

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **The Cheshire and Wirral Councils' Joint Scrutiny Committee**
held on Monday, 11th October, 2010 at Vauxhall Suite, Ellesmere Port Civic Hall, Civic Way, Ellesmere Port, CH65 0AZ

PRESENT

Councillor D Flude (Chairman)
Councillor P Lott (Vice-Chairman)

Councillors D Beckett, C Andrew, C Beard, A Dawson, J Grimshaw, W Livesley, D Roberts, G Smith, R Thompson, G Watt, B Silvester and J Salter

56 ALSO PRESENT

Councillor C Tomlinson – Cheshire East Council;
Councillor R Wilkins – Wirral Borough Council.

57 APOLOGIES FOR ABSENCE

Apologies for absence were received from Wirral Councillor A Bridson (substitute - Councillor R Wilkins) and Cheshire East Councillor S Jones (substitute - Councillor C Tomlinson).

58 DECLARATIONS OF INTEREST

RESOLVED: That the following declarations of interest be noted:

- Councillor D Flude, personal interest on the grounds that she was a member of the Alzheimers Society and Cheshire Independent Advocacy; and
- Councillor D Roberts, personal interest on the grounds that her daughter was an employee of the Cheshire and Wirral Partnership NHS Foundation Trust.

59 MINUTES OF PREVIOUS MEETING

RESOLVED: That the minutes of the meeting of the Committee held on 12 July 2010 be confirmed as a correct record.

60 OFFICERS PRESENT

Avril Devaney, Cheshire and Wirral Partnership NHS Foundation Trust
Ros Francke, Cheshire and Wirral Partnership NHS Foundation Trust
Dr R Parhee, Cheshire and Wirral Partnership NHS Foundation Trust
Denise French, Cheshire East Council

61 CHIEF EXECUTIVE'S UPDATE

The Committee considered the Chief Executive's update report on the following items:

- Primrose Avenue – following the consultation period the proposals to close Primrose Avenue Respite Unit had been reconfirmed by the Board of the Cheshire and Wirral Partnership NHS Foundation Trust (CWP) and were to be re-presented to the Cheshire East Learning Disability Management Group on 16 October for reconfirmation. All service users' health respite needs would be reassessed and a needs assessment for carers also undertaken; this process would be done jointly with social care staff. A decision around implementation dates would be taken in November;
- Soss Moss – this former hospital site had now been renamed the Alderley Unit and had planning permission for 45 low secure beds. The CWP Board had confirmed that Dane Ward (a 15 bed low secure service for adult males with mental health needs currently provided from the Millbrook site, Macclesfield Hospital) would transfer to the first building to be constructed which would be a purpose built 15 bed low secure unit. Most patients staying at the unit would be longer term and the environment was more suitable with space for activities and more facilities available. All safeguarding standards had been met. A meeting with local Parish Councils had been held to provide information and answer queries and a further meeting would be held in the new year. It was expected that the unit would be completed by 4 April 2011;
- Medical Director – a jobshare appointment had been made to the post of Medical Director, and Dr Andy Cotgrove and Dr Anushta Sivananthan had been appointed and taken up the post at the beginning of August;
- Annual Report 2009/10 and Annual Plan Summary 2010/13 – this was now available on the website.

RESOLVED: That:

- the update be received;
- a report be submitted to the next meeting of the Committee on definitions of low secure units, the types of services provided and the service users who access such services;
- a visit be arranged to the Alderley Unit in the new year; and
- a progress report be submitted to the next meeting on the integration of the Assertive Outreach Function into Community Mental Health Teams.

62 28 RISELEY STREET, MACCLESFIELD - DECOMMISSIONING OF LEARNING DISABILITY RESPITE SERVICES

The Committee considered a report on a Level 2 Substantial Development or Variation in Service. The proposal was to decommission learning disability respite services currently delivered at 28 Riseley Street, Macclesfield.

