

Health and Adult Social Care Overview and Scrutiny Panel

Wednesday 23 September, 2009

PRESENT:

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

Co-opted Representative: Vacancy

Apology for absence: Councillor Kerswell.

The meeting started at 10.00 a.m. and finished at 1.15 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.

11. DECLARATIONS OF INTEREST

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

12. MINUTES

Resolved that the minutes of the meeting held on 29 July, 2009, be confirmed as a correct record.

13. Co-options

The Chair –

- (i) sought the panel's opinion on co-opting non-executive board members from the Primary Care Trust and Plymouth Hospital NHS Trust;
- (ii) reported that Barry Lucas, LINK representative, had stepped down from his role on the panel for health reasons and, as an interim measure, Vicky Shipway from Colebrook Housing would be attending meetings in order to keep Members informed of the LINK's progress.

In regard to (ii) above, Vicky Shipway advised that the Chair of the LINK's Stewardship Group, Chris Boot, had agreed to take on the role and would be attending future meetings of the panel.

Resolved that –

- (1) letters be sent to the Primary Care Trust and Plymouth Hospital NHS Trust inviting each of them to nominate a non-executive board member to serve as a co-opted representative on the panel;
- (2) the LINK's replacement Co-opted Representative nomination be noted and referred to the Overview and Scrutiny Management Board for approval.

14. Nomination of Substitute for Management Board

The panel was advised of the need to appoint a substitute member to attend meetings of the Overview and Scrutiny Management Board, as per the Management Board's terms of reference. The rationale behind this was to ensure that each scrutiny panel was represented

at every meeting of the Management Board. The substitute member must have received the required finance training and be from the same political party as the member for whom they were substituting.

Resolved that Councillor Stark be the nominated substitute from the Health and Adult Social Overview and Scrutiny Panel.

15. **Quarterly Scrutiny Report**

The panel was advised that the Overview and Scrutiny Management Board would be receiving quarterly scrutiny reports at its 4 November meeting. As not all panels were meeting in October, it would be necessary to consider delegating approval of the scrutiny reports to the Lead Officer, in consultation with the Chair and Vice-Chair, prior to their submission to Management Board.

Resolved that delegated authority be given to the Lead Officer of the panel, in consultation with the Chair and Vice-Chair, to approve the panel's quarterly scrutiny report prior to it being forwarded to the Overview and Scrutiny Management Board meeting on 4 November, 2009.

(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).

16. **SOFT TISSUE SARCOMA**

The panel considered a report by the South West Specialised Commissioning Group regarding service development proposals for the treatment of soft tissue sarcoma in adults. The report –

- (i) indicated that, currently, patients from the Peninsula Cancer Network (Cornwall and the Isles of Scilly, Plymouth, Torbay and Devon) were treated by Royal Devon and Exeter NHS Foundation Trust or Plymouth Hospitals NHS Trust;
- (ii) advised that there had been 279 incidence within the Peninsula in the last 3 years;
- (iii) proposed that two centres be provided in the north and south of the region to serve the Avon, Somerset and Wiltshire and Peninsula populations.

In response to questions raised, the panel heard –

- (iv) that the South West Specialised Commissioning Group was responsible for putting together the proposal as far as surgery and any associated treatments were concerned. However, behind this proposal, and any other service changes, there would be a need for a health and social care framework to be put in place to support it;
- (v) that following the initial round of consultations with the Peninsula health scrutiny panels, the next stage would be a competitive procurement process to select a provider for each network. Once this had been completed, the South West Specialised Commissioning Group would return to the scrutiny panels with its final recommendations for approval;
- (vi) with an increasing ageing population, it was anticipated that there would also be an increase in incidences of sarcoma;
- (vii) that part of the preliminary specification for this service change proposal would include training for GPs around diagnosis then, as knowledge and diagnosis improved, referrals would be able to be made direct to the specialist centre;

- (viii) that the views of the other scrutiny panels would be circulated to panel members for their information.

The panel welcomed the comprehensive report, particularly the inclusion of the glossary which had been most helpful, and thanked the representatives from the South West Specialised Commissioning Group for their attendance. Although the principle of developing centres of excellence was welcomed, Members recognised that patients had other outcomes to consider besides medical, such as emotional and financial wellbeing. They, therefore, asked that steps be taken to ensure the needs of patients having to travel and requiring overnight stays be met and supported along with those of their families.

Resolved that -

- (1) the proposed approach to providing soft tissue sarcoma services for residents be noted;
- (2) the improved quality and safety of the service that residents would receive be noted;
- (3) the involvement of patients, clinicians and the public in the process to date be noted;
- (4) the proposed approach, including the intention to designate two soft tissue sarcoma centres in the South West region, ready for service delivery in Spring 2010 be supported.

