

## **Health Scrutiny Panel – Meeting held on Thursday, 14th January, 2016.**

**Present:-** Councillors Ajaib (Chair), Strutton (Vice-Chair), Chahal, Chaudhry, Cheema, Chohan, M Holledge, Pantelic (from 6.35pm) and Shah

**Also present:-** Councillor Carter

**Apologies for Absence:-** Colin Pill

### **PART I**

#### **40. Declarations of Interest**

No declarations were made.

#### **41. Minutes of the Last Meeting held on 18th November 2015**

**Resolved –** That the minutes of the last meeting held on 18<sup>th</sup> November 2015 be approved as a correct record.

#### **42. Member Questions**

There were no questions from Members.

The Chair varied the order of the agenda to consider Item 6: Slough Walk In Centre first.

#### **43. Slough Walk In Centre**

The Panel received a report from Slough Clinical Commissioning Group (CCG) on the current activity and review of future provision of Slough Walk In Centre at Upton Hospital. The contract had been extended for 18 months to June 2017 and this provided an opportunity for NHS England and the CCGs to review the current service and consider how the service could be developed in the future. This work would be aligned with the strategic 5-year plan for primary care including providing seven day access to services.

*(Councillor Pantelic joined the meeting)*

Slough Walk In Centre opened in 2009 and the current services included walk in provision which had 42,470 attendances in 2014/15 and a GP practice with 6,409 registered patients. The current walk in service was for minor illnesses such as colds, fever and dressings, and it did not cater for minor injuries. 66% of attenders were from the Slough CCG area, and following a question from a Member it was indicated that the high level of use was mainly due to the geographic proximity rather than any specific health related issues.

Members discussed various issues and asked a number of questions which can be summarised as follows:

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- The national GP survey revealed only 47% of patients in Slough said they found it 'easy to get someone on the phone' compared to 71% nationally. The CCG were asked what steps were being taken to improve this position and it was responded that improving telephone access had been identified as a key priority and actions were being undertaken to respond to patient demands including increased online access.
- Had there been any significant impact on Walk In Centre attendance arising from recent improvements at Wexham Park Hospital systems? There was some evidence that hospital admissions had started to come down but attendance at the Walk In Centre had increased.
- Why didn't the Walk In Centre deal with minor injuries? It was noted that there were no x-ray facilities at Upton Hospital which was required to deliver minor injury services. Future provision could include such services, however, there would a significant additional cost to consider and Wexham Park Hospital was already relatively close. Discussions were taking place with Wexham Park Hospital about an integrated offer.
- What areas of development had been identified? The CCG were not looking at the future options for the Walk In Centre in isolation, and were looking to encourage further integration with normal primary care provision, promote self care and information; and complement the offer at Wexham Park Hospital.

The review of the current services offered an opportunity to shape future provision to meet patients primary care needs, provide a hub for services such as dressings and blood tests and avoid unnecessary use of Accident & Emergency. A steering group had been established, which included the Commissioner for Health & Wellbeing, and consultation and data collection had taken place to inform the future options. A further workshop would be held on 26<sup>th</sup> January and the Panel requested that the Chair be invited to represent the scrutiny panel. Members also expressed a strong interest in the emerging proposals of the review. It was therefore agreed that the Chair be invited to the workshop on 26<sup>th</sup> January and that a further report be brought to the Panel, at an extraordinary meeting in February if required or at the next scheduled meeting.

### **Resolved –**

- (a) That the update on the review of the current Walk In Centre service at Upton Hospital be noted.
- (b) That the CCG invite the Chair of the Panel to the second stakeholder workshop to be held on 26th January 2016.

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- (c) That a further report on the emerging proposals be considered at a future meeting with an extraordinary meeting of the Panel arranged in February or early March 2016 if required.

### **44. Adult Social Care Budget and Adult Social Care Reform Programme 2015-19**

A report was considered that updated Members on the in-year adult social care budget, future budget plans and the progress of the implementation of the reform programme.

An overspend of approximately £0.6m was projected for 2015/16 primarily due to the slippage on the delivery of savings and the increasing demand and complexity of needs of individuals. Efficiency savings of £2.714m would be delivered during the current year with further planned savings of £5.14m to be delivered by March 2019 as part of the reform programme. In addition to the major reductions in the government grant for local authorities in recent years, the provisional Local Government Finance Settlement had brought forward further reductions and this would put pressure on service budgets. The Government had announced that local authorities could introduce a new precept of 2% on Council Tax (in addition to the existing 2% referendum cap), providing this was used to support adult social care. If introduced in Slough, this would raise circa £0.9m and would be considered as part of the budget setting process. The Panel asked a number of questions about how the precept would operate and how it could be demonstrated that the additional revenue would support adult social care. It was noted that further detail of how the scheme would work was awaited and the Members would be provided with further information when available.

