Health and Adult Social Care Overview and Scrutiny Panel

Wednesday 31 March, 2010

PRESENT:

Councillor Mrs. Watkins, in the Chair. Councillor Gordon, Vice-Chair. Councillors Berrow, Browne, Delbridge, Mrs. Nicholson and Stark.

Co-opted Representative: Mr. Boote (LINk).

Apologies for absence: Councillor Mrs. Aspinall and Ms. Schwarz (PHT).

The meeting started at 10.00 a.m. and finished at 12.30 p.m.

Note: At a future meeting, the committee will consider the accuracy of these draft minutes, so they may be subject to change. Please check the minutes of that meeting to confirm whether these minutes have been amended.

71. APPOINTMENT OF VICE-CHAIR

In the absence of the Vice-Chair, Councillor Gordon, having been proposed by the Chair and seconded by Councillor Delbridge, was appointed Vice-Chair for the purposes of this meeting only.

72. DECLARATIONS OF INTEREST

There were no declarations of interest made in accordance with the Code of Conduct.

73. MINUTES

Resolved that the minutes of the meetings held on 27 January and 23 February, 2010, be confirmed, subject to the amendment of Minute 68(6) to reflect the fact that a briefing paper be circulated to panel members in the first instance and that only in the event of concerns being raised would a report be presented to a future meeting of the panel.

CHAIR'S URGENT BUSINESS

74. Scrutiny of Health Commissioning

The Chair advised that the panel had been invited to submit comments on a draft scrutiny guide which had been prepared by the Centre for Public Scrutiny. The purpose of the guide was to raise awareness of the opportunities for health scrutiny panels to get involved in the scrutiny of health commissioning and particularly to focus on health inequalities.

Resolved that -

- (1) panel members submit comments on the draft guide to the Democratic Support Officer by 6 April, 2010;
- (2) authority to respond on the panel's behalf be delegated to the Democratic Support Officer, in consultation with the Chair and Vice-Chair.

75. **Lead Officer**

The Chair updated the panel on the latest position with regard to its Lead Officer following the departure of Christina Smale. Members were advised that Ian Gallin, Assistant Chief Executive, had been proposed to take over the role but the Chair had met with him and raised concerns about —

- whether it was appropriate for him to support the conflicting roles of both cabinet and scrutiny
- whether he had the capacity to take on such a significant role, given his already demanding workload

As a result, an alternative Lead Officer was being considered but could not yet be confirmed.

(In accordance with Section 100(B)(4)(b) of the Local Government Act, 1972, the Chair brought forward the above item of business because of the need to consult Members).

76. SOUTH WESTERN AMBULANCE SERVICES NHS TRUST - FOUNDATION TRUST CONSULTATION RESPONSE

The panel noted the report from South Western Ambulance Service NHS Trust which provided details of the consultation undertaken as part of its move toward becoming a Foundation Trust.

77. MODERNISATION OF BROADMOOR HOSPITAL

The panel noted the briefing paper from the NHS South West Specialised Commissioning Group regarding the planned modernisation of Broadmoor Hospital. Members were advised that the proposals would have minimal affect on Plymouth citizens.

78. INFECTION CONTROL BRIEFING

The panel received a report from the Plymouth Hospitals NHS Trust updating them on infection control measures and performance at Derriford Hospital. In attendance to present the report was Dr. Peter Jenks, Director of Infection Prevention and Control. The report provided statistics relating to the Trust's performance in respect of —

- Clinical cases of Meticillin-Resistant Staphylococcus Aureus (MRSA)
- MRSA bacteraemias
- Clostridium difficile
- Hand Hygiene
- Surgical site infection rates

In response to questions raised, the panel were further advised that –

- (i) infection audits were carried out regularly on all wards on a three-monthly cycle. Each ward undertook its own audit for two months of the cycle and during the third month the Infection Control Team would make an unannounced visit:
- (ii) the year-on-year improvements in infection control standards had been achieved for a number of reasons, including
 - investment in the Infection Control Team
 - raising awareness of the importance of hand wash
 - isolation of patients
 - MRSA screening

These changes had been fully supported by the Trust Board and were now embedded throughout the Hospital;

- (iii) all patients were screened prior to admission for surgery. Anyone identified as having an infection was given a five day course of treatment comprising application of a nasal cream two days prior to admission and three days after surgery;
- (iv) educating the public was an identified area for improvement and work had already begun in this regard, including
 - poster competition in schools
 - development of a questionnaire to establish how much/or little people actually knew
 - establishment of a focus group to look at how the Trust could engage better
- (v) membership of the focus group comprised hospital staff whilst the engagement project was being scoped but, once completed, this would be widened to include other interested parties;
- (vi) Members' assistance in helping the Trust to engage with the public was welcomed and Dr. Jenks would come back with suggestions once he had taken time to give more thought to the matter.

The panel congratulated the Trust on its performance in regard to infection control and thanked Dr. Jenks for his attendance.

