Health Scrutiny Panel – Meeting held on Wednesday, 19th November, 2014.

Present:- Councillors Strutton (in the Chair), Bains, Cheema, Chohan, Davis,

M Holledge and Rana

Also present:- Councillor Hussain

Apologies for Absence:- Councillors Pantelic and Dhillon

PART I

31. Declarations of Interest

No declarations were made.

32. Minutes of the Last Meeting held on 6th October 2014

Resolved – That the minutes of the last meeting held on 6th October 2014 be approved as a correct record.

33. Member Questions

There were no questions from Members.

34. The Care Act 2014 - Reforming Care and Support

The Assistant Director Adult Social Care introduced a report which provided a summary of the Care Act 2014; updated Members on the current status of the Act's regulations and guidance; and outlined the potential implications for Slough.

The Act brought together care and support law into one statute and set out a long term agenda to meet the social care needs of vulnerable adults. The promotion of wellbeing and prevention of need was central to the Act and the key aspects of the Act, as detailed in paragraph 5.3 of the report, were summarised. The implementation was staged with the majority of provisions of the Act coming into force in April 2015 with the funding reforms coming into effect in April 2016, following consultation early next year.

There would be significant financial implications for the Council arising from the implementation of the Act with the estimated cost of £0.9m to £1.2m in 2015/16 depending on the rate at which additional carers present for assessment/support. The amount of additional funding Slough would receive would not be announced until December, however, early indications suggested that it would be circa £440k. The Panel also noted that the national context of rising demand and reduced spending on adult social care – of 26% over the past four years – was forecast to create a budget gap of £4.3bn by the end of the decade.

The Panel discussed a number of key aspects of the Act and the implications for Slough which can be summarised as follows:

- The impact that funding pressures would have on services locally was questioned. The Assistant Director responded that significant savings would need to be made next year and in future years but that the starting point was assessing people's needs and then working with the market to deliver the right care.
- Members asked what steps were being taken to promote integration
 with other Council services such as planning and housing to ensure
 more people had the necessary support and modifications to stay in
 their homes. The Assistant Director stated that there was a significant
 focus on delivering care in the home, partly through the Better Care
 Fund, and work was ongoing with other departments. In terms of
 planning, whilst the Council would look into individual circumstances to
 make modifications to people's homes, planning regulations would
 need to be followed.
- The need for good relationships with the provider market would be necessary and the Panel considered why most providers for supporting people at home were not currently based in Slough for various historic reasons. The Assistant Director confirmed that the Council wanted to further develop relationships with the provider market based in Slough and also commented that there were likely to be more framework contracts paying providers by results. It was also noted that more people would be using direct payments in the future and would purchase their own care and support and this would have a significant impact on the market.
- The process for deferred payments so that people would not have to sell their home at a point of crisis was discussed. The Assistant Director stated that such a system had already been running in Slough so it was likely to have less impact that elsewhere. Members commented on the need for robust systems to recoup deferred payments and it was confirmed that appropriate systems were in place.
- The Panel asked whether the Council provided the appropriate advice to recipients of direct payments. It was noted that this was not currently provided as the service previously provided had not worked as well as hoped, however, the community team were currently looking to provide new direct payment advice and support services.

At the conclusion of the discussion, the Panel thanked the Assistant Director for the report and agreed to receive a further update on the implementation of the Act at the meeting on 23rd March 2015.

Resolved -

(a) That the report be noted.

(b) That a further report updating the Panel on the progress in implementing the Act in Slough be received in March 2015.

35. Progress Report on Diabetes Strategy 2013-15

The Panel received a report on the progress made on the Diabetes Strategy for Slough from Dr Onteeru Reddy, Public Health Programme Manager, and Dr Nithya Nanda, Clinical Lead for Diabetes and CVD Networks at Slough Clinical Commissioning Group (CCG).

The Strategy had been approved in 2013 and significant progress had been made in the intervening eighteen months. Diabetes posed a major health problem in Slough as its prevalence was above the national average and levels of physical activity were relatively low. In 2012/13 there were 8,604 patients in Slough diagnosed with diabetes and across Berkshire East it was forecast that the rate would increase by 80% by 2030. Diabetes had therefore been identified as a priority for Slough and the Council and CCG were working closely in partnership to improve the outcomes for patients. Members were briefed on the performance data relating to the key care processes targets, such as blood pressure and total cholesterol, and the number of diabetes related hospital admissions. The CCG had achieved substantial improvements in terms of diabetes management, offer for care processes and value for money which would be reflected in national results to be published in December.

Progress was outlined on the key themes in the strategy, as detailed from paragraph 6.6 of the report, which included increased Healthcheck delivery and targeted activity for high risk groups. It was considered that the short, medium and long term action plans set out in the strategy were delivering substantial improvements to services.

