# Adult Social Care and Health Overview and Scrutiny Committee

# 24 January 2018



A meeting of the Adult Social Care and Health Overview and Scrutiny Committee will be held at the **SHIRE HALL, WARWICK on Wednesday, 24 January 2018 at 11.00a.m.** 

Please note that this meeting will be filmed for live broadcast on the internet. Generally, the public gallery is not filmed, but by entering the meeting room and using the public seating area you are consenting to being filmed. All recording will be undertaken in accordance with the Council's Standing Orders.

The agenda will be: -

### 1. General

- (1) Apologies
- (2) Disclosures of Pecuniary and Non-Pecuniary Interests Members are required to register their disclosable pecuniary interests within 28 days of their election of appointment to the Council. A member attending a meeting where a matter arises in which s/he has a disclosable pecuniary interest must (unless s/he has a dispensation):
  - Declare the interest if s/he has not already registered it
  - Not participate in any discussion or vote
  - Must leave the meeting room until the matter has been dealt with
  - Give written notice of any unregistered interest to the Monitoring Officer within 28 days of the meeting

Non-pecuniary interests must still be declared in accordance with the Code of Conduct. These should be declared at the commencement of the meeting.



### (3) Chair's Announcements

### (4) Minutes of previous meetings

To confirm the minutes of the meeting held on 22 November 2017.

# 2. Public Speaking

Any member of the public who is resident or working in Warwickshire, or who is in receipt of services from the Council, may speak at the meeting for up to three minutes on any matter within the remit of the Committee. This can be in the form of a statement or a question. If you wish to speak please notify Paul Spencer in writing at least two working days before the meeting. You should give your name and address and the subject upon which you wish to speak. Full details of the public speaking scheme are set out in the Council's Standing Orders.

# 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 Les Caborn (Adult Social Care and Health) and Councillor Jeff Morgan (Children's Services) on any matters relevant to the remit of this Committee.

# 4. Delayed Transfers of Care

To provide the Committee with an update and presentation on the work taking place to reduce delayed transfers from NHS to social care.

# 5. Work Programme

This report reviews the recent work of the Adult Social Care and Health Overview and Scrutiny Committee and seeks the Committee's views on the proposed forward work programme.

# 6. Any Urgent Items

Agreed by the Chair.

DAVID CARTER Joint Managing Director



#### Adult Social Care and Health Overview and Scrutiny Committee Membership

Councillors Mark Cargill, Neil Dirveiks, Clare Golby (Vice Chair), Anne Parry, Dave Parsons, Wallace Redford (Chair), Kate Rolfe, Andy Sargeant, Jill Simpson-Vince and Adrian Warwick.

**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 Margaret Bell Councillor Jill Sheppard Councillor Belinda Garcia Councillor Christopher Kettle Councillor Pamela Redford

Portfolio Holders:- Councillor Les Caborn (Adult Social Care and Health) Councillor Jeff Morgan (Children's Services)

General Enquiries: Please contact Paul Spencer on 01926 418615 E-mail: paulspencer@warwickshire.gov.uk

\* The agenda for this meeting includes item 4 that relates solely to adult social care.



#### Minutes of the meeting of the Adult Social Care and Health Overview and Scrutiny Committee held on 22 November 2017

#### Present:

#### Members of the Committee

Councillors Mark Cargill, Neil Dirveiks, Clare Golby (Vice Chair), Anne Parry, Dave Parsons, Wallace Redford (Chair), Jerry Roodhouse, Andy Sargeant, Jill Simpson-Vince and Adrian Warwick

#### Other County Councillors

Councillor Les Caborn, Portfolio Holder for Adult Social Care and Health Councillors Richard Chattaway and Alan Webb

#### **District/Borough Councillors**

Councillor Margaret Bell (North Warwickshire Borough Council) Councillor Pamela Redford (Warwick District Council)

#### Officers

Elizabeth Abbott, Business Partner - Planning, Performance & Improvement Dr John Linnane, Director of Public Health Pete Sidgwick, Head of Social Care and Support Sushma Soni, Performance & Improvement Officer (Policy Lead) Paul Spencer, Senior Democratic Services Officer

#### Also Present:

Chris Bain, Chief Executive, Healthwatch Warwickshire Matt Gilks, Warwickshire North and Coventry & Rugby Clinical Commissioning Groups (CCG)

Anna Hargrave, South Warwickshire CCG Jenni Northcote, Warwickshire North and Coventry & Rugby CCG

#### 1. General

The Chair welcomed everyone to the meeting.

#### (1) Apologies for absence

Councillors Christopher Kettle (Stratford District Council), Jeff Morgan (Portfolio Holder for Children's Services), Kate Rolfe (replaced by Councillor Jerry Roodhouse) and Jill Sheppard (Nuneaton & Bedworth Borough Council).

#### (2) Members Declarations of Interests

Councillor Margaret Bell declared a non-pecuniary interest as a member of the Warwickshire Health and Wellbeing Board. Councillor Jerry Roodhouse declared a non-pecuniary interest as a director of Healthwatch Warwickshire.