17. **SOUTH WEST AMBULANCE SERVICES NHS TRUST - FOUNDATION TRUST CONSULTATION**

The panel welcomed Lynne Paramor, Associate Director of Strategic Communication and Public Relations, who was in attendance to present and consult upon the Trust's proposals for achieving Foundation Trust status. Members were advised that this was the start of the statutory 12-week consultation period and the aim of the presentation was to seek their views on the Trust's –

- Mission, vision and values
- Journey so far and future priorities
- Thoughts about the benefits of becoming an NHS Foundation Trust
- Proposed membership plans
- Proposed Governance and Council of Governors
- Plans for what happened next

In response to questions raised, the panel heard that –

- (i) charges were applied for ambulance call-outs in certain circumstances. The nature of those circumstances, together with details of the amount charged would be provided to the panel members in writing;
- (ii) the Fire Authorities were aware of the Trust's proposals through discussions held at Chief Executive level;
- (iii) over 144 consultation events, including 5 all-day events, had been scheduled along with relevant press and media coverage. One of the all-day events would take place at Plymouth Guildhall on Monday 5 October, 2009, and panel Members would be most welcome to attend
- (iv) membership of the Council of Governors would be split geographically and per capita.

The Chair congratulated the Trust on being the best performing ambulance trust in the Country and welcomed the fact that the citizens of Plymouth benefitted from such an excellent service.

Resolved that the –

- (1) Trust's application for Foundation Trust status be supported;
- (2) panel makes a formal response to the consultation.

18. **LINK UPDATE**

The panel welcomed Vicky Shipway, LINK/PAPOP Support Team Manager, who was in attendance to provide an update on the work of the LINK. Members heard –

- how the LINK had been establishing itself in its first year of operation and was continuing to develop and build new relations
- that as a result of successful promotion across the City it now had over 1,000 members
- that it had been training its Visiting Team in preparation for undertaking unannounced inspections
- that it had looking at ways of working with scrutiny and had produced a draft protocol
- that it had been identifying priorities for inclusion in its work programme and these had now been agreed as –
 - GPs – focus on promotion of extended opening hours
 - Dentists – lack of access
 - Mental Health Services – focus on promotion of what is available
 - Derriford Hospital – waiting times
 - Carers' Support – promotion of availability

In response to a question raised, the panel heard that NHS Plymouth was responsible for putting together and publicising the list of available NHS dentists in the City and this was available on its website.

19. **MATERNITY SERVICES - MONITORING PROVISION/ACTION PLAN**

The panel welcomed the Chief Executive of Plymouth Hospitals NHS Trust, together with the Acting Heads of Midwifery, who were in attendance to report on the provision of maternity services at Derriford Hospital. The presentation updated Members on progress being made on the following –

- Healthcare Commission Action Plan
- National Maternity Drivers
- Maternity and Newborn Care Programme
- Maternity and Newborn Strategy

In response to questions raised, Members were advised that –

- (i) representatives from the Midwifery Service were on the working group that had been set up to look at teenage pregnancies and repeat conceptions;
- (ii) the patient survey (which was anonymous) had been split into 3 categories to specifically target post-natal care and encourage a higher response rate all round, however, an overall return of 54% had established that this had not been the case and the next patient survey would be reverting to its former format;
- (iii) over 30% of pregnant women using Derriford's maternity services were classified low-level risk and did not need to be in a hospital environment. A

national driver, and one of the Trust's strategic health targets, was to provide an alternative place of birth and, to this end, a business plan had been put together for providing a purpose-built midwifery unit. The proposal would be considered by the Trust's Capital Strategy Group next month;

- (iv) the length of stay in hospital was dependent upon the type and nature of delivery. However, the results of the patient survey indicated that the majority of women felt their length of stay had been appropriate;
- (v) women were given access to 6 sessions of pre-natal care, one of which focussed on breastfeeding. These sessions were generally provided at community health or children's centres;
- (vi) the Hospital's Trust and Plymouth City Council were working very closely together toward achieving Baby Friendly status for the City. The first stage of the assessment had been completed and the assessment for the second stage was expected by the end of the year;
- (vii) there were a total of 202 midwives employed by the Trust. Those working in the Hospital provided care for women from as far a field as South East Cornwall, West Devon and the South Hams. Those working in the community provided care to women, not only in Plymouth, but from parts of the South Hams, West Devon and down to South East Cornwall;
- (viii) the quarterly report on smoking cessation was currently awaited, however, there had been a definite improvement in take-up since the Smoking Cessation Service had been making contact direct in addition to communicating through the Community Midwives.