The Panel discussed a wide range of issues which are summarised as follows:

- There were very significant costs to the NHS arising from diabetes and related conditions, estimated at £10bn nationally, and these were more pronounced in Slough due to higher prevalence. The approach being taken in the strategy was early intervention and support and advice to promote healthy lifestyles. Good management of people's condition would help to limit costs and it was noted that the number of people whose conditions were categorised as well controlled in Slough had risen significantly over the past two years from 4,000 to 5,700.
- Members emphasised the importance of ensuring that the key themes
 of the strategy were properly integrated to related plans such as
 leisure, transport and licensing. Officers recognised this and confirmed
 that progress was being made in this regard, however, the Panel noted
 some of the practical barriers such as the fact that public health was
 not a licensing objective under the Licensing Act 2003.

- The different types of diabetes were discussed and Members asked what support was available for people with pre-diabetes. It was noted that good diet and exercise were most effective in controlling the condition and a range of support services were provided to promote healthy lifestyles. It was also felt that public health information campaigns on diabetes could be more hard hitting and prominent.
- Education and awareness raising on public health issues was considered to be vital and the Panel asked what engagement mechanisms were being used. Officers outlined the wide range of activities including engagement and screening GP practices, in the community and public health awareness in schools. Members asked for more information about the role of the Silver Star Diabetes charity in Slough and it was confirmed that their Mobile Diabetes Unit offered an inclusive service and would have a launch event in the High Street in the coming weeks. The Panel agreed that such activity needed to be well promoted to raise awareness of the free checks that were available.

The Panel thanked Dr Reddy and Dr Nanda for their report and agreed to receive a further update in the future on the progress being made.

Resolved -

- (a) That the progress on the diabetes strategy for Slough and the action plan detailed in section 6.6 of the report be noted.
- (b) That it be noted that national comparator data would be published at CCG and practice level in December 2014 which would show the detailed performance improvements as highlighted in the report.
- (c) That it be noted that the strategy was predominantly focused on adults and included the themes of: early identification, patient and clinical information, improved clinical management and monitoring of clinical outcomes.

36. Child and Adolescent Mental Health Services (CAMHS tier 2) Engagement Update

Dr Angela Snowling, Consultant in Public Health, introduced a report updating the Panel on the engagement that had taken place to address the recommendations of the Child and Adult Mental Health Services (CAMHS) engagement survey in relation to tier 2 and tier 1 services.

The Panel were informed that good progress was being made in responding to the issues raised by the CAMHS engagement survey, which included the understanding, timeliness and transparency of the service. Significant changes had been made to the service design following the feedback and delivery would commence in January 2015. Eight pathways had been

identified including eating disorders, Autism Spectrum Disorder, self-harm and anxiety and depression, with varying approaches for each pathway. Specific activities included a new app designed by and for young people and the wellbeing programme would be piloted in two schools (Wexham and Baylis Court) and two colleges (Haybrook and East Berkshire).

The Panel welcomed the progress that had been made and discussed a number of specific aspects of the pilot. It was agreed to receive a further report on the outcomes after the conclusion of the pilot in June 2015.

Resolved -

- (a) That the update be noted on the Five Ways to Wellbeing (tier 1 and 2) service to be piloted in Slough from January to June 2015.
- (b) That the results of the pilot would inform CCGs future plans as commissioners of Child and Adolescent Mental Health Services.
- (c) That the Panel consider a further report on the outcomes of the pilot in summer 2015.

37. Public Engagement About GP Out of Hours

Consideration of the item was deferred until the next meeting. Members were invited by the Scrutiny Officer to submit any specific comments or questions on the proposed move of GP Out of Hours service from Herschel Medical Centre to Wexham Park Hospital.

Resolved – That the item be deferred and any immediate comments or questions be forwarded to the CCG via the Scrutiny Officer.

38. Chair's Visit to Wexham Park Hospital - 24th October 2014

Councillor Pantelic was not present to provide a verbal update to the Panel but had indicated that she would update Members directly on her recent visit to Wexham Park Hospital.

Resolved – That the Panel be updated on Chair's visit to Wexham Park Hospital following the meeting.

39. Forward Work Programme

The Panel considered the Work Programme for 2014/15. It was noted that an update on Frimley Health NHS Foundation Trust was expected in January 2015. It was agreed to add updates on the Care Act for March 2015 and CAMHS in June or July 2015.

Resolved – That the current work programme for the 2014/15 municipal year be noted, subject to the amendments noted above.

40. Attendance Record

Resolved – That the record of Members' attendance in 2014/15 be noted.

41. Date of Next Meeting - 20th January 2015

The date of the next meeting was confirmed as 20th January 2015.

Chair

(Note: The Meeting opened at 6.30 pm and closed at 8.25 pm)