#### (3) Chair's Announcements

The Chair reminded members of the stand in the Ante Chamber to update on See, Hear, Act and its formal launch which would run from 27 November to 1 December. He spoke about the Care Quality Commission (CQC) review of

the Coventry and Warwickshire Partnership Trust. He had recently attended a quality summit where the CQC had presented its report. The Trust had remained at an overall level of 'Requires Improvement' and there were a number of areas deemed inadequate. He urged members to read the documents, copies of which had been placed in the group rooms. The Chair gave an update on the Joint Health Overview and Scrutiny Committee (JHOSC), working with Coventry City Council. A formal meeting of the JHOSC had been scheduled for 15 January 2018 at Coventry. Finally, he referred to a review of community dental services and asked that copies be provided to the Committee.

#### (4) Minutes

The minutes of the Adult Social Care and Health Overview and Scrutiny Committee held on 13 September 2017 were agreed as a true record and signed by the Chair.

#### 2. Public Question Time

None.

#### 3. Questions to the Portfolio Holders

In response to a question about flu vaccination, Dr John Linnane, Director of Public Health provided an update. He drew a comparison to the winter flu outbreak in Australia and if the same proportion of people caught flu in the United Kingdom, there could be ½ million cases this year. All NHS staff were being encouraged to have the vaccination. He urged elected members and the general public to have a flu vaccination.

# 4. One Organisational Plan (OOP) Quarterly Progress Report: April-September 2017

Elizabeth Abbott gave a presentation to the Committee, to provide a context on the Committee's performance management role in monitoring the OOP. The presentation covered the following areas:

- Context of OOP 2020 and Key Areas of focus
- Service Redesign
- Making Warwickshire the best it can be: A new conversation
- Towards an integrated health and care model
- Children and families a vision for the future
- Developing Community Capacity 2017-2020
- Making information and advice freely available
- OOP 2020 budget
- Overlap of savings plans
- OOP 2020 performance reporting and that for the Adult Social Care Overview and Scrutiny Committee
- Demand key business measures and total service users
- Delayed transfers of Care

Sushma Soni, Performance and Improvement Officer (Policy Lead) introduced the report. The quarter two report had been considered by Cabinet on 9 November and this report focussed on the 12 key business measures (KBM) within the Committee's remit. The report had been tailored in response to previous requests from the Committee. She referred members to an appendix showing performance for the key areas of Adult Social Care and Health and Wellbeing. An explanation was given on the data provided, which reported the quarter two position and predicted year end position, but also had to be viewed against the three year context of the OOP and how the Council was responding to the challenges it faced.

Pete Sidgwick, Head of Social Care and Support provided further information about this service area, in relation to the other performance monitoring indicators it was measured against. There were numerous influences on performance for some areas, with delayed transfers of care being used to demonstrate this particularly. He spoke of the departmental budget of £140 million, including the funding received from the Better Care Fund and the improved performance from that shown in the report on delayed transfers of care.

Dr John Linnane similarly spoke about the performance aspects within his department's remit. It was hard to demonstrate health and wellbeing within these six KBM's, which were aggregated from over 140 measures the department was monitored against. He referred to the graphs within the KBM scorecard section, commenting on the worsening position in respect of child obesity, alcohol related hospital admissions and those for self-harm in children. These were following the national trend. An area of significant reduction was the percentage of people smoking during pregnancy.

Members submitted questions and comments on the following areas, with responses provided as indicated:

- It was questioned how this report could be tailored for the public and whether the objective of 'Making Warwickshire the best it can be' was positive enough.
- Reducing the number of people in hospital who didn't need to be there. Improvements were being made to reduce delayed discharges, but there were increasing numbers of people presenting at acute hospitals. It was stated that delayed transfers of care was an important area and the Committee should monitor progress on reducing discharge times.
- Reference was made to the revised Child and Adolescent Mental Health Service (CAMHS) and cases of self-harm, which should also be an area for the Committee to retain a focus on.
- The report included a statement on ambitions and priorities, with one stating support for communities and individuals and priority focussed on the most vulnerable. A member expressed a view that the statement was not transparent when compared to the budget position, with reduced revenue support grant and more reliance on local taxation, which impacted on the most vulnerable. An example was used of the increasing demand for food banks.
- Comment was made about the many challenges the County Council was facing and a statement that the current budgets should be reviewed. It was considered the OOP report should be scrutinised before its submission to Cabinet. The Chair agreed to take the suggestion on the timing of the OOP report coming to scrutiny to the next Chair and Party Spokesperson meeting.

- Reference was made to the public satisfaction survey conducted every two years. It was felt public satisfaction levels should be reflected in the performance report.
- On teenage conception, it was questioned if the data was available by locality and whether there were any social factors or trends. John Linnane confirmed that the Nuneaton and Bedworth area was consistently the highest area for teenage conception rates in Warwickshire, although the rate had reduced slightly. He agreed to send the Committee more information on teenage pregnancy rates. It was noted that the data on smoking in pregnancy did not include e-cigarettes.
- It would be useful for members to publicise the local health check offer shown in the KBM. Further information on health checks would be provided to the Committee.
- Discussion about the school health and wellbeing service. The Director of Public Health offered to recirculate a briefing on this service.
- The trend data in the report was welcomed. It was noted that the lengths of time people were living in a residential or nursing care home was increasing and this was suggested as an area the Committee may wish to look at in more detail.
- There was a social care implication where the aging parents of children who had a disability or learning difficulty died, or they were no longer able to look after their children.
- It was questioned if there was data on 'hot spots' for areas with higher levels of self-harm. This was an issue that would similarly be raised at the Children and Young People OSC.
- Comparing performance data against that for the Health and Wellbeing Board and CCGs would give a strategic view.