The Panel also noted that a further £1.5bn nationally had been announced for the Better Care Fund from 2018-19 although the detail of this was not yet known. Details of the main savings in adult social care up to 2019 and progress on implementing the portfolio of projects in the reform programme were summarised. The Panel highlighted the importance of ensuring the necessary controls and procedures were in place to provide assurance that the Council met the standards required by the Care Act despite the funding reductions. The Panel were informed that the delivery of the reform programme incorporated the Care Act requirements and the authority would remain compliant with statutory requirements after implementing the proposed savings proposed.

Members asked what approach was being taken to balance the competing pressures of rising demand, a relatively unhealthy population and budget reductions. It was responded that a system wide approach was needed and the reform programme had been designed to address these pressures. A more preventative approach would be taken to delay or avoid care needs, however, it was recognised that implementing the programme would be challenging. The level of budget reductions was unprecedented and involved carefully renegotiating contracts and recommissioning such as the new community and voluntary sector SPACE alliance.

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The possibility of further devolution of social care in the future and potential funding opportunities was raised. The devolution deal in Manchester was being observed by local authorities across the country and the department were exploring any additional funding opportunities such as Smart Cities. The Panel discussed the status and options for introducing new technology, for example to promote flexible working for staff, and it was noted that a pilot had taken place and all available options had been reviewed in making a recommendation that would meet the future needs of the service.

At the conclusion of the discussion, the Panel noted the report.

### **Resolved –**

- (a) That the financial position facing the Adult Social Care service and progress being made in the reform programme be noted.
- (b) That the Panel receive further information on the mechanism of the option for the Council to introduce a 2% Adult Social Care precept on the Council Tax.

### **45. Get Active Slough: A Five Year Leisure Strategy for Slough**

The Commissioner for Community & Leisure gave the Panel an update on the progress of implementing the Slough Leisure Strategy, “Get Active Slough” that was designed to get “more people, more active, more often”. The report provided further information on the investment in major capital development of core facilities – a new leisure centre to replace Montem Leisure Centre, refurbishment of the ice arena and the Arbour Park community sports facility – however, the main focus was on progress of the ‘Get Active’ targeted activity programme and the neighbourhood capital programme.

The cost of physical activity in Slough was estimated to be £24m per annum and was a major contributing factor in a range of health conditions contributing to premature death. Activity was also recognised to have major social and economic benefits and could contribute to community safety. Promoting activity could play a major role in achieving a wide range of strategic objectives and the Commissioner stated that 2016 would be the ‘year of delivery’ to make a major step forward in implementing the strategy. Examples included five multi-use games areas that had been developed so far in strategic locations and capital funding had been committed to provide a series of new outdoor gyms, trim trails and improvements to existing sports provision in parks and neighbourhoods. The early evidence from the ‘Get Active’ programme and Active People Survey was that there had been a decrease in inactivity levels and an increase in participation. The Commissioner emphasised the importance of raising awareness of the opportunities for people to become more active in neighbourhoods across Slough and he invited the Panel to submit their ideas to him about how to most effectively communicate the key message and engage local residents in Members’ wards.

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The Panel were very supportive of the work being done to implement the strategy at a local and neighbourhood level. Members raised the following points during the discussion:

- Attitudes and behaviours were formed early, so what work was being done with schools and in early years settings? It had been initially difficult to engage schools, but the team were working with the School Sports Network and advising on the most effective use of the premium available to primary schools for PE. Links were also being made with Public Health on childhood obesity programmes.
- A Member expressed the view that the cycle hire scheme had primarily been targeted at commuters and businesses rather than residents. It was suggested siting stations in neighbourhoods with links and routes to the Jubilee River and Burnham Beeches. The Commissioner agreed that more could be done to extend and promote the scheme to residents in this way to take advantage of the excellent provision of cycle routes available locally.
- Was support to access leisure facilities available to Looked After Children? A scheme was in place previously to provide free access to leisure facilities for Looked After Children but the scheme had not been well used. However, it could be reconsidered in the future and promoted to ensure it was effective.
- What role could councillors play in promoting neighbourhood level activity? The Panel felt that ward Members were well placed to support and raise awareness of local leisure opportunities. A number of suggestions about how this could be done were discussed and it was agreed ward Members would be provided with further information on the facilities and activities in their areas to promote appropriately. A communications plan was suggested for each councillor to help them promote the fun and engaging activities available in their ward. Members were encouraged to provide their views to the Commissioner on how such opportunities could be effectively communicated. The Panel felt more generally that more visible and proactive communications activity led by the communications team would assist in promoting the key messages of the campaign.
- A Member expressed disappointment that the play park in Bloom Park had recently been lost and residents were concerned about anti-social behaviour. It was noted that there was a trim trail in Bloom Park and emerging proposals for a football pitch and walking track. The leisure strategy therefore needed to be closely linked to other services such as parks and community safety. Issues were also highlighted at other local facilities such as the play area in the Lynch Hill area. The Commissioner commented that barriers to using particular play areas, parks and open spaces for informal activity often needed to be

