
Overview and Scrutiny Panel

(Social Well-Being)

Report of the meetings held on 3rd March and 7th April 2015.

Matters for Information

50. MENTAL HEALTH UPDATE

The Panel has received a presentation on Mental Health Services in Huntingdonshire from Mr J Ellis, Clinical Commissioning Group (CCG) Commissioning and Contract Lead, Dr E Tiffin, CCG Clinical Lead and Dr D Irwin, GP Mental Health Lead. The general context of the presentation is as follows:

- ◆ the Cambridgeshire service is split into different areas: North, Central and South with a central point of access via the Advice and Referral Centre (ARC).
- ◆ the majority of referrals come from GPs, with the police as the second highest source of referrals.
- ◆ priorities include a better referral system which involves getting patients referred in a short space of time.
- ◆ the CCG will also work on supporting patients once they have been discharged.

The Chairman has raised the issue of waiting times. In response the Panel has been informed that there is no waiting time for the Improving Access to Psychological Therapies (IAPT) service and for Step Three referrals the waiting time is variable and can be between four and twelve weeks.

The Panel have been informed that in nine months, 128 patients have been sent to Peterborough and the average stay is around seven days. In addition it has been noted that the total number of patients that have been admitted has been lower than previously due to the increased use of home treatment.

The Panel have been advised that the voluntary sector provides a lot of support to mental health services and the sector will see an increase in funding from April 2016.

Having regard to the provision of Mental Health Services in Huntingdonshire, the Panel has requested that a representative should be invited to a future meeting to discuss Children's Mental Health Services.

51. HINCHINGBROOKE HOSPITAL ACTION PLAN

The Panel has received an update on the Hinchingsbrooke Hospital Action Plan from Mr H Abdel-Rahman, Chief Executive Officer and

Clinical Chairman, Mr M Burrows, Chair of the Hinchingbrooke Trust Board, Mrs D Fowler, Director of Nursing, Midwifery and Quality and Mr C Davidson, Franchise Manager. The presentation has been split into two sections. The general context of section one is as follows:

- ◆ Hinchingbrooke has recorded high levels of patient satisfaction as well as low levels of serious incidents including zero “Never Events”;
- ◆ there have been particular problems with Accident and Emergency (A&E) as there have been nationwide;
- ◆ the Care Quality Commission (CQC) report has highlighted that the areas of critical care, maternity and gynaecology and outpatients and diagnostic imaging are good however the areas of A&E and Medical Care are inadequate; and
- ◆ Hinchingbrooke Hospital will have a new Critical Care Unit opening in July.

In response to questions submitted by members of the public the Panel has been informed that the hospital is taking Governance seriously and has appointed a Director of Governance. The hospital will work with the NHS Trust Development Authority to improve the standards at the hospital. The hospital has applied for an additional £10m to balance the budget and will not start repaying the historical £40m debt until there is a budget surplus.

The Panel were informed that the cost of employing agency staff is double compared to employing a permanent member of staff. The current vacancy rate is 12% which equates to 21 full time equivalents and there are 16 international nurses undertaking an induction programme.

The Panel has been advised that the CQC’s report is final and the 200 inaccuracies identified have been accepted, however this did not change the rating received by the hospital overall.

The Panel has been acquainted with details of the future direction of the hospital,. The general context is as follows:

- ◆ Since the CQC’s report there has been progress and the Quality Improvement Plan can be viewed on the hospital’s website;
- ◆ The Board is continuing to keep the finances in check as well as making sure that the hospital adheres to operational performance standards; and
- ◆ The hospital aims to become one of the top 10 District General Hospitals.

Having regard to controlling the heating system the Panel has been informed that it is not possible to zone the heating and it is difficult to control, therefore on balance the decision has been taken to keep the hospital warm as patients fare better in warmer conditions.

The Panel has concluded that the item will be followed up at a future meeting.

52. HEALTHWATCH

Ruth Rogers, Chairman of Healthwatch Cambridgeshire has addressed the Panel to provide an update on its activities. The Panel previously received a presentation two years ago when Healthwatch Cambridgeshire had recently been inaugurated and without a full complement of staff.

The role of Healthwatch Cambridgeshire is to ensure public voices are heard in all aspects of health and social care and is a not for profit organisation. Healthwatch Cambridgeshire covers the whole of Cambridgeshire and has played a significant role prior to the Care Quality Commission audit of Hinchingbrooke Hospital.

The Panel has been advised that Healthwatch Cambridgeshire has facilitated public comments and complaints regarding Hinchingbrooke Hospital. These have included many positive views as well as negative. Overall a balanced view about the hospital and what could be improved has been received.