The Chair noted the suggestions made for further areas of scrutiny review or briefings.

#### Resolved

That the Committee notes the progress of the delivery of the One Organisational Plan 2020 for the quarterly period of April-September 2017.

#### 5. Commissioning Intentions

The Chair welcomed Anna Hargrave of South Warwickshire Clinical Commissioning Group (CCG) and Matt Gilks and Jenni Northcote of Warwickshire North and Coventry & Rugby CCGs. The Committee received a report which gave a context and background information about CCGs and the NHS Five Year Forward View. It explained local strategic plans and operational plans, before reporting on the process of developing commissioning intentions. In addition to the report, the Committee received two presentations, the first from Anna Hargrave, which covered the following areas:

- Objectives
- Context
- Cross Cutting Themes
- Development Process
- Focus Areas for 2018-19:
  - o Out of Hospital Cornerstone

- o Personalisation Cornerstone
- Specialist Provision Cornerstone
- Delivering Today Cornerstone

Members submitted questions and comments on the following areas, with responses provided as indicated:

- Members discussed the development of the commissioning intentions. The intentions were developed in the summer. There was a limited consultation period which fell during August, when people took holidays. The commissioning intentions were revised in line with NHS England guidance in December to become the operating plan. This timing was required to give service providers six months' notice of changes.
- The ability to tailor services. Examples were how delivery of services was shaped at the weekends to reduce demands on primary care on the Monday morning.
- Could CCGs be more proactive in keeping councils informed? The commissioning intentions were submitted to the Health and Wellbeing Board for sign off. This Committee had its own work programme and could feed in to the commissioning intentions.
- More information on the four cornerstones would be helpful. There was a detailed commissioning intentions document with this detail, a copy of which was included in the agenda.
- There was a sense that the Committee could be more involved as well as the Health and Wellbeing Board, in contributing in the early design stages of the commissioning intentions.
- Demonstrating the shift of emphasis and funding from delivering acute services to the prevention agenda. There were some funding strands on education and support, with work on diabetes and the out of hospital work also referenced. It was accepted that more could be done. This could be an area for further scrutiny and having a shared strategy and honest conversations would be helpful.
- Chris Bain of Healthwatch Warwickshire spoke of the need for clarity on the pressures being faced at the national, regional and local levels. From the Healthwatch perspective, an assurance was needed that patient needs were reflected and integrated with the Sustainability and Transformation Plan and the plans of service providers, so the population's needs were met, both now and in the future. He emphasised the roles that local authorities and the third sector had to play. On public engagement in commissioning intentions he made an offer of Healthwatch assistance to deliver this. There were issues around delayed transfers of care, end of life care and transport which this committee was well placed to assist in reviewing.

Matt Gilks provided the presentation for the Warwickshire North and Coventry and Rugby CCGs, which covered the following areas:

- What are commissioning intentions
- The annual commissioning cycle
- The services commissioned
- Sustainable local health system
- The areas served
- Aligning with the local health economy
- Strategic work programmes
- Aligning with health and wellbeing priorities

- Engagement with the population and partners
- The People's Commission
- Highlights of engagement by work programme
- Engagement methodology

Members submitted questions and comments on the following areas, with responses provided as indicated:

- It was agreed that the CCGs could engage with the Committee at an earlier stage in the development of their commissioning intentions.
- Reference was made to the Committee's current review of GP services, the issues affecting this primary care area and further information was provided on how commissioners were responding to workforce challenges.
- There was frustration over the delays in commencing the formal consultation on the stroke service reconfiguration, which had been ongoing for 18 months. Similar views were reported in relation to the CAMHS service. It was confirmed that the work programmes were aligned to health and wellbeing priorities and progress was being made both on CAMHS and the out of hospital work. However, there was a need to engage better with the Committee.
- Substantial housing development would take place in the County over the years ahead, which would increase service demands, with GP services used as an example. This was a recognised issue and would require more than just additional GPs. Different ways of working would be needed, for example upskilling nurse practitioners. A briefing note was requested on the current work that the CCG was doing in this regard.
- A point was made about the level at which the Committee should scrutinise health services, with a comparison to the role of the Health and Wellbeing Board and whether this Committee should hold that Board to account.
- Increases to the costs of some prescription drugs and the monitoring arrangements in place to challenge where such price rises were deemed excessive.

#### Resolved

That the Committee notes the report and the presentations.

#### 6. Work Programme Report of the Chair

The Committee gave consideration to its work programme for the coming months. The report included sections on the forward plan of the Cabinet and areas of scrutiny work taking place in each district and borough council in Warwickshire.

An update was provided on the GP Services task and finish group (TFG). It comprised eight members, including three representatives of district and borough councils, to ensure County-wide representation. The TFG had met twice and a copy of its final scoping document was submitted.

The Children and Young People Overview and Scrutiny Committee and this Committee had each received a report regarding the new Children and Young People's Emotional Well-being and Mental Health Contract. The Chairs of the Committees had agreed for a joint task and finish group to be established, comprising members drawn from both committees, to undertake a review of the new service and report back to a joint meeting of the Committees. The proposed terms of reference for the Group were provided. The agreed nominations from this committee's membership were Councillors Jill Simpson-Vince and Adrian Warwick.