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addressed locally by involving ward members, residents etc. to find the right solution.

- Would the increase in pitch fees negatively impact on levels of activity? The Commissioner explained the rationale for the change and commented that at a time of significant pressure on the revenue budget it was important to strike a balance that still made pitches available at with attractive fees. Pitch fees in Slough had previously been very low compared to neighbouring areas. There was also an important role for the CCG, police and other public sector partners with an interest in promoting healthy lifestyles to actively support the strategy.

At the conclusion of the discussion, the Panel expressed its support for the aims of the community leisure strategy and noted the progress that had been made.

### **Resolved –**

- (a) That the progress report on the implementation of the Leisure Strategy, 'Get Active Slough', be noted.
- (b) That communication plan including a list of events, activities and programmes in each ward across the Borough be provided to each councillor to enable them take ownership in promoting local opportunities through surgeries, canvassing and general engagement with residents.
- (c) That Members of the Panel submit any further ideas to the Commissioner for Community & Leisure on how local activity could be delivered and communicated to Slough residents.
- (d) That the communications department take an active role in promoting the 'Get Active Slough' programme to help raise awareness in the local media and publications.

## **46. Service changes arising from the in year reduction to the Public Health Grant and the Comprehensive Spending Review**

The Panel considered a report on the implications of the in year reduction to the public health grant and the comprehensive spending review. It built on the report to the Panel in October 2015.

The proposed 6.2% in year cut to the public health budget had been confirmed in the November Spending Review which had also included a further 9% reduction to 2019. The baseline public health grant for 2016/17 would not be confirmed until later in January but significant activity had been undertaken to review services and where possible to reduce services in line with the funding reductions. However, the Panel noted that the cut would have a severe impact, particularly as Slough was already the lowest funded in the country amongst authorities with equivalent levels of deprivation and

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because of the difficulty of implementing in year cuts when the vast majority of spend was committed in contracted services. Details of the service reviews were set out in paragraph 5.2 of the report and the Panel were informed that the risks were being mitigated by integrating services and working with partners such as the CCG and Children's Trust.

The Panel asked about the overall approach being taken and it was responded that there remained considerable uncertainty about the profile of the grant reduction over the next three years and the Council was therefore working on the 'worst case scenario'. A three-year plan was being put in place and the Council would fund mandated services by 2019 with a greater need to align with Slough CCG and NHS England. A Member commented on the good progress being made with the drug and alcohol misuse strategy presented at the last meeting, and asked how other funding could be attracted to protect services. It was responded that income generation was part of the approach being taken and the redesign of services could also achieve savings without negatively impacting on health outcomes. The Panel commented that cuts to public health services was likely to increase pressures on other parts of the health system and that partners therefore needed to work closely together to maximise the value for money of the 'public pound'.

Members discussed a number of other issues including the impact of staffing cost reduction this year and plans for recruitment from April 2016; the protection provided to mandated services; and the joint commissioning arrangements across Berkshire. At the conclusion of the discussion the Panel noted the report.

**Resolved** – That the report be noted.

### 47. Forward Work Programme

The Panel considered the work programme for 2015/16 and agreed the following additions/amendments:

- An additional meeting to be arranged, if required, in February or early March to discuss the emerging options for the future of the Slough Walk In service and the CQC inspection of Wexham Park Hospital be considered at the extraordinary meeting.

**Resolved** – That the Forward Work Programme for 2015/16 be endorsed, subject to the possibility of an additional meeting if required.

### 48. Attendance Record

**Resolved** – That the record of Member's attendance in 2015/16 be noted.

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### **49. Date of Next Meeting - 21st March 2016**

The date of the next meeting was confirmed as 21<sup>st</sup> March 2016, noting the possibility of an additional meeting in February 2016 if required to further discuss the proposals for the Slough Walk In Centre.

Chair

(Note: The Meeting opened at 6.30 pm and closed at 8.30 pm)