

HUNTINGDONSHIRE DISTRICT COUNCIL

MINUTES of the meeting of the OVERVIEW AND SCRUTINY PANEL (SOCIAL WELL-BEING) held in the Civic Suite 0.1A, Pathfinder House, St Mary's Street, Huntingdon, PE29 3TN on Tuesday, 1 April 2014.

PRESENT: Councillor S J Criswell – Chairman.

Councillors R C Carter, I J Curtis, R Fuller, C R Hyams, Mrs P A Jordan, P Kadewere, S M Van De Kerkhove and M C Oliver.

APOLOGIES: Apologies for absence from the meeting were submitted on behalf of Councillors K M Baker, D B Dew and J W G Pethard.

IN ATTENDANCE: Councillor Mrs B Boddington.

105. MINUTES

The Minutes of the meeting of the Panel held on 4th March 2014 were approved as a correct record and signed by the Chairman.

106. MEMBERS' INTERESTS

Councillor C R Hyams declared a non disclosable pecuniary interest in respect of Minute No. 13/108 as a Committee Member of the Acorn Cancer Support Group.

Councillor Mrs P A Jordan declared a non disclosable pecuniary interest in respect of Minute No. 13/108 by virtue of her employment with the NHS.

107. NOTICE OF KEY EXECUTIVE DECISIONS

The Panel considered and noted the current Notice of Key Executive Decisions (a copy of which is appended in the Minute Book) which had been prepared by the Executive Leader of the Council for the period 1st April to 31st August 2014. The Panel would have sight of the Consultation and Engagement Strategy and Cambridgeshire Home Improvement Agency – 2 Year Review at future meetings.

108. HINCHINGBROOKE HOSPITAL: REVIEW OF THE YEAR AND 16 POINT PLAN FOR 2014/15

(Dr S Bashford, Elderly Care Physician, Hinchingsbrooke Hospital, Mr M Burrows, Chair of Hinchingsbrooke Hospital NHS Trust Board, Dr J Challenger and Mr J Pye, Non- Executive Directors of Hinchingsbrooke Hospital NHS Trust Board, Mrs J Raine, Chief Financial Officer and Deputy Chief Executive for Hinchingsbrooke Hospital, and Mr M Watson, Head of Operations for Circle Healthcare, were in attendance for consideration of this item).

(Councillor Mrs B E Boddington was also in attendance for this item).

(At 7.35pm, during discussion on this item, Councillor P Kadewere took his seat at the meeting).

The Panel received a presentation from representatives of Circle Healthcare and Hinchingsbrooke Hospital reviewing the activities of the Hospital over the 2013 calendar year. Mr M Watson, Head of Operations for Circle Healthcare, reminded Members that it had been two years since Circle took over responsibility for operating Hinchingsbrooke Health Care NHS Trust through a ten-year franchise agreement. Circle's management approach was one of empowerment, where clinicians would take responsibility for and made decisions on the services and facilities they were involved with at the Hospital.

It was reported that the Hospital continued to strive to become one of the top ten District General Hospitals in the Country. Circle's 16 point plan for 2014/15 set out how this would be achieved. There had been a noticeable improvement in standards over the previous two years with the Care Quality Commission ranking the quality of care at the Hospital as "green", which was the highest available ranking. The Maternity Ward had been awarded Clinical Negligence Scheme for Trusts Level 3 status for safety and the Hospital's Accident and Emergency targets were continually being met, with Hinchingsbrooke regularly featuring within the top ten best performing facilities across the nation. In addition, patient referral waiting times from GPs were being achieved while the Hospital had achieved an 80% referral rate in its "Friends and Family" test, which demonstrated positive patient experiences. It was then confirmed that no outbreaks of infections had arisen within the Hospital and that all relevant targets were being met.

Mr Watson went on to report that significant improvements had been made to the Hospital's finances over the previous two years. In order to achieve a balanced budget last year, Circle had invested £3.7m of its own funds into the Hospital. This year's outturn position was likely to reveal a £700,000 deficit, which again would be met by Circle. In response to questions, it was confirmed that the total £4.4m would be paid back to Circle in future years before the Hospital received any profits. Negotiations were ongoing on amending the commissioning agreement with the Clinical Commissioning Group to take into account the increase in demand for services caused by patients choosing to be treated at the Hospital. Projections had been underestimated last year resulting in over activity in some service areas thereby impacting upon the Hospital's use of temporary and agency staff.

The Panel discussed recent headlines in the local press concerning staff morale, the types of issues raised by patients not wishing to refer their friends and family to the Hospital, increases in demand for services, the level of expenditure relating to temporary and agency staff and the adoption of a 24/7 approach to care. A suggestion was made that estimated waiting times should be displayed in the Accident and Emergency Department. Members then requested the Hospital to look into the absence of support from Macmillan Nurses for the Acorn Cancer Support Group, concerns over waiting times for

patients referred from GPs to the Accident and Emergency Department, whether staffing levels were adequate for patients suffering from dementia or Alzheimer's together with the common feeling of isolation amongst these patients and the adequacy of care in the community provision to prevent unnecessary Hospital admissions.

Finally, the Panel recommended that revalidation processes were introduced to promote learning and that enhanced general levels of communication between GPs and consultants were needed. Representatives of the Hospital and Circle acknowledged that communications was an area that needed improvement, A work stream was being developed to improve communications next year.

At the conclusion of the Panel's discussions, the Chairman thanked the representatives of Circle and Hinchingsbrooke Hospital for attending the meeting and invited them back in a year's time to deliver a further update on the Hospital's progress and plans for the future.

(At this point during the meeting (8.00pm), Councillor R Fuller left the meeting).