An update was also given on the Joint Health Overview and Scrutiny Committee (JHOSC). The first area for review was Stroke Services. There had been a delay in the assurance process needed before the public consultation commenced. Arrangements were being made to hold the first formal meeting of the JHOSC in January 2018.

#### Resolved

That the Committee:

- 1) Confirms its work programme;
- 2) Notes that the first Joint Health Overview and Scrutiny Committee with Coventry City Council will take place in January 2018;
- 3) Notes the scoping document for the GP Services Task and Finish Group; and
- 4) Approves that a joint task and finish group of Children and Young People OSC and Adult Social Care & Health OSC is established to review the new CAMHS service, with Councillors Jill Simpson-Vince and Adrian Warwick representing the Committee.

#### 7. Any Urgent Items

None.

The Committee rose at 1.20pm

Chair

# Adult Social Care and Health Overview & Scrutiny Committee

# 24 January 2018

# **Delayed Transfer of Care Update**

### Recommendation

Members to understand the complexities of Delayed Transfers of Care and to acknowledge the system wide partnership working in order to meet the Delayed Transfer of Care target of 3.5%.

### 1. Introduction

1.1 Delayed Transfers of Care have been the subject of much national attention over recent months. This report is an update to members on the collaborative system wide approach to reduce delayed transfers of care (DTOC) and importantly support people who are well to return to their original destination be that in their own home or a care home.

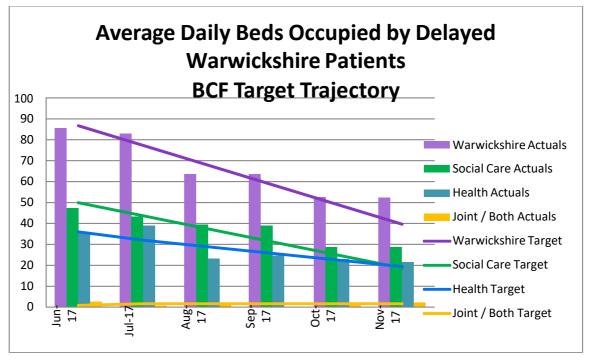
### 2. Update

- 2.1 Significant system wide efforts have intensified in preparation for the increase in demand for hospital and other services over winter. This is in direct recognition that improving the timeliness of discharge is the right thing to do for patient care and experience, it improves operational flow through the system and makes best use of the resources across health and social care.
- 2.2 Through the Better Care Fund, Central Government has called for a 3.5% target to be established nationally for all DTOCs. A delayed transfer of care from an acute or non acute setting occurs when a patient is ready for external transfer from such care and is still occupying a bed. Reducing Delayed Transfers of Care (DToC) to achieve the national target means reducing the number of NHS beds occupied by a delayed patient to 3.5% (or no more than 40 beds occupied by a delayed patient). Warwickshire has consistently been in the bottom quartile when compared to other local authority areas. However, Warwickshire also has more non-acute (community) facilities when compared to many other areas and also hosts the Central England Rehabilitation Unit (CERU) both of which can make it harder to reduce delays due to complexity of long(er) term needs.
- 2.3 Despite these local challenges and as a result of the establishment of a dedicated DTOC team, led by Anne Coyle, Director of Operations from SWFT, focussed improvement activity and joint working between health and social care at the three main Acute (hospital) sites has seen a step change in performance.

- 2.4 This project, led by South Warwickshire Foundation Trust on behalf of the Better Together programme is supported by colleagues from acute providers; CCGs; social care in Warwickshire has commissioned external support and expertise to assist.
- 2.5 The key areas of focus, identified from assessment against the High Impact Change model are:
  - Proactive discharge planning
  - Patient and family expectation management
  - Resilient discharge pathways and DTOC escalation process
  - Improve logistics at point of discharge
  - Proportionate and trusted assessment between agencies.
  - Improved IT support systems with cross functional access and automated reporting

### 3. Reducing Delayed Transfers of Care

- 3.1 Measuring DTOC is a complex and multifaceted business. It relies of a range of data from multiple sources and multiple sites. There are many 'owners' of the data which has the potential to influence the final results.
- 3.2 Warwickshire has agreed to submit to the DTOC targets set by NHS England to be achieved by Nov-17. However, this target was provided to us in Jul-17 along with the planning guidance for the two year plan and represented a 54% reduction in days delayed (compared with Jan-May 17 performance) over a period of 5 months from Jul-17 to Nov-17. As the timescale for this reduction was so short and the reduction so significant, the Warwickshire submission stated that realistically the target would be met during the course of 2017/18 and 2018/19.
- 3.3 In order to reduce delayed transfers of care, Warwickshire has to coordinate improvements across 3 CCGs and 4 main providers. In fact Warwickshire Hospital Social Care staff have to work across 9 different sites. This makes Warwickshire's DTOC Improvement Plan significantly more complicated to implement than a large proportion of other councils in England.
- 3.4 Average daily beds occupied by a delayed patient is the preferred measure. This measure represents the number of hospital beds occupied by a delayed Warwickshire resident on an average day in each month. The target set by NHS England is that by Nov- 17 there should be no more than 40 beds occupied by a delayed Warwickshire resident on an average day and that this should be maintained until Mar-19. Data for this measure is only available 6 weeks in arrears. November data is due 11.01.17 at the earliest. However, weekly data is now being collected from Warwickshire's three main providers which is received only 1 week in arrears. Using this data and an average value for delays from CWPT and out of county providers, a fairly accurate forecast or estimation can be produced. The forecast for November 2017 is 52 which is a small reduction from Oct-17 performance of 53. This is impressive given the significant peak in DTOC at George Eliot Hospital at the end of Nov-17. Since the target and trajectory to meet that target was set in June, Warwickshire performance has met the trajectory in Jun-17 and Aug 17. Whether we meet the target of 40



