

Minutes of: HEALTH SCRUTINY COMMITTEE

Date of Meeting: 14 November 2017

Present: Councillor Kerrison (in the Chair)
Councillors N Bayley, M D'Albert, S Haroon, K Hussain,
O Kersh, J Mallon, A McKay, Susan Southworth and R Walker

Also in attendance:

Public Attendance: No members of the public were present at the meeting.

Apologies for Absence: Councillor P Adams and Councillor J Grimshaw

HSC.232 DECLARATIONS OF INTEREST

There were no declarations of interest made at the meeting.

HSC.233 PUBLIC QUESTION TIME

There were no questions from members of the public present at the meeting.

HSC.234 MINUTES

It was agreed:

That the minutes of the meeting held on 12th September 2017 be approved as a correct record.

HSC.235 DELAYED DISCHARGE

Julie Gonda, Interim Executive Director, Communities and Wellbeing and Charlotte Walker, Operations Manager, Fairfield Hospital attended the meeting to provide members with an update in respect of delayed discharge within the Borough. The Presentation contained the following information; update on progress with regards to the flow improvement journey; performance reporting on delayed transfer of care and implementation of the GM Standards.

The Operations Manager reported that progress has been made with regards to the implementation of a true and effective discharge to assess pathway for patients going home and into temporary 24 hour care with an aim for only essential assessments taking place in the acute setting. The development of a 7 day Integrated Discharge Team function on the FGH site.

The Interim Executive Director reported that formal agreements have been developed with Integrated Discharge Teams on other acute sites to support the discharge of Bury patients. In order to develop a truly responsive community pathway, work is underway with community partners to support the flow of patients from secondary care, coupled with a 'Home First' principle.

Those present were invited to ask questions and the following issues were raised.

In response to a Member's question the Integrated Discharge Team Manager reported that there are pressures on acute inpatient beds throughout the year. Attendances at A&E have increased to 200/220 patients per day. Work is underway to try to ascertain the reasons for the high demand and where appropriate, divert patients to other services.

The Integrated Team Discharge Manager reported that moving a patient to a temporary placement in order to free up an acute bed, would always be carefully managed and only be undertaken if it was in the best interest of the patient. Patients would be able to access re-ablement services whilst in a temporary placement.

The Interim Executive Director reported that the DofH reporting structure only requires the Pennine Acute Trust to provide information across the whole of the Acute Trust footprint and not site specific. Following the establishment of the new site management arrangements discussions are ongoing with the CCG to ascertain as to whether the information could be reported differently. In response to a Member's question, the Interim Executive Director reported that a further break-down providing reasons for specific health delays, can be provided to members of the Committee.

The Integrated Team Discharge Manager responding to a Member's question, reported that the publicity surrounding the possible closure of the walk in centres did affect A&E attendances.

The Integrated Team Discharge Manager reported that there has been a great deal of work undertaken with partners in the Acute Trust, the CCG and nursing homes, in respect of discharge planning.

With regards to the development of integrated IT systems across partner organisations, the Interim Executive Director reported that Pennine Care and Community health services already have an integrated IT system. A bid for additional GM monies was recently submitted to help support the further development of IT infrastructure.

The Interim Executive Director reported that monies from the Transformation Fund will be spent on developing the Home First initiative.

Currently a Bury social worker would visit any hospitals where a Bury Resident is an in-patient. Part of the GM devolution agreement will include the development of the GM trusted assessor system. This will enable and allow any social worker to assess any patient, this arrangement already exists within Pennine Acute NHS Trust.

It was agreed:

1. Further updates in respect of delayed discharge will be considered at future meetings of the Health Overview and Scrutiny Committee.

Information in respect of the break-down of the reasons for the delayed discharge attributed to health delays will be reported at a future

HSC.236 NORTH WEST AMBULANCE SERVICE CARE HOME WORK

Mike Hynes, Bury Sector Manager, (NWAS) Amanda Fisher, Urgent Care Development Manager, (NWAS), Dan Smith, Paramedic Consultant, (NWAS) attended the meeting to inform members of the work being undertaken by the service in relation to local care homes.

Care homes have always been one of the highest callers of 999 and this is understandable considering the profile of the residents. Some 999 calls however are for minor conditions or incidents which do not require an emergency ambulance and a way of managing these for the benefit of the patient and the Service needs to be established.

