Caring Plymouth

Thursday 14 November 2013

PRESENT:

Councillor Mrs Aspinall, in the Chair.

Councillor James, Vice Chair.

Councillors Casey (substituting for Fox), Gordon, Michael Leaves, Dr. Mahony, Monahan, Mrs Nicholson (substituting for Mrs Beer), Parker, Jon Taylor, Kate Taylor and Wright.

Apologies for absence: Councillors Mrs Beer and Fox.

Also in attendance: Also in attendance: Debbie Butcher – Head of Safeguarding, Rachel Silcock – Commissioning Officer, Lin Walton, Mental Health Commissioner, Councillor Sue McDonald – Cabinet Member for Adult Social Care and Public Health, Rob Nelder – Public Health Consultant, Craig McArdle – Head of Joint Strategic Commissioning, Katy Shorten – Strategic Commissioning Manager, Sarah Lees – Public Health Consultant and Amelia Boulter – Democratic Support Officer.

The meeting started at 2.00 pm and finished at 4.50 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.

23. **DECLARATIONS OF INTEREST**

In accordance with the code of conduct, the following declarations of interest were made –

Name	Subject	Reason	Interest
Councillor	Minute 27 – Dementia	Owner of a care	Disclosable
Michael Leaves	Strategy and Minute 29 –	home	Pecuniary
	Pledge 90 – Mental Health		
	Review		
Councillor Jon	Minute 26 – Carers	Employed by NEW	Private
Taylor	Strategy, Minute 27 –	Devon CCG	
	Dementia Strategy and		
	Minute 29 – Pledge 90 –		
	Mental Health Review		

24. CHAIR'S URGENT BUSINESS

The Chair informed the panel that she was recently interviewed by BBC Spotlight on the backlog of appointments at Derriford Hospital. The interview will be aired tomorrow evening and the Chair and Vice Chair would be meeting with Ann James, Chief Executive, Plymouth Hospitals NHS Trust to discuss this matter in further detail.

Agreed that all panel members read the relevant board papers and to raise any issue they feel should be discussed in further detail at future panel meetings.

25. MINUTES

Agreed that the minutes held on 26 September 2013 be confirmed.

26. CARERS STRATEGY

Debbie Butcher, Head of Safeguarding and Rachel Silcock, Commissioning Officer provided an update on the refresh of the existing Carers Strategy. It was reported that –

- a) they were still in consultation phase and would produce a final draft of the strategy in January;
- b) the priorities were unchanged and they were speaking with carers across the city to ask what they felt was important;
- c) the Carers Hub had gone live and they were now supporting 4,000 carers in the city;
- d) the carers budget spend is monitor quarterly and carers were able to access this pot of money.

In response to questions raised, it reported that -

- e) the strategy did not currently mention groups dealing with mental health issues and they were in touch with Plymouth Involvement and Participation Service (PIPS) to receive feedback and would add this to the refreshed strategy;
- f) they had a far better understanding on the number of young carers in the city. They were working with schools to identify further young carers and that teachers were trained to look for signs that a child could be a carer;
- g) a detailed offer on respite for carers would be included in the action plan. There are a range of short breaks for those being cared to choose from and carers do have a 24 hour plan of support.

Agreed that a review of the Carers Strategy takes place in the New Year following the consultation period and to review the action plan.

(Councillor Jon Taylor declared a private interest).

27. **DEMENTIA STRATEGY**

Lin Walton, Mental Health Commissioner, NEW Devon CCG, Debbie Butcher, Head of Safeguarding, Rachel Silcock, Commissioning Officer and Councillor McDonald, Cabinet Member for Public Health and Adult Social Care provided the panel with an update on the Dementia Strategy. It was reported that -

- a) this strategy covers the whole clinical commissioning group area and the strategy would also be shared with the Health and Wellbeing Board in the New Year:
- b) the action plan would be developed through the Plymouth Joint Dementia Strategic Commissioning Group following a consultation with service users and stakeholders:
- c) in 2014 it is predicted that Plymouth would have over 3,000 people over the age of 65 with dementia, this number is expected to grow;
- d) the strategy would focus on increasing and improving awareness of dementia, early diagnosis and intervention, support for service users and carers and improved dementia pathway;
- e) Plymouth has become the UK's first Dementia friendly city;
- f) by raising awareness, they have increased the number of memory cafes, have a carers hub, looking at an integrated hospital process and the team has been nominated for an innovation award and where shortlisted down to the last 5:
- g) Stoke Damerel school had gained national recognition on their work on dementia and the Local Government Association (LGA) had acknowledged Stoke Damerel as one of the top three schools in the country.