### 4. Key Issues

- 4.1 We recognise the importance of ensuring that people do not remain in acute hospitals longer than necessary, however we do have some serious concerns about the target as data is not comparable due to there being no standard method of counting delays.
- 4.2 It is also important to not look at DToC in isolation. We are focussing funding and improvement initiatives on reducing both non-elective admissions (the 'front door') through our prevention, rehabilitation and public health work and DToC (the 'back door').
- 4.3 Following a significant reduction in delays at our three main Acute site, our focus has now moved to the five smaller community hospitals.

None	
Author:	Christine Lewington
	Head of Strategic Commissioning
	Email: chrislewington@warwickshire.gov.uk
Heads of	Christine Lewington
Service	
	Pete Sidgwick
Strategic	Nigel Minns
Director	Strategic Director of the People Group
Director	
Portfolio	Cllr Les Caborn
Holders	Portfolio Holder for Adult Health and Social Care.

# Background Papers

# Adult Social Care and Health Overview and Scrutiny Committee

# 24 January 2018

# Work Programme Report of the Chair

## Recommendations

That the Committee:

- 1. Reviews and updates its work programme.
- 2. Notes the updates provided, particularly in relation to the Joint Health Overview and Scrutiny Committee with Coventry City Council and the GP Services Task and Finish Group.

## 1. Work Programme

The Committee's work programme for 2017/18 is attached at Appendix A for consideration. The programme was discussed by the Chair and Party spokespeople at their meeting on 4 January. A copy of the work programme will be submitted to each meeting for members to review and update, suggesting new topics and reprioritising the programme.

# 2. Forward Plan of the Cabinet

The Cabinet and Portfolio Holder decisions relevant to the remit of this Committee are listed below. Members are encouraged to seek updates on decisions and identify topics for pre-decision scrutiny. The responsible Portfolio Holders have been invited to the meeting to answer questions from the Committee.

Decision	Description	Date due	Cabinet / PfH
One Organisational Plan Quarterly Progress Report	To report on progress on delivery of the OOP 2020, for the period April-December 2017.	25 Jan 2018	Cabinet
Adult Transport Policy	A report to Cabinet on the outcome of a consultation and any amendments to the proposed Adult Transport Policy, seeking approval to implement the Policy from 1st April 2018.	25 Jan 2018	Cabinet

Last updated 16 January 2018

### 3. Forward Plan of Warwickshire District and Borough Councils

Set out below are scheduled reports to be considered by district and borough councils at scrutiny / committee that are relevant to health and wellbeing. Further updates will be sought and co-opted members are invited to expand on these or other areas of planned activity.

Date	Report
North Warwic	kshire Borough Council
	In North Warwickshire, the focus on health is provided through two forums, the Warwickshire North Health and Wellbeing Partnership (covering both North Warwickshire and Nuneaton and Bedworth), and the Borough Council's Health and Wellbeing Working Party. Examples of recent work are shown below:
	<ul> <li>Warwickshire North Health and Wellbeing Partnership:</li> <li>End of Life Care</li> <li>Addressing Teenage Conceptions – Sustainability of the service</li> <li>Access to Health Services – Community Transport Initiatives</li> <li>Services at George Eliot Hospital and its Future Vision</li> <li>#onething – Focus and sustainability of the service</li> </ul>
	<ul> <li>Health and Wellbeing Working Party</li> <li>The Corporate Health and Wellbeing Action Plan - Delivery</li> <li>The evolving Strategic Leisure Review – Ensuring that it addresses issues of relevance to the health and wellbeing of the local community</li> <li>End of Life Care</li> <li>Addressing Teenage Conceptions - The service afforded to young people in North Warwickshire</li> <li>Access to Health Services – Community Transport Initiatives</li> <li>#onething</li> <li>Fitter Futures and its services in North Warwickshire</li> </ul>
	Bedworth Borough Council – Housing Health & Communities Scrutiny Panel
2017/18	<ul> <li>To be programmed in 2017/18:</li> <li>Discharge Protocol</li> <li>Lack of NHS Dental Care</li> <li>Reduction in Pharmacy Funding</li> <li>Gambling and its impact on health and wellbeing</li> <li>Healthwatch Concerns / Priorities</li> </ul>
Mar 2018	<ul><li>Provision of Hospice Beds in the</li><li>Health Performance Report</li></ul>

