

Adult Social Care and Health Select Committee

A meeting of Adult Social Care and Health Select Committee was held on Tuesday, 13th June, 2017.

Present: Cllr Lisa Grainge (Chairman), Cllr Lauriane Povey (Vice-Chairman), Cllr Evaline Cunningham, Cllr Lynn Hall, Cllr Mohammed Javed, Cllr Kevin Faulks, Cllr Norma Stephenson (sub for Cllr Mitchell)

Officers: Rob Papworth, Liz Hanley (AS) Peter Mennear, Annette Sotheby (DCE)

Also in attendance: Daniel Maddison, Jo Heaney (NHS Clinical Commissioning Group)

Apologies: Cllr Mrs Sylvia Walmsley, Cllr Allan Mitchell, Cllr John Gardner

ASH 20/17

Evacuation Procedure

The evacuation procedure was noted.

ASH 21/17

Declarations of Interest

There were no declarations of interest.

ASH 22/17

Minutes for signature - 14th February 2017

The draft minutes of 14th February 2017 were agreed by members.

ASH 23/17

Monitoring the Impact of Previously Agreed Recommendations

ACCESS TO SERVICES FOR PEOPLE WITH LEARNING DISABILITIES

An update was given, key points as follows:

Five practices in Stockton achieved over 80% health checks of patients in their practice with learning disabilities. Much could be learned from this approach.

Training was ongoing, working closely with TEWV. All but 4 Stockton practices received training in 2016/17.

Development was ongoing for a quarterly newsletter to all practice managers to improve communication and raise awareness of the service through health facilitators.

An improvement had been seen in the Stockton performance of health checks from 45% in 15/16, up to 51% in 16/17 and work was ongoing to continue to improve this figure. Members expressed disappointment at the small increase, and emphasised the need for a key person in each practice to improve on this.

It was noted that work had been undertaken with practices to identify champions for each practice. The nurse who was taking the lead on this work had now left the CCG, so this work was currently being undertaken by remaining staff. The CCG could not compel Practices to undertake health checks as these were part of a Directed Enhanced Service funded by NHS England.

Darlington CCG had performed well in this area, and information would be

shared around best practice to replicate some of the systems in place.

A CCG sub-group health action plan had been developed to continue to build on the progress already made with health checks, to include vaccinations and screening.

Individual practice performances – a clinical lead for Stockton area would highlight annual health checks when visiting GP practices.

Improvement ongoing with vaccinations and cancer screening with an action plan in place developed jointly with health facilitators. A Pilot for bowel screening had been carried out in the North of Tyne to specifically target this. A bowel screening hub was being developed, and letters had been sent to all GPs to support this.

An easy read letter was developed targeting those with learning disabilities and their carers to ensure clarity around their eligibility for flu vaccinations.

Members asked for more information on the practices working hard and achieving the 80% level of coverage, also on those who had not taken part in health check training. It was noted that the health facilitators would target those involved to ensure they engage in the training which was a requirement of the annual health checks.

Members expressed concern around the support for this vulnerable group of people, as they were unlikely to speak up or complain themselves. It was confirmed that a regular report was received which highlighted practices that may give cause for concern and these would be followed up.

The governance of the Safe Place Scheme had been taken on by Teesside Safeguarding Adults Board. An audit was currently being done and visits would be prioritised around those who did not return the self-assessment form.

The easy read version of the Committee's report on Access to Services had been developed through the Learning Disabilities Partnership Board, and people with learning disabilities had helped design it. This was attached to the agenda.

Members discussed the difficulties experienced by wheelchair users in accessing taxis. Although 12 taxi companies were listed on the Council's website as providing wheelchair accessible taxis, only 3 of those displayed their telephone number. It was noted that this subject had been discussed at the recent Licensing Committee. A request for more information would be made.

DEPRIVATION OF LIBERTY SAFEGUARDS

Increasing focus was being given to community cases, with around 300 clients potentially meeting the definition in the community.

An additional report was included elsewhere on the agenda with more detail on the work carried out so far, the outstanding improvements and monitoring through the steering group.

HOME CARE

Home Care contracts were shortly to be re-commissioned. Members asked if difficulty had been experienced in finding providers and were informed that 27 providers had expressed an interest in working in Stockton, and that the increased number would now give a better consistency and stability of care.

It was noted that a letter would be issued to the successful providers on 16 June, who would then have a 2-week period to challenge the process if required. Contracts had been allocated on a geographical basis, and South Central Stockton would be mobilised first in August, followed by the Northern area in October. The Customer Contact Centre team had been set up and would be briefed and ready to deal with any enquiries.

An update was given at the last Committee meeting about the Five Lamps Pilot, which is eligible to bid for the substantive contracts.

A review of progress would be held in June with Five Lamps and this would be reported back to the Committee as part of the reporting in update already scheduled. This would include the staffing breakdown, staff turnover, and consistency of care for clients.

The Chair felt it would be beneficial to receive an update on this, and members asked for information on people employed, number of hours worked (zero hours, full contracts etc). Members were concerned about the zero hours contracts on a long-term basis, and it was felt that although some staff may be happy with that, it should be discouraged amongst providers.

Members asked if an 18-year old would be paid the same as a 24-year old when carrying out the same job. It was noted that the majority of staff were over the age of 24 years, and although this was not in the contract and would have a cost implication, this could be looked at.

Members noted that, although budget constraints had to be taken into consideration, the calibre of employee was important.

ACCESS TO GP, URGENT AND EMERGENCY CARE

These recommendations were signed off as complete.

LICENSING AND PUBLIC HEALTH

Members commented on the amount of take-away shops opening in the area and were pleased that the Licensing Committee were looking at this. There was however a limit to what licensing condition could be placed on applications from a public health perspective.

AGREED that the information be noted.

- a) the assessments of progress be agreed
- b) the requests for information be provided.

ASH Mental Capacity Act Deprivation of Liberty Safeguards (DoLS) Update

24/17

In line with the recommendations from the scrutiny review, a report was provided detailing the latest progress.

Members were delighted with progress, particularly in reducing the amount of time spent on documentation, giving more time to spend with people.

AGREED that the report be noted.

ASH **Adult Care Management - Reporting-In Review**

25/17

Three of the Lean reviews had been carried out for the following processes – assessment process, support planning process and client financial services

A summary of the action plans was tabled.

Members asked where funding was obtained for laptops, tablets and mobile phones to support mobile working. It was noted that this was mostly from an underspend in the staffing budget for Adult Social Care, a proportion of the corporate structure budget and additional social care funding for the next 3 years.

Members asked for comparisons on efficiencies and reducing paperwork. It was noted that more efficient processes were obtained with the technology.

AGREED – that the information be noted.

ASH **Tithebarn Registered Patient GP Service**

26/17

Due to the ongoing procurement process, the Committee was informed that there was nothing substantial to report to the Committee at this meeting. This would be re-arranged for the July meeting.

AGREED – that the information be noted.

ASH **Work Programme**

27/17

The next meeting to be held on 11th July.

In addition, an evidence session would be held next week to hear from the Ambulance Service and the Head of A&E at North Tees Hospital to inform the Review of Defibrillators – this would then be taken forward to the next meeting in July. The Chair requested that members attend and apologised for the short notice.

Tithebarn Registered Patient GP Service would be discussed at the July meeting if CCG in agreement.

AGREED – that the Work Programme be noted.

ASH **Chair's Update**
28/17

The Chair had nothing further to report.