 recorded suicides of patients known to Trust services in 2016/17. She said there had been an initial increase in suicides since the recession and that incidents were decreasing; however, the current numbers were higher than they were four years ago. She said men were more likely to commit suicide than women, and they were more likely to take place in a community setting. Suicides within an inpatient environment were extremely rare.

Cllr Hollingsworth asked if the Trust was confident its IT servers were secure, in light of the hacking of various NHS Trusts the previous week. Jayne Reynolds said the Trust had been unaffected by the hacking and reminders about IT security risks, along with warnings to remain vigilant, had been sent to all staff.

Cllr Jones asked what was being done to improve waiting list times for the CAMHS service. Jayne Reynolds said a transformation project was underway with a specific aim of improving access for youngsters with an autistic spectrum disorder, by creating a pathway that included specialist mental health teams and an out of hours urgent care response unit. She said there was an aim for patients to be seen within 12 weeks. At the moment the average wait within Berkshire was 15-18 months, while the national average was three years. It was hoped a specialist unit for this service could be housed at Prospect Park Hospital. Cllr Jones stated that CAMHS provided a fantastic service for youngsters and asked if there was anything the Panel could do to improve matters and ensure the affected youngsters' schooling did not suffer as a result of waiting for specialist intervention.

The Chairman asked which area needed the biggest prioritisation in terms of learning from complaints. Jayne Reynolds said mental health services had been identified as the area which had the lowest levels of patient satisfaction. She said the Trust was looking to ask patients for feedback on services at a later date, rather than at the point of discharge, which was the current standard practice.

The Chairman thanked Jayne Reynolds for attending the meeting and addressing the Panel.

FINANCIAL UPDATE

The Finance Partner informed Members that there had been a total underspend in the 2016/17 budget of £477,000, or 0.5 per cent of the total budget. There had been a spending of £57,100,000 in the Adult, Children and Health Directorate and an underspend of £12,000. Adult, Children and Health commissioning had seen an overspend of £772,000 on a budget of

£7,124,000, representing 10.8 per cent of the budget. The Finance Partner stated however that much of this figure related to Children's Services and Housing commissioning. There had been a significant underspend of £1,448,000 in the Health and Adult Social Care budget, representing 4.2 per cent of the £34,237,000 budget. Much of this underspend was accounted for in an £887,000 underspend on services for older people and people with a physical disability. The Finance Partner explained the budget for this service area had been set when the Council was experiencing a peak in demand for these services. However demand had reduced in 2016/17 and that level of funding was not required, giving rise to £678,000 of the underspend. The Finance Partner stated that the Council had also benefited from additional income towards the cost of homecare and care provided in nursing homes.

The Finance Partner stated that going forward Members would be provided with finance updates on a quarterly basis, following the transfer of services to Optalis. It was queried why the first quarterly report would not be available until September. The Finance Partner stated that the report was generally put together in July and it was unlikely to be ready for the Panel meeting taking place that month. However he stated that it could be circulated to Members the figures were confirmed.

Following questions from Cllr Jones, the Finance Partner stated that the money from the underspend would be put into the Council's reserves and set aside for use in the relevant budget area.

ADULT SOCIAL CARE INVESTMENT

The Managing Director stated that the need for additional financial resources had been identified in 2015, as the demand for adult social care would continue to increase each year and additional investment would be required in order to help people with complex needs. Additional funding had been acquired through the Adult Social Care Precept. The Managing Director informed Members that an investment of £28.5million over the next three years had been proposed in order to provide a more proactive service for residents. The Managing Director said that some of the funds would be committed to ensuring that salaries of the social care workforce was in line with the national minimum living wage. Areas of high need had been identified and four new social work staff had been recruited to assist.

The Managing Director informed Members that additional work on improving delayed transfers of elderly patients out of hospitals had been identified as a priority. This entailed looking at improving residential or community care as an alternative to hospital treatment, so that patients could be transferred out of hospital in a timely manner. Responding to a question from Cllr Airey, The Managing Director stated that patients would undergo an assessment as early as possible in order to assess their needs and plan for their discharge from hospital. However there was a need to ensure there was the staffing capacity to enable this to happen.

The Managing Director reminded Members that services had successfully been transferred out to Optalis in April, and the Council wished to re-invest into adult social care services. The Managing Director informed Members that the Council had a hospital team based within adult social care.

RESOLVED UNANIMOUSLY: That the report recommendation be agreed.

STOP SMOKING SERVICE UPDATE

The Deputy Director - Strategy and Commissioning reminded Members that the Council had revised the smoking cessation service in 2016 in order to provide a more targeted service for young people, pregnant women and those with mental health issues. The target groups had been agreed at a Task and Finish group. In addition to the three target groups already identified in the contract, the Task and Finish Group agreed to include people suffering from hypertension and/or asthma in order to make the service more effective, and to provide school-based activities in order to encourage younger people to stop smoking. It was noted

that the targeted groups would benefit the most from the changes in the service; however they were felt to be the hardest groups to engage with.

The Deputy Director - Strategy and Commissioning informed Members that the management of the smoking cessation contract would be brought in-house, in order for the Council to retain greater control over contracts and spot interventions for smokers with exceptional circumstances.

The Deputy Director - Strategy and Commissioning said that a report would be brought back to the Panel in six months' time to inform Members on the progress of the service. The Deputy Director - Strategy and Commissioning said that since the meeting of the Task and Finish group new venues for service delivery were being sought; opportunities to deliver service within Health and Social Care models were being sought; plans were being advanced to train drug and alcohol service providers to deliver advice on stopping smoking; and the Council had joined that Berkshire Tobacco Control Alliance.

The Deputy Director - Strategy and Commissioning said that it had been difficult to do a comparison of targets for stopping smoking, but those that had been set were viewed as being realistic and achievable.

Cllr Airey stated his belief that the spot interventions were a good idea and Cllr Jones stated the new service afforded greater flexibility. Members agreed with the next steps that had been proposed and thanked the Officers for their team's efforts.

WAYS INTO WORK ANNUAL UPDATE

The Deputy Director - Strategy and Commissioning reminded Members that Ways into Work had been established in March 2015 as an in-house Council service to provide help for people with disabilities find employment, before becoming an independent social enterprise. Ways into Work met all of its targets during its first two years of operation, which led to the Council agreeing a five year contract to provide services. This led to a decreased financial burden on the Council, although the figures in relation to this were still to be confirmed. The Deputy Director - Strategy and Commissioning informed Members that the majority of clients were staying in employment after Ways into Work had provided them with their initial assistance. The Deputy Director - Strategy and Commissioning said Ways into Work relied upon winning new contracts to receive funding.

Cllr Jones stated her belief that Ways into Work had proved successful due to the consistent level of contact between client and employer.

LOCAL GOVERNMENT ACT 1972 - EXCLUSION OF THE PUBLIC

RESOLVED UNANIMOUSLY: That under Section 100(A)(4) of the Local Government Act 1972, the public be excluded from the remainder of the meeting whilst discussion takes place on item 10 on the grounds that they involve the likely disclosure of exempt information as defined in Paragraphs 1-7 of part I of Schedule 12A of the Act.

The meeting, which began at 7.00 pm, finished at 8.32 pm

CHAIRMAN.....

DATE.....