	George Eliot Hospital Update
	CAMHS
Rugby Borough C	council – Customer and Partnerships Committee
Date TBC	Mental Health Briefing
Stratford-on-Avor	District Council – Overview and Scrutiny Committee
24 January 2018	Follow up from Sustainability & Transformation Plan (STP) Lead Prof.
	Andy Hardy – Focus Prevent Agenda
18 April 2018	Update from the Oxfordshire CCG
	<ul> <li>Update from the Bromsgrove and Redditch CCG</li> </ul>
Warwick District (	Council – Health Scrutiny Sub-Committee
16 January 2018	<ul> <li>Embedding Health and Wellbeing Strategically</li> </ul>
	<ul> <li>Health and Wellbeing Priorities and Action Plan 2018-20</li> </ul>
	Review of the Work Programme & Forward Plan
	Updates from Councillors sitting on Outside Bodies dealing
	with Health & Wellbeing
Each meeting	Health and Wellbeing Update
Each meeting	Updates from representative on WCC ASC&H OSC
Date to be set	Care Quality Commission

# 4.0 Briefing Notes Circulated Since the Last Meeting

4.1 The work programme at Appendix A lists the briefing notes circulated to the Committee. Members may wish to raise questions and to suggest areas for future scrutiny activity, having considered those briefing notes.

### 5.0 Update on Task and Finish Group Work

5.1 The Task and Finish Group (TFG) on GP Services continues to progress well and is nearing the end of its evidence gathering phase. It will have met on four occasions by the time of this Committee. It is envisaged that one further evidence session will take place on planning / infrastructure, before compilation of the review report with conclusions and recommendations.

# 6.0 Joint Health Overview and Scrutiny Committee (JHOSC)

6.1 An informal meeting of the JHOSC took place on 15 January 2018 at Coventry City Council. The purpose of the meeting was to provide an update to all members on the work of this joint committee, to share work programmes and look at opportunities for joint working. The primary role of this group will be to respond to consultations from NHS service reconfigurations. The first of the areas for review is Stroke Services, but there are continued delays in the assurance process which is needed before the public consultation commences.

### **Background Papers**

None.

	Name	Contact Information
Report Author	Paul Spencer	01926 418615
		paulspencer@warwickshire.gov.uk
Head of Service	Sarah Duxbury	
Strategic Director	David Carter	
Portfolio Holder	n/a	

The report was circulated to the following members prior to publication:

Local Member(s): None Other members: Councillor Redford

# Adult Social Care and Health Overview and Scrutiny Committee Work Programme 2017/18

Date of meeting	Item	Report detail
24 January 2018	Delayed Transfers of Care	To provide an update on the initiatives put in place to reduce discharge times from hospital to social care. This will include a presentation by Chris Lewington and Pete Sidgwick. The presentation to cover progress since the previous update and the links to the BCF funding.
14 March 2018	Dementia Awareness	This item was considered in September 2017. The Committee agreed to hold a further presentation/development session to cover the additional work being undertaken through Warwickshire's Living Well with Dementia Strategy (2016-2019), the potential areas of focus being timely diagnosis and support in acute/residential housing with care settings.
14 March 2018	One Organisational Plan 2017-18 Q3 Progress Report	To provide the Committee with a quarterly update on progress of the One Organisational Plan 2020.
9 May 2018	The Care Home Care Market and Domiciliary Care.	This meeting will have one substantive item on the care home care market and domiciliary care, with up to two hours allocated, effectively including the normal pre-committee briefing slot. Key aspects are workforce, making this service attractive to new employees and greater use of technology.
11 July 2018	Update on the HWBB	Councillor Seccombe, Chair of the Health and Wellbeing Board will give an update to the Committee on the work of the Board. This would be a useful opportunity to consider the working arrangements under the Memorandum of Understanding between these two bodies, the Children and Young People OSC and Healthwatch Warwickshire. Progress on the STP would also be a useful topic.
11 July 2018	One Organisational Plan 2017-18 Q4 Progress Report	Date is to be confirmed, depending on the timing of the corresponding report to Cabinet. This will provide the Committee with the final quarterly update on outturn of the One Organisational Plan for 2017/18.
Dates to be confirmed	Review of the Direct Payments processes and infrastructure	This item was suggested at the Chair and Party Spokesperson meeting in January, as a joint review area for this Committee and the Children and Young People OSC. The timing for this to come to members would be considered further as part of the annual work programme review.
	Review the Social Care budget position	Suggested by Councillor Caborn at the Chair and Party Spokesperson meeting in January. An area for the Committee to review during the 2018/19 financial year with the predicted budget pressures.

