



Minutes

Name of meeting	POLICY AND SCRUTINY COMMITTEE FOR ADULT SOCIAL CARE AND HEALTH
Date and time	MONDAY, 19 MARCH 2018
Venue	COUNCIL CHAMBER, COUNTY HALL, NEWPORT, ISLE OF WIGHT
Present	Cllrs John Nicholson (Chairman), George Cameron, Rodney Downer, John Howe, Michael Lilley, Steve Hastings
Cabinet Members Present	Cllr Claire Mosdell
Other Members Present	Cllr Lora Peacey-Wilcox
Co-opted Member (Non-Voting)	Chris Orchin (Healthwatch Isle of Wight)
Healthwatch Isle of Wight	Joanna Smith
IW NHS Trust	Maggie Oldham, Barbara Stuttle
Other NHS representatives	Carol Wood, NHS England (South East and South West); Dr Liz Mearns, NHS Wessex
IW Clinical Commissioning Group	Gillian Baker, Loretta Outhwaite, James Seward
Officers Present	Jennifer Beresford, Mike Corrigan, Terry Corry, Bryan Hurley, Paul Thistlewood, Carol Tozer.

26. [Minutes](#)

The IW Clinical Commissioning Group reminded members that they had considered reports on the mental health blue print and proposals for improvements at Shackleton and Woodlands at the January 2018 meeting. NHS England had indicated that it required the formal approval of the committee on these matters rather than just noting them.

RESOLVED :

- (i) THAT the Minutes of the meeting held on 22 January 2018 be confirmed.

- (ii) THAT the draft mental health blueprint and proposals for Shackleton and Woodlands, as circulated at the 22 January 2018 meeting be approved.

27. **Declarations of Interest**

No declarations were received at this time.

28. **Health Service re-configurations**

a) **Neonatal unit redesignation**

The committee considered a report relating to proposed changes would affect the Island's neonatal unit and regional radiotherapy services.

It was noted that the Chairman had met with Healthwatch and representatives from NHS England regarding the background to the changes to neonatal services. Dr Liz Mearns, the Medical Director for NHS Wessex, clarified the key issues on which the case for change had been based. The IWNHS Trust had agreed with the changes and had requested support in this area.

The redesignation would result in a safer and more effective service and actually reflect current practice. Further engagement with patients was to be undertaken before a final date set for formal adoption of the changes.

RESOLVED:

- (i) THAT the proposed resignation of the local neonatal unit at St. Mary's Hospital, Newport be accepted.
- (ii) THAT an update on progress with the engagement exercise with service users be provided prior to implementation.

b) **Modernising Radiotherapy Services in England – developing proposals for future service models**

Members were advised NHS England had undertaken a consultation on adult radiotherapy services which had closed on 28 January 2018. It was expected the results of the consultation would be available in Summer 2018 as a high number of responses had been received. A response had been submitted on behalf of the committee outlining concerns about the possible impact on Island patients if travel was required to Oxford for treatment.

The Scrutiny Officer updated the committee on discussions that he had with NHS England which indicated that there would be minimal, if any impact. Dr Liz Mearns advised that there had been significant investment of £120m in radiotherapy equipment and only a small number of very rare cases would be impacted by the proposed changes. The committee still had a number of serious concerns regarding the implications for

Islanders but agreed to wait for the results of the consultation before taking them forward.

RESOLVED:

THAT the results of the national consultation on radio therapy services be awaited before a view can be taken by the committee on whether NHS England is formerly advised that the change is deemed to be a substantial variation in service delivery for Island residents.

c) Acute Care Redesign Update

James Seward, System Redesign Programme Director, presented an update on the redesign of acute care services on the Isle of Wight. The key elements of the blue print for future configuration of acute services, along with the next steps in developing the proposals and timelines, were provided. It was noted that the Clinical Commissioning Group's (CCG) Governing Body had approved the blue print at its February 2018 meeting.

Members were also provided with programme assurance requirements and process and information on the work being undertaken around patient transport and the impact of travel. Ten key questions from the Centre of Public Scrutiny regarding reconfiguration were addressed in the written information provided to the committee.

