

**TEES VALLEY HEALTH SCRUTINY JOINT COMMITTEE**

A meeting of the Tees Valley Health Scrutiny Joint Committee was held on 26 January 2017.

**PRESENT:** Councillor E Dryden (Chair) – Middlesbrough Council,, J Taylor - Darlington Council, I Jeffrey - Redcar and Cleveland Council, E Cunningham - Stockton Council and L Hall - Stockton Council.

**ALSO IN ATTENDANCE:** S Fenwick, Redcar and Cleveland Council, P Mennear, Stockton Council, L Stones Louise Dauncey, Senior Commissioning Manager, Joint Commissioning (Learning Disability), North of England Commissioning Support Service, Sam Harrison, Senior Communications and Engagement Manger, North of England Commissioning Support Service

**OFFICERS:** C Breheny

**APOLOGIES FOR ABSENCE** Councillor Taylor, Belcher, Martin-Wells, Biswas, J Walker, Harding, Reed, Cunningham, Newall and Tostevin.

**DECLARATIONS OF INTERESTS**

None Declared

**1 MINUTES - TEES VALLEY HEALTH SCRUTINY JOINT COMMITTEE 21 OCTOBER 2016**

The minutes of Tees Valley Health Scrutiny Joint Committee held on 21 October 2016 were agreed subject to minor amendments being made.

**2 STAKEHOLDER ENGAGEMENT UPDATE – TRANSFORMING CARE: RESPITE SERVICE REVIEW**

The Committee had received a report in October 2016 about a review of health funded respite care for adults with a Learning Disability and complex needs in relation to the wider Transforming Care agenda. An update had been requested in January 2017 and the Senior Commissioning Officer and Senior Involvement Officer from North of England Commissioning Support (NECS) were in attendance to provide the information requested.

The informal engagement process had started and if at the end of that process the feedback indicated that there would need to be significant variations in service provision a formal consultation exercise would commence. The CCG would then need to consider the feedback received but at this stage the focus was on finding out how respite services could be improved and talking to people about what respite meant to them. The Commissioners were also interested in finding out what was important about respite provision, if the current offer was meeting people's needs, whether it could be provided in a different way and what aspects of service provision were highly valued. It was not about cutting respite provision but establishing whether the CCG could make any improvements to better meet people's needs. How respite provision was received in emergency situations as well as how health and social care respite offers were working together for the benefit of clients.

Reference was made to the establishment of needs and building based respite and it was confirmed that Bankfields Court in Normanby and Allensway Day Service in Stockton both offered building based respite. Clinical staff were on hand at both facilities and some clients received respite services through social services and others received continuing healthcare contributions. The review was about how those resources were deployed collectively and not solely about clients who accessed health respite services. It was emphasised that a multi-layer approach had been taken with a view to speaking to people who used the respite services for learning disabilities and complex needs.

The Senior Commissioning Officer explained that the review had been working with Project Choice to ensure young people with learning disabilities were able to develop their skills and take up employment opportunities. Two young people from the project were scheduled to start

with the North of England Commissioning Support Team to assist in ensuring that the work being undertaken was accessible to other people with learning disabilities. A survey had been sent out to all families of carers of those who had received respite services in the last five years and an accessible summary of the work undertaken had been produced. The point was made that some work had also been undertaken with Inclusion North a not for profit organisation that was assisting the NECS in facilitating discussions with people with very complex learning disabilities and their families. Stockton Helps All (previously Citizen Advice Bureau) who facilitate a self-advocacy group had also been consulted and discussions with clients had taken place in Hartlepool, Stockton-On-Tees and Redcar & Cleveland. The questionnaire had been adapted for the people who were in receipt of respite services and this was a genuine opportunity for them to have their voice. A number of facilitated discussions were taking place throughout February 2017 and as part of the process efforts were being made to collate "my experience" stories with a view to providing real life examples to the CCG.

Inclusion North had facilitated discussion groups and canvassed views from those attending Learning Disability Partnership Boards in the region. A new sub group of approximately twenty people linked to Stockton's Learning Disability Partnership Board were keen to be involved and it was hoped their views would be fed to the process. Various stakeholder packs had been distributed and everything that had been given out was due to be returned by the end of February 2017. The full engagement report would be made available to the CCG following receipt of these returns and cover all aspects of the service. If significant changes in service provision were required a full public consultation exercise would be undertaken.

The committee queried the potential for changes to be required given the growth in demands and complexity of needs, the need to achieve improved sustainability and a gap at times in where social care provision ends and health care provision starts. It was advised that providers of services had also been engaged in this review process and soft market engagement activities in an effort to in to find out what other models of care are operating elsewhere and what is happening locally. Discussions had taken place with local authorities from a wider prospective and if proposals for significant changes were put forward then this process marked the start of conversations around what aspects of service provision were working well and what were not.

