Health and Adult Social Care Select Committee

15 November 2018 – At a meeting of the Health and Adult Social Care Select Committee held at 10.30 am at County Hall, Chichester.

Present: Mr Turner (Chairman)

Dr Walsh Mr Petts Cllr Belben
Mrs Arculus Mrs Smith Cllr Boram
Lt Cdr Atkins Cllr Blampied Cllr Coldwell
Mrs Jones Cllr Neville Miss Russell

Dr O'Kelly Cllr Belsey

Apologies were received from Mr Barling, Mrs Bridges, Mr Edwards, Ms Flynn and Cllr Bickers

Also in attendance: Mrs Jupp

19. Declarations of Interest

19.1 In accordance with the code of conduct, Mr Belsey declared a personal interest in item 4, Relocation of the Special Care Dental Service at Littlehampton Health Centre, as a governor of Sussex Community NHS Foundation Trust.

20. Urgent Matters

20.1 The Chairman reported that as a result of recent inspections by the Care Quality Commission, South East Ambulance NHS Foundation Trust's rating had been upgraded to Requires Improvement. He also reported that the Trust's Chief Executive would be leaving next Spring and that a new Chairman had been recently appointed.

21. Minutes of the last meeting of the Committee

- 21.1 The Committee agreed to add the following two comments to minute 17.6: -
- The Committee would like to have sight of Coastal West Sussex Clinical Commissioning Group's Human Resources Strategy that supports its Estates Strategy
- The Committee would like to remind Sussex Community NHS
 Foundation Trust of the Secretary of State for Health & Social Care's
 statement that no more community beds would be lost
- 21.2 Resolved that the minutes of the meeting held on 27 September, with the addition of the two bullet points above, be approved as a correct record and that they be signed by the Chairman.

22. Relocation of the Special Care Dental Service at Littlehampton Health Centre

22.1 The Committee considered a report by Sussex Community NHS Foundation Trust (SCFT) (copy appended to the signed minutes) that was introduced by Lloyd Barker, Area Director: Central, Children's Services, Dental, Podiatry and Wellbeing SCFT who told the Committee that: -

- The Littlehampton site was not compliant with Health & Safety regulations, did not meet NHS England standards, did not meet Care Quality Commission standards, and did not provide the full range of services
- Some patients with mobility issues already went to either Worthing or Chichester due to the safety risks at Littlehampton
- Recruitment and retention was a problem at the Littlehampton site
- The average distance travelled by patients would only increase by two miles
- Consultation on the proposals had commenced contact had already been made with service users

22.2 Summary of Members' comments and question responses: -

- Patients' home postcodes were used to calculate new travel distances
- Of the six patients that had provided feedback on the proposals, two had concerns over travel to the new locations and the Trust was working with those two to mitigate the potential impact
- Local dentists had capacity to take on the routine work done by the clinic, but specialist treatment would have to be carried out in either Worthing or Chichester, where there was also capacity
- Depending on the details of the wider estates plan, reinstating the service in Littlehampton could be an option if the right staff were available, but this is a decision for the commissioners. It would also need to be a multi-chair clinic
- A better facility with a full range of dental services might make recruitment and retention of staff easier
- The Worthing centre had been refurbished and was recruiting new staff
 the dentist from the Littlehampton clinic had agreed to work one day
 a week in Worthing to provide continuity for the patients who transfer
- SCFT was keen to carry on running the service which was commissioned by NHS England – NHS England was happy with the proposals as it would make the service more robust
- Patients included those with learning disabilities and autism and could be any age
- As well as the consultation document, families had also received letters and had conversations with SCFT

22.3 Resolved – that the Committee

i. Understands the rationale for the proposed relocation of the Special Care Dental Service and asks that consideration be given to making this a temporary measure until further work is done on utilising the proposed community hub in Littlehampton, putting emphasis on partners in the public sector to work together and that this should be done at pace. ii. Asks that the consultation results are shared with the Committee

23. Cabinet Member Response

- 23.1 The Committee welcomed the extension of current housing related support contracts to the end of September 2019.
- 23.2 Resolved that the Committee notes the response.

