Adult Social Care and Health Overview and Scrutiny Committee

8 December 2010

Agenda

A meeting of the Adult Social Care and Health Overview and Scrutiny Committee will be held at the SHIRE HALL, WARWICK on WEDNESDAY, 8 DECEMBER 2010 at 2.00 p.m.

The agenda will be: -

1. General

- (1) Apologies
- (2) Members' Disclosures of Personal and Prejudicial Interests.

Members are reminded that they should disclose the existence and nature of their personal interests at the commencement of the relevant item (or as soon as the interest becomes apparent). If that interest is a prejudicial interest the Member must withdraw from the room unless one of the exceptions applies.

'Membership of a district or borough council is classed as a personal interest under the Code of Conduct. A Member does not need to declare this interest unless the Member chooses to speak on a matter relating to their membership. If the Member does not wish to speak on the matter, the Member may still vote on the matter without making a declaration'.

(3) Minutes of the meeting of the Adult Social Care and Health Overview and Scrutiny Committee held on 8 November 2010



(4) Chair's Announcements

2. Public Question Time (Standing Order 34)

Up to 30 minutes of the meeting is available for members of the public to ask questions on any matters relevant to the business of the Adult Social Care and Health Overview and Scrutiny Committee.

Questioners may ask two questions and can speak for up to three minutes each.

For further information about public question time, please contact Ann Mawdsley on 01926 418079 or e-mail *annmawdsley*@warwickshire.gov.uk.

3. Questions to the Portfolio Holders

Up to 30 minutes of the meeting is available for Members of the Committee to put questions to the Portfolio Holders (Councillor Izzi Seccombe (Adult Social Care) and Councillor Bob Stevens (Health) on any matters relevant to the Adult Social Care and Health Overview and Scrutiny Committee's remit and for the Portfolio Holders to update the Committee on relevant issues.

Health items

4. Long-term Reduction in Acute Beds

The Committee will receive an oral update from Paul Maubach, Director of Strategy and Commissioning, NHS Warwickshire on the long-term reduction in Acute Beds.

5. NHS Warwickshire - Update

The Committee will receive an oral update from Paul Maubach, Director of Strategy and Commissioning, NHS Warwickshire on progress made following decisions to reduce activity and commissioning plan for 2011/12.

Adult Social Care items

6. Council Performance Rating APA 2009-10 - Warwickshire

Report of the Strategic Director, Adult, Health and Community Services.

Each year the Care Quality Commission (CQC) acting as the Adult Social Care regulator assess performance within all local authorities with social care responsibilities and award judgements which indicate the quality of service provided by each Council.



Recommendation

It is recommended that the O&S Committee considers and comments on performance for 2009/10 and the areas for improvement highlighted by the CQC.

For further information please contact Andrew Sharp, Service Manager, Tel: 01926 745610 E-mail andrewsharp@warwickshire.gov.uk

7. Joint Review of Antenatal and Postnatal Services for Teenage Parents in Warwickshire

Report of the Chair of the Scrutiny Review Task and Finish Group

Warwickshire County Council, Rugby Borough Council and Nuneaton and Bedworth Borough Council have undertaken a joint scrutiny review of services available for teenage parents in the county. The review was funded by the Centre for Public Scrutiny. This report outlines the process followed before setting out the task and finish group's conclusions and recommendations.

Recommendation

That the Adult Social Care and Health Overview and Scrutiny Committee comments on the conclusions and recommendations of the task and finish group and forwards them on to Cabinet for consideration.

For further information please contact Councillor Angela Warner, Tel: 01926 420355 E-mail *cllrwarner@warwickshire.gov.uk* or Paul Williams, Overview and Scrutiny Officer, Tel: 01926 418196 E-mail *paulwilliams@warwickshire.gov.uk*.

8. Dementia Strategy

Jon Reading will update the Committee on the proposed Dementia Strategy.

Joint Health and Adult Social Care items

9. Work Programme 2010-11

Report of the Chair of the Adult Social Care and Health Overview and Scrutiny Committee

This report contains the Work Programme for the Adult Social Care and Health Overview and Scrutiny.

Recommendation

The Committee is recommended to agreed the work programme, to be reviewed and reprioritise as appropriate throughout the course of the year.

For further information please contact Michelle McHugh, Overview and Scrutiny Manager, Tel: 01926 412144 E-mail *michellemchugh@warwickshire.gov.uk* or Ann Mawdsley, Principal Committee Administrator, Tel: 01926 418079 E-mail *annmawdsley@warwickshire.gov.uk*.

10. Any Other Items

which the Chair decides are urgent.

JIM GRAHAM Chief Executive Adult Social Care and Health Overview and Scrutiny Committee Membership

Councillors Martyn Ashford, Penny Bould, Les Caborn (Chair), Jose Compton, Richard Dodd, Kate Rolfe (S), Dave Shilton (Vice Chair), Sid Tooth(S), Angela Warner and Claire Watson.

District and Borough Councillors (5-voting on health matters) One Member from each district/borough in Warwickshire. Each must be a member of an Overview and Scrutiny Committee of their authority:

North Warwickshire Borough Council: Nuneaton and Bedworth Borough Council: Rugby Borough Council Stratford-on-Avon District Council Warwick District Council:

Councillor Wendy Smitten Councillor Bill Hancox Councillor Sally Bragg Councillor Helen Haytor Councillor Michael Kinson OBE

Portfolio Holders:- Councillor Izzi Seccombe (Adult Social Care) Councillor Bob Stevens (Health)

The reports referred to are available in large print if requested

General Enquiries: Please contact Ann Mawdsley on 01926 418079 E-mail: *annmawdsley@warwickshire.gov.uk.*

Enquiries about specific reports: Please contact the officers named in the reports.



Minutes of the Meeting of the Adult Social Care and Health Overview and Scrutiny Committee held on 8 November 2010 at Shire Hall, Warwick

Present:

Members of the C	Committee	Councillor Martyn Ashford "Les Caborn (Chair) "Jose Compton "Richard Dodd "Kate Rolfe "Dave Shilton "Sid Tooth "Angela Warner "Claire Watson	
District/Borough Councillors		Michael Kinson OBE	
Other County Councillors		Councillor Izzi Seccombe (Portfolio Holder for Adult Social Care Councillor Bob Stevens (Portfolio Holder for Health)	
Officers	Commissior Wendy Fabl Kim Harlock Performanc Ann Mawds	ssociate Director of Strategic Joint ning - Children and Maternity bro, Director of Adult Services k, Head of Strategic Commissioning and e Management ley, Principal Committee Administrator Hugh, Overview and Scrutiny Manager	
Also Present:	Jill Freer, N Paul Maub Heather No Rachel Pea	(Warwickshire LINks) IHS Warwickshire ach, NHS Warwickshire orgrove, George Eliot Hospital NHS Trust arce, NHS Warwickshire mington, Coventry and Warwickshire Partnership	

1. General

The Chair welcomed everyone to the meeting, in particular Wendy Fabbro, the new Director of Adult Services at Warwickshire County Council.

(1) Apologies for absence

Apologies for absence were received on behalf of Councillor Sally Bragg, Councillor Bill Hancox, Councillor Helen Hayter, Councillor Wendy Smitten and Geoff King.

(2) Members Declarations of Personal and Prejudicial Interests

Councillor Richard Dodd declared a personal interest as an employee of the West Midlands Ambulance Service NHS Trust.

Councillor Kate Rolfe declared a personal interest as a private carer not paid by Warwickshire County Council.

Councillor Angela Warner declared a personal interest in her role as a GP.

(3) Minutes of the meeting of the Adult Social Care and Health Overview and Scrutiny Committee held on 12 October 2010

The minutes of the meeting of the Adult Social Care and Health Overview and Scrutiny Committee held on 12 October 2010 were agreed as a correct record and signed by the Chair.

Matters Arising

There were no matters arising.

(4) Chair's Announcements

The Chair informed Members of the Committee that he had agreed to Item 6 (The Future of Bramcote Hospital) being considered after Item 3 to accommodate the availability of NHS Warwickshire representatives.

2. Public Question Time

None.

3. Questions to the Portfolio Holder

Councillor Bob Stevens

Councillor Claire Watson asked Councillor Bob Stevens to give the Committee an update on the Health Transition Group and the event planned for 30 November. Councillor Stevens gave the background to the non-decision making partnership Group which was co-coordinating all aspects of the transfer of Public Health to the County Council. He stated that details regarding areas such as the Health and Wellbeing Board could not be finalised until the White Paper was published. The Chair noted that the Committee would monitor developments, including the issue of scrutinising the Board. Rachel Pearce stated that there were a number of changes being faced within health, and decisions were being made around communicating these internally and externally. She added that the Local Government Improvement and Development (formerly IDEA) were facilitating a meeting of all stakeholders on 22 November, which would start to look at the way forward. Councillor Izzi Seccombe stated that two issues that needed to be considered were the number of patients in rural areas not registered with GPs and how this group would be encapsulated, as well as how public health would be delivered through the County Council.

Councillor Sid Tooth highlighted the need for better communication in terms of the changes. He raised concern about the GP consortia involvement and what liaison there would be between them and the County Council. Councillor Bob Stevens confirmed that meetings were taking place, but there had still not been any confirmation on how many patients consortia would cover. Paul Maubach added that this was an issue to be debated and decided by GPs, with Strategic Health Authorities adjudicating on whether consortia were fit for purpose.

