



# Rutland County Council

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Minutes of the **MEETING of the ADULTS AND HEALTH SCRUTINY COMMITTEE**  
held in the Council Chamber, Catmose on Thursday, 20th June, 2019 at 7.00 pm

**PRESENT:** Mr D Blanksby Mr J Dale  
Mrs S Harvey Mrs R Powell

**OFFICERS  
PRESENT:** Mr M Andrews Strategic Director for People  
Mrs J Morley Governance Officer

**IN  
ATTENDANCE:** Mr A Walters Portfolio Holder for Safeguarding- Adults,  
Public Health, Health Commissioning,  
Community Safety & Road Safety  
Mr M Sandys Director of Public Health  
Mr T Sacks Chief Operating Officer, East  
Leicestershire and Rutland CCG  
Miss G Waller Scrutiny Commission Chair

## 51 APOLOGIES FOR ABSENCE

Apologies were received from Mr Ainsley, Mr Cross and Mrs Fox.

## 52 RECORD OF MEETING

The minutes of the Adults and Health Scrutiny Panel held on 21 March 2019, copies of which had been previously circulated, would be confirmed at the next meeting of the Committee.

## 53 DECLARATIONS OF INTEREST

No declarations of interest were received.

## 54 PETITIONS, DEPUTATIONS AND QUESTIONS

No petitions, deputations or questions were received.

**55 QUESTIONS WITH NOTICE FROM MEMBERS**

No questions with notice had been received from Members.

**56 NOTICES OF MOTION FROM MEMBERS**

No notices of motion had been received from Members.

**57 CONSIDERATION OF ANY MATTER REFERRED TO THE PANEL FOR A DECISIONS IN RELATION TO CALL IN OF A DECISION**

No matter had been referred to the Panel for a decision in relation to a call-in of a decision in accordance with Procedure Rule 2016.

**58 THE RUTLAND MEMORIAL HOSPITAL OAKHAM**

A verbal report on the Rutland Memorial Hospital out of hours service was received from Tim Sacks, Chief Operating Officer of the East Leicestershire and Rutland Clinical Commissioning Group.

During his introduction, Mr Sacks confirmed the following:

- There were two distinct services operating at the Rutland Memorial Hospital; the daytime minor injuries service and the weekend and evening out of hours service.
- The minor injuries service was run by Oakham Medical Practice and operated between the hours of 8.30am until 6.30pm; this had been extended from the previous end time of 5.00pm.
- The weekend and evening out of hours service was run by Derbyshire Health United who operated the service from 6.30pm until 9pm Monday to Friday and from 9am to 7pm at the weekends and on bank holidays.
- Anyone who called the 111 service could be triaged and booked into an appointment slot. All Rutland GP surgeries could also book their patients directly into the service.
- Walk-in appointments were also available but the next walk-in appointment may not be until, for example, two hours later as earlier appointments had been booked by the 111 service or GP practices. Residents may have had a different perception of a walk-in service and this was where confusion had arisen. Additionally, patients had been told incorrectly that they would have to call 111 and that a walk-in service was not available. Mr Sacks reassured the committee that staff training had rectified this issue and the walk-in service was available and would be offered.
- Walk-in patients were welcome to wait or could come back for their appointment time.
- Emergencies would be seen immediately but otherwise all patients would be booked into an appointment slot.

During discussion the following points were noted:

- Appointments for the service could not yet be booked directly via the website but this service would be coming in the future.

- Although it was only the four local GP practices that could book the GP appointment slots, anyone, even if from out of area or not registered with a local surgery, could access the walk-in service.
- It was difficult to assess the impact of the service in terms of reduced hospital A&E visits because of the various cross-county hospitals Rutland residents accessed. The CCG was however in the process of reviewing the impact of all commissioned services.
- The CCG would be working with Healthwatch Rutland to promote the service as current advertising was limited and even the signage on the door was confusing and with no indication of operating hours.
- To avoid any confusion, there was no direct phone line into the service and calls had to be made via the 111 service.
- The term 'minor injury' usually referred to a cut, burn, sprain, bad bruise or a break. Confusingly Oakham Medical Practice also operated a minor *illness* clinic right next door but the two services were distinct and funded in different ways.

