

**Minutes of the meeting of the
Adult Social Care and Health Overview and Scrutiny Committee
held on 9 May 2018**

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

District/Borough Councillors

Councillor Margaret Bell (North Warwickshire Borough Council)

Councillor Christopher Kettle (Stratford District Council)

Officers

Olivia Cooper, Quality Assurance Operations Manager

Nigel Exell, Market Manager

Dr John Linnane, Director of Public Health and Strategic Commissioning

Zoe Mayhew, Integrated Older People Commissioning Service Manager

Nigel Minns, Strategic Director for the People Group

Pete Sidgwick, Head of Social Care and Support

Paul Spencer, Senior Democratic Services Officer

Also Present:

Chris Bain, Chief Executive, Healthwatch Warwickshire

Arham Qureshie, Tim Osborne and Rachel Murrow, junior doctors/GPs

Chris Edgerton

1. General

The Chair welcomed everyone to the meeting, mentioning specifically the three junior doctors listed above.

(1) Apologies for absence

Councillor Pamela Redford (Warwick District Council)

Councillor Kate Rolfe, replaced by Councillor Jerry Roodhouse

Councillor Jeff Morgan, Portfolio Holder for Children's Services

(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 circulated briefing note from George Eliot Hospital (GEH) and that from Dr John Linnane, Director of Public Health and Strategic Commissioning about his annual report for 2018. The briefing

note from GEH had been forwarded to Staffordshire County Council, which had also expressed concerns on the GEH mortality data.

Dr Linnane was asked to give an update about the current outbreak of measles, with eleven cases diagnosed in Warwickshire. He explained the seriousness of the illness and the action being taken to address it, including containment meetings. Dr Linnane was producing a briefing note for the Committee to update on a service delivery review by the Coventry and Warwickshire Partnership Trust.

The Chair gave a brief update on a proposed 'super' health overview and scrutiny committee (OSC) to look at the review of maternity services provided at the Horton General Hospital in Banbury. This followed a decision of the Secretary of State for Health and Social Care. The OSC would include one member from Warwickshire County Council and subject to consideration of this matter at Council, the Chair proposed to be the representative on this OSC.

The Quality Account documents of provider trusts had been circulated to members for their consideration and feedback. Any member wishing to submit a response was asked to liaise with Paul Spencer in Democratic Services.

(4) Minutes

The minutes of the Adult Social Care and Health Overview and Scrutiny Committee held on 14 March 2018 were agreed as a true record and signed by the Chair.

2. Public Question Time

None.

3. Questions to the Portfolio Holders

Question to Councillor Les Caborn, Portfolio Holder for Adult Social Care and Health

Councillor Cargill referred to the place based joint strategic needs assessments (JSNA), specifically that for Alcester. The required population size for each of these JSNAs meant it covered a large geographic area for Alcester with differing health needs. Considerable resources would need to be devoted to complete this work and he asked the portfolio holder if these resources were available. Councillor Caborn confirmed that WCC had sufficient resources for the work involved, but the JSNAs would also need input from district/borough councils, for example in terms of housing, so this aspect would need to be monitored.

4. GP Services Task and Finish Group (TFG)

At its meeting on 13 September 2017, the Adult Social Care and Health Overview and Scrutiny Committee commissioned a task and finish review of GP Services. The drivers for a review at this time were the GP Five Year Forward View and to understand the impact of projected residential development throughout the County. The objectives of this review were reported, together with an outline of the contributions received through a number of evidence gathering sessions over the period October 2017 to February 2018. The TFG had noted a number of recurring themes from the different evidence sources. This led to the formulation of the conclusions and recommendations shown in the appended review report, grouped under the categories of:

- National issues – those that could not be resolved for Warwickshire in isolation and required recommendations for national assistance.
- Those which required a Coventry and Warwickshire 'system approach'. These were areas to be considered by the Health and Wellbeing Board.
- Those which could be progressed by an individual agency, through recommendations to commissioners or providers of services.

The report of the TFG was introduced by its Chair, Councillor Margaret Bell, who took members through each of the recommendations and the rationale for those recommendations. She recorded her thanks to members of the TFG, all the contributors to this review, particularly Dr John Linnane and his officers, Chris Bain of Healthwatch Warwickshire, the representatives of clinical commissioning groups (CCGs) and Paul Spencer from Democratic Services. On the recommendations, she explained those areas where national assistance was required and there was a lobbying role for this Council. There were system issues which should be considered by the Health and Wellbeing Board and others for the WCC Cabinet to consider. She highlighted particularly the need for the public to take responsibility for their own health, spoke about care navigation, areas that required further research, improving communication and examining the process and barriers to providing new and extended GP services.

