



# Rutland County Council

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Catmose Oakham Rutland LE15 6HP  
Telephone 01572 722577 Facsimile 01572 758307 DX 28340 Oakham

Record of a meeting of the **PEOPLE (ADULTS AND HEALTH) SCRUTINY PANEL** held in the Council Chamber, Catmose, Oakham, at 7.00pm on **Thursday 11 July 2013**

**PRESENT:** Mrs L I Stephenson – (Chairman, in the Chair)  
Mrs C Cartwright  
Mr G Condé  
Mr J T Dale  
Mrs J K Figgis  
Miss G Waller

**Also in Attendance:** Mr R Begy Portfolio Holder for Community Safety, Adult Social Care, Libraries, Museums and Culture (Non Sport)

**Non Panel Members Present:** Mr J M Lammie Chairman of the Scrutiny Commission and Resources Scrutiny Panel

**OFFICERS PRESENT:** Ms C Chambers Strategic Director for People  
Miss M Gamston Democratic Services Officer  
Ms J Haigh Senior Manager, Health, Wellbeing and Commissioning

**APOLOGIES:** Mr W J Cross, Mr M R Woodcock, Mr C A Parsons and Mrs C Emmett

## 178. RECORD OF MEETING

The Record of the meeting of the People (Adults & Health) Scrutiny Panel held on 2 May 2013, copies of which had been previously circulated, was confirmed and signed by the Chairman.

## 179. DECLARATIONS OF INTEREST

There were no declarations of interest.

## 180. PETITIONS, DEPUTATIONS AND QUESTIONS

No petitions, deputations or questions had been received from Members of the public.

## 181. QUESTIONS WITH NOTICE FROM MEMBERS

No Questions with Notice had been received from Members.

## **182. NOTICES OF MOTION FROM MEMBERS**

No Notices of Motion had been received from Members.

## **183. CONSIDERATION OF ANY MATTER REFERRED TO THE PANEL FOR A DECISION IN RELATION TO CALL IN OF A DECISION**

No matter was referred to the Panel for a decision in relation to call in of a decision in accordance with Procedure Rule 206.

## **SCRUTINY**

## **184. AIMS AND OBJECTIVES – FORWARD PLANNING**

Rutland County Council's Strategic Aims and Objectives were distributed.

A "brainstorming" exercise took place during which Members decided on areas to scrutinise that would benefit the residents of Rutland; to prioritise the areas and how they wished to scrutinise a particular topic or area of concern.

The main areas that Members wished to see covered at Scrutiny were:

1. Access to GP appointments throughout Rutland
  - Consideration to be given to the information the Panel wishes to receive and the approach the Panel wishes to undertake;
  - Concern expressed at the reliance on 'phones and the breakdown of the mobile signal in some areas of the county;

Together with Out of Hours care. Members were advised that this contract was commissioned by the Clinical Commissioning Group not individual surgeries;

2. East Midlands Ambulance Service
  - Data to be provided on Rutland;
  - Members were reminded that at the last meeting of this Panel (2 May 2013) it had been agreed that a further presentation would be received in six months time;
  - Members were advised that EMAS only had the transport contract for emergencies; Arriva had the contract for all other transportation;
  - Consideration to be given to inviting Voluntary Action Rutland to attend the same Panel as EMAS, to gain their perspective with regards to patients being transported to and from hospital appointments;
  - The Senior Manager, Health, Wellbeing and Commissioning, Mrs Haigh advised Members that there was to be an initial officer meeting with Arriva and she would provide an update at the next meeting of this Panel;
  - Lack of knowledge of rural areas – to establish parish contacts, possibly request through the Parish Council Forum;
3. Care Commission reports on Care Homes
  - Reports are in the public domain;
  - Reports on Rutland based residential care homes and providers are

- automatically received;
- Future reports to be brought to this Panel;
- Officers requested to look into the possibility of receiving reports on local hospitals;

#### 4. Children's Health

- Report requested on the state of health of children in the county with particular regard to mental health; in relation to the current position, work being undertaken in Rutland and what partner bodies are doing;

#### 5. Lack of Affordable Housing

- Members advised that S106 payments/Community Infrastructure Levy comes under the remit of the Places Scrutiny Panel;

#### 6. Feedback on how the Welfare Reform changes to benefits had impacted on residents

- The Chairman of the Resources Scrutiny Panel, Mr Lammie, advised Members that a representative from the Citizens Advice Bureau was to be invited to the next Resources Panel to discuss this topic;

#### **Agreed:**

The Strategic Director for People, Ms Chambers, and the Chairman of the People (Adults & Health) Scrutiny Panel, Mrs Stephenson, to discuss the issues raised and put items to agenda.