Discussion took place regarding patient transport as this was a key area of concern. Members questioned if other UK Islands transport arrangements had been explored.

The committee requested that it be involved in the consultation process and it was agreed that all members would be requested to identify any stakeholders or groups that the consultation needs to reach. In addition, it was agreed a comprehensive stakeholder engagement plan be provided to the committee for its comment.

Discussion took place regarding encouraging better public engagement and it was agreed further consideration would be given to the approaches which could be used to enhance this at meetings of all partners.

RESOLVED:

- (i) THAT the development of the acute care re-design proposals be noted.
- (ii) THAT all members be requested to identify any stakeholders or groups that the consultation needs to reach.
- (iii) THAT the comprehensive stakeholder engagement plan be provided to the committee.

- (iv) THAT consideration should be given to looking at approaches aimed at enhancing public engagement at meetings of the Committee, the IW NHS Trust Board and the IWCCG Board.

29. **Update on key significant issues from health partners**

(a) [IWNHS Trust](#)

Consideration was given to an update on the key significant issues relating to the delivery of services by the trust.

Members were pleased to note that the Trust's winter resilience plan remained strong with only one instance of the hospital being placed on black alert for 10 hours since the end of January despite extreme weather conditions, high levels of sickness, and staff vacancies. Support from the local authority and other partners in the difficult the winter period were highlighted.

In relation to the Care Quality Commission (CQC) measures imposed on the Trust, members were advised feedback had not yet been received following the January 2018 onsite inspections. This was expected early in April 2018. Verbal feedback had been positive. No further regulatory action would be required and the "Green shoots" had been noted.

The chairman indicated that he would liaise with the Trust's Chief Executive regarding a specific case raised by the Chairman of the Council during the discussion on this agenda item.

Reassurance was sought regarding changes to the Trust's board structure and its financial impact. Members were concerned the changes would result in further salary costs. It was noted that the annual report would provide a comparison between senior management structure costs.

Concerns were raised in relation to bullying within the Trust and members sought reassurance that whistleblowing policies were in place and considered effective. It was confirmed by the Chief Executive that this was the case but acknowledged the cultural change was something which took time and staff remained fragile. The Island's rural nature also impacted negatively in this area which was not unique. The trust was beginning to build with new leaders. A more robust performance framework would also be introduced.

RESOLVED:

- (i) THAT while the formal CQC inspection report would not be available until early April 2018, the positive verbal feedback and that there was no regulatory action arising be noted.

- (ii) THAT arrangements be made for the Chairman of the Council to meet with the Trust's Chief Executive.

(b) [Isle of Wight Clinical Commissioning Group \(CCG\)](#)

Loretta Outhwaite, the Acting Chief Officer for the CCG delivered an oral update from the CCG which was under legal direction from NHS England.

Members noted, as part of the direction, that the CCG was required to recommend an option to take forward the Acute Care Redesign which the board had now agreed.

In addition, a review of Capacity and Capability was necessary. As the smallest CCG in the country the Isle of Wight CCG was not sustainable. A formal review of capacity and capability was being undertaken by Pricewaterhousecoopers. Partnership working with mainland CCG's was being explored to allow commissioning at scale. A partnership with Hampshire CCG's regrading joint commissioning of children and maternity services would be the first step in this direction.

The financial challenges the group faced were noted. Savings of £4.9m (4% of the total budget) needed to be made. There was also a need to improve quality assurance processes. A revised operational plan which focussed on high level finance and quality would be published shortly.

The chairman raised concerns in relation to a recent meeting of the Primary Care Committee not being quorate. Reassurance was provided that the decisions required at that meeting would be ratified by the Acting Chief Officer and that resilience was being considered as part of the governance review.

RESOLVED:

- (i) The legal directions placed upon the IWCCG were noted.
- (ii) The proposed partnership working with Hampshire CCG's on children and maternity services to provide capacity and capability was noted.

30. [**Health and Wellbeing Strategy**](#)

The Cabinet Member for Adult Social Care and Public Health presented the Health and Wellbeing Strategy which had been submitted to the Cabinet and Health and Wellbeing Board.