Councillor Dave Shilton stated that there was a lot of dissatisfaction about the 0845 call system used by GP surgeries. Councillor Angela Warner added that a national investigation had been carried out on this, which Members of the Committee could link into. David Gee stated that the former PPI Forum had carried out a survey and found that GP surgeries had the choice of two systems, the 0845 answering service or patients having to keep trying one number until they are able to get through. The PPI Forum survey showed that patients preferred being in a queue than having to continuously redial. Councillor Bob Stevens agreed to look into this.

Councillor Kate Rolfe asked that a piece of work be commissioned on waiting times in Warwick Hospital. The Chair agreed to look into this matter.

Councillor Izzi Seccombe

Councillor Angela Warner asked the Portfolio Holder for an update on what had been learned at the National Children and Adult Services Conference and Exhibition 2010: shaping the present, building the future attended in early November. Councillor Izzi Seccombe and the Chair gave a brief update on the conference and agreed that they would prepare a Briefing Note from a Member perspective and asked Wendy Fabbro to prepare a Briefing Note from an officer perspective, for distribution to the Committee.

Councillor Angela Warner asked the Portfolio Holder for an update on developments with virtual wards in Warwickshire. Councillor Izzi Seccombe reported that the Alcester Hospital was in operation and currently going through an evaluation process. Her understanding was that this model was working well, but at a higher cost and the reasons for this had to be looked at. Rachel Pearce added that there were two virtual ward pilots being carried out in the north and south of the county and these would be assessed to ensure they were producing outcomes for the population and in terms of investment. Results to date looked promising, demonstrating that hospital admissions were reducing by 60%. Lessons learned from the work in Alcester and the two pilots had been used in setting up the virtual ward in Rugby on 1 October. The Chair asked for a Briefing Note to be sent to the Committee, giving an assessment of the overall position in Warwickshire.

David Gee, Warwickshire LINks, stated that much had been said about virtual wards and care in the community, but everybody was aware of the financial pressures being faced and a recent survey had shown that two out of three councils surveyed had reported that they would not have sufficient money to fund this level of support in the future. Councillor Izzi Seccombe stated the following:

- the Comprehensive Spending Review had identified additional funding allocated to Health to be signed off around social services
- Health would have an additional penalty in the future for any rereferrals back to hospital within six weeks of discharge
- a lot of the changes being made were about reablement and Warwickshire were doing well in this area already
- the financial difficulties had resulted in forging closer working relationships with Health.

The Chair added that the Overview and Scrutiny Board had commissioned a Task and Finish Group on Adult Social Care Low Prevention Services and would be looking to commission another on Delayed Hospital Discharges at their meeting on 10 November.

Health Items

4. Banbury Obstetric, Maternity and Paediatric Services

Paul Maubach, Director of Strategy and Commissioning, NHS Warwickshire updated the Committee on the ongoing discussions with NHS Oxfordshire to resolve the contractual issue relating to their request that NHS Warwickshire pay a premium for patients living in the south of Warwickshire using Banbury Obstetric, Maternity and Paediatric Services. He added that it was important to recognise that because of the geography of south Warwickshire, a premium of some form would have to be paid, but these were purely contractual negotiations and Warwickshire patients would continue to receive services as before.

Paul Maubach informed Members that the balance of provision of services between George Eliot and University Hospital Coventry and Warwickshire was also being reviewed and it was expected that proposals for a consultation would be brought jointly to this Committee and the Coventry Health and Social Care Scrutiny Board in the New Year.

5. Transfer of Warwickshire Community Health

Rachel Pearce, Director Compliance/Assistant Chief Executive, NHS Warwickshire presented her report setting out the transfer of Warwickshire Community Health in line with the requirement for the separation of PCT commissioning from the provision of services by April 2011.

David Gee, Warwickshire LINks stated that he hoped the proposals would provide proper pathways with smoother routes for patients. Rachel Pearce responded that this was in fact re-enforced in the White Paper.

The Chair asked that a progress report be brought to the Committee once the transfer had been implemented.

6. The Future of Bramcote Hospital

Jill Freer, Director of Quality and Safety and Executive Nurse, supported by Paul Maubach, Director of Strategy and Commissioning give a presentation on the situation regarding the future of Bramcote Hospital, including the background, benefits and risks associated with the three options to be consulted on.

Jill Freer noted that she had attended the Nuneaton and Bedworth Area Committee, where concern had been expressed that Community Forums had not been consulted, and to allow for this to happen, NHS Warwickshire had agreed to extend the consultation to January. The Chair read the draft minutes from the Area Committee meeting.

During the discussion that followed, these points were made:

 Concern was raised that despite numerous requests that the consultation document be changed, this had not happened. It was noted that a meeting had taken place with representatives from NHS Warwickshire, LINks and the County Council, where agreement had been reached about different options for consultation. The outcome of this meeting had not been shared with the Committee, and the Chair agreed that a Briefing Note should be prepared setting out what had been agreed.

- 2. In response to a query regarding the pressures that would be put on George Eliot Hospital if Bramcote was closed and the potential for an increase in bed-blocking, Jill Freer stated that lessons had been learned from Alcester, and that greater investment in the community plus a small number of acute beds was expected to reduce the demand on George Eliot.
- 3. There were currently not enough district or community nurses, but savings made from Bramcote would be ring fenced for increased investment in this area.
- 4. Bramcote was geographically isolated, only accepted patients from George Eliot and could not accept patients needing specialist nurses, drips or 24 hour medical cover. This meant that even when there was pressure on hospitals, Bramcote beds could not necessarily be used. Jill Freer added that the reduction from 41 to 20 beds agreed by the NHS Board approximately 12 months ago, together with closer working with Social Care, had resulted in more appropriate use of beds.
- 5. It was noted that the NHS had to have plans in place to respond to the needs of the population, including the flexibility to buy ad hoc beds should they need to. There was general agreement that having the beds (specified under Option 3) in one place under one control would ensure quality control. Paul Maubach responded to a query around winter pressures, noting these were monitored daily, and that the solution to dealing with these pressures was to invest in the responsiveness of the community, not an increase in acute hospital beds.
- 6. The changing situation with Health and Social Care in an environment of limited financial resources and an aging population meant that resources would have to be managed effectively as possible and the way services were currently provided would have to alter.
- 7. The Nuneaton and Bedworth Area Committee had a strong view that all services Nuneaton and Bedworth needed to be protected, but the consultation was about re-provision of services. Feedback on virtual wards from both users and GPs had already been very positive and it was expected that the money saved through closing the 20 beds at Bramcote could result in approximately 600 patients being supported in the community.
- 8. The consultation was in relation to the 20 NHS beds and not to services on the site provided by Coventry and Warwickshire Partnership Trust (CWPT). Paul Maubach reported that CWPT had not to date indicated any potential implications for their services should Bramcote be closed.

- 9. Councillor Angela Warner raised concern about the ability for services to be provided locally at the pace of change required. She added that there needed to be a clear understanding of how much commitment there was within the local health commitment, and there needed to be an easy system providing a quick and appropriate response to GPs and patients. Wendy Fabbro added that it had been announced at the Conference that details of arrangements for NHS commitment to reablement would be available in December.
- 10. Members requested a copy of the report from the original stakeholder group dealing with the pilot for Bramcote, where the decision was made to reduce the number of beds from 41 to 20 beds.

Heather Norgrove, Commercial Director, George Eliot Hospital outlined the current pathways for patients using Bramcote, which had contributed to the hospital meeting the PCT stroke specifications, by the provision of non-acute beds for patients to allow them to reach optimum health. She added that she was pleased to hear that there would still be some beds purchased, and highlighted the need for these to be in the same place to facilitate treatment by orthopaedic surgeons and stroke physicians.

The Committee supported Option 3 as set out in the NHS Warwickshire report, taking into account comments above.

Adult Social Care Items

7. Telecare Progress Report

The Committee considered the report of the Interim Director of Adult Services providing an update on the outcome of the Strategic Review of telecare in Warwickshire and the approved recommendations that are now being implemented in the county. Rachel Norwood added that there was a greater range of equipment available than currently used in Warwickshire, and the aim was to make use of the full range to meet the needs and wants of users and achieve outcomes. There was also a need to set up a system where services bought privately could be assessed.

Councillor Izzi Seccombe stated that Rachel Norwood managed the Housing Support Service, enabling a joined-up approach with the District and Borough Councils. She added that telecare was a an important service in Warwickshire County Council's direction of travel in terms of keeping people independent, and could be widened across the county and could also include telehealth.

Wendy Fabbro emphasised how advantageous telecare could be to the County, improving quality of life for individual users and families, as well as increased value for money. There were many opportunities to work closely with Health using telehealth and telecare.

The Chair requested that this area of work, particularly in terms of the wider implications for the County Council and partners, be included in the Task and Finish Group looking at Adult Social Care Low Level Prevention Services.

Joint Health and Adult Services

8. Work Programme 2010-11

Members noted the work programme, taking into account suggestions made during the meeting.

9. Any Other Business

None

.....

Chair of Committee

The Committee rose at 12:10 p.m.

