

## **Health Scrutiny Panel – Meeting held on Thursday, 3rd April, 2008.**

**Present:-** Councillors Plimmer (Chair), Dhillon, Dodds, O'Connor, Shine and Small.

**Also present:-** Nasreen Bhatti (Berkshire East PCT), Dr Sadhana Bose (Berkshire East PCT), Andrew Burgess (Berkshire Healthcare NHS Foundation Trust), Suzie Loader (Heatherwood and Wexham Park Hospitals NHS Trust), Dr Angela Snowling (Berkshire East PCT), Viki Wadd (Berkshire East PCT) and Rob Whitehouse (Slough Community Leisure).

**Apologies for Absence:-** Councillor Qureshi.

### **PART I**

#### **52. Declarations of Interest.**

Councillor Maclsaac declared that two members of his family were employed by the Berkshire Healthcare NHS Foundation Trust.

#### **53. Minutes**

The minutes of the last meeting held on 12th February, 2008 were approved as a correct record.

#### **54. Joint East Berkshire Health Overview & Scrutiny Committee - Minutes**

The minutes of the Joint East Berkshire Health Overview & Scrutiny Committee meeting held on 10th January, 2008 were noted.

#### **55. Berkshire East Obesity Strategy.**

The Panel received a presentation from Dr. Angela Snowling, Consultant in Public Health, Locality Lead for Bracknell Forest. Dr Snowling explained that the local strategic vision was to improve the health and wellbeing of the East Berkshire population by 2012. The recommendations of the Foresight report (2007) had estimated that two thirds of children would be overweight or obese by 2050. The national strategy had indicated that the priority would be to restore obesity levels in children to those measured by the Health Survey for England in 2000. It was emphasised that collective action was needed and early intervention would encourage activity and nutrition in places such as children's centres. School based prevention would include education to reduce TV viewing.

The Berkshire East Obesity network had been established to develop action plans and implement the strategy that would run from 2008-2012. Monitoring would be carried out by the local network and GOSE. Members noted the required involvement of town planners and members of the leisure industry. Employers, local strategic partnerships, the voluntary sector and institutions would also be

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involved with the strategy, together with food producers, retailers and manufacturers.

Members noted the incidence of overweight children on a ward basis and this evidence had been discussed with local area agreement teams. The Network would work together to deliver a comprehensive range of services and interventions to prevent and manage obesity for the population of East Berkshire. Dr Snowling highlighted the at risk groups in the locality and the most prominent ages of risk. She discussed the timescale for the implementation of the strategy and the mapping of local contributors since June-December 2007.

In response to the presentation, Members made the following observations:-

- A Britwell Ward Councillor was concerned at the number of Fast Food Outlets in his ward which in his opinion encouraged families to eat too much convenience food. He was concerned that youth activity was limited and children were unable to play outside their homes due to the excessive number of "no ball game" signs. He argued that parks were not used because of concerns in relation to bullying. The Member commented that children were healthier in the days when they received school dinners and suggested that all children should be able to have a free school meal. He was also concerned that Slough residents should not lose the enjoyment of Farnham Park Pay and Play Golf course if it were sold. In response Dr Snowling agreed that his view on school lunches was echoed nationally but advised that the provision of lunches must be a school based decision. She also advised that a national play strategy would be published in the near future.
- In response to a question relating to the benefits of breast feeding, Dr Snowling advised that it was beneficial to children because less weight was gained and there were other beneficial nutritional values. Members were advised that the incident of breast feeding in Slough was at a very successful level.
- A Member argued that obesity would be difficult to tackle until the issue of poverty amongst children in the town was addressed. She was concerned that in some large families children could not afford to take part in sport and leisure activities. She felt that initiatives such as 'walking buses' to school would be helpful in the strategy. In response The Interim Director, Community and Cultural Services, advised that participation in sport and reducing obesity were currently critical indicators in the draft LAA. It was anticipated the final LAA would be signed off by Cabinet in June. Local authorities were required to set stretch targets for critical indicators and Government Offices would carefully monitor whether these targets were being delivered. To support the work of the LAA, the government had no longer ring fenced a number of existing grants and these had been pooled into 'Area Based Grants'. Local Strategic Partnerships could use these grants to support the delivery of LAA targets. The Area Based Grant for Slough was around £4.5m for 2008/2009. However, it was important to emphasise these were existing grants being used to fund current services, therefore the scope to redirect these monies could be limited. The Officer

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also advised that consideration would be given to the safety of parks as part of the Community Safety Strategy.

- A Member was concerned that there was a shortage of midwives in Slough but was reassured by Ms Loader that the level of midwives in post was higher than ever and the recruitment process continued.
- A Member suggested that a children's champion should attend Planning Committee meetings to ensure that provision was made for play areas when applications were considered.

