

## **CHESHIRE EAST COUNCIL**

Minutes of a meeting of the **Health and Wellbeing Scrutiny Committee**  
held on Wednesday, 5th October, 2011 at The Bridestone Suite, Congleton  
Town Hall, High Street, Congleton CW12 1BN

### **PRESENT**

Councillor G Baxendale (Chairman)  
Councillor J Saunders (Vice Chairman)

Councillors S Gardiner, M Grant, M Hardy, D Hough, G Merry, A Martin,  
A Moran, J Saunders and J Wray

### **26 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor G Boston (substitute Councillor L Jeuda) and Portfolio Holders R Domleo (Adult Services and Health and Wellbeing) and R Menlove (Environmental Services)

### **27 ALSO PRESENT**

Councillor L Jeuda (substitute for Councillor G Boston)  
Councillor J Clowes – Cabinet Support Member for Health and Wellbeing

### **28 OFFICERS PRESENT**

G Kilminster, Head of Health and Wellbeing  
H Grimbaldeston, Director of Public Health  
D J French, Scrutiny Officer

### **29 DECLARATIONS OF INTEREST**

Councillor J Wray declared a personal interest in item 6 - the minutes of the Cheshire and Wirral Councils Joint Scrutiny Committee, on the grounds that he is a member of the Board of Governors of the Cheshire and Wirral Partnership Trust

### **30 MINUTES OF PREVIOUS MEETING**

RESOLVED: that the minutes of the meeting of the Committee held on 28 July be confirmed as a correct record.

### **31 PUBLIC SPEAKING TIME/OPEN SESSION**

Charlotte Peters Rock addressed the committee in relation to proposed and actual closures of social care and health facilities in the Knutsford area. She expressed concern about the impact these closures would have on the health and wellbeing of both carers and cared for people. She was concerned that

carers faced increasing expense as a result of a reduction in facilities in the Knutsford area. She referred to the removal of social care transport and the difficulties people appeared to be experiencing when using the Empower card. She requested that the Scrutiny Committee set up a Task/Finish Group to look at the issue.

## **32 VASCULAR SERVICE RECONFIGURATION AND ABDOMINAL AORTIC ANEURYSM SCREENING**

Julia Curtis and Dr Gurnani of the Central and Eastern Cheshire Primary Care Trust, outlined to the Committee proposed improvements to vascular services in Cheshire. A consultation had been undertaken looking at future provision of vascular services in Cheshire and Merseyside, the findings of which were awaited.

The current position was that treatment for vascular conditions took place at most district hospitals. However, to treat vascular disease well was not easy and research showed that chances of survival and improved quality of life were greatest where patients were treated by a highly specialised team working in a large centre to which many patients were referred. This would enable medical staff to develop and maintain a high level of skill. In addition, by having a small number of large centres, this would ensure that specialist doctors were available at all times. This would also enable access to the latest treatments and techniques. Finally, this would enable the NHS to be prepared for a new screening programme that had begun for older men for abdominal aortic aneurysms (AAA). Men discovered to have this condition would need specialist treatment.

Julia Curtis explained that the South Cheshire Clinical Commissioning Group (CCG) had decided not to be a part of the Cheshire and Merseyside review but rather to strengthen existing links with the University Hospital of North Staffordshire NHS Trust. This was on the grounds that the vision of the CCG was to commission care for its patients from a vascular provider that could provide a robust complete service and the University Hospital was already achieving the national AAA Quality Improvement programme markers as well as already providing vascular services to the South Cheshire area. In addition, the University Hospital was already commissioned to provide cardiothoracic and renal components and the CCG felt that these were significant elements to managing vascular conditions. This option was felt to give the best outcomes for patients.

In discussing the item, Members were advised that patients could still exercise patient choice in determining where they received treatment; and that most treatment for vascular services (such as screening and out-patient appointments) would still be carried out at a local centre, either Leighton Hospital or the GP Surgery; only surgical procedures and unplanned emergencies that would tend to be carried out at University Hospital.

The Committee was also advised that patients from East Cheshire CCG would not be affected by the overall review as they would continue to access services from the Greater Manchester Vascular network which was not subject to a review and were already accessing AAA screening as part of a pilot in the Northwest.

RESOLVED: That the proposed changes to vascular services in South Cheshire be supported.

### **33 THE CHESHIRE AND WIRRAL COUNCILS JOINT SCRUTINY COMMITTEE**

The Committee considered the minutes of the meeting of the Cheshire and Wirral Councils Joint Scrutiny Committee held on 11 July.

RESOLVED: That the minutes be received.

### **34 WORK PROGRAMME**

The Committee considered a report on the current work programme which had been updated following discussion and recommendations made at the informal meeting on 8 September.

The work programme was updated as follows:

- The Annual Public Health report would be presented in January 2012;
- An update on Health and Wellbeing Boards would be made to every meeting;
- A training session on the Joint Strategic Needs Assessment and the Health and Wellbeing Board would be held on 24 and 25 November.

Members were invited to visit Wilmslow Leisure Centre to see the Lifestyle concept in operation.

In relation to the item on Alcohol, the Committee was advised that the Sub Regional Leadership Board would be considering a report in December on minimum pricing; the North West region was lobbying the Government on the topic too.

In relation to the item on the Local Involvement Network, it was reported that a Notice of Motion would be submitted to Council calling for confirmation and clarification that funding for LINKs would be available at the earliest opportunity to enable transition arrangements to Healthwatch to be planned and a smooth handover to be achieved.

In relation to Health Inequalities, Dr Grimbaldeston reported that there would be information in her Annual Public Health report covering this and including practical steps that could be taken, not just statistics. It was also noted that some Local Area Partnerships were keen to engage on this topic.

Members also considered the following requests:

- From a member of the public, Charlotte Peters Rock, that a Task/Finish Group be set up to look at the health and wellbeing of carers. It was noted that the Adult Social Care Scrutiny Committee had received a presentation on the "Strategy for Carers in East Cheshire 2011-2015" and

would be reviewing the Strategy in six months time; any Scrutiny work on the topic of Carers would need to take this into account as well as seeking involvement from members of the Adult Social Care Scrutiny Committee;

- From Councillor Gardiner to set up a Task/Finish Group to look at proposals in Knutsford around primary healthcare; a Task/Finish Group had been set up in 2009 and reported on its findings earlier in the year; however, there was now a renewed focus on developing new primary care facilities and it was suggested that a Task/Finish Group be reconstituted;
- From Councillor Flude to set up a Task/Finish Group to look at suicide; it was explained that Councillor Flude had held a meeting with the Cheshire Coroner which had suggested an increase in suicide verdicts, it was also likely that there would be an increase in suicide or incidents of self harm during a recession.

RESOLVED: that the Work Programme be updated to include the following topics:

- Impact on the health and wellbeing of carers and service users, across Cheshire East, arising from closures of health and social care services already undertaken, and proposed changes currently under consultation;
- Future healthcare provision in the Knutsford area;
- Suicide prevention.

### **35 FORWARD PLAN**

There were no items on the Forward Plan for consideration by the Committee.

### **36 CONSULTATIONS FROM CABINET**

There were no consultations from Cabinet.

The meeting commenced at 10.00 am and concluded at 11.10 am

Councillor G Baxendale (Chairman)