AGENDA MANAGEMENT SHEET

Name of Committee	Adult Social Care and Health O&S Committee			
Date of Committee	8th December 2010			
Report Title	Adult Social Care – Annual Performance			
Summary For further information	Assessment Ratings 2009/10 Each year the Care Quality Commission (CQC) acting as the Adult Social Care regulator assess performance within all local authorities with social care responsibilities and award judgements which indicate the quality of service provided by each Council. Andrew Sharp			
please contact:	Service Manager, Adult Social Care Tel: 01926 745610			
<i>Would the recommended decision be contrary to the Budget and Policy Framework?</i>	No.			
Background papers	Adult Social Care APA letter 2009/10 Adult Social Care APA Report 2009/10			
CONSULTATION ALREADY U	NDERTAKEN:- Details to be specified			
Other Committees	Health Overview and Scrutiny Committee			
Local Member(s)	X Not Applicable			
Other Elected Members	Councillor L Caborn, Councillor D Shilton, Councillor C Watson, Councillor S Tooth, Councillor C Rolfe, Councillor J Tandy, Councillor J Ross, Councillor P Balaam			
Cabinet Member	Councillor A Farnell, Councillor Mrs I Seccombe, Councillor H Timms			
Chief Executive				
Legal	Alison Hallworth, Adult and Community Team Leader			
Finance	X Chris Norton, Strategic Finance Manager			
Other Chief Officers				
	63			



District Councils		
Health Authority	Χ	Warwickshire PCT
Police		
Other Bodies/Individuals	Χ	Janet Purcell, Cabinet Manager
FINAL DECISION YES		
SUGGESTED NEXT STEPS:		Details to be specified
Further consideration by this Committee		
To Council		
To Cabinet		
To an O & S Committee		
To an Area Committee		
Further Consultation		



Adult Social Care and Health Overview and Scrutiny Committee – 8th December 2010

Adult Social Care – Annual Performance Assessment Ratings 2009/10

Report of the Strategic Director, Adult, Health and Community Services

Recommendations

It is recommended that the O&S Committee considers and comments on performance for 2009/10 and the areas for improvement highlighted by the CQC.

1. Background

- 1.1 Each year the Care Quality Commission (CQC), acting as the Social Care regulator, assess social care performance within all local authorities with social care responsibilities and award judgements which indicate the quality of service provided by each Council.
- 1.2 The CQC rate social services for adults in the form of a judgement, which categorises authorities as:
 - Grade 4 Performing excellently
 - Grade 3 Performing well
 - Grade 2 Performing adequately
 - Grade 1 Performing poorly

These judgements are formed through an assessment of our performance against a set of seven outcomes:

- Improved health and well-being
- Improved quality of life
- Making a positive contribution
- Increased choice and control
- Freedom from discrimination or harassment
- Economic well-being
- Maintaining personal dignity and respect



In addition to these outcomes we are also assessed against two additional areas (domains), these being:

- Leadership
- Commissioning & Resources
- 1.3 Each of the individual outcomes are scored by the CQC and rated taking into account the way in which we address the additional domains across all of these areas to inform the total judgement. In our last assessment in 2008/09 Warwickshire County Council was rated as Grade 3 Performing well.

2. Information and Advice

- 2.1 The Strategic Director, Adult, Health & Community Services has now been notified of the CQC rating for Adult Social Care Services in Warwickshire for the performance year 2009/10, this judgement is embargoed by the CQC until the 25th November 2010.
- 2.2 Overall the CQC has rated adult social care in Warwickshire as Grade 3 Performing Well, this means that in the view of the CQC services in Warwickshire "consistently deliver above minimum requirements for people, are cost-effective and makes contributions to wider outcomes for the community."
- 2.3 This judgement is extremely positive and although it falls in line with the rating that we received for 2008/09 the level of continued improvement and progress in relation to adult social care services in the County is highlighted through the specific judgements that have been made by the CQC in relation to the outcomes against which we are assessed. When compared to the results we received in our 2008/09 assessment we have improved in one of the seven areas, achieving our second excellent rating in relation to "Improved Quality of Life" and maintained our excellent status in relation to "Making a Positive Contribution". The table below shows our 2008/09 judgements compared to the new 2009/10 judgements.

Areas for judgment	2008/09	2009/10
Improved health and emotional well-being	Well	Well
Improved quality of life	Well	Excellent
Making a positive contribution	Excellently	Excellent
Increased choice and control	Well	Well
Freedom from discrimination & harassment	Well	Well
Economic well-being	Well	Well
Maintaining personal dignity and respect	Well	Well
Performance Rating	Performing Well	Performing Well



2.4 This judgement has been formed following the submission of evidence by the Council to the CQC throughout the year and as a result of ongoing discussions between the Strategic Director, Adult, Health & Community Service with the CQC Area Manager during routine business meetings and the annual business meeting which take place as part of the regulatory framework for adult social care. The judgements is also significantly informed through the completion of annual performance assessment returns to the CQC in relation to a wide range of performance information and the completion of a narrative self-assessment of performance within the authority.

3. Summary of Key Strengths & Areas for Improvement

3.1 The areas of strength and for improvement outlined in the adult social care APA report provided by the CQC are presented below in the following table:

Outcome 1: Improved health and emotional well-being					
	onfirmed through self declaration as				
unchanged from 2008/09	_				
Outcome 2: Improved quality of life					
Key Strength	Area for Improvement				
The advice and support provided to	Waiting times for adaptations should				
carers	be reduced in line with other				
	Councils				
The development of housing options					
a part of the care and choice					
accommodation programme					
Outcome 3: Making a positive cont					
5	onfirmed through self declaration as				
unchanged from 2008/09					
Outcome 4: Increased choice & cor					
Key Strength	Area for Improvement				
The increased number of people	Deliver planned roll out of				
who use services in receipt of a	reablement services and self				
direct payment for the first time in	directed support across				
2009/10	Warwickshire				
Outcome 5: Freedom from discrimi					
	onfirmed through self declaration as				
unchanged from 2008/09					
Outcome 6: Economic well-being					
•	onfirmed through self declaration as				
unchanged from 2008/09					
Outcome 7: Maintaining personal d	* / .				
Key Strength	Area for Improvement				
Introduction of a "keeping safe" plan	Further development and extension				
for people who use services or in	of work to evaluate outcomes for				
receipt of a direct payment	people subject to a safeguarding				
	review				



Domain 1: Leadership	
Key Strength	Area for Improvement
The Council has a clear vision for the transformation of adult social care services and takes a holistic view in addressing all aspects of service provision	The Council recognises the importance of partnership working and has developed these during 2009/10. The Council should further strengthen and broaden these partnerships during 2010/11
Domain 2: Commissioning & Use o	
Key Strength	Area for Improvement
The use and development of tools and business models to support service planning and development	No improvement areas identified
The review of and changes to the	
way in which services are	
commissioned to support the	
Councils plans for the transformation of services	

WENDY FABBRO Strategic Director of Adult, Health and Community Services

Shire Hall Warwick

November 2010



AGENDA MANAGEMENT SHEET

Name of Committee	Adult Social Care And And Scrutiny Commit 8th December 2010			
Report Title	Jo Se	int Review of Antena rvices for Teenage F arwickshire		
Summary	Warwickshire County Council, Rugby Borough Council and Nuneaton and Bedworth Borough Council have undertaken a joint scrutiny review of services available for teenage parents in the county. The review was funded by the Centre for Public Scrutiny. This report outlines the process followed before setting out the task and finish group's conclusions and recommendations.			
For further information please contact:	Councillor Angela Warner Tel: 01926 420355 cllrwarner@warwickshire.gov.uk		Paul Williams Overview and Scrutiny Officer Tel: 01926 418196 paulwilliamscl@warwickshire.go v.uk	
Would the recommended decision be contrary to the Budget and Policy Framework?	No			
Background papers	No	ne		
CONSULTATION ALREADY U	INDE	ERTAKEN:- Details to b	pe specified	
Other Committees				
Local Member(s)				
Other Elected Members				
Cabinet Member	X	Portfolio Holder for Heal Children, Young People information		
Chief Executive				
Legal	Χ	Sarah Duxbury		
Finance				
Report to OSC 8.12.10.doc		1 of 6	Warwickshire County Council	

Other Strategic Directors	X	Strategic Director for Customers, Workforce and Governance, Strategic Director for Children, Young People and Families
District Councils		
Health Authority	X	Rachel Pearce, NHS Warwickshire - For information
Police		
Other Bodies/Individuals		
FINAL DECISION NO		
SUGGESTED NEXT STEPS:		Details to be specified
Further consideration by this Committee		
To Council		
To Cabinet	Χ	Date to be agreed
To an O & S Committee		
To an Area Committee		
Further Consultation		



Agenda No

Adult Social Care and Health Overview and Scrutiny Committee - 8th December 2010.

Joint Review of Antenatal and Postnatal Services for Teenage Parents in Warwickshire

Report of the Chair of the Scrutiny Review Task and Finish Group

Recommendation

That the Adult Social Care and Health Overview and Scrutiny Committee comments on the conclusions and recommendations of the task and finish group and forwards them on to Cabinet for consideration.

- 1 In the autumn of 2009 the Centre for Public Scrutiny (CfPS) announced that it was to produce a scrutiny toolkit aimed at informing and supporting any scrutiny review that sought to tackle health inequalities. Resources were made available to pay for four reviews and bids were invited from local councils. Warwickshire County Council along with Rugby Borough Council and Nuneaton and Bedworth Borough Council prepared and submitted a joint bid. The focus of the review was to be the antenatal and postnatal services provided for teenage parents in Warwickshire. This subject was selected on the basis of evidence that indicated that whilst a considerable amount of work is being done in Warwickshire to meet the particular needs of teenage parents this is inconsistent both in terms of its quality and distribution across the county. National evidence suggests that a lack of support to teenage parents (who may be highly vulnerable) can result in long term health and well-being problems for them and their children.
- 2 In January 2010 the CfPS announced the winners of the bidding process. The joint Warwickshire bid had been successful.
- 3 Over the next few months evidence was gathered from a number of sources. A summary of the process undertaken is contained in the following section of this report. The evidence gathering stage lasted until September 2010 and culminated in a major select committee style meeting held in Rugby Town Hall on the 27th of that month.
- 4 When the councillors who constituted the task and finish group were satisfied that they had learned as much on the subject as they could they convened to agree their conclusions and recommendations.