### Slough Community Leisure

Rob Whitehouse addressed the Panel on behalf of Slough Community Leisure. A briefing note had been submitted to the previous Panel meeting outlining the cost of the proposal to introduce free admissions to swimming pools for disadvantaged children. A Member had challenged the estimate given and requested that a representative attend the future meeting to discuss this. Mr Whitehouse advised that Slough Community Leisure had operated the council's leisure facilities since 2000. At that time 25% of funding was received from the Council. The current funding level provided was 13% and the remainder of income was received from door receipts. It was noted that Slough Community Leisure had worked closely with the PCT last year on health initiatives. Members were advised that 7000 children were members of the leisure centres and several new initiatives had been introduced particularly to encourage the use of the facilities by 8-16 year olds.

Members raised the following observations:-

- A Member advised that on a recent visit to Mallards Children Home she had learned that the resident children did not receive reduced admission prices to leisure facilities and she asked how well publicised the reductions were. Mr Whitehouse advised in response that until 2008 discounts were given to individuals only but discussions were currently being held to assess whether discounts could be provided for day centres and individuals in care. He advised that children who came to the centres with schools were charged a 50p entrance fee.
- The Interim Director agreed that this was an important issue and advised that he would discuss this matter with Director of Education to discuss whether Looked After Children should have automatic free membership.
- A Member stated that the cost of swimming lessons for a 3 year old was £69 per term and she was concerned that this was an excessive amount and poor families would not be able to afford this level of charges.
- The Interim Director advised that a report would be submitted to the next Panel meeting to consider what could be done to encourage sporting activities. He also suggested that the obesity strategy should be presented to the Youth Cabinet to ask their views on what they thought would be the most effective way to combat child obesity.

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The Panel thanked Dr Snowling for her comprehensive report and presentation.

### **Resolved –**

- (a) That the Report and Presentation be noted.
- (b) That the Obesity Strategy presentation be presented to the Youth Cabinet for their view and comment.
- (c) That the Interim Director discuss the possibility of automatic free membership to Looked After Children with the Director of Education.

## **56. Safeguarding Adults - Annual Report.**

The Panel received a presentation and a report from the Head of Learning Disability Services, to advise on the Local Authorities responsibilities and arrangements in relation to safeguarding adults. Members were advised that safeguarding adults related to all work that enabled an adult who was or may be eligible for community care services to retain independence, well being and choice and to live a life that was free from abuse and neglect. The six Berkshire Unitary Councils had agreed in 2000 to produce guidelines for protecting vulnerable people in Berkshire. The procedures were published in 2001 and Adult Protection Committees were set up in Berkshire. Slough was a member of the East Berkshire Adult Protection Committee. The Committees had since been renamed as the Safeguarding Adults Partnership Boards and included representatives from the Local Authorities, Berkshire East PCT, Heatherwood and Wexham Park Hospital NHS Trust and other organisations.

Members were advised that the Commission for Social Care Inspectorate (CSCI) had a particular role in ensuring that standards were maintained so that they were provided safely.

It was noted that working arrangements had consistently been commended by the CSCI. Members were advised that a Safeguarding Adults Co-ordinator post was created in 2007 and the postholder was responsible for coordinating and managing the response to potential abusive situations. Since April 2007 190 referrals had been received but it was noted that most of the activity related to problems with care associated with one particular Residential Home and one Nursing Home. Members noted that older people were the most referred group, followed by people with learning disability but this was mainly due to actions in relation to the residential and nursing home discussed. The Council had been involved with these two homes over the last 2 years because neither establishment was meeting the standards for dignity in care and providing a safe environment for older people. Both Homes had enforcement notices served on them by CSCI and the Council had provided assistance with the monitoring of care standards in the Homes. The Homes had been subject to Slough Borough Council's special measures in order to drive standards up and these included the regular weekly inspection by the Assistant Director and Head of Services for Older Peoples Services, more frequent inspection by CSCI and the location of Slough Borough Council staff in one of the Homes to assist with the skills required to improve the quality and standard of their service. It was noted that the impact of

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these interventions had dramatically improved the standards in the Homes. The Officer emphasised that the Council was robust in its response to allegations of abuse and its special measures and monitoring arrangements had been recommended to other Berkshire authorities by CSCI. The Officer highlighted training arrangements in place and the future work required.

The Officer concluded that the Council's policies and procedures were robust and met regulatory requirements in relation to safeguard vulnerable adults.