Figures for 999 calls from Bury care homes are as follows:

Year	No. of 999 calls
2014/15	1,947
2015/16	1,949
2016/17	1,746

The NWAS Trust has received CQUIN (commissioning for quality and innovation) funding to establish an internal working group whose aim is to; 'reduce the number of calls originating from nursing and residential care homes through training and education of care home staff, and to ensure those needing a response are managed with a resource that is commensurate with their presenting needs.

The initial pilot conducted over the Christmas period (late last year/early this year) was for 50 care homes region wide and this resulted in a 50 per cent reduction of calls from those homes trained with ongoing support.

Four care homes within Bury have been identified and are taking part in the initiative. They are:

Home	Managed by
Killelea House	Bury Council
Nazareth House	Nazareth Care Charitable Trust
Abbeycliffe Care Home	Abbeycliffe Ltd
The Heathlands	Federation of Jewish Services

Those present were invited to ask questions and the following issues were raised.

Responding to a member's question, the Urgent Care Development manager reported that the most recent figures for ambulance call outs are as follows; 112 calls, Killelea House; 106 calls, Nazareth House; 109 calls Abbeycliffe Care Home and 161 calls from Heathlands. Staff at these nursing homes have undertaken training in the NWAS tool kit to be able to best assist the residents and to avoid un-necessary 999 calls.

The Bury Sector Manager reported that work is underway in other local authorities to embed the new NWAS tool in their organisations, some are considering making it part of their procurement process when commissioning care home providers.

The Urgent Care Development Manager reported that a culture shift is required within care homes. Staff are naturally risk averse and often the easy option is to make a 999 call.

In response to a member's question, the Urgent Care Development Manager reported that feedback from the initial pilot areas highlighted problems with high staff turnovers in some care homes and ongoing training is an issue. As well as the ability to access ongoing help, advice and support from paramedics.

The Urgent Care Development Manager reported that by piloting this work, further issues have been identified and work is underway to try and alleviate the risk, reduce falls etc.

It was agreed:

Representatives from the North West Ambulance Service be thanked for their attendance.

HSC.237 ADULT'S SAFEGUARDING ANNUAL REPORT

Amanda Symes, Adult's Safeguarding Manager, attended the meeting to report on the work of the adults safeguarding board. A copy of the annual report had been circulated to members in advance of the meeting and contained the following information:

The Report has been produced in line with the statutory requirements set out in the Care Act 2014. The report provides an opportunity to look back on the achievements of the previous year and plan for the challenges of the forthcoming year.

The report sets out the strategic priorities for the Adult Safeguarding Board for the forthcoming year:

- To prevent the abuse of adults at risk
- To protect adults at risk from being victims of abuse.
- To ensure wider understanding about Adult Safeguarding and the role everyone can play in preventing adult abuse.
- To be assured that in Bury Adults are safe from abuse.

Those present were invited to ask questions and the following issues were raised:

The Adults Safeguarding Manager reported that the process for recruiting a new Board Chair has commenced. Following a recently undertaken peer review process it has been recognised that greater scrutiny of the work of the Adults Safeguarding Board is required, how best to achieve this will be discussed with the new Chair, once in post.

In response to a Member's question, the Adult's Safeguarding Manager reported that members from the Safeguarding team regularly meet and liaise with staff from Care homes across the Borough and will provide safeguarding information and advice.

Responding to a Member's question, the Adult's Safeguarding Manager reported that a great deal of work is undertaken to ensure that safeguarding referrals are appropriate and proportionate.

The Adults Safeguarding Manager reported one of the biggest challenges facing the Council is the increase in the number of Deprivation of Liberty (DoL) cases. This year, over 1100 applications have been processed (compared to 835 last year and 224 in 2014-2015). DoL orders has affected a high number of care home residents.

It was agreed:

Discussions will be ongoing with regards to the relationship between the Adult's Safeguarding Board and Health Overview and Scrutiny Committee going forward.

HSC.238 UPDATE FROM THE PENNINE ACUTE AND PENNINE CARE JHOSC

Councillor Walker provided members of the Committee with an update in respect of the work undertaken by the JHOSCs for Pennine Acute and Pennine Care.

Both Trusts have recently been inspected by the Care Quality Commission and as a result action plans have been drawn up to address the problems identified. Financial problems continue; Salford Royal have taken over the Management of the Pennine Acute Trust and Pennine Care have approached Jon Rouse at the GM Strategic partnership for assistance.

It was agreed:

Regular updates in respect of the JHSOC for Pennine Acute and Pennine Care will be provided at future meetings.

HSC.239 URGENT BUSINESS

There was no urgent business reported.

COUNCILLOR KERRISON
Chair

(Note: The meeting started at Time Not Specified and ended at Time Not Specified)