Report to OSC 8.12.10.doc

3 of 6



- 5. The accompanying report is the result of the task and finish group's work. In it will be found a summary of the process followed and the group's conclusions and recommendations. To aid members the recommendations are reproduced below.
- 6. The group's report will be considered by member bodies of Rugby Borough Council and Nuneaton and Bedworth Borough Council. Members of the Adult Social Care and Health Overview and Scrutiny Committee are asked to comment on the recommendations and forward them to Cabinet for agreement.

Recommendations of the Task and Finish Group

- 1. Those statutory and voluntary organisations that provide services for teenage parents be encouraged to establish objective performance management frameworks with which positive outcomes for teenage parents can be accurately measured.
- 2. That to ensure that they are providing the right services in the best possible way all providers of services for teenage parents actively seek feedback from their customers and act on their findings.
- 3. That following the lead set by the George Eliot Hospital and the Providing Information and Positive Parenting Support (PIPPS) team based there, other hospitals in Warwickshire are encouraged as a minimum to,

a. Identify a member of the community midwifery team to specialise and develop an understanding of the particular needs of teenage parents.

b. Provide as much continuity as possible so that teenage parents have only one or two midwives to get to know.

c. Consider the use of antenatal and postnatal outreach services being delivered from Children's Centres or other community venues.

- 4. To help ensure member engagement, the Respect Yourself Campaign be requested to consult the Adult Social Care and Health Overview and Scrutiny Committee on the draft strategy for young fathers when it becomes available.
- 5. The Portfolio Holder for Health writes to the Chief Executive of the Coventry and Warwickshire NHS Partnership Trust with a request that whenever a Common Assessment Framework is undertaken that requires input from the Trust an officer from the Trust (Children and Adolescent Mental Health Services) attends Family Support Meetings. If the Trust is requested to send an officer to a Family Support Meeting but is unable to do so then it is asked to ensure that apologies are provided with the reason for non-attendance.
- 6. That given the decision to remove the post of Personal Advisor for Pregnant Teenagers and Teenage Parents the Strategic Director for Children, Young People and Families is requested to explore ways in which the gap left by the

Report to OSC 8.12.10.doc

Narwickshire

decision can be filled through work in partnership with other agencies or the voluntary sector.

- 7. That the Family Nurse Partnership be asked to report in twelve months time to the Adult Social Care and Health Overview and Scrutiny Committee on
 - a) progress with this initiative and
 - b) how its services complement others.
- 8. In recognition of the excellent work of the PIPPS team, management at the George Eliot Hospital is requested to reflect on whether the midwives that make up the team would be able to deliver more services if the administrative burden currently placed on them was reduced.
- 9. Acknowledging the key role played in communities by Children's Centres, managers of those facilities be asked to work to encourage teenage parents to attend and access services by making them feel particularly welcome when they do attend.
- 10. Midwives ensure that at the end of the period of midwifery care, a successful transition to health visitor care and other appropriate professionals and services takes place, as well as ensuring that prior to the end of the midwifery care, teenage parents have been given opportunities to engage with Children's Centre services.
- 11. That the Respect Yourself Campaign Co-ordinator be requested to liaise with the Council's Voluntary and Community Sector Relationships Manager to identify any ways in which the Voluntary and Community sector can be utilised to help meet the needs of teenage parents. Particular emphasis should be placed on addressing transport issues and the dissemination of information and advice.
- 12. That the Strategic Director of Children, Young People and Families be requested to write to all secondary schools in Warwickshire reminding them of the need to follow the current, "Supplementary Guidance on the Education of School Age Parents".
- 13. That the Strategic Director of Children, Young People and Families be requested to provide a brief to the Children and Young People and Adult Social Care and Health Overview and Scrutiny Committees on the impact of the raising of the education participation age on teenage parents.
- 14. That the Respect Yourself Campaign Co-ordinator be asked to continue to meet with representatives of midwives, Children's Centres and Connexions to explore ways in which the midwifery referral system can be further enhanced thus ensuring that teenage parents receive all the support they need. Also that the Family Information Service and Children's Centre Managers ensure that outreach workers support teen parents who have been referred to other services, to attend appointments.

Report to OSC 8.12.10.doc

5 of 6



- 15. That in partnership with other statutory and voluntary organisations the County Council through the Respect Yourself Campaign looks at ways in which the voice of teenage parents can continue to be strengthened especially in light of the recent budget cuts' announcements and possible changes to the Youth and Community Service.
- 16. That the Family Information Service be requested to produce a briefing for all members and partner organisations setting out the type of information it holds (and is responsible for) and how it can be accessed.
- 17. Midwifery managers consider the best way of regularly disseminating good practice between themselves, their staff and their partners.

CLLR ANGELA WARNER Chair of Scrutiny Review Task and Finish Group

Shire Hall Warwick



Nuneaton and Bedworth Borough Council, Rugby Borough Council and Warwickshire County Council

Joint Review of Antenatal and Postnatal Services for Teenage Parents in Warwickshire

Autumn 2010

INDEX

Foreword1	
Introduction and Recommendations 2)
The Review Process 2)
Input into the Centre for Public Scrutiny Toolkit 4	•
The Task and Finish Group's Conclusions and Recommendations5	

Foreword by Councillor Angela Warner



Becoming a parent is probably the most significant life-changing experience a person will have. Seemingly overnight the routines we follow daily are turned upside down and for most people this can be traumatic and exciting at the same time. For young mums and dads however the thrill that parenthood should bring can in many instances be offset by anxiety and loneliness.

This review, funded by the Centre for Public Scrutiny (CfPS) as part of its health inequalities initiative, has sought to understand the challenges that teenage parents in Warwickshire face and to appreciate the services that are available to them. The process we have followed and the lessons we have learned are being fed into the CfPS development of a scrutiny toolkit aimed at health inequality.

One outstanding feature of this review is that it has been undertaken collaboratively by three councils Nuneaton and Bedworth Borough Council, Rugby Borough Council and Warwickshire County Council. Such joint working is becoming increasingly important especially if we are to maximise the benefits of what we do and ensure joint service delivery when it is appropriate.

The review has highlighted the differences and similarities between services for teenage parents in different parts of Warwickshire. It is clear from the evidence we have gathered that there is no single model for service delivery that would meet everybody's requirements. The key, however, is to ensure that everyone in Warwickshire (regardless of where they live) is able to access the services to which they are entitled.

I am confident that the conclusions we have reached and the recommendations we have made will help to improve services for teenage parents just at a time when financial constraints are making efficiency and effectiveness the key words of service delivery.

I should like to thank all those people from the councils involved, and outside, who have contributed to this review. Without their support and that of the Centre for Public Scrutiny it would not have been possible.

1.0 Introduction and Recommendations

- 1.1 In the Autumn of 2009 the Centre for Public Scrutiny (CfPS) announced that it was to produce a scrutiny toolkit aimed at informing and supporting any scrutiny review that sought to tackle health inequalities. Resources were made available to pay for four reviews and bids were invited from local councils. Warwickshire County Council along with Rugby Borough Council and Nuneaton and Bedworth Borough Council prepared and submitted a joint bid. (The bid submission document can be found at appendix A of this report).
- 1.2 The focus of the review was to be the antenatal and postnatal services provided for teenage parents in Warwickshire. This subject was selected on the basis of evidence that indicated that whilst a considerable amount of work is being done in Warwickshire to meet the particular needs of teenage parents this is inconsistent both in terms of its quality and distribution across the county. National evidence suggests that a lack of support to teenage parents (who may be highly vulnerable) can result in long term health and well-being problems for them and their children.
- 1.3 In January 2010 the CfPS announced the winners of the bidding process. The joint Warwickshire bid had been successful.
- 1.4 Over the next few months evidence was gathered from a number of sources. A summary of the process undertaken is contained in the following section of this report. The evidence gathering stage lasted until September 2010 and culminated in a major select committee style meeting held in Rugby Town Hall on the 27th of that month.
- 1.5 When the councillors who constituted the task and finish group were satisfied that they had learned as much on the subject as they could they convened to agree their conclusions and recommendations.
- 1.6 This report aims to give the reader a brief overview of the review process before summarising the Task and Finish group's conclusions. For the sakes of brevity the evidence gathered is not reproduced in the report or its appendices. It can, however, be made obtained on request.

2.0 The Review Process

2.1 In July 2009 the Centre for Public Scrutiny launched its Health Inequalities Scrutiny Programme. The aim of this initiative is to "raise the profile of overview and scrutiny as a tool to promote community well-being and help councils in addressing health inequalities within their local community." The programme was funded by the Healthy Communities Programme at Local Government Improvement (formerly the IDeA). One of its main outputs was the establishment of Scrutiny Development Areas. Initially it was envisaged that four areas would be developed, but eventually this was escalated to ten across the country. Local authorities with ideas for scrutiny were invited to bid for support which took the form of funds (up to \pounds 5000) and expert advice (6.5 days of an advisor's time).

