

## **Caring Plymouth**

**Thursday 4 July 2013**

### **PRESENT:**

Councillor Mrs Aspinall, in the Chair.

Councillor James, Vice Chair.

Councillors Mrs Beer, Fox, Gordon, Michael Leaves, Dr. Mahony, Monahan, Parker, Jon Taylor, Kate Taylor and Wright.

Also in attendance: Councillor McDonald – Cabinet Member for Public Health and Adult Social Care, Dave Simpkins - Interim Assistant Director for Joint Commissioning, Craig McArdle, Head of Joint Strategic Commissioning, Lin Walton, Mental Health Commissioner, Elaine Fitzsimmons and Sharon Matson from NEW Devon CCG, Debbie Stark, Interim Joint Director for Public Health and Rob Nelder, Consultant Public Health Intelligence, Vicky Shipway, Chief Executive – Colebrook Housing and Claire Hodgkins – Strategic Commissioning Manager.

The meeting started at 2.00 pm and finished at 5.00 pm.

*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.*

#### **1. TO NOTE THE CHAIR AND VICE-CHAIR**

Agreed that the Chair and Vice Chair are noted.

#### **2. DECLARATIONS OF INTEREST**

In accordance with the code of conduct, the following declaration of interest was made –

Name	Subject	Reason	Interest
Councillor Michael Leaves	Minute 6 – Mental Health Review – Delivering Pledge 90	Owner of a care home	Personal
Councillor Jon Taylor	Minute 7 – Urgent Care	Employee of NEW Devon CCG	Personal

#### **3. CHAIR'S URGENT BUSINESS**

There were no items of Chair's Urgent Business.

#### **4. TERMS OF REFERENCE**

The Panel noted the Terms of Reference.

5. **CABINET MEMBER FOR PUBLIC HEALTH AND ADULT SOCIAL CARE**

Councillor McDonald, Cabinet Member for Public Health and Adult Social Care and Dave Simpkins, Interim Assistant Director for Joint Commissioning provided the Panel with an overview of priorities for the next year. It was reported that –

- a) there were 1,000 people in residential care in Plymouth. In the past 12 months cross party working on this agenda had provided a comprehensive universal offer for everyone accessing social care services;
- b) it was important to evaluate the take up of personal budgets and direct payments and to ensure that we are on course to meet the 80 per cent target. There were budget pressures with the demographics of an increasing elderly population;
- c) the Health and Wellbeing Board had recently agreed their vision and were looking at a systems leadership model which had attracted some attention nationally;
- d) a strategy to improve the quality of care and to support care homes in Plymouth was being produced;
- e) the Dementia Quality Mark standard had been achieved and was included in the Plymouth directory.

In response to questions raised, it was reported that -

- f) Plymouth was well prepared to maintain people safely and effectively in their own homes. Our transformation agenda had made Plymouth slightly better prepared in dealing with the increase in the older population;
- g) the public health agenda was crucial in the universal offer for looking after older people and to access medical services and to have a healthier old age. The Marmot Report highlighted that if you get the first few years of life right you set the course for a much healthier adulthood;
- h) they were looking at the whole process around early intervention and prevention to enable people to live in their own homes and within their communities as long as possible. Reviewing the services people can access to ensure greater choice and support.

6. **MENTAL HEALTH REVIEW - DELIVERING PLEDGE 90**

Craig McArdle, Head of Joint Strategic Commissioning and Lin Walton, Mental Health Commissioner informed the Panel on how the review would be completed. It was reported that –

- a) good work had been undertaken in this area and would look at previous scrutiny reviews to draw information from;

- b) the scope of the review was extensive and critical examination would be undertaken to gather feedback and experiences;
- c) the service user voice was at the heart of the review with extensive engagement with children on CAMHS and the Chair of Mental Health Forum;
- d) the aim was to commence the review in July and conclude in December and findings would form the NEW Devon CCG Mental Health Strategy.

In response to questions raised, it was reported that -

- e) the police would form part of the review to look at the gaps in service provision at night. There was a new project with mental health practitioners working in the custody and court system to support and help people with mental health needs;
- f) they were working more closely with the Mental Health Provider Network and Healthwatch would be the focus of attention for the review. Community stakeholder events would also be taking place.

Agreed that –

- 1. CAMHS to form part of the review process.
- 2. a variety of stakeholders not just services users are involved in the consultation.
- 3. the Panel members volunteer to participate in some of the public consultations for this review.

## 7. **URGENT CARE**

Elaine Fitzsimmons and Sharon Matson from NEW Devon CCG provided the Panel with a report. It was reported that -

- a) all emergency departments have a 4 hour target. The emergency department at Derriford Hospital in quarter 1 and the impact of the cold winter meant that patients were waiting longer than 4 hours. There were three overarching causes which led to the Emergency Department not delivering,
- b) the demand for emergency care had not gone up but mix of people presenting at hospital had changed. People were a lot more unwell and needed to stay at Derriford hospital longer which had led to a backlog;
- c) they were required to produce an improvement plan on what they expect from Derriford hospital over the next couple of months. They would monitor the plan twice a month on how the services were responding. Performance was improving and there were robust continuity plans in place to avoid escalation.