The Committee reviewed the document, submitting the following questions and comments with responses provided as indicated:

- Where substantial housing development was taking place, the site was often divided between a number of developers. Determining responsibility for which developer would provide the new premises could be an issue. There was a perception that elected member working between the county and some boroughs could be better too. Councillor Bell stated that it was a matter for the CCGs and planners to have a dialogue on the services that would be required to meet the needs of additional residents.
- Approval of local plans by government inspectors was a key issue and would add weight to the district/ borough council negotiating position to secure developer contributions. There had been delays in the local plan process for some areas of Warwickshire.
- Councillor Bell was thanked by several members of the TFG for the way she had chaired the group. There was also recognition of the amount of work the TFG had completed over a relatively short period.
- The need for a unified response to development proposals. There was a lot of work taking place between health and local authorities, but this could be communicated to elected members and the public more effectively.

- Discussion about retention and/or providing additional care homes. The financial viability of some care homes and differing income levels between self-funded and local authority placements was also raised.
- A different challenge was when funding from planning agreements had a time limit and could be lost if there were delays in drawing down the funding for infrastructure development.
- CCGs could learn from local authority colleagues in making demands for infrastructure contributions.
- Section 106 funding provided a one-off capital payment for building costs. It didn't provide ongoing revenue funding for the GPs and other staff to deliver the needed services. There was a shortage of GPs and different ways of working would be needed, with specific reference to linking GPs and pharmacy as well as social prescribing.
- The delays in providing new services. The replacement surgery for Brownsover was mentioned specifically.
- The Portfolio Holder, Councillor Caborn considered this was a good report, but the challenge would be how to make its findings work in practice. The document should be circulated widely. There was a lot of work taking place between the CCGs and local authorities already. Councillor Bell replied with a comment made at the TFG by a CCG representative, that the Health and Wellbeing Board should take the moral high ground in making the sectors work together.
- Improving communication between GPs and acute service providers was an important aspect.
- Innovative solutions should be shared; an example was the use of a 'roving' GP service for homeless people.
- Chris Bain of Healthwatch Warwickshire praised the quality of the report. He spoke of the original aims of the Sustainability and Transformation Plans and their failure due to a lack of statutory power. Provision of new buildings wasn't always the solution and staffing them was a challenge. He referred to GP recruitment challenges and many were leaving this service. Nationally, 4000 care home beds had been lost in recent years. Helping people to live well at home for longer was another area, which would be explored by Healthwatch at its event in October.
- A member of the TFG explained the distrust between some GPs and pharmacies. There was resistance from GPs to try different service delivery methods.
- Several members contributed with local examples of the difficulties and frustrations experienced due to the poor way that services were joined up or due to data sharing difficulties.

The Chair proposed to discuss at the next meeting with party spokespeople the feedback from this meeting, the recommendations from the review and how to take forward the other areas proposed for the Committee. He recorded the Committee's thanks to the TFG, its Chair and contributors to this review.

Resolved

That the Committee:

- 1) Welcomes the report of the GP Services Task and Finish Group and supports its conclusions and recommendations.

- 2) Refers the document to Cabinet and the Warwickshire Health and Wellbeing Board to consider the recommendations made for actions by the County Council and the wider Coventry and Warwickshire health 'system'.
- 3) Records its thanks to the Chair, members and contributors to the TFG and that a letter of thanks is sent with a copy of the final review report to all contributors.

5. Update on Commissioned Care Services for Older People

A report and presentation was introduced Zoe Mayhew, Integrated Older People Commissioning Service Manager, supported by Olivia Cooper, Quality Assurance Operations Manager and Nigel Exell, Market Manager. The Committee had requested an update on older people's commissioned services, which was provided through a comprehensive presentation. This covered the key issues, developments, achievements and risks for the Domiciliary Care Services and Care Home commissioned service areas. An overview was provided of quality and assurance for commissioned services, paying particular attention to the learning and development initiatives that had been implemented for the provider market. Finally, the presentation focussed on current market priorities and issues for the two commissioned service areas.

Zoe Mayhew commenced the presentation, giving background on the 651 contracts managed by the service, with a total purchasing value £128 million in 2017/18. Domiciliary Care was the first service area discussed. A graph showed the number of people receiving care each month for the last two years, the eight different zones within which contracts for care were let and the names of the 27 contracted service providers. Of these, 82% had been assessed by the Care Quality Commission (CQC) as good, with 16 % requiring improvement and 2% rated as inadequate. Further graphs showed the number of referrals per month and the average time taken to source packages of care. A summary provided the benefits for people receiving domiciliary care and potential improvement areas.

Data was provided for care homes. From October 2016 the County Council had entered into a Section 75 agreement with the Warwickshire North and South Warwickshire CCGs for the 108 care homes (of which 87 were for older people). The CQC ratings of the care homes were provided, with 82 rated as 'outstanding' or 'good'.