### **185. RUTLAND JOINT HEALTH AND WELLBEING STRATEGY 2013-16 CONSULTATION**

Report No. 158/2013 from the Strategic Director for People was received.

The Senior Manager, Health, Wellbeing and Commissioning, Ms Haigh, introduced the report the purpose of which was to consult Scrutiny Panel on the draft Joint Health and Wellbeing Strategy (JHWS) for Rutland.

During discussion the following points were noted:

- i) That part of the remit of the Health and Wellbeing Board was to create a Joint Health and Wellbeing Strategy. The Joint Strategic Needs Assessment Executive Summary, which was widely consulted on, formed the basis of the Strategy;
- ii) The delivery of the Strategy will be through the three sub-groups to the Health and Wellbeing Board:
  1. Complex Needs
  2. Children's Trust
  3. Staying Healthy
- iii) That under Context it would be useful to have some indication why particular lifestyle risk factors had been identified as a problem in Rutland;

- iv) That Rutland specific data was often suppressed as too small, for example, Public Health indicators;
- v) That this is a strategic plan;
- vi) It was requested that consideration be given to additional wording under Our Vision, bullet point 4 at the end of sentence: “by encouraging people to take responsibility for own health”;
- vii) That priorities identified in the Strategy formed the direction of travel. Percentage targets would be included in the detailed plan;
- viii) That young people did not appear to be included under the Priority: Depression and Anxiety;
- ix) That under the Health and Social Care Act 2012 each local authority had to establish a Health and Wellbeing Board. The Act required key partners to agree local priorities. The plan had been produced by all partners on the Health and Wellbeing Board;
- x) That the Health and Wellbeing Board was a public meeting held quarterly;
- xi) That it had been decided to continue with the Children’s Trust, as a separate body to the Health and Wellbeing Board. Many of the partners of the Trust were represented on the Board, with different representatives. There was a reporting mechanism with the Children’s Trust being a standing agenda item at the Board;
- xii) That Care Homes as service providers, rather than commissioners, did not sit on the Board. However, there were links through the Local Authority and partners;
- xiii) The possibility of liaising with community groups and the voluntary sector to empower individuals; if relying on the voluntary sector would need to ensure that it linked in with policy;
- xiv) The possible inclusion of dying well, patient choice and the role of the Rutland Memorial Hospital;
- xv) An update to this Panel in six months.

**Agreed:**

That Scrutiny Panel notes the draft Joint Health and Wellbeing Strategy for Rutland.

**186. INTEGRATED CARE PROJECT**

The Integrated Care Team leaflet and draft integrated care model for East Leicestershire and Rutland were distributed.

A verbal update to inform Members of this new scheme was received from the Senior Manager, Health, Wellbeing and Commissioning, Ms Haigh.

Members were advised that this is a piece of integrated work involving health and social care. It was developed by the East Leicestershire and Rutland Clinical Commissioning Group and piloted in part of East Leicestershire.

When appointed the Rutland Co-ordinator will be based at the Oakham Medical Practice.

This is a multi-disciplinary approach to identify those at risk of:

- becoming hospitalised

- loss of independence
- being unable to stay in their own homes

During discussion the following points were noted:

- i) Members would welcome a chance to hear from the Rutland Co-ordinator;
- ii) Members welcomed the inclusion of Mental Health;
- iii) That if this ran as well as a similar scheme aimed at diabetics it would improve the quality of life;
- iv) The co-ordinator role would be funded through Health funding received by the Local Authority. All other services/posts would be funded by either health or social care ;
- v) That long-term conditions accounted for:
  - 50% of all GP appointments
  - 64% of all Out Patient appointments
  - 77% of hospital bed days
- vi) That the project looked to ease pressure on services and improve quality of life.

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8.17 pm Mr Dale left the meeting and did not return

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## **187. PAEDIATRIC HEART SURGERY UPDATE**

A verbal update was received from the Chairman of the People (Adults & Health) Scrutiny Panel, Mrs Stephenson.