The Chairman of Healthwatch has attended a meeting with the new Chairman and the two new Non-Executive Members for Hinchingbrooke Healthcare NHS Trust and has felt a strong commitment from the Board. It has been noted that more Non-Executive Members are to be recruited.

Mental Health Services is listed on the Panel's activities and it has been noted that this service is problematic within Cambridgeshire. A local charity called 'Pinpoint' have assisted with the collection of evidence regarding problems faced by parents in the diagnosis and provision of care, especially for children with additional needs and disabilities. Healthwatch Cambridgeshire has been able to escalate these issues to Healthwatch England for national recognition.

Accessing GP appointments is a growing issue and it is NHS England that is the responsible authority for this matter. A lack of funding is a key issue in addressing this problem. Members have been advised of details of the establishment of the GP surgery in Cambourne whereby funding was accessible that allowed the surgery to open before it had the required number of patients. However, this funding is no longer available.

Healthwatch Cambridgeshire are unable to work effectively unless people inform them of any concerns or complaints they have. Healthwatch Cambridgeshire also welcome compliments. District Councillors play an important role as they receive contributions from constituents.

53. CLOSER WORKING WITH THE POLICE

The Panel has received a presentation from Chief Inspector Laura Hunt to inform the Panel on:

- ◆ Policing Priorities;
- ◆ Vision within Huntingdonshire for 2015/16;
- ◆ Control Strategy Priorities;

- ◆ Similarities between the Community Safety Priorities and Huntingdonshire District Council Corporate Plan.

It has been reported that the priorities for Huntingdonshire Police were:

- ◆ Responding to community concern;
- ◆ Investigating crime and protecting the vulnerable;
- ◆ Staff professionalism; and
- ◆ Keeping people safe.

There is now less focus on numbers and more on value-based outcomes and an explanation has been provided on how the priorities are being achieved.

The Huntingdonshire Police Vision for 2015/16 is to be supporting, empowering and belonging. Putting the person at the heart of all that the Police do and aiming for a seamless service.

Special Constables are slowly being recruited and those that have completed the required number of hours each month, along with Police Community Support Officers, are issued with handheld devices to reduce the need to work out of the station and therefore create a greater street presence.

It has been explained that the Police previously have had control strategy priorities such as dwelling burglaries and anti-social behaviour. These are still a priority but the following are now significant emerging issues:

- ◆ Cyber-crime;
- ◆ Modern-day slavery; and
- ◆ Child sexual exploitation.

Common ground and shared objectives exists between the Huntingdonshire Police priorities and Huntingdonshire District Council Corporate Plan.

The Chief Inspector wants a continued and meaningful dialogue with the Councillors and has enquired how best to achieve this. The Panel has noted that the Council has a Community Safety Partnership. However, the Chief Inspector has stated that there is no longer continued Councillor representation at the meeting and the issues considered are operational issues. The Panel's responsibility is a challenging role and therefore more appropriate to strategic issues.

The Panel has agreed for the Managing Director and the Chief Inspector to meet to discuss the way forward regarding continued dialogue between District Councillors and the Police. One potential option has been suggested to have the Chief Inspector regularly attend and present to the Overview and Scrutiny Panel (Social Well-Being).

It has been emphasised that depending on the crime experienced in a particular area this will determine the weekly priorities for that area.

An example has been provided whereby there have been a number of tool thefts from vehicles in the Yaxley area over the previous week, which will therefore feature as a priority for that area.

The Panel has been made aware that crimes such as child sexual exploitation or matters concerning vulnerable people are often complex and people are able to report any concerns via any methods, such as emailing the Chief Inspector, eCops or Crimestoppers.

Other Matters of Interest

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

The Panel has reviewed its work programme at each of its meetings. Members have agreed that a representative from the Clinical Commissioning Group will be invited to attend a future meeting of the Panel to discuss Children's and Young People's Mental Health Provision in Huntingdonshire. The Panel have also requested an update on Hinchingbrooke Hospital Improvement Plan at a future Panel meeting.

Given the imminent submission date of the Local Plan, a meeting will be arranged with the Affordable Housing Working Group, Managing Director, Executive Councillor (Strategic Planning and Housing) and the Leader in order to consider and progress matters that it might like to include in the Local Plan such as Community Land Trusts and Affordable Housing.

55. WORK PLAN STUDIES

The Panel has received details of studies being undertaken by the other Overview and Scrutiny Panels.

56. NOTICE OF KEY EXECUTIVE DECISIONS

The Panel has been acquainted with the content of the Notice of Key Executive Decisions.

57. SCRUTINY

The Panel has considered the latest editions of the Decision Digest and discussed matters contained therein.

S J Criswell
Chairman