Review of the Adult Transport Policy	Cabinet will consider a revised Adult Transport Policy on 25 January. Subject to its approval and implementation, this is a suggested area for the Committee to review after 12 months of implementation.
Reconfiguration of Stroke Services	Suggested by Councillor Margaret Bell. A proposal to consider it before decisions are finalised. There are concerns about the assumptions around a reduction in stroke cases. Also suggested by Healthwatch. This topic will be the subject of formal consultation to the Joint Health OSC established with Coventry City Council.
CAMHS	This item was considered in September 2017 and it was agreed that a further update be provided to the January 2018 meeting. Since that decision, a task and finish group comprising members from both ASC&H OSC and C&YP OSC has been formed to focus on this topic in detail and report back to a joint meeting of the OSCs.
STP – Proactive and Preventative Workstream	Suggested by Councillor Margaret Bell. The Proactive and Preventative work stream of the STP. The suggestion is to find out more: What is happening; what is the plan; how is it to be funded; when will we see results?
STP – Accountable Care System	Suggested by Healthwatch. The STP is morphing into an Accountable Care System. This item is about how the public will be better engaged in the accountable care system, unlike the process for the STP. This will be the subject of the briefing session in March 2018.
STP – George Eliot Hospital Campus Model	Suggested by Councillor Clare Golby. To understand how the proposals for the George Eliot Hospital (GEH) Campus Model will fit into other health services for the north of Warwickshire and the implications for residents. Councillor Parsons supported this area, raising concerns about the potential downgrading of services delivered at GEH.
Patients Transport Service	Suggested by Councillor Margaret Bell. This concerns the voluntary Patient Transport Service. The areas to examine are: is the county covered; how expensive are services for the user; what is happening to their funding sources; how sustainable are they?
The 111 Service	Suggested by Councillor Margaret Bell. Areas to examine are: How do they refer people to health services; how do they link in with the relevant CCG; how do they know where services are commissioned; also what do they do about patients with no transport who are referred to an Out of Hours Service at, say, the early hours of the morning.
Provision of GP Surgeries	Suggested by Councillor Pam Redford, with a focus on the impact of housing growth, the need for extra GPs surgeries and their location. This area is the subject of a task and finish review and the scope includes the areas raised here.
Local Commissioning of Services	Suggested by Councillor Mark Cargill. A pilot scheme has been undertaken in Alcester. Needs clarification on the area for scrutiny
Reablement and Delayed Transfers of Care (DTOC)	Suggested by Councillor Mark Cargill. A scrutiny area which looks at how to streamline the transfer process, including avoiding hospital admission where possible and links to good quality housing. DTOC is being considered in January 2018.

Director of Public Heal	Ith Suggestions	To support the recommendations highlighted in the Director of Public Health's annual report, which the DPH has a statutory duty to provide. The theme this year is 'Vulnerability' (and its impact on health). This will be taken to the HWBB on 6 September and cascaded following that meeting. To support the JSNA (Joint Strategic Needs Assessment) – The purpose of the JSNA is to analyse the current and future health and wellbeing needs of the local population, to inform the commissioning of health, wellbeing and social care services. The JSNA aims to establish a shared evidence based consensus on the key local priorities across health and social care. From 2017 this moves to a place
		<ul> <li>based approach with five drivers.</li> <li>Health &amp; Wellbeing Strategy: <ul> <li>Sustainability &amp; Transformation Plan (STP)</li> <li>Out of Hospital Programme</li> <li>GP Five Year Forward Plan – Part of the GP Services TFG review</li> <li>Community Hubs</li> <li>County Council Transformation Plans</li> </ul> </li> <li>To support the work around suicide prevention, looking at the possible causes of a local increase against national trend.</li> <li>To support the work around the dual diagnosis needs assessment – Mental health and substance misuse.</li> </ul>
Coventry and Warwick	shire Partnership Trust	Suggested by Healthwatch. There has been a re-inspection of the CWPT by the Care Quality Commission. Originally planned for the Trust to present its progress against the action plan to the January 2018 meeting. This may be too soon for the Trust to have implemented actions from the CQC review. Suggestion to have a written update and then programme for a formal report to provide assurance that the 'must do' and 'should do' recommendations are being implemented.
Mental Health of Veter	rans	Suggested by Healthwatch. Further detail needed on scope.
Meals on Wheels Serv		Suggested by Councillor Rolfe. A briefing note to cover the reduction in take up of this service and the current costs of the service. It was agreed by the Chair and Party Spokes (22 August) that a briefing note be provided in the first instance.
Briefing Session – Proa Quality of Care – The 'S	active Monitoring of the See, Hear and Act model'	This was publicised via a stand in the Ante Chamber on 22 November. Previously an offer from Chris Lewington to host a members seminar on our new model for assuring Quality given the number of new members within the Council.
Additional Funding for	Adult Social Care	At Cabinet on 13 July, members questioned the long term viability of health and social care services across the county. Changes to the domiciliary care commissioning arrangements were discussed. Whilst the situation in Warwickshire is better than in other areas, the private care industry is facing a number of significant challenges, a major one being recruitment. Cabinet suggested that the Overview and Scrutiny Committee be asked to review the fragility/stability of the private care industry and the role of the County Council in ensuring its continuance. Discussed with Chair 28 November who requested a briefing in the first instance. There was further discussion of this topic by the Chair and spokespeople in January 2018.

#### **BRIEFING SESSIONS PRIOR TO THE COMMITTEE**

Date	Title	Description
12 July 2017	Overview of Strategic Commissioning	Chris Lewington provided an overview of the work of Strategic Commissioning.
13 September 2017	Out of Hospital Programme	A significant and positive step forward on the Out of Hospital Programme. It is felt members need to be sighted and engaged in this development. This session would include representatives of the clinical commissioning groups.
22 November 2017	Housing Related Support	Hugh Gaster, Housing Related Support Officer to lead on this. A briefing beforehand to remind of recent history and the briefing session to bring up to date with current position / developments.
24 January 2018	Proposal from Chair and Party Spokes Meeting - Direct Payments	An initial briefing note on direct payments would be useful, ahead of the January session.
14 March 2018	Accountable Care Systems	The session will be led by John Linnane and Chris Lewington. All members of the County Council to be invited. The session to include how the direct payments system operates and causes for delays in people receiving the payments.
9 May 2018	None	There is no separate briefing session for this meeting. The Committee will have a single issue agenda, with two hours reserved to discuss the care home care market and domiciliary care.
11 July 2018	TBC	