In response to questions raised, it was reported that -

- d) the action plan timescale to be achieved by the end of Quarter 1 in September and they would provide an update to the Panel in November;
- e) work was taking place on how to appropriately deal with patients coming into the emergency department with additional needs such as dementia;
- f) the action plan would cover all the elements of the urgent care system, on how they commission, communicate with the public and ensure better links between services. The plan focuses on the 4 hour proxy indicator and there were other indicators that focused on wider care.

A report was provided to the Panel on NHS111 and it was reported that -

- g) the South West Ambulance Trust (SWAST) would run this service with the advantage of having a good understanding of the local community;
- h) they had made a decision to defer the start date allowing them the opportunity to take a stock take in the planning of the service. It was planned to have a soft launch in September;
- i) the quality of the call handlers had been subject to press coverage. There would be at least one clinician available for every 6 call handlers. SWAST staff were the best trained staff in the country and they were sharing good practice with the other areas;
- j) they would take the implementation slowly to enable them to iron out any issues and would closely review the process during this time.

In response to questions raised, it was reported that -

- k) the service would be based in Exeter which provided a synergy with 999 calls already based in Exeter;
- l) they would be keeping a close eye on Cornwall. As part of the planning process they had made switches based on neighbouring numbers. They were also working closely with the Emergency Department in advance of the implementation of the service.

Agreed that -

1. the Panel receive a progress report on Derriford's A&E figures in November and an officer to attend if progress has stalled/declined (to include other wider aspects of preventing urgent care).
2. the Panel accept the open invitation to visit the SWAST Headquarters in Exeter.

3. the Panel to receive a progress report on the implementation of NHS III at its meeting on 13 February 2014.
4. a colour copy of the Emergency Department Performance Improvement Plan is circulated to Panel members.

(Councillor Mike Fox was present at the meeting from the agenda item onwards).

## 8. **PUBLIC HEALTH**

Debbie Stark, Interim Joint Director for Public Health and Rob Nelder, Consultant Public Health Intelligence provided the Panel with a report on Public Health's future plans and integration with Plymouth City Council. It was reported that -

- a) they were changing the health outcomes for the people of Plymouth and were pleased to be part of a co-operative council and working with Health and Wellbeing Board and Caring Plymouth;
- b) one of the big issues in Plymouth was the life expectancy between the rich and poor;
- c) they were looking at how the rest of the council was considering public health outcomes and what they were doing about prevention and inequalities;
- d) they were looking for health champions and were looking to the Caring Plymouth Panel to take on this opportunity. Training would be provided for interested Panel members by the Royal Society for Health.

In response to questions raised, it was reported that -

- e) they would work with different teams across the council on how they can improve the health outcomes in the city;
- f) a tool had been developed to monitor how Plymouth was performing in each neighbourhood and how they actively work with partners on targeted activity;
- g) there were 32 indicators that were red against national comparator and the key themes were reviewed by the Health and Wellbeing Board;
- h) they had linked together inequality and poor health and were monitoring this across the city.

Agreed that -

1. the Panel take up the offer of training to become health champions by Royal Society of Health. Invitations to be extended to other councillors.
2. all Plymouth City Council reports to include a public health impact section.

3. the Panel to consider the 32 indicators and 9 themes areas of poor performance as part the presentation received by the Health and Wellbeing Board at the next meeting in September.

## 9. **HEALTHWATCH PLYMOUTH**

Vicky Shipway, Chief Executive for Colebrook Housing and Claire Hodgkins, Strategic Commissioning Manager provided the Panel with an overview on Healthwatch. It was reported that –

- a) they had been involved in a long line of patient and public involvement. The service was to engage as many people as it could and be a champion for health and social care. More importantly their aim was to involve people to ascertain what the priorities were;
- b) they would provide a signposting service to give people enough information to be able to make the right choices;
- c) Healthwatch would scrutinise health and adult social care services and there was a debate around the country on how Healthwatch would be scrutinised.

In response to questions raised, it was reported that -

- d) enter and view checks areas of feedback and the Care Quality Commission (CQC) undertake different types of visits. For a visit to be undertaken they need to work with partners to avoid duplication. Healthwatch England was part of CQC with the aim to gaining a holistic view of services at national level;
- e) they were testing out different methods of spreading the word and getting Healthwatch known to a wider audience;
- f) there were currently 8 to 9 volunteers at Healthwatch with more in the pipeline. A press release asking for voluntary and community involvement would be produced shortly.

## 10. **WORK PROGRAMME**

The Panel discussed the work programme for the next year. It was agreed that the following to be included –

### Work Programme

Maternity Services

Stroke Pathway

Unused Prescription Drugs

Cancer Waiting Times

### Co-operative Review

Health Accountability Forum

One-off session

To cover the relationship between the Health and Wellbeing Board, NEW Devon CCG and Local Area Team to look at roles and responsibilities.

11. **FUTURE DATES AND TIMES OF MEETINGS**

The Panel noted the future dates and times for Caring Plymouth.

12. **EXEMPT BUSINESS**

There were no items of exempt business.