Webpage: <http://www.irpanel.org.uk/viiew.asp?id=56>

Members were advised that on the 12 June 2013 it was announced that the Independent Review Panel had found that the JCPCT's decision was based on flawed analysis.

The Independent Review Panel made 15 recommendations the following 5 categories:

1. Co-ordination where services overlap
2. Implications on services
3. How reviews actually done
4. Ongoing public analysis of data
5. Moving forward – plan of action

NHS (England) would be reporting at the end of July 2013 on how proceeding.

**188. QUARTER 4 FINANCIAL MONITORING AND DRAFT FINANCIAL OUTTURN 2012/13**

Report No. 122/2013 from the Strategic Director for Resources was received.

The following point was noted during discussion:

- i) Cost Centre 4553 – Fairer Charging and Meals on Wheels Income – £299,124 variance between Q4 Outturn and Budget. This was due to having built additional income into the Budget pending an increase in service charges, however the change to the charges had not been introduced due to consultation taking place.

**Agreed:**

That the Panel noted the report.

**189. QUARTER 4 PERFORMANCE MANAGEMENT 2012/13**

That Report No. 120/2013 from the Chief Executive be received.

During discussion the following points were noted:

- i) That during staff sickness absence the Authority looked to protect frontline services;
- ii) Members raised the issue of the loss of front line staff being included on the Risk Register;
- iii) That difficulty in recruiting to posts could put staff under extra pressure. The Authority sought to be effective at where to target recruitment to avoid unnecessary expense;

**Agreed:**

That the Panel noted the report.

**190. STRATEGIC RISK REGISTER**

Report No. 147/2013 from the Strategic Director for Resources was received.

The purpose of the report was to update the Panel on the current status of the Risk Register.

During discussion the following points were noted:

- i) Risk Ref 15 – Contracted Services. It was noted that main Adult specific contracts to fall within this risk would be Residential Nursing Care and Domiciliary Care. There were no current concerns;
- ii) Risk Ref 21 – Welfare Reform. This is being taken into account at the Health and Wellbeing Board;
- iii) Risk Ref 2 – Public Health. The risk description was being reviewed;
- iv) Risk Ref 30 – Residential Care Home fees. model still under development and this will be brought to the panel when complete.

- v) Risk Ref 18 – Cottesmore Base. Army GP Training Unit provide services for dependents. Agreed when the first tranche of soldiers arrived at the base. No provision for the same arrangement at St George's Barracks. The Authority will contact to see if they are any plans for a similar arrangement. Currently using Empingham Medical Centre which is impacting on appointments there.

**Agreed:**

That the Panel notes the contents of the risk register and the actions underway to address the risks.

**PROGRAMME OF MEETINGS AND TOPICS**

**191. REVIEW OF FORWARD PLAN**

The following items were noted as being of interest for future meetings:

- i. Adult Social Care Reform – to be discussed at the Special meeting on 8 August 2013 (Apologies received from Mrs Figgis and Miss Waller);
- ii. Safeguarding Business Plan

**192. REVIEW OF RISK REGISTER**

This item was covered under agenda item no. 13

**193. ANY OTHER URGENT BUSINESS**

University Hospitals of Leicester Update

A verbal update was received from the Senior Manager, Health, Wellbeing and Commissioning, Ms Haigh.

The University Hospitals of Leicester had failed to meet the 4 hour discharge target. The Leicester Royal Infirmary had not been meeting this target for a period of time. The three Clinical Commissioning Groups (CCG), East Leicestershire and Rutland, West Leicestershire and Leicester City, had received a letter from NHS (England) asking them to address the situation urgently.

The Emergency Care Board is now known as the Urgent Care Board (UCB); this is a strategic board meeting weekly, chaired by NHS (England) team and is attended by commissioners and practitioners. Work has taken place on an improvement programme to include staffing, accommodation and clinical leadership. Plan to be signed off by the Area team and expected to presented and agreed at the UCB today (11 July2013).

A report that had been presented to all three CCGs is now in the public domain and the Senior Manager, Health, Wellbeing and Commissioning, Ms Haigh, undertook to send a copy of the report to members.

A press release would be released through the Strategic Communications Advisor.

**194. DATE AND PREVIEW OF NEXT MEETING**

Thursday 8 August 2013 at 7.00 pm in the Council Chamber (Special)

Thursday 26 September 2013 at 7.00 pm in the Council Chamber

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**The Chairman declared the meeting closed at 8.56 pm**

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