- 2.2 Scrutiny officers from Warwickshire County Council, Nuneaton and Bedworth Borough Council and Rugby Borough Council worked together to identify a suitable topic for scrutiny and following discussions with the Respect Yourself Campaign it was agreed that there was a clear need to examine antenatal and postnatal services for teenage parents across Warwickshire. The bid was submitted in December 2009 and in January 2010 the County Council was informed that it had been successful. (The three other district/borough councils in Warwickshire were invited to join the review but for various reasons they declined to do so).
- 2.3 There then followed a lengthy period during which the Task and Finish group was selected from the three Local Authorities. In addition to the elected members, each council supplied an Overview and Scrutiny Officer to support the review. A coordinator from WCC's Respect Yourself Campaign provided support throughout. The elected members from the three councils were,

Warwickshire County Council

Councillor Angela Warner Councillor Carolyn Robbins

Rugby Borough Council

Councillor Noreen New Councillor Clare Watson

Nuneaton and Bedworth Borough Council

Councillor Don Navarro Councillor Tom Wilson

2.4 The early stages of the review were occupied by desk top research and by briefings from the Respect Yourself Campaign Co-ordinator and others. National guidance and the results of major studies were considered at a series of meetings. Armed with an extensive selection of background information the review moved onto its next stage. This took the form of a major select committee style meeting held at the end of September 2010. To that meeting were invited representatives from a range of organisations involved in delivering services to teenage parents. These included midwives, health visitors, Children's Centre managers, those involved in the delivery of education outside of school, information services, Young Parents' Forums leads and Connexions. All "witnesses" were given a good opportunity to share their experiences with the Task and Finish group members and with each other. Detailed questioning provided the elected members with a considerable amount of evidence, the value of which was that it was obtained largely from those delivering services on the ground. Prior to the select committee meeting witnesses were provided with a questionnaire that sought to establish their views regarding opportunities and challenges facing the services they provide. The value of these questionnaires was that when completed they gave the elected members an idea of the areas they might like to explore further in the meeting.

- 2.5 A further component of the review was that members of the Task and Finish group visited Children's Centres to talk to young parents and practitioners. In practice, the young parents tended to be young mothers. The evidence from these visits was rich and varied and was duly fed back to the rest of the group for consideration.
- 2.6 The final stage of the evidence gathering process was a "mopping up" exercise. This was used to fill any remaining gaps in members' knowledge and understanding of the subject. For example, given that the review was intended to look county-wide it was clear after the select committee that some input from midwives in the south of the county, who were unable to attend, would be of benefit. Thus a visit to Warwick Hospital was organised to meet with the Head of Community Midwifery.
- 2.7 Having satisfied itself that it had gathered and considered all the evidence it might require the Task and Finish group set about reaching its conclusions and developing its recommendations. This process took a considerable length of time (five hours spread over two meetings) partly because of the scale and complexity of the evidence considered but principally because of the Task and Finish group's desire to ensure that they arrived at the right recommendations.
- 2.8 At the end of this report the reader will find an action plan. (See Appendix B). This contains all the recommendations with an indication of which organisation or individual will be responsible for implementation of them. This will help with monitoring the implementation of the recommendations whilst ensuring that people know who is responsible for them.

3.0 Input into the Centre for Public Scrutiny Toolkit

3.1 As noted above the review was funded by the Centre for Public Scrutiny with a view to gathering information to be used in the development of a health inequalities scrutiny toolkit. Twice during the course of the review the Task and Finish group was able to contribute to the toolkit development process. Elected Members and officers reflected on the review process to that stage and made suggestions on how future reviews on health inequalities could operate.

- 3.2 The CfPS will combine the intelligence gathered from the scrutiny development areas and will produce its toolkit in the spring of 2011.
- 3.3 It should be noted that as this report is focused on services for teenage parents none of the recommendations refer specifically to future scrutiny of health inequalities or to the toolkit.

4.0 The Task and Finish Group's Conclusions and Recommendations.

4.1 Conclusion 1

4.2 Throughout this review the Task and Finish group has been very aware that most of the evidence it has considered has been anecdotal and subjective. There is very little in the way of strong objective data. National reports such as "Teenage Parents - Next Steps" and local initiatives such as Bigmouth have relied heavily on gathering evidence on the experiences of young parents. Such evidence is useful particularly for a topic such as this where the human dimension is highly significant. Nevertheless the paucity of objective fact-based evidence means that it is difficult to establish accurately whether actions and initiatives being pursued by various agencies are having a positive effect. This is particularly the case during these difficult financial times. If new projects are to be pursued it is essential that evidence exists both of the need for them and ultimately the benefits they have accrued.

Recommendation 1

Those statutory and voluntary organisations that provide services for teenage parents be encouraged to establish objective performance management frameworks with which positive outcomes for teenage parents can be accurately measured.

4.3 Conclusion 2

4.4 National and local evidence make it clear that teenage parents do not always receive the quality of service they would want or require. The task and finish group has gathered a wide range of evidence relating to different services. No single service or provider was highlighted as being inadequate but there is evidence that on occasions teenage mothers feel they are being "talked down to", ignored or made to feel unwelcome. Teenage dads have reported similar experiences. The task and finish group is aware that some teenage parents can present their own challenges to service providers and recognises that the expectations of one will not always match that of another. The key, however, may lie in the collection of feedback from teenage parents. Where this feedback is negative service providers should be prepared to act on it rather than simply ignoring it.

Recommendation 2

That to ensure that they are providing the right services in the best possible way all providers of services for teenage parents actively seek feedback from their customers and act on their findings.

4.5 Conclusion 3

4.6 The task and finish group was impressed by certain aspects of services provided by midwives in Warwickshire. In particular the initiatives currently being pursued by the Providing Information and Positive Parenting Support (PIPPS) team at the George Eliot Hospital in Nuneaton were commended. Whilst the group recognises that it may not be desirable or possible to precisely replicate the model being operated in Nuneaton in other parts of the county it is felt that certain aspects of the PIPPS work should be copied. Children's centres play a key role in terms of the provision of services for teenage parents and this is acknowledged in the recommendation below.

Recommendation 3

That following the lead set by the George Eliot Hospital and the Providing Information and Positive Parenting Support (PIPPS) team based there other hospitals in Warwickshire are encouraged as a minimum to,

a. Identify a member of the community midwifery team to specialise and develop an understanding of the particular needs of teenage parents.

b. Provide as much continuity as possible so that teenage parents have only one or two midwives to get to know.

c. Consider the use of antenatal and postnatal outreach services being delivered from Children's Centres or other community venues.

4.7 Conclusion 4

4.8 The members of the task and finish group have heard on a number of occasions of the particular experiences of teenage fathers. Exclusion and disengagement were common themes. The group is very interested in the strategy for young fathers that the Respect Yourself Campaign is in the process of commissioning. Overview and Scrutiny has a clear role in helping in the development of strategy and for this reason it is felt that the relevant Overview and Scrutiny Committee should be given the opportunity to input into this strategy as it evolves.

Recommendation 4

To help ensure member engagement the Respect Yourself Campaign be requested to consult the Adult Social Care and Health Overview and Scrutiny Committee on the draft strategy for young fathers when it becomes available.

4.9 Conclusion 5

4.10 The value of the Common Assessment Framework is being increasingly acknowledged by practitioners and councillors across the county. However this task and finish group has been concerned to hear that on a number of occasions when Family Support Meetings have been arranged and the Child and Adolescent Mental Health Service has been invited officers from that agency have failed to attend. Non-attendance by an agency can seriously compromise the outcome of the meeting. This in turn undermines the value of the Common Assessment Framework. For this reason the group feels that the Coventry and Warwickshire NHS Partnership Trust (that provides the CAMHS service) should be reminded of the need to attend CAF meetings.

Recommendation 5

The Portfolio Holder for Health writes to the Chief Executive of the Coventry and Warwickshire NHS Partnership Trust with a request that whenever a Common Assessment Framework is undertaken that requires input from the Trust an officer from the Trust (Children and Adolescent Mental Health Services) attends Family Support Meetings. If the Trust is requested to send an officer to a Family Support Meeting but is unable to do so then it is asked to ensure that apologies are provided with the reason for non-attendance.

4.11 Conclusion 6

4.12 Members were very interested to learn of the services provided by Connexions to teenage parents. They were, however, concerned to learn of the recent removal by Connexions of the post of Personal Advisor to Pregnant Teenagers and Teenage Parents. Whilst the group realises that it would not be appropriate to propose a reversal of that decision it does consider that some alternative approach to fill the gap left is now required.

Recommendation 6

That given the decision to remove the post of Personal Advisor for Pregnant Teenagers and Teenage Parents, the Strategic Director for Children, Young People and Families is requested to explore ways in which the gap left by the decision can be filled through work in partnership with other agencies or the voluntary sector.

4.13 Conclusion 7

4.14 During the September select committee meeting the task and finish group was impressed by the Family Nurse Partnership (FNP), its planned work and the rationale behind its creation. The group did, however, wonder how the work of the FNP will fit with that of other organisations and considers that a report on progress will be required.

Recommendation 7

That the Family Nurse Partnership be asked to report in twelve months time to the Adult Social Care and Health Overview and Scrutiny Committee on

- a) progress with this initiative and
- b) how its services complement others.