Olivia Cooper then reported on quality assurance. She gave an outline of the 'See, Hear and Act' approach. All providers, including residential and nursing homes were quality assured using three key principles:

- Evidence led and planned
- Acts proactively
- Enforces required improvements when needed

There was a collaborative approach, working with CCGs to provide quality assurance. A slide showed the Quality Dashboard and how feedback was collated from a range of sources. An outline was given of the quality assurance visits undertaken. Olivia spoke about the Service Escalation Panel (SEP), which was a multi-agency panel to review providers where there was a significant or sustained concern. It ensured that issues were resolved as swiftly as possible, whilst

maintaining safety of customers. Details of the core quality issues were also reported.

Through the See, Hear and Act Learning Partnership, funded learning opportunities had been provided and some examples were given. Olivia Cooper concluded with details of an apprenticeship levy. The sum of £125,000 had been secured in apprenticeship funding for the social care sector. Whilst this was still under development, it presented an excellent opportunity for service providers in Warwickshire.

The Chair invited questions, comments and responses on this part of the presentation:

- Discussion about the use of placement stops. The lack of local authority placements impacted on the provider's financial viability and whilst the safety concerns had to be weighed, it might force the closure of a care home in an area where there was an identified service need. The SEP only used placement stops when there were serious concerns and sought to remove them as quickly as possible. Early intervention was the key to resolving concerns before they reached this level. More often, the provider would enter into a voluntary placement stop and some brought in their own support to resolve issues.
- It was questioned if access to outstanding / good care homes was restricted by the fee structure of care homes, particularly in the south of Warwickshire. The data showed that WCC had more of the market share of outstanding and good care homes.
- Members welcomed the news about the apprenticeship funding, seeking further information on how this could be used. Some examples were discussed and this would hopefully assist with staff retention too.

Nigel Exell, Market Manager concluded the presentation. He spoke about market management key functions. A position statement gave summary information on supply and demand in the County and clarity about the current and future shape of markets. Data was provided on care homes in Warwickshire. The total capacity was 4,808 beds for older people and this had increased by 314 beds over the last five years. An example was displayed of the market dashboard. This was a tool based on JSNA geographies that gave commissioners information on market shape and the balance of service types. It identified areas for more detailed analysis work and review of commissioning arrangements. Further slides showed estimates of future demand and data on the market share for older people care homes. The key messages and next steps were reported.

The Chair invited questions on this part of the presentation:

- It was noted that Warwickshire's population was aging but the number of care home placements was reducing. This was due to the number of people being supported in their own homes. People were living longer overall, but life expectancy varied across the county.
- It was noted that the estimates of future need were based on the 2011 census data. Since that time, there had been substantial development across Warwickshire and the next census might show large increases. A particular aspect was inward migration from neighbouring areas.
- Discussion about the funding risks and the limitations of the Section 75 (iBCF) funding. An assurance was sought that these risks were recorded on

the Council's risk register. Nigel Minns, Strategic Director for the People Group spoke about the precept arrangements, the Council's base budgets, also confirming that the iBCF funding would cease. This funding had been invested to achieve longer term savings. The Council had a clear understanding of its financial position and reviewed it regularly, also lobbying central government on sustainable funding for adult social care. A risk analysis had been completed.

- It was confirmed there had been a reduction in the numbers of people going into care and was considered that the prices paid by the authority for its care home placements was fair.

The Chair closed the item, thanking the presenters.

Resolved

That the Committee receives the report and presentation on commissioned care services for older people.

6. Work Programme

The Committee reviewed its work programme. Sections of the report showed the forward plan of the Cabinet and Portfolio Holders and the areas of scrutiny activity in each district and borough council. Updates were provided on the joint health overview and scrutiny committee with Coventry and that proposed with Oxfordshire. It was noted that the CAMHs task and finish review was nearing completion and would report to a joint meeting of this Committee and the Children and Young People OSC on the afternoon of 12 June 2018.

For the July agenda, the Chair confirmed the addition of a presentation on developing the Fire and Rescue Service work with health and social care. The pre-committee briefing topic for July would be the drugs and alcohol service.

Councillor Golby sought clarity on some aspects of the work programme of the Nuneaton and Bedworth Borough Council. This would be researched. Councillor Kettle clarified the remit of the Oxfordshire Joint Health OSC. It was questioned how the report of the GP Services TFG would be revisited. Officers explained that the document included an action plan, on which updates could be provided to the Committee, usually at six monthly intervals. The Chair suggested that the Committee review its work programme for the year ahead, to focus on the key areas. He added that a further update on care homes should be included for twelve months' time.

Resolved

That the work programme is noted and the document updated to reflect the Committee's decisions, as set out above.

7. Any Urgent Items

None.

The Committee rose at 12.30pm

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Chair