24. Forward Plan of Key Decisions

24.1 Resolved – that the Committee notes the Forward Plan of Key Decisions.

25. The Adult Social Care Improvement Programme - beyond 100 days

25. The Adult Social Care Improvement Programme - beyond 100 days

- 25.1 The Committee considered a report and presentation by the Executive Director Children, Adults, Families, Health & Education and the Director of Adults' Services (Interim) (copies appended to the signed minutes) which were introduced by Dave Sargeant, Interim Director of Adults' Services who told the Committee: -
- To meet the challenges arising from the Peer Review report, work was moving at pace divided into 100 day units of remedial actions that could be achieved quickly and identifying longer term actions
- The Peer Review report said that Adults' Services was not outward looking, needed to show evidence that it was preparing for integration with health, needed to be Care Act compliant, had to clear its backlog of assessments and lacked the capacity to make the changes needed to improve
- There had been good project support and involvement from across the Council
- Some social worker training had been identified as being outdated and was being updated with e-learning and understanding the Care Act
- Customer experience needed to improve
- Safeguarding wasn't as big a problem as suspected by the Peer Review, but a new timescales had been introduced to deal with issues with the most urgent being dealt with within 24 hours, less urgent within three days and all being signed-off by a manager within five days of being reported
- The service had been prioritising reviews over assessments a managed service had been introduced to clear the backlog of assessments, of which 80% were for occupational therapy, by the end of the year
- Another managed service was required to clear the backlog of assessments relating to Deprivation of Liberty Safeguards (DoLS)
- Extra capacity had been put in place to improve the leadership and culture of the service and a permanent Director of Adults' Services would be starting in January 2019

- A lot of work had taken place on performance and systems as some of the data provided for the Peer Review had been of poor quality leading to false assumptions in future projects.
- One of the lessons learned was about more collaboration with frontline staff

25.2 Sarah Farragher, Head of Adult Services Improvement Programme, told the Committee: -

- A vision and strategy had been developed and there would be a consultation on the final versions in January
- The vision built on the West Sussex Plan wanting West Sussex to be a good place to live for older people with community-led support
- The strategy aimed for integration with health by 2020
- Care homes would be considered as the last option for people
- There needed to be a balance between safeguarding and protecting people
- Support should be around what works for people, not the service
- The strategy will mainly be an improvement programme over three years focussing on: -
 - Following-up on work done through the innovation sites
 - Care Act compliance
 - Market capacity and workforce issues
 - IT systems

25.3 Summary of Members' comments and question responses: -

- The Transformation Programme had looked at co-design and best practice in other local authorities and will use it going forward as well as working with local Members
- Extra care schemes could provide housing with support as an alternative to care homes
- All stakeholders and partners would be invited to take part in the consultation on the vision and strategy – easy read versions would be available
- There was already some joint commissioning and integrated service delivery with health and a lot of work was going on through the Health & Wellbeing Board to improve joint working which should save money in the long-term
- The project structure was almost complete and increased capacity in Adults' Services would help deliver projects in conjunction with partners
- The successful Hampshire County Council model would be adopted to clear the DoLS backlog
- West Sussex was nearly fully staffed with occupational therapists, but had shortages in social workers compared to neighbouring counties
- The Health & Wellbeing Board was working on workforce within its strategy across health and social care
- The outcomes from the innovation sites pilots and recruitment campaigns would be shared with the Committee
- The Peer Review had been reported to Members of the Council via the Members' Information Service newsletter and the Members' Information Network

- The Cabinet Member for Adults & Health had spoken to the Cabinet Member for Highways & Infrastructure about the effects of possible reductions in bus subsidies
- The Committee welcomed the progress made