4.15 Conclusion 8

4.16 As referred to above the Task and Finish group was impressed by the work of the PIPPS team operating from the George Eliot Hospital. It was, however, surprised to learn that a considerable amount of the PIPPS midwives' time is taken up on basic administrative duties. Whilst it would not presume to tell the management of the George Eliot Hospital how to manage its staff the task and finish group feels that it is worth highlighting this matter for consideration by the hospital.

Recommendation 8

In recognition of the excellent work of the PIPPS team, management at the George Eliot Hospital is requested to reflect on whether the midwives that make up the team would be able to deliver more services if the administrative burden currently placed on them was reduced.

4.17 Conclusion 9

4.18 A recurrent theme in this review has been the challenge that young parents have in accessing the services that are available to them. The group is aware that in many instances these people find it a challenge entering a new and strange environment and feel that they will be judged in some way. Members commend the work done at Children's Centres and in recognition of that good work would encourage managers at those centres to do everything they can to welcome teenage parents.

Recommendation 9

Acknowledging the key role played in communities by Children's Centres, managers of those facilities be asked to work to encourage teenage parents to attend and access services by making them feel particularly welcome when they do attend.

4.19 Conclusion 10

4.20 Members acknowledge the major contribution that midwives make to the wellbeing of teenage mothers, and specifically their critical role in ensuring that the transition between antenatal and postnatal care is managed effectively. To this end, they request that midwives ensure that care is in place and continues with health visitors and other appropriate professionals and services. Also that midwives take every opportunity to ensure that teenage parents engage with Children's Centres services.

Recommendation 10

Midwives ensure that at the end of the period of midwifery care, a successful transition to health visitor care and other appropriate professionals and services takes place, as well as ensuring that prior to the end of the midwifery care, teenage parents have been given opportunities to engage with Children's Centre services.

4.21 Conclusion 11

4.22 The voluntary and community sector will play an increasing role in providing a range of community services. Every opportunity should be sought to engage with this sector.

Recommendation 11

That the Respect Yourself Campaign Co-ordinator be requested to liaise with the Council's Voluntary and Community Sector Relationships Manager to identify any ways in which the Voluntary and Community sector can be utilised to help meet the needs of teenage parents. Particular emphasis should be placed on addressing transport issues and the dissemination of information and advice.

4.23 Conclusion 12

4.24 The Task and Finish group acknowledges that the majority of secondary schools are supportive of teenage parents. The Guidance provided to schools regarding their responsibilities towards young (school-age) teenage mothers is quite clear. There is, however, evidence that the degree to which schools adhere to that guidance may

vary. Whilst the Task and Finish group would not attempt to micromanage schools it does feel that they should all make every effort to follow the Guidance.

Recommendation 12

That the Strategic Director of Children, Young People and Families be requested to write to all secondary schools in Warwickshire reminding them of the need to follow the current, "Supplementary Guidance on the Education of School Age Parents".

4.25 Conclusion 13

4.26 There are a range of outstanding questions pertaining to the current proposal to raise the education participation age from 16 to 18. The Task and Finish group is concerned about the potential impact of this on young parents and that the extra support that will be needed, will be in place.

Recommendation 13

That the Strategic Director of Children, Young People and Families be requested to provide a brief to the Children and Young People and Adult Social Care and Health Overview and Scrutiny Committees on the impact of the raising of the education participation age on teenage parents.

4.27 Conclusion 14

4.28 The Task and Finish group has concluded that without an effective referral system many teenage parents will miss out on the services they need. Whilst the system appears generally effective the group feels that certain elements of it need further development. The Respect Yourself Campaign introduced Midwifery Referral Forms to ensure referral between midwives and Connexions and Children's Centres took place. While the three Community Midwifery teams across Warwickshire have put this system in place, the system could be further tightened. In addition, teenage parents may be referred to services but then not attend. While teen parents cannot be forced to attend, the group feels that if support was in place through outreach workers from Children's Centres and Family Information Service, there would be more chance of the referral being successful.

Recommendation 14

That the Respect Yourself Campaign Co-ordinator be asked to continue to meet with representatives of midwives, Children's Centres and Connexions to explore ways in which the midwifery referral system can be further enhanced thus ensuring that teenage parents receive all the support they need. Also that the Family Information Service and Children's Centre Managers ensure that outreach workers support teen parents who have been referred to other services, to attend appointments.

4.29 Conclusion 15

4.30 The group has been very impressed with exercises such as Bigmouth. At the same time it feels that from what it has heard, particularly from young parents themselves, the opportunities to communicate concerns and other views are limited. It is recognised that by their very nature teenage parents do not remain as such for long. However, the group feels that whilst they are under 20 and facing the particular challenges that they do they should be given an opportunity to express their and ideas. The Respect Yourself Campaign has concerns commissioned the Youth and Community Service to start up and run existing Young Parent's Forums (five across the county). These are now operating to varying degrees and are funded until March 2011 at least.

Recommendation 15

That in partnership with other statutory and voluntary organisations the County Council through the Respect Yourself Campaign looks at ways in which the voice of teenage parents can continue to be strengthened especially in light of the recent budget cuts' announcements and possible changes to the Youth and Community Service.

4.31 Conclusion 16

4.32 Elected members were interested to find out about the Family Information Service. They were however concerned that they had not heard of it sooner and felt that more should be done to promote it.

Recommendation 16

That the Family Information Service be requested to produce a briefing for all members and partner organisations setting out the type of information it holds (and is responsible for) and how it can be accessed.

4.33 Conclusion 17

4.34 The group believes that one of the main outcomes from the September select committee meeting was the opportunity witnesses had to share their knowledge and experience. It is clear that professionals working with pregnant teenagers and teenage parents are occupied on a daily basis delivering the services for which they are employed. The group acknowledged that finding time to network and share experience is limited but feels that time invested now would help to avoid problems and duplication of effort later.

Recommendation 17

Midwifery managers consider the best way of regularly disseminating good practice between themselves, their staff and their partners.

APPENDIX A

Supporting Scrutiny - Invitation to bid for Scrutiny Development Area status for the Health Inequalities Scrutiny Programme



WARWICKSHIRE COUNTY COUNCIL, NUNEATON AND BEDWORTH BOROUGH COUNCIL AND RUGBY BOROUGH COUNCIL.

JOINT REVIEW OF ANTENATAL AND POSTNATAL SERVICES FOR TEENAGE PARENTS IN WARWICKSHIRE

Section 1- Details of the lead authority submitting the bid and the contact officer, details of partner organisations, management and governance arrangements for the project.

Lead Authority	Warwickshire County Council				
Lead Authority Contact	Paul Williams Overview and Scrutiny Officer Warwickshire County Council Customers, Workforce and Governance Directorate PO Box 34 Shire Hall Warwick CV 34 4RR				
	Tel -	01926 418196			
	e-mail -	paulwilliamscl@warwickshire.gov.uk			
Partner Organisations	Nuneaton and Bedworth Borough Council Contact – Shirley Round, Principal Democratic Servic Officer (Overview & Scrutiny) Rugby Borough Council Contact – Paul Ansell, Scrutiny and Policy Officer Respect Yourself Campaign Team Contact: - Kathy Siddle, Respect Yourself Campaign ordinator				

Management and Governance Arrangements for the Project

The project will be overseen by Warwickshire County Council as the lead authority.

Although to be finalised it is anticipated that the review will be undertaken by a panel comprising at least two elected members from each of the three partner authorities. In identifying these members the principal considerations will be whether they have an interest in the topic area and a desire to bring about a positive improvement to the lives of those young people who might otherwise miss out on the services they require.

In the case of Warwickshire County Council it is likely that elected members will be selected from the Health Overview and Scrutiny Committee and the Children Young People and Families Overview and Scrutiny Committee. Member representatives from Nuneaton and Bedworth Borough Council and Rugby Borough Council will be drawn from appropriate committees to be agreed.

Support for the member panel will be provided by the Overview and Scrutiny Officers from the three partner authorities.

On completion of the review the panel will report to the appropriate decision making bodies of the three authorities. It is expected that the Executive body of each of the three authorities will be asked to approve the panel's recommendations with a view to their implementation.

Section 2- Details of the proposed project

A – What is the Topic Area?

The review will focus on current provision of antenatal and postnatal services for teenage parents in Warwickshire. Members and officers of the three partner authorities have based their choice of topic on the following:-

- According to the Department of Health in September 2008 there were 425 young parents in Warwickshire. Many but not all of these young people live in the north of the county.
- Anecdotal evidence from young people indicates that in a number of instances the antenatal and postnatal services available to them are either not known, inadequate or unattractive.
- It is recognised by Warwickshire's Respect Yourself Campaign that
 - Teenage parents have particular needs that older parents do not.
 - Whilst in one area of the county provision is being made to accommodate those specific needs the rest of Warwickshire is not well provided for.