In response to questions raised, it was reported that -

- h) we do try to keep people in their own homes but dementia is an illness that cannot be managed and people needed extra care. This means we have to look imaginatively at care systems. I in 4 between the ages of 65 to 80 will have some form dementia, all cases would be based on assessment of need and the earlier you are able to intervene you will be able to have autonomy;
- i) they ensure providers have good practice in place and as well as providing dementia training for staff. They also provide support to care homes working towards the quality mark and on the Plymouth Online Directory (POD) will advertise those homes with the dementia quality mark;

j) for those people that slip through the net, the GP would be the first point of contact. It is important to work closely with GP practices to highlight those people suffering with dementia and working actively with commissioning colleagues on this.

Agreed that a review of the Dementia Strategy takes place in the New Year to review the action plan.

(Councillor Michael Leaves left partway through this item because the discussion moved to care homes).

(Councillor Jon Taylor declared a private interest).

28. PUBLIC HEALTH OUTCOMES

Rob Nelder, Public Health Consultant provided the panel with an overview on recently published Public Health Outcomes report. In response to questions raised, it was reported that -

- a) the Public Outcomes Report would also go to the Joint Commissioning Partnership and Health and Wellbeing Board and they ensure all data comes from the same source;
- b) there were massive inequalities between most deprived areas of the city with regard to breastfeeding. In Plymouth breastfeeding rates have remained poor for a number of years and they were looking to produce an action plan to address this. It was also reported that Sheffield University were offering incentives to mothers to improve breastfeeding rates:
- c) information was available in the city on domestic violence and every health visitor completes a form and reports on any violence within the family;
- d) Plymouth's settlement per head was the lowest in the country. The panel went onto discuss whether a letter sent to the minister with backing from the 3 MPs would support a better settlement?

The panel wanted to see what action plans were in place and the current trends. The panel also wanted to see how performance with a red rating would be addressed with a short narrative.

<u>Agreed</u> that the panel receive on a quarterly basis the Public Health Outcomes report to include trends and narrative on progress to address issues.

29. PLEDGE 90 - MENTAL HEALTH REVIEW

Craig McArdle, Head of Joint Strategic Commissioning, Katy Shorten, Strategic Commissioning Manager, Sarah Lees, Public Health Consultant and Lin Walton, Mental Health Commissioner provided the panel with an update on the Pledge 90 – Mental Health Review. In response to questions, it was reported that -

- a) they consulted with stakeholders and the Plymouth Involvement and Participation Service (PIPS) consulted with service users and carers and this information would form part of the review;
- b) in Plymouth there were no place of safety. If a person was too incapacitated for an assessment they would be put in a cell;
- c) mental health was the fastest growing problem with I in 3 people that could be suffering from mental distress;
- d) when a service person leaves they will not be able to leave without an NHS number and would be tracked. The MOD would not have any responsibility for a person once they have left in terms of healthcare and would come into the local clinical commissioning group.

Agreed that a review of Pledge 90, Mental Health takes place in December.

(Councillor Michael Leaves declared a disclosable pecuniary interest).

(Councillor Jon Taylor declared a private interest).

30. TRACKING RESOLUTIONS

The panel noted the progress of the tracking resolutions. With regard to -

Minute 7 – Urgent Care. The Chair reminded panel members to visit SWAST.

Minute 16 – Health and Wellbeing Strategy. This resolution was on-going..

Minute 17 – Improvements in Disabled Parking at Derriford Hospital. They met to and approved the plans prior to submission to Planning Committee and were consulted with and made dialogue happen with the disability groups.

31. WORK PROGRAMME

The Chair recently attended a workshop in Exeter on Transforming Community Services. The Integrated Transformation Fund was discussed (£3.8b). This was a joint fund and clinical commissioning groups and local authorities have to agree how the money would be spent to achieve better outcomes for patients.

A plan was being produced on how this would be achieved and would be submitted to the Department of Health on 15 February 2014. The plan would also be submitted to the Health and Wellbeing Board on 13 February 2014.

The Chair raised that it would be useful for the plan to come before the panel in February, however, the next meeting takes place just before the submission date. A proposal was put forward to change the date of the next Panel meeting to accommodate the plan.

The Panel noted the work programme and <u>agreed</u> that the next meeting is rearranged for the purpose of the panel having sight of the Integrated Transformation Fund Plan prior to submission to the Department of Health on 15 February 2014.

32. **EXEMPT BUSINESS**

There were no items of exempt business.