Discussion took place regarding how the outcomes from the strategy could be monitored and it was agreed the committee include monitoring the progress of the strategy and its delivery as part of its workplan.

Members questioned why some areas did not have Local Area Co-ordinators. Due to insufficient funding it had not been possible to provide Local Area Co-

ordinators for Cowes, East Cowes, Wootton, Binstead, Havenstreet and Ashley. However, there had been significant investment in Early Help and the Local Care Board considered evidence of impact when assessing what services to invest in.

RESOLVED:

THAT the committee monitor progress with the delivery of the strategy as part of its workplan.

31. **Adult social care**

(a) **Progress Reports: Care Close to Home, Deprivation of Liberty Safeguards (DOLs) and Section 42 safeguarding reviews Progress**

The committee considered the updates from the Director and senior service managers.

Progress on the implementation of the Care Close to Home Strategy highlighted that there was positive momentum. Permanent admissions to residential or nursing homes for people who were over the age of 65 were now only 13.9% above average, a 26.9% decrease since April 2017.

There was evidence early help services were becoming effective. Of 196 referrals, only one referral was a re-referral. People were not returning to adult social care, as had happened previously when they had been declined help due to national eligibility, following the investment in early help services.

Further work was needed in relation to quality. Only 64.9% of care homes on the Island were rated as Good or Outstanding compared to 80% nationally. There had been investment in training for registered managers and the programme was well underway which was expected to drive the improvement in quality.

The service was expecting a £2,500 overspend at the end of January but had delivered £3m in savings to date in 2017/18.

The concern around conversion rates in relation to safeguarding referrals was noted. It was felt a report on the performance indicator relating to conversion rates should be submitted to a future meeting when an appropriate reporting solution with partners had been identified.

The procurement exercise to outsource historical DOLs assessments had been completed. It was expected work would begin shortly and progress would be monitored electronically. Nine additional staff had completed training to undertake incoming assessments and another cohort would be trained in April 2018.

The assessments undertaken to date had not been contentious or shown a risk to the council. However, it was noted that courts were not accepting a lack of resource as an adequate reason for not completing assessments.

Members questioned the impact of the government announcement that legislation needed to be revised. It was expected it would take time for any changes in legislation and the corresponding guidance to be confirmed. It would be necessary to continue with the current actions.

RESOLVED:

- (i) THAT the progress made to reduce the backlog of Deprivation of Liberty Safeguards within adult social care was noted together with the government's recently announced intention to replace these when parliamentary time allowed.
- (ii) THAT a report on the safeguarding performance indicator relating to conversation rates be submitted to a future meeting when an appropriate reporting solution with partners has been identified.

(a) Cabinet Member's Update

The cabinet member updated the committee regarding work being undertaken in the following areas.

- Further work was needed around fee uplifts. Not all providers had communicated the information necessary to fully assess what increases were needed.
- The council's re-enablement teams were performing well and supporting people within their own homes. Initially there had been two teams, but this had been increased to four and it was hoped there would be a further increase to six teams in 2018/19.
- Members questioned the status of work at the Adelaide and Gouldings facilities. Following delays to work being started, it had been postponed as part of winter planning to ensure maximum capacity across the Island, and would begin in the first week of May 2018. Property services were finalising plans to ensure the design was fit for purpose on a long term basis.

The cabinet member shared her intention to invite the relevant local member to visit residential care establishments within their area when visiting.

RESOLVED:

- (i) THAT the updates be noted and the intention of the Cabinet Member for Adult Social Care to invite the relevant local member to visit residential care establishments within their area when visiting be welcomed

32. Committee's Workplan

The committee and health partners were reminded of the forthcoming training session by the Centre of Public Scrutiny on 26 March 2018 which would have a health focus.

Councillor Lilley, as lead member for the Suicide Prevention Task and Finish Group, provided an update on initial discussions and key issues identified. It was hoped that a copy of draft plan would be available soon to enable comments to be made.

RESOLVED:

THAT the update be noted and the key issues relating to the suicide prevention strategy be forwarded to the Suicide Prevention Steering Group

CHAIRMAN