B - Why this Topic is considered Important

The three partner authorities acknowledge that both nationally and locally some work has been done to develop an understanding of the challenges facing teenage parents. The 2007 report Teenage Parents Next Steps (Dept. of Health) identifies three areas where teenage parents and their children are disadvantaged. These are,

- Poor Child Health Outcomes
 - Teenage parents frequently book late for antenatal care (on average at 16 weeks gestation).
 - Many teenage mothers smoke through pregnancy. This compares poorly with older mothers including those in lower socio-economic groups.
 - Breastfeeding rates are around a third lower than the average for all mothers.
 - The incidence of infant mortality amongst young parents is 60% higher than rates for children born to mothers aged 20-39.
 - Children born to teenage mothers are more likely to be born preterm with a 25% higher risk of low birth weight.
- Poor Emotional Health and Wellbeing
 - Teenage mothers have high rates of poor mental health after birth compared to older mothers.
 - 61% of teenage mothers live alone. The lack of a strong emotional relationship with a partner can contribute to a young mother's poor emotional health and well-being.
- Poor Economic Wellbeing
 - Of the 294 young parents known to the Warwickshire Connexions Service in September 2008 51.7% were not in education, employment or training.
 - In April 2001 (at the time of the last Census) 40% of teenage mothers who had given birth in the last three years still had no qualifications.
 - Young parents are 20% more likely to be living in poverty than older parents.
 - Children born to teenage parents have a 63% higher risk of living in poverty compared to babies born to mothers in their twenties.

It is acknowledged that the incidence of unplanned and teenage pregnancies and deliveries occur in areas of high deprivation. In one such area in Warwickshire, Nuneaton and Bedworth additional support is now provided to meet the needs of young parents. However, this prompts the three key questions that drive the need for this review,

- 1. Are the bespoke services provided in Nuneaton and Bedworth sufficient to meet the needs of teenage parents in that area?
- 2. In recognition of the benefits for young parents of services aimed at their specific needs what lessons can be learned from the experience of those delivering and receiving the services in question?

3. How do we address the inequality resulting from the fact that services available in one part of Warwickshire are not readily available to all young parents in the county?

In 2008 the Respect Yourself Team in Warwickshire undertook a consultation exercise with young parents to help develop their understanding of the challenges they face both before and after the birth of the child. The consultation was called "BIGMOUTH!". That consultation resulted in a report and a series of recommendations aimed largely at the interface between young parents and service providers. The consultation was of significant interest because it drew directly on the experiences of those young parents who were prepared to share their views. However, by its nature the BIGMOUTH! consultation relied heavily on anecdotal evidence.

The review that funding from the CfPS will support will be broader in that it will involve elected members (vital if political support is to be given to the implementation of any recommendations), practitioners from local authorities and the health economy and representatives from the voluntary and community sector.

A decision will be required as to whether young parents will be called on again to share their experiences. The BIGMOUTH! reports provide much of the evidence that might be required from young parents. If they are to be engaged with, it may be as recommendations are being considered.

The overall aim of the review is to improve the health and well being of all young parents and their children in Warwickshire. The review will do this by

- Considering opportunities for greater partnership working by public agencies and the voluntary and community sector.
- Reviewing the role of local authorities in disseminating information to young parents and providing venues for the delivery of services and advice to them.
- Improving our appreciation of the challenges facing young parents and the long term effects of a lack of awareness and support on their health and well-being as well as that of their children.
- Developing an enhanced understanding of the distribution of young parents and an appreciation of the particular challenges being confronted by young parents in areas not currently supported by bespoke services
- The development of a series of recommendations aimed at reducing health inequalities across the whole of Warwickshire.

Warwickshire as Scrutiny Development Area

It is considered that when completed the review will provide a good example of how working in partnership can bring about positive outcomes for people from all communities.

C - Who the Partnership will Involve

A final list of those to be included in the review would be developed as the project is scoped. However the following are provisionally suggested.

NHS Warw	vickshire		LINks	Youth and Community Service
Town Councils	and	Parish	Voluntary organisations	School representatives
Teenage	parents		Respect Yourself Campaign	Health Workers

D - How the Partnership will run the Review

The review will be undertaken by the member panel. It will be divided into five stages common to most scrutiny reviews. These are,

1. Scoping – The panel will need to agree the aims and objectives of the review along with key lines of inquiry, who it wishes to speak to and when it has to be undertaken by. This process is the key to a successful review and whilst its conclusions will not need to be adhered to rigidly it will form the basis of everything that comes afterwards. It is important at this stage to identify tangible improvements that the review seeks to achieve along with ambitious targets.

2. Evidence Gathering – This will potentially be the most time consuming element of the review. It will be necessary to ensure that the right people are invited to engage in the process. It may be that some people or agencies will be reluctant to become involved but it will be the task of the panel and supporting officers to ensure that no valuable source of information remains untapped.

Methods for evidence gathering may include:

- Select committee style meeting(s)
- Focus group event(s)
- The use of internet forums/Facebook/Twitter/websites/texting

3. Drawing Conclusions and Making Recommendations - Once it has gathered the evidence it needs the group will be required to arrive at its conclusions and produce its recommendations.

4. Implementation and follow-up - Any recommendations, once agreed, will need to be implemented. To assist this process it will be necessary to develop an action plan listing what needs to be done, by when and by whom. A key element to this action plan will be recognition of the cost of any initiatives to be followed.

Progress with implementation will be monitored initially by the review group and then by practitioners. A post review evaluation will be undertaken after 18 months to establish the positive benefits it has brought about.

Every effort will be made to ensure that learning points from this process will be disseminated to people and agencies involved with this topic. The report will also be placed in the CfPS library for the use of other Overview and Scrutiny officers and members.

When will the review be undertaken?

The programme for the review is:-

Scope	February 2010
Evidence gathering	March 2010 to October 2010
Conclusions/Report	November 2010

Section 3 – How the Project Meets the Evaluation Criteria

1. It is hoped that all questions have been answered satisfactorily.

2. Section 2(D) above lists some of the approaches to be pursued. Because this topic area covers a broad spectrum of organisations it will be necessary to utilise a range of approaches to engage with them.

3. This bid is founded on the understanding that a teenager should, with the right information and support be able to manage parenthood. In addition it recognises that the pressures that parenthood can bring are likely to be attended by health and economic problems.

4. Warwickshire County Council has previously demonstrated its commitment to the completion of reviews supported by the Centre for Public Scrutiny. All three partner authorities have a good track record of successful scrutiny as evinced in the CfPS library.

5. It is expected that partner agencies, that are already working closely together, will use this process and the learning points from it to develop their independent and joint scrutiny functions further.

Project element	Forecast Cost			
Select Committee meeting	£600			
Focus group events	£1200			
Meetings with young parents (?)	£500			
Publication of panel Report	£1000			
Total	£3300			

Section 4 – Project Costs

APPENDIX B

Joint Review of Antenatal and Postnatal Services for Teenage Parents in Warwickshire

Action Plan November 2010

Reco	ommendation	Responsible Officer or Agency	Implementation date	Comments
1.	Those statutory and voluntary organisations that provide services for teenage parents be encouraged to establish objective performance management frameworks with which positive outcomes for teenage parents can be accurately measured.		December 2010	One off letter to accompany copy of report
2	That to ensure that they are providing the right services in the best possible way all providers of services for teenage parents actively seek feedback from their customers and act on their findings.		December 2010	One off letter to accompany copy of report
3	That following the lead set by the George Eliot Hospital and the Providing Information and Positive Parenting Support (PIPPS) team based there, other hospitals in Warwickshire are encouraged as a minimum to, a. Identify a member of the community midwifery team to specialise and develop an		December 2010	One off letter to accompany copy of report

	understanding of the particular needs of teenage parents. b. Provide as much continuity as possible so that teenage parents have only one or two midwives to get to know. C. Consider the use of antenatal and postnatal outreach services being delivered from Children's Centres or other community venues.			
4	To help ensure member engagement, the Respect Yourself Campaign be requested to consult the Adult Social Care and Health Overview and Scrutiny Committee on the draft strategy for young fathers when it becomes available.	Respect Yourself Campaign	As appropriate From April 2011	Date of first draft of strategy by 31 Mar 2011
5	The Portfolio Holder for Health writes to the Chief Executive of the Coventry and Warwickshire NHS Partnership Trust with a request that whenever a Common Assessment Framework is undertaken that requires input from the Trust an officer from the Trust (Children and Adolescent Mental Health Services) attends Family Support Meetings. If the Trust is requested to send an officer to a	Portfolio Holder for Health	December 2010	Progress to be monitored via CAF Co- ordinator

	Family Support Meeting but is unable to do so then it is asked to ensure that apologies are provided with the reason for non-attendance.			
6	That given the decision to remove the post of Personal Advisor for Pregnant Teenagers and Teenage Parents the Strategic Director for Children, Young People and Families is requested to explore ways in which the gap left by the decision can be filled through work in partnership with other agencies or the voluntary sector.	Children, Young People and Families	March 2011	
7	That the Family Nurse Partnership be asked to report in twelve months time to the Adult Social Care and Health Overview and Scrutiny Committee on a) progress with this initiative and b) how its services complement others.	Family Nurse Partnership	December 2011	Briefing note should suffice. Subject to wish of committee chair.
8	In recognition of the excellent work of the PIPPS team, management at the George Eliot Hospital is requested to reflect on whether the midwives that make up the team would be able to deliver more services if the administrative burden currently placed on them was reduced.	George Eliot Hospital NHS Trust	As appropriate	
9	Acknowledging the key role played in communities by Children's Centres,		As appropriate	RYC to commission Mystery Shopping of remaining (N & B already carried out)

	managers of those facilities be asked to work to encourage teenage parents to attend and access services by making them feel particularly welcome when they do attend.	People and Families Head of Early Years and Children's Centre Area Managers		Children's Centres by 31 March 2011 if funding available. This should highlight where Centres have carried out this action.
10	Midwives ensure that at the end of the period of midwifery care, a successful transition to health visitor care and other appropriate professionals and services takes place, as well as ensuring that prior to the end of the midwifery care, teenage parents have been given opportunities to engage with Children's Centre services.	at GEH, Warwick and Rugby (via	As appropriate	
11	That the Respect Yourself Campaign Co-ordinator be requested to liaise with the Council's Voluntary and Community Sector Relationships Manager to identify any ways in which the Voluntary and Community sector can be utilised to help meet the needs of teenage parents. Particular emphasis should be placed on addressing transport issues and the dissemination of information and advice.	Campaign Co-	January 2011	
12	That the Strategic Director of Children, Young People and Families be requested to write to all secondary schools in Warwickshire reminding them of the need to follow the current,	5	January 2011	