### **BRIEFING NOTES**

Date Requested	Date Received	Title of Briefing	Organisation/Officer responsible
22/11/17	21/12/17	Self-Harm – A briefing on data for intentional self-harm in Warwickshire and the support services available.	Paula Mawson
22/11/17	21/12/17	Childhood Obesity – A briefing on the levels of obesity affecting both adults and children, the health consequences of childhood obesity, data for Warwickshire and the support services available.	Fran Poole
22/11/17	21/12/17	#onething - Launched in 2015, this campaign asked people in the north of Warwickshire to think about just one thing they could change in their life to be a little healthier, with the overall aim of reducing the risks of heart disease, a significant health issue across the north of the county.	Yasser Din

22/11/17	21/12/17	Teenage Pregnancy – The Director of Public Health agreed to send the Committee	Etty Martin
		more information on teenage pregnancy rates.	
22/11/17	21/12/17	NHS Health Checks - Members providing publicity of the local health check offer.	Sue Wild
		Further information on health checks would be provided to the Committee for this	
		purpose.	
22/11/17	21/12/17	Discussion about the school health and wellbeing service. The Director of Public	Kate Sahota
		Health offered to recirculate a briefing on this service.	
31/10/17		Update on progress with reducing delayed transfers of care	Chris Lewington
-	01/11/17	Healthwatch England Publication – Readmission to Hospital	Paul Spencer
-	31/10/17	LGA Publication – Adult Social Care Funding	Paul Spencer
12/07/17	07/09/17	Dementia – Enhancing Awareness and Understanding Across Warwickshire	Claire Taylor
12/07/17	05/09/17	Summary of the CAMHS Redesign Process	Andrew Sjurseth
-	20/07/17	Healthwatch Report into Warwickshire Mental Health Services	Chis Bain
01/03/17	23/03/17	Maternity Briefing Note	
-	16/01/17	NHS Dental provision in Stratford	
14/09/16	14/2/17	End of Life Care	Amy Sirrs
14/09/16	14/2/17	Public Health: Monitoring Performance and Outcomes	Paul Kingswell
-	23/11/16	Patient Transport Services	
14/09/16	31/10/16	Health Visiting Service - Tender. At the Chair and Party Spokesperson meeting in	Director of Public Health (Kate
		January, it was suggested that a further update by way of briefing note on the health	Sahota)
		visiting service would be useful.	
-	31/10/16	Member visit to WMASS Coventry Hub	Paul Spencer, Democratic
			Services
14/09/16	15/11/16	Hospital discharge planning arrangements. A briefing note to explain the discharge	Head of Social Care and
		arrangements for each of the hospital sites in Coventry and Warwickshire.	Support
13/07/16	25/08/16	Urgent Care & Walk in Centre, George Eliot Hospital	Andrea Green, Warwickshire
			North CCG
13/07/16	10/10/16	Falls Prevention trip hazards and condition of footways – data on claims	Head of Transport and
			Economy

### TASK AND FINISH GROUPS

ITEM AND RESPONSIBLE OFFICER	OBJECTIVE OF SCRUTINY	TIMESCALE	FURTHER INFORMATION
GP Services	The Committee agreed this TFG area at its meeting on 15 September. The report back is due in March 2018.	Aim to report back to ASC&H in January 2018.	The review has commenced, agreed its scope and by the time of this meeting will have met on three occasions.
Joint Health Overview and Scrutiny Committee	This is the first of the joint committees, working with Coventry City Council to focus on Stroke Services.	To be confirmed	There have been delays in the commencement of the work due to the NHS assurance process required ahead of the public consultation.
Maternity and Paediatric Services	The Committee agreed this TFG area at its meeting on 15 September. The detailed scoping of this area is still to be determined.	Review starts after completion of the GP Services TFG.	
Quality Accounts 2016/17. Paul Spencer and Coventry City Council / Healthwatch	QA Groups for each of the 5 Trusts to work with the Trusts on quality accounts over the year.	June 2016 – completed	Follows the format used for 2015/16, with WCC leading on the TFGs for George Eliot Hospital, West Midlands Ambulance Service and South Warwickshire Foundation Trust. Coventry City Council and Healthwatch Coventry to lead on the reviews for UHCW and CWPT.
Quality Accounts 2015/16, Paul Spencer and Coventry City Council / Healthwatch	QA Groups set up for each of the 5 Trusts to work with the Trusts on quality accounts over the year.	June 2016 – completed	The reviews are complete. This year, WCC led on the TFGs for George Eliot Hospital, West Midlands Ambulance Service and South Warwickshire Foundation Trust. Coventry City Council and Healthwatch Coventry led on the reviews for UHCW and CWPT.
Select Committee to look at Winter Pressures	The Committee held a select committee to look at the winter pressures for 2014/15. A follow up report was provided on actions progressed.	2 October 2015 - completed	An update was requested at the meeting on 2 <sup>nd</sup> December 2015, to the Committee on 2 March 2016.
Quality Accounts 2014/15, Ann Mawdsley/Sally Baxter	QA Groups set up for each of the 5 Trusts to work with the Trusts on quality accounts over the year	May 2015 - completed	