Resolved that a further update be presented to panel in 12 months' time, the next report to include the actual number of incidents recorded in addition to percentages.

79. CARERS CHAMPIONS

This item was deferred for consideration at the meeting on 14 April, 2010.

80. PROJECT INITIATION DOCUMENT - CARERS

The panel received for its consideration a copy of the project initiation document (PID) prepared with a view to undertaking a task and finish group to look at carers. Members were advised that, subject to panel approval, the PID would be submitted to the Overview and Scrutiny Management Board's meeting that afternoon.

<u>Recommended</u> that the Overview and Scrutiny Management Board be requested to approve the panel's proposal to undertake a task and finish group in respect of Carers.

81. LINK UPDATE

The panel's co-opted representative presented an update on the work being undertaken by the Plymouth LINk. Members were advised that –

- (i) questions which could not be answered would be responded to in writing after the meeting;
- (ii) Plymouth's Primary Care Trust (PCT) was still not meeting the Government's target of 65 per cent with regarding to providing access to an NHS dentist. The LINk was working with the Trust to ensure that this would significantly improve over the next 12 months;
- (iii) relations between the PCT and care homes had not been very good, particularly around patient discharge. One of the problems identified by the LINk had been the lack of attendance of a suitable PCT representative at the Care Homes Forum. This had since been resolved via the attendance of the Deputy Director of Primary Care;
- (iv) the LINk was working with two specialist nurses to develop process and procedures aimed at improving the treatment of people with learning disabilities whilst in hospital;
- (v) the LINk had been invited to form part of –

- an inspection team looking at cleanliness at Derriford Hospital to monitor performance of the Serco contract
- a review team tasked with assessing whether or not Derriford Hospital should be designated as a Burns Centre as part of the specialised commissioning process
- a review team tasked with reviewing access to social services
- (vi) the success of the City Centre Health Day would determine whether or not it became an annual event:
- (vii) copies of the LINk promotional leaflet would be made available to Councillors to pass on to constituents should they express an interest in becoming a member.

Written responses would be provided to the panel in respect of –

- the problems associated with patient discharge
- whether the cleanliness inspection at Derriford Hospital had been planned or a spot check
- the status of the LINk representative on the PHT Board
- the current membership of the LINk and the number of active members

82. CORPORATE IMPROVEMENT PRIORITIES (CIPs)

The Committee considered the briefing paper which provided an update on performance against the Council's Corporate Improvement Priorities, CIP3 and CIP4. In the absence of a presenting officer for this item, it was suggested that a written response to any questions asked would be provided in writing to members after the meeting. With this in mind, the following questions were noted for response -

- (i) why was the Council failing to achieve the target set against NI 135 and what remedial action was being taken to address the situation?
- (ii) was the Council comparing like for like in terms of benchmarking, could details of the comparatives used be provided?
- (iii) in regard to NI 141, could a definition of vulnerable be provided?
- (iv) the table in section 5 of the report was incomplete, could a more detailed overview of the milestones be provided?

Resolved that -

(1) with regard to (i)-(iv) above, the Assistant Director for Adult Health and Social Care be requested to provide a written

response to the Democratic Support Officer for onward dissemination to panel members;

- the statistics provided in future reports to include numbers as well as percentages;
- (3) a copy of the action plan to reduce health inequalities, identified as a key area of under performance in the Council's Comprehensive Area Assessment, be presented to a future meeting of panel.

83. QUARTERLY REPORT

The panel received for its information a copy of the quarterly report.

Members noted the report with interest and sought assurance that the panel's remaining budget of £905.42 would be carried forward to 2010/11. The Chair reported that, as far as she was aware, the money would be ring-fenced. However, clarification would be sought from the Overview and Scrutiny Management Board which was meeting that afternoon.

84. TRACKING RESOLUTIONS

The panel received for its information a copy of the tracking resolutions schedule. With regard to –

- (i) Minute 56 the Chair reported that she had met with the Chief Executive and the Director for Community Services and been advised that the Director for Public Health already attended all of the strategic meetings necessary and had regular dialogue with the Assistant Chief Executive. The panel's recommendation was not therefore required;
- (ii) with regard to Minute 61(2) the Chair advised that she would be speaking to the Assistant Chief Executive to identify a way forward;
- (iii) with regard to Minute 68(3) the Democratic Support Officer would make enquiries of the Assistant Director for Adult Health and Social Care as to when the results of the survey would be available;
- (iv) with regard to Minute 69(2) the Chair advised that she would be speaking to the Assistant Chief Executive to identify a way forward.

85. WORK PROGRAMMES 2009/10 AND 2010/11

The panel noted its work programme for 2009/10 and its draft work programme for 2010/11. The Chair reported that she would be working

closely with the Chair of the Healthy Theme Group during 2010/11 to ensure that the work programmes were more closely aligned with a particular focus on tackling inequalities.

86. **EXEMPT BUSINESS**

There were no items of exempt business.