109. CLINICAL COMMISSIONING GROUP PUBLIC CONSULTATION - PROPOSALS TO IMPROVE OLDER PEOPLES HEALTHCARE AND ADULT COMMUNITY SERVICES

(Dr A Fertig, Clinical Lead for the Older Peoples Programme, and Mrs S Last, Assistant Director for Public Engagement, Cambridgeshire and Peterborough Clinical Commissioning Group, were in attendance for consideration of this item).

(At 8.35pm, during discussion on this item, Councillor S M Van De Kerkhove left the meeting).

Pursuant to Minute No. 13/101, representatives of Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) delivered a presentation on the consultation currently being undertaken on proposals to improve older people's healthcare and adult community services. Dr A Fertig, Clinical Lead for the Older Peoples Programme, explained why there was a need to improve care for older people within the CCG area together with what services were involved. These included community services for older people and adults, emergency hospital care for patients aged 65 and over, older people's mental health services and various other services that supported the care of older people. Members then received details of the events leading up to the consultation, which included a procurement exercise. Accord Health, Care for Life, Uniting Care Partnership and Virgin Care Limited were the shortlisted bidders.

The CCG sought to identify a lead organisation, which would be responsible for joining up care to enable different parts of the NHS better to work together. It was hoped that improved clinical outcomes and patient experiences would be achieved. These would be measured through an Outcomes Framework. A number of common themes had arisen from the initial submissions by the shortlisted bidders, which included delivering more joined up care for patients, better planning and communication, support older people to remain

independent and improved community services and end of life care.

The shortlisted bidders would submit full proposals to the CCG in July 2014 with the preferred bidder being selected in September 2014. The new service was expected to start operating in January 2015.

The Panel reiterated its previously expressed concerns over the lack of elected Member involvement in the process and the tight timescales for the mobilisation of the contract. Members welcomed the intention for services to be more joined up in their approach to delivery and noted the benefits that a multi-disciplinary team could bring to patients in terms of enhancing their experiences and providing improved levels of care.

It was expected that there would be notable improvements to older peoples and adult services from January 2015 onwards. It was also intended to reduce risk to patients. Members stressed the importance of providing training for staff on new systems and practices. They then recommended that the implications of the proposals for Cambridgeshire Community Services should be clarified and that the new provider should positively engage with local communities to build community resilience. Reference was made to the need for appropriate accountability mechanisms to be introduced relating to joint working between the voluntary sector and the new provider.

Given that the consultation period would run from 17th March to 16th June 2014 inclusive and having thanked representatives of the CCG for their attendance at the meeting, the Panel requested the Working Group appointed at the previous meeting to convene and formulate a draft response to the consultation with a view to submitting it to the June 2014 meeting for consideration.

110. CAMBRIDGESHIRE ADULTS, WELL-BEING AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE

The Panel received and noted the Minutes of the meeting of the Cambridgeshire Adults, Wellbeing and Health Overview and Scrutiny Committee held on 13th March 2014 (a copy of which is appended in the Minute Book).

111. WORK PLAN STUDIES

The Panel received and noted a report by the Head of Legal and Democratic Services (a copy of which is appended in the Minute Book) which contained details of studies being undertaken by the Overview and Scrutiny Panels for Economic Well-Being and Environmental Well-Being. The Chairman reported upon the review he and the Vice-Chairman were undertaking in conjunction with the other Overview and Scrutiny Panel Chairmen and Vice-Chairmen on the operation of the Overview and Scrutiny Panels. It was being suggested that they should act more like Select Committees. In response to questions, it was confirmed that the Panels would continue with external scrutiny work and that any changes were intended to improve the Council's internal scrutiny practices. Concerns were raised over recent delays two of the Panel's Working Groups had experienced in concluding their studies. Members were reminded that Officers were accountable to Members and that any

concerns should be raised with the relevant Executive Member. A suggestion was then made that the Panels should be more proactive at issuing press releases when issues of local concern were being considered at meetings. Members were encouraged to forward on any further comments directly to the Chairman.

112. OVERVIEW AND SCRUTINY PANEL (SOCIAL WELL-BEING) - PROGRESS

The Panel received and noted a report by the Head of Legal and Democratic Services (a copy of which is appended in the Minute Book) which contained details of actions taken in response to recent discussions and decisions. The Chairman reported on the work being undertaken by the Economic Well-Being Panel to monitor the Facing the Future project and advised that the Social Well-Being Panel would continue to receive service related reports on matters falling within its remit.

Pursuant to Minute No. 13/99, Councillor I J Curtis reported on the outcome of the meeting of the Cambridgeshire Police and Crime Panel in March 2014 when he had been present to submit questions on behalf of the Panel on the Commissioner's approach to engaging with the public and what the Commissioner regards as political decisions as opposed to operational ones. On the former, it was reported that the Commissioner had appointed an individual to undertake public engagement work on his behalf and, in terms of the latter, it was noted that the Police and Crime Panel had appointed a Working Group to define the boundaries between political and operational decisions.

Pursuant to Minute No. 13/100, the Chairman reported that he had presented a proposal to establish a scheme of funding for Parishes to encourage and support them in developing Community Plans at the March 2014 meeting of the Executive Leader's Strategy Group. The Executive had acknowledged that some form of support should be provided to Parishes and agreed that a follow up workshop event should be arranged for Parishes to deliver training on how to develop Community Plans. This would be undertaken in conjunction with partners including the County Council.

(At this point during the meeting (9.10pm) Councillor Mrs P A Jordan left the meeting).

113. SCRUTINY

The 143rd Edition of the Decision Digest was received and noted.

114. COUNCILLOR C R HYAMS

In noting that this would be Councillor C R Hyams' last meeting as a Panel Member and that he would not be seeking re-election to the District Council at the elections in May 2014, Members placed on record their gratitude to Councillor Hyams for his contributions during his time on the Panel and wished him well for the future.

Chairman