In response to the presentation, Members raised the following observations:-

- A Member stated that she was profoundly disturbed by the report and asked whether the police were involved when the cases of abuse were detected. The Officer advised that the police were involved but not in every case. It was noted that some investigations had concluded but others were ongoing.
- A Member asked whether a robust protocol was in place so that the accused could be suspended where necessary and the police contacted. The Officer confirmed that if a member of council staff was involved, the individual would be suspended and the police would be involved where necessary. The Interim Director advised that if criminal activity was suspected, the police would be invited to a safeguarding adult conference. A decision would then be made on whether to proceed with action and ultimately the Crown Prosecution would decide whether to proceed with prosecution. It was confirmed that in every single case the staff member would be suspended.
- A Member asked whether all staff had been CRB checked and was advised that it was a requirement that this was done before they commenced their employment. This procedure included all agency employees.
- A Member was concerned that the Panel were not aware of the issues of neglect until they had received the Committee report. In response the Assistant Director, Health and Social Care, commented that the statistics shown in the report did not tell the whole story. Some of the statistics reflected the number of investigations that had been carried out but in some cases the allegation was not proven or it had been found that there had been no evidence of neglect. The Officer commented that it was regrettable that there would always be cases where people were neglected and Care Homes had problems due to a variety of reasons. The Assistant Director emphasised that when one case of neglect was discovered, then all of the other residents in the Home would be assessed to make sure that their level of care was acceptable. He explained that the Council had no right to enter a Care Home unless it had placed an individual in that Home. If however, that Home did not adhere to CSCI standards then the Council could intervene. It was also noted that the CSCI would carry out independent checks on the Council's processes.
- A Member asked what lessons had been learned from the incidents reported in the two Homes in question. The Officer advised that experience had shown that problems often arose where there was a rapid turnover of managers in a Home. The associated lack of training often

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resulted in chaos and the best staff left. It had also been found that record keeping was not always consistent and in the residential care home case the Council had installed its own staff to rectify this situation.

- A Member stated that he had on occasion raised issues of concern and was confident that the Council had dealt with these in an inappropriate manner. He added that the type of problems referred to in the report were a national issue.
- Members discussed the availability of advocacy services within Homes and the Officer suggested the possibility that Members could receive training and visit Homes on occasion to view standards of care.

### **Resolved –**

- (a) That the report be noted.
- (b) That the Assistant Director considers the establishment of training to enable Members to visit Nursing Homes.
- (c) That the Assistant Director investigate the allocation of a Council funded advocate to Care Homes, subject to funding.

## **57. 'Right Care, Right Place' Consultation - Draft Consultation**

Members considered the draft Members responses to improving local NHS services and local mental health inpatient facilities, set out in the consultation paper, 'Right Care, Right Place'. The following questions were raised:-

- A Member asked how the public consultation meetings were progressing and advised that at the first meeting she had attended there were only nine people there. In response Viki Wadd advised that the second meeting had attracted approximately 50 people and another meeting on the following day at the Centre in Slough had been well publicised and a good attendance was expected. She also advised that Slough had received a very good response to the consultation questionnaires that had been issued.

Andrew Burgess, Berkshire Health Care NHS Foundation Trust, commented that a negative article had appeared in a Slough newspaper relating to the transfer of mental health care to Upton Hospital. Dr Nazreen Bhatti advised that the options had not yet been tidied up but commented that if Upton Hospital was the preferred site then development would take place before patients were moved there. Viki Wadd added that it was hoped that if the Upton Hospital was the preferred location then it was hoped that the whole site would be kept in public ownership. The Interim Director advised the Panel that the Council supported the development of integrated facilities on the Upton site.

**Resolved –** That the Panel endorses the submitted responses.

## **58. Healthcare Commission's Annual Health Check.**

In the absence of the Scrutiny Officer, the Chair introduced a report to provide an explanation of the requirements of the Health Commission's Annual Health check.

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Members were advised that each Health Care Trust was obliged to submit a declaration to the Health Care Commission by 30<sup>th</sup> April 2008 and as part of this process Trusts were responsible for inviting third parties to comment on their performance, including the Overview and Scrutiny Committee. The Commission had published sets of criteria for NHS Trusts which set out 24 core standards for the Annual Check and these described a minimum level of service which patients had the right to expect. It was hoped that an individual response from the Council could be submitted by the first week in April 2008. Members noted the suggested issues for comments and in particular considered that the issue of car parking charges at Wexham Park Hospital had not yet been satisfactorily resolved. It was agreed that the Chair of the Panel would liaise with the Scrutiny Officer to formulate a response to the Health Care Trust on behalf of the Panel.

**Resolved** – That the report be noted and that the Chair of the Panel and the Scrutiny Officer formulate a response to the Health Care Trust.

### **59. Health Inequalities - Audit Commission Report.**

Members noted the content of the Health Inequalities Audit report 2007/2008. The progress made by the partnership was noted, together with the number of areas where action was still required. The four partners had agreed to ask the Audit Commission to look at ways in which the framework for reducing health inequalities 2008/09 could be improved. The Interim Director of Community and Cultural Services commented that the review was carried out in 2006 and as such the report was not up to date. Further work had been arranged with the Audit Commission.

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

### **60. Forward Agenda Plan.**

The Panel noted the forward Agenda Plan and agreed the following additions.

- Joint Strategic needs Analysis- June 2008.
- LAA Indicators.
- Male Cancers.
- Nursing Home fees.
- Access to NHS Dentistry (particularly Orthodontics).
- Wexham Park Hospital- Update on Access Issues and Parking Charges.
- Adult Social Care- Performance Management.

### **61. Date of Next Meeting - Monday, 30th June, 2008.**

Chair

(Note: The Meeting opened at 6.30 p.m. and closed at 10.20 p.m.)