The Chair noted with interest that the Midwifery Service was represented on the teenage pregnancy working group and suggested that they may wish to participate in the joint task and finish group which was being set up to look at sexual health (minute 23(2) refers).

The panel welcomed the presentation and thanked the representatives from Plymouth Hospitals NHS Trust for their attendance.

Resolved that a copy of the Maternity Strategy be presented to the panel when available.

20. FOUNDATION TRUST STATUS AND HYGIENE CODE UPDATE

The panel welcomed the Chief Executive of Plymouth Hospitals NHS Trust and the Director of Nursing and Midwifery/Nurse Consultant in Critical Care, who were in attendance to report on cleanliness at Derriford Hospital and update Members on the Trust's application for Foundation Trust status.

With regard to improving cleanliness, Members were advised that –

- (i) following an unannounced visit by the Healthcare Commission in June 2008, the Trust was found to have been in breach of two of the three Hygiene Code standards;
- (ii) the Trust had immediately drawn up an action plan to address the concerns raised and a cleanliness action group now met on a fortnightly basis. In addition, the following four work streams had been developed to help the Trust improve the situation and maintain consistently higher standards -
 - Developing a culture of ownership
 - Standardising and improving the process
 - Enhancing the environment
 - Increasing user involvement and public confidence

- (iii) the Care Quality Commission had undertaken a conditions review visit in July, 2009, and had been satisfied with the 5 wards inspected. As a result, the Condition imposed in June 2008 had been lifted with effect from August 2009;
- (iv) unannounced yearly inspections by the Care Quality Commission would continue to take place.

In response to questions raised, Members were advised that –

- (v) every cleaner working at the hospital had met with the new contract provider to discuss the new working arrangements;
- (vi) that the service level agreement would be monitored, in the first instance, at ward level. This would be backed up by a series of inspections from which a database would be compiled and any trends quickly identified dealt with;
- (vii) visitors were not permitted to sit on patients' beds;
- (viii) staff leaving the hospital in their uniform were only supposed to do so if they were going directly home, otherwise it should be removed before leaving work.

The Chair commented that she had been most encouraged on her last visit to Derriford and was confident that the new contract provider would be a vast improvement. This feeling was reiterated by other panel Members who had recently visited the hospital, along with positive comments about the improvements to lighting and signage.

With regard to Foundation Trust status, Members were advised that the Trust had taken the decision not to pursue its application until next year when they would have to start the process all over again. They would be focussing on delivering good healthcare instead and if this was achieved, Foundation Trust status would follow.

The panel welcomed the presentation and thanked the representatives from Plymouth Hospitals NHS Trust for their attendance.

Resolved that number of extra staff employed as a result of the change in service provider be forwarded to the Democratic Support Officer for onward dissemination to panel Members.

21. LOCAL STRATEGIC PARTNERSHIP - HEALTHY THEME GROUP MINUTES

The panel received for its information a copy of the Local Strategic Partnership's Healthy Theme Group minutes of the meeting held on 18 May, 2009.

Resolved that –

- (1) the minutes be noted;
- (2) a copy of the Health Poverty Index 2007 be circulated to panel members for their information.

22. TRACKING RESOLUTIONS

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

- (i) Minute 7 – Dementia Strategy
since the agenda had been published several members had expressed an interest in the proposed memory clinic visit and arrangements would now be

put in place for this to proceed. Councillor Gordon asked that his name be added to the list;

(ii) Minute 8 – Tracking Resolutions (Use of Sunbeds)

the view of the Mayflower Trust Board remained unchanged and the sun bed would be kept in-situ until the Mayflower Centre was replaced by the Life Centre. The Chair would write again to the Cabinet Member providing him with the supporting evidence from the World Health Organisation and seeking an assurance that sun beds would not be installed in the Life Centre.

23. WORK PROGRAMME

The panel considered its work programme for 2009/10, as presented in its new format. The Chair also reported on progress being made on the health projects awareness-raising day which would provide an opportunity for community groups to showcase their work and inform Members of the additional services that were available locally to help support communities live healthier lives. The event would be held at the Jan Cutting Healthy Living Centre at a date to be advised. Finally, nominations were sought for a representative of the panel to serve as a member of the Plymouth Hospitals NHS Trust multi-storey car park working group.

Resolved that –

- (1) the new format work programme be noted;
- (2) the three nominations requested for the joint task and finish group with the Children and Young People's Overview and Scrutiny Panel be confirmed as –
 - Councillor Mrs. Watkins
 - Councillor Mrs. Aspinall
 - Councillor Delbridge
- (3) Councillor Stark be appointed as the panel's representative to the Plymouth Hospitals NHS Trust's multi-storey car parking working group.

24. EXEMPT BUSINESS

There were no items of exempt business.

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