#### **RESOLVED:**

The Committee **NOTED** the verbal report and update on the out of hours service operating at Rutland Memorial Hospital.

## **59 ANNUAL REPORT OF THE DIRECTOR FOR PUBLIC HEALTH 2018**

Report No.94/2019 was received from the Director of Public Health.

Mr Mike Sandys, Director of Public Health gave a presentation (appended to the minutes) and introduced his Annual Report to the Committee.

During discussion the following points were noted:

- The Director of Public Health had a statutory duty to produce an independent annual report which highlighted trends in the County.
- An original report that investigated military health was still awaiting sign off from the Army.
- The annual report focused on multi-morbidity and the number of Rutland residents, of any age, living with multiple conditions and the effect and the cost that had to society.
- The population projections slide showed that there would be increasing numbers of the very old by 2041 and a reduction in the number of work age individuals who pay tax and have ability to pay, therefore putting greater pressure on the system.
- It was inevitable that the percentage of those living with 2 or more conditions was higher in the oldest residents but if a dividing line was set at 65 years of age then the burden for these two age groups was approximately the same.
- The health system needed to move away from individual referrals and look at treating the person rather than the individual condition.
- Increasing physical activity could help to reduce falls and tackle social isolation and loneliness.
- Loneliness was a complex issue and sometimes an individual, even if they were surrounded by people in a good care home, could feel lonely because they had not built up social networks. Additionally it was not just individuals but couples that could be living in social isolation.

- Lack of transport options in Rutland could add to social isolation.
- Although hypertension rates were high in Rutland, given the County's demographic it was to be expected and could be seen as a positive as it indicated that GPs were picking up on more cases.
- The Director of Public Health would share with Members the number of referrals to physical activities.
- Officers were looking at developing a social prescribing network which would look at whether what was being prescribed was what was really needed and if it delivered the desired outcomes. Other aspects of this network would be to fully utilise existing resources and to understand what activities were working well and try to replicate them in other areas.
- Some residents did not want an activity prescribed but instead wanted social interaction, such as that offered by Parish Council good neighbourhood schemes.

**RESOLVED:**

The Committee **NOTED** the Director of Public Health's Annual Report 2018 and **SUPPORTED** the report's recommendations.

**60 SCRUTINY PROGRAMME AND SUBSTANTIVE ITEMS FOR THE WORK PROGRAMME 2019/20**

The Committee reviewed the Forward Plan and discussed possible items for inclusion in the Adults and Health Scrutiny work programme for the municipal year 2019-20.

During discussion the following items were suggested:

- Prevalence of dementia and dementia services
- Care Home inspection reports
- Adult Social Care Key Performance Indicators. It was agreed that a full report would come to the September meeting.
- Draft Cancer Strategy
- Children and Adolescent Mental Health Services (CAMHS)
- Social isolation
- District Nursing Service
- East Midlands Ambulance Service – to be included in either the September or November meeting to discuss their preparations for winter.

The Chair of the Committee also suggested that a possible joint Task and Finish Group be set up to with the Growth, Infrastructure and Resources Scrutiny Committee to look at the issue of care home places and their funding. The issue covered both committees as there had been an increase in the building of care homes with seemingly little regard for the effect on the Council budget and services when residents ran out of money and then became the responsibility of the Council. Invariably this situation arose for the very elderly towards the end of their life when it was deemed not to be in their best interests to remove them from where they were. This increased spend was arguably not fair to those residents who had been supported from the very beginning. The creation of a task and finish group to investigate the issue of care homes would be further discussed at Scrutiny Commission.

The Chairman requested that Members email him if they had any further items they wished to see included in the work plan and addressed at the next meeting of the committee.

**61 QUARTER 4 FINANCIAL MANAGEMENT REPORT - REVENUE AND CAPITAL OUTURN 2018/19**

The report was taken without debate.

**AGREED:**

That the Committee **NOTED** the report.

**62 ANY OTHER URGENT BUSINESS**

No items of urgent business had been previously notified to the person presiding.

**63 DATE OF NEXT MEETING**

The next meeting of the Adults and Health Scrutiny Committee would be held on Thursday 19 September 2019 at 7pm.

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**The Chairman declared the meeting closed at 8.25 pm.**

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