25.4 Resolved – that the Committee

- i. Supports the outline of the proposed plan (3 year improvement plan underpinned by the vision and strategy) and makes the following key points:
 - a) The importance of resourcing this project appropriately
 - b) The importance of pursuing joint commissioning as part of health and social care integration
 - c) Place emphasis on preventing social isolation and the importance of social prescribing projects
- i. That further details are shared with all Members of the County Council, including key figures such as backlog data
- Requests further detail on the outcomes of the innovation sites and recruitment and retention of adult social care workers and
- iii. Welcomes a further item on the next 100 days of the improvement programme

26. Joint Health Overview Scrutiny Committee Terms of Reference

- 26.1 The Committee considered a report by the Director of Law and Assurance (copy appended to the signed minutes) which was introduced by Helena Cox, Senior Advisor, who told the Committee that the Joint Health and Overview Scrutiny Committee (JHOSC) could only supersede the Health & Adult Social Care Select Committee if an issue affected more than one authority.
- 26.2 The Chairman pointed out that the Committee could have four representatives on the JHOSC, including one co-opted member, and that the appointments had to be politically balanced.
- 26.3 The Chairman nominated himself, Mr Turner, as one of the Conservative representatives, the Vice Chairman, Dr Walsh, as the Minority Group representative (with Dr O'Kelly as Minority Group substitute) and Miss Russell of Healthwatch West Sussex as the co-opted representative. The nominations were agreed by the Committee leaving one Conservative place to be filled.
- 26.4 Mrs Arculus and Mrs Jones put themselves forward to fill the remaining Conservative vacancy, a ballot was held with the nomination going to Mrs Arculus with Mrs Jones as Conservative substitute.
- 26.5 Resolved that the Joint Health and Overview Scrutiny Committee Terms of Reference are agreed.

26.6 Resolved – that the Health & Adult Social Care Select Committee representation on the Joint Health and Overview Scrutiny Committee is as follows: -

Conservative – Mr Turner and Mrs Arculus with Mrs Jones as substitute Minority Group – Dr Walsh with Dr O'Kelly as substitute Co-opted Member – Miss Russell

27. Brighton & Sussex University Hospitals NHS Trust Working Group Update

- 27.1 The Committee considered a verbal update from the Chairman who said that: -
- Brighton and Sussex University Hospitals NHS Trust (BSUH) was inspected by the Care Quality Commission (CQC) in September and October – the results were expected in January
- The BSUH Management Team was hopeful that the Trust would come out of special measures as performance figures and staff morale were improving
- 85% of A & E patients were seen within four hours in the Trust overall (the target is 95%) with Princess Royal Hospital beating the target
- BSUH was holding regular meetings with patients and local authorities regarding delayed transfers of care
- Improvement plans were in place for performance against cancerrelated targets
- BSUH was running at 90% capacity
- 18 additional outpatient beds would be available over the winter period
- The Trust was out of financial special measures
- The next working group meeting would take place after the latest CQC inspection results were known
- 27.2 Resolved that the Committee notes the update.

28. Business Planning Group Report

- 28.1 The Committee considered a report by the Chairman of the Business Planning Group (copy appended to the signed minutes) which was introduced by the Chairman who told the Committee: -
- A Sexual Health Inquiry Day had been arranged for 30 November in conjunction with the Centre for Public Scrutiny
- The following items would come to future Committee meetings: -
 - Substance misuse
 - Health & Wellbeing Board Strategy
 - Mental Health
- Visits to mental health units would be arranged
- Screening for tuberculosis in Crawley was being looked into by Surrey and Sussex Healthcare NHS Trust, Public Health West Sussex and Public Health England
- The NHS 111 procurement process had been halted
- There were four areas of risk relating to Adults & Health in the Council's Total Performance Monitor, but it was expected that a balanced budget would be returned

28.2 Resolved – that the Committee endorses the contents of the report and the Committee's work programme.

29. Date of Next Meeting

29.1 The next scheduled meeting of the Committee is on 12 December 2018, County Hall, Chichester at 10.30.

The meeting ended at 12.51 pm

Chairman