	"Supplementary Guidance on the			
	Education of School Age Parents".			
13	That the Strategic Director of Children,	Strategic Director of	March 2011	
	Young People and Families be	Children, Young		
	requested to provide a brief to the	People and Families		
	Children and Young People and Adult			
	Social Care and Health Overview and			
	Scrutiny Committees on the impact of			
	the raising of the education			
	participation age on teenage parents.			
14	That the Respect Yourself Campaign	Respect Yourself	December 2011	RYC Coordinator meet with the three
	Co-ordinator be asked to continue to	Campaign Co-		Community Midwifery Managers, attend
	meet with representatives of midwives,	ordinator		a county Children's Centre meeting and
	Children's Centres and Connexions to			liaise with Connexions.
	explore ways in which the midwifery			
	referral system can be further			One off letter to go to Children's Centre
	enhanced thus ensuring that teenage			Area Managers and Family Information
	parents receive all the support they			Service
	need. Also that the Family Information			
	Service and Children's Centre			
	Managers ensure that outreach			
	workers support teen parents who			
	have been referred to other services,			
	to attend appointments.			
15	That in partnership with other statutory	Respect Yourself	March 2011	
	and voluntary organisations the	Campaign Co-		
	County Council through the Respect	1 0		
	Yourself Campaign looks at ways in			
	which the voice of teenage parents			
	can continue to be strengthened			
	especially in light of the recent budget			
	cuts' announcements and possible			
			1	

	changes to the Youth and Community Service.			
16	That the Family Information Service be requested to produce a briefing for all members and partner organisations setting out the type of information it holds (and is responsible for) and how it can be accessed.	Service	March 2011	
17	Midwifery managers consider the best way of regularly disseminating good practice between themselves, their staff and their partners.	with Respect	December 2011	

AGENDA MANAGEMENT SHEET

Name of Committee Date of Committee	Adult Social Care And Health Overview And Scrutiny Committee 8 December 2010				
Report Title	Work Programme				
Summary	This report contains the Work Programme for the Adult Social Care and Health Overview and Scrutiny Committee				
For further information please contact:	Michelle McHugh Overview and Scrutiny Manager Tel: 01926 412144 michellemchugh@warwickshire.gov .uk Ann Mawdsley Principal Committee Administrator Tel: 01926 418079 annmawdsley@warwick .gov.uk				
Would the recommended decision be contrary to the Budget and Policy Framework?	No.				
Background papers	None				
CONSULTATION ALREADY U	NDE	RTAKEN:- Details to b	e specified		
Other Committees					
Local Member(s)		N/A			
Other Elected Members					
Cabinet Member					
Chief Executive					
Legal					
Finance					
Other Strategic Directors					
District Councils					
Health Authority					

Police	
Other Bodies/Individuals	
FINAL DECISION NO	
SUGGESTED NEXT STEPS:	Details to be specified
Further consideration by this Committee	
To Council	
To Cabinet	
To an O & S Committee	
To an Area Committee	
Further Consultation	

Agenda No

Adult Social Care and Health Overview and Scrutiny Committee - 8 December 2010

Work Programme

Report of the Chair of the Adult Social Care and Health Overview and Scrutiny Committee

Recommendation

The Committee is recommended to agree the work programme, to be reviewed and reprioritise as appropriate throughout the course of the year.

1. Summary

The Committee's Work Programme is attached as Appendix A. The Work Programme will be reviewed and reprioritised throughout the year so that the Committee can adopt a flexible approach and respond to issues as they emerge.

CLLR CABORN Chair of the Adult Social Care and Health Overview and Scrutiny Committee

Shire Hall, Warwick, 27 August 2010



Work Programme for Adult Social Care and Health Overview and Scrutiny Committee 2010/11

MEETING DATE	ITEM AND RESPONSIBLE OFFICER	OBJECTIVE OF SCRUTINY	Performance Management	Holding Executive to Account	Policy Review/Development	Overview	Raising Levels of Educational Attainment	Maximising independence for older people and adults with disabilities.	Developing sustainable places and communities	Protecting the Community and making Warwickshire a safer place to live	Cross cutting themes/ LAA
8 Dec 2010, 2pm	Questions to the Portfolio Holder	Committee to put questions to the Portfolio Holder									
	Report of the Ante- natal and post- natal services for Teenage Parents Joint Scrutiny Review	To consider the proposed recommendations from the review			~						
	Annual Performance Assessment (Adult Social Care) ratings 2009/10 (Andrew Sharp)	The Care Quality Commission (CQC) undertake an annual performance assessment of all local authorities with adult social care responsibilities. The purpose of this assessment is to test the quality and effectiveness of the services provided and commissioned for adults in receipt of social care. The result of the annual assessment for the performance and financial year 2009/10 will be released by the CQC in November 2010.						High			
		The results of the APA will provide a judgment of the quality of adult social care services overall and specific levels of performance against a range of outcomes for our customers.									
	Long-term reduction in acute beds, Paul Maubach (NHS Warwickshire)	To consider NHS Warwickshire's approach to reducing the demand for hospital beds						High			

MEETING DATE	ITEM AND RESPONSIBLE OFFICER	OBJECTIVE OF SCRUTINY	Performance Management	Holding Executive to Account	Policy Review/Development	Overview	Raising Levels of Educational Attainment	Maximising independence for older people and adults with disabilities.	Developing sustainable places and communities	Protecting the Community and making Warwickshire a safer place to live	Cross cutting themes/ LAA
	NHS Update Paul Maubach (NHS Warwickshire)	Update on NHS progress made following decisions to reduce activity and commissioning plan for 2011/12									
	Dementia Strategy, Jon Reading, Lead Commissioner – Mental Health	Jon Reading to give a verbal update on the proposed Dementia Strategy			~			High			
24 Jan 2011	Questions to the Portfolio Holder	Committee to put questions to the Portfolio Holder									
	LINks –Progress Report, Councillor Roodhouse and Nick Gower- Johnson)	To consider the work and progress of the LINk and their future	~			~		Med			
	The future of WCC's residential care homes for older people, Ron Williamson	To consider the outcomes of the consultation on the future of WCC's residential care homes for older people, prior to Cabinet consideration.		~	~			High			
	Adult Social Care Prevention Services, Cllr Watson	To consider the final report and recommendations from the Task and Finish Group established to scrutinise Adult Social Care Prevention services			~			High			
	Bramcote Hospital - Consultation	Update from NHS Warwickshire on outcome of consultation									
13 th April 2011	Questions to the Portfolio Holder	Committee to put questions to the Portfolio Holder									
	Virtual Wards	Virtual Wards NHS Warwickshire									

MEETING DATE	ITEM AND RESPONSIBLE OFFICER	OBJECTIVE OF SCRUTINY	Performance Management	Holding Executive to Account	Policy Review/Development	Overview	Raising Levels of Educational Attainment	Maximising independence for older people and adults with disabilities.	Developing sustainable places and communities	Protecting the Community and making Warwickshire a safer place to live	Cross cutting themes/ LAA
	NHS Transformation	Update on the Transformation of the NHS									
	West Midlands Ambulance Service	Update on the implementation of the re- modernisation programme									
	Personalisation and Budgets	Update on progress									
	Orthopaedic Surgery	Plan for Financial Year from April 2011 following decisions to reduce activity and commissioning plan for 2011/12									
22 nd June 2011	Questions to the Portfolio Holder	Committee to put questions to the Portfolio Holder									
7 [™] Sept 2011	Questions to the Portfolio Holder	Committee to put questions to the Portfolio Holder									
	Orthopaedic Surgery	Retrospective Update on implementation of Plan for Financial Year from April 2011 following decisions to reduce activity and commissioning plan for 2011/12									
19 th Oct 2011	Fairer Charging and Contributions, Ron Williamson	To consider impact of changes to charges and contributions						High			
Dates to be set	Learning Disability Consultation	Requested by the Committee on 12/10/10									
	Hospital Discharge and Reablement	Report and Recommendations of the Task and Finish Group									

BRIEFING NOTES								
Excess Winter Deaths and Fuel Poverty	Update on summit (Cllr Clare Watson)							
Lighthorne Heath GP	To update the committee on progress in Lighthorne Heath Surgery (Rachel Pearce, NHS Warwickshire)	Requested by end of Sept						
Older Adults Mental Health Services in Rugby	To receive an update on the implementation and impact of changes to older adult mental health services in Rugby and impact of changes for services in Nuneaton (Stanely and Pembleton)	Requested by the end of Nov						
West Midlands Ambulance Service – re- modernisation	To receive an update on the implementation of the re-modernisation programme (requested at meeting on 12/10/10)	Requested by end of Jan 2011						
Virtual Wards	General background and progress Reports on pilots (Rachel Pearce) (requested at meeting on 3/11/10)	Requested by end of Jan 2011						