In terms of risk unmet needs was highlighted as one of the greatest risks alongside a need to make services more responsive and flexible to the needs of the people who use them including carers. Volunteers were undertaking engagement work, respite task and finish groups had been established and the use of health personal budgets was also being explored.

A Member of the committee expressed the view that it was surprising the Sustainable Transformation Plan (STP) had not been included on the Committee's agenda and queried how this particular review would fit with the STP. The point was also made that this review did not include Darlington and it was queried whether a separate piece of work was being undertaken there. The representatives from NECS advised that the Respite Services Review was outside of that STP programme, which included a much broader footprint. The point was made that five local authorities were represented on this Committee and there was a need for a special meeting to consider the STP and focus political attention on what was happening. It was requested that this meeting be held in February / March and the identified lead Alan Foster, Chief Executive North Tees and Hartlepool NHS FT, for the Durham, Darlington, Teesside, Hambleton, Richmondshire and Whitby STP be invited to attend.

NECS expressed the view that in respect of the Respite Services Review the issue was not about withdrawing resources but about making sure they were spent appropriately. The way clients received contributions in Hartlepool were very different for example compared to Stockton and Middlesbrough.

A Member of the Committee made the point that Hartlepool and Stockton CCG and South Tees CCGs had requested a review of respite services. NECS was undertaking this review on their behalf supported by Tees, Esk and Wear Valleys (TEWV) NHS Foundation Trust. Confirmation was given that three public engagement events had been held as part of this review in each of the Local Authority areas. It was confirmed that one of the aims of the review

was to be more flexible in meeting people's needs and how support was provided. In response to a query it was confirmed that 91 individuals currently accessed respite service provision at Bankfields Court in Normanby and Allensway Day Service in Stockton. Quite a few different options were available in Hartlepool and with the emergence of personal health budgets there was a need for a marketplace to spend this money. In Hartlepool there was no building based service, although there were social care settings that included a health element but not a nursing service. The point was made that only 2 individuals in Hartlepool were unable to have their needs met in these type of settings. It was queried what other models were in place elsewhere and it was advised that the Transforming Care agenda focussed on the provision of more flexible outreach rather building based respite and supporting people to access these alternatives. It was confirmed that NECS was unaware of a similar piece of work being undertaken in Darlington.

A Member of the Committee expressed the view that these services were used by people with very complex needs and it was queried how these needs would be met in the community to ensure families received the break they needed. It was advised that respite often meant different things to different people and it may not be the case that the family required a 24 hour period of care in order to benefit from a break. It was acknowledged that people's needs were often extremely complex and the services offered would need to provide for all of their needs. The Committee was hopeful that NECS would receive some good information from service providers as part of the soft market testing exercise via RFI. In Nottinghamshire there was an option for people to book holidays and take a support team with them. One of the questions being asked as part of the review was what is respite and what does it mean for you? At present the number of nights were not necessarily allocated in line with people's needs.

In response to a query on the risk of unmet needs being identified it was confirmed that the information gathered to date had indicated that some areas were not performing and there was a gap. However, if services could be flexible enough to bridge that gap then there would be no need for significant service change to take place. The plan was to redesign services and not withdraw resources by ensuring resources were spent efficiently, effectively and were consistent across the area.

It was confirmed that a number of self-advocacy groups exist currently for clients, carers and families in the voluntary and community sector and regular contact sessions were held with these groups. TEWV NHS Foundation Trust have a user group and an ambassador who undertake work on customer satisfaction. Carers together had also been consulted as part of the review and the stakeholder list was developed by RTF. The point was made that the respite review was not simply about learning disabilities but also about complex needs too. Mainstream schools were finding some difficulties in meeting children's needs which also had implications for the future.

Reference was made to the importance of the transition period from receipt of child to adult support services and it was queried what level of involvement the voluntary sector had in this review. NECS advised that Network North East (NNE) had led the discussion groups, which had proved effective in working with the organisation and groups involved in the consultation as NNE had already developed trust with the organisations.

NECS made the point that at this stage it was unknown as to whether there would be any significant changes to service provision. There may be Commissioners that had some ideas about how services might be improved but until the CCGs had received the results of the stakeholder review no changes to respite services would be proposed. It was emphasised that sustained efforts made to ensure the work undertaken is meaningful.

**AGREED** as follows:-

That further information be brought back to the committee once the findings from the review had been reported to the CCGs. A representative from Hartlepool and Stockton CCG and South Tees CCG will also be invited to attend.

That an additional meeting of the Tees Valley Health Scrutiny Committee be scheduled for

late February / early March to consider the Durham, Darlington, Teesside, Hambleton, Richmondshire and Whitby Sustainable Transformation Plan. An invitation would be extended to the identified lead Alan Foster, Chief Executive North Tees and Hartlepool NHS FT to update the Committee on developments.