The Central and Eastern Cheshire Primary Care Trust (PCT) had notified CWP of a reduction in income and in order to manage this reduction had worked with CWP to evaluate all services commissioned by the PCT and provided by CWP.

All services had been reviewed using the same criteria and, using this prioritisation process, it was proposed that the respite provision at Riseley Street cease to be provided.

There were a range of respite options for people with learning disabilities living in central and eastern Cheshire – residential bed based services provided by CWP at Primrose Avenue, Crewe (due for closure), Crook Lane, Winsford and Riseley Street, Macclesfield. The Council's social care team also provided respite at Warwick Mews, Macclesfield and Queen's Drive, Nantwich. People with learning disabilities were also able to access direct payments to choose their own provision.

The proposed closure of Primrose Avenue had been subject to a consultation process and as part of the overall planning for the changes, had also confirmed eligibility criteria for health respite services provided by CWP. This agreed eligibility criteria and assessment process would be used to review the needs of all existing respite service users starting in September 2010. Respite services provided by CWP in central and eastern Cheshire would then be allocated on the basis of the outcome of this assessment process and the resources available. Transitional arrangements would be put in place to enable a mix of health and social care respite to be provided by CWP for an agreed period of time.

There were a small number of people affected by the closure of Riseley Street and this had enabled personalised consultation and future planning based on their needs, to be done.

A report on this issue had also been submitted to Cheshire East's Council OSC.

During discussion of the item the following points were raised:

- There was concern that there would be no learning disability respite in Cheshire East Borough and whether there would be a detrimental impact on the existing provision at Winsford; in response, Members were advised that outcomes tended to be better if services were accessed in the community, rather than building based, and such services were available. If social care respite was required this would be provided (by other partners such as the Council), it was only health respite that would no longer be available;
- Who would monitor private provision? In response, the Committee was reminded of the role of the Local Involvement Network who had powers to inspect provision through their Enter and View powers. Also the Care Quality Commission's role was to regulate providers and anybody who wished to could provide feedback to them on provision;
- People may have to travel further to access respite and carers/friends would have further to travel to visit their family member. The Committee was advised that as the number of people affected was small any travelling issues on individuals would be picked up through the individual assessment process.

RESOLVED: That the closure of the service at Riseley Street be noted.

The Committee considered a report on the proposed closure of The Willows, Macclesfield.

The Central and Eastern Cheshire Primary Care Trust (PCT) had notified CWP of a reduction in income and in order to manage this reduction had worked with CWP to evaluate all services commissioned by the PCT and provided by CWP. All services had been reviewed using the same criteria and, using this prioritisation process, it was proposed that The Willows be closed.

The Willows offered day services to patients already under the Care Programme Approach (CPA) of a Community Mental Health Team (CMHT). The service was provided to up to 115 patients in and around Macclesfield and was not accessed by service users from other areas. The services offered included social skills training, computer literacy and horticulture and the operation of a small print workshop, all of which were offered in conjunction with external agencies. All the services offered were available through other agencies such as the Council and service users would be supported to access these services. Service users had been advised of the potential closure at an early stage to enable them to access courses starting in September if they wished. The building belonged to the Council.

The proposed closure had also been discussed at the Cheshire East Overview and Scrutiny Committee.

RESOLVED: That the proposed closure and alternative arrangements for service users be noted.

64 THE MILLBROOK UNIT, MACCLESFIELD - CONSOLIDATION OF MENTAL HEALTH INPATIENT SERVICES

The Committee considered a report regarding the consolidation of mental health inpatient services at the Millbrook Unit, Macclesfield.

A public consultation exercise had been carried out by the Cheshire and Wirral Partnership NHS Foundation Trust on behalf of Central and Eastern Cheshire Primary Care Trust about consolidating Adult and Older People's services from two sites to one in Central and Eastern Cheshire. The results of the consultation exercise suggested broad approval to centralise onto a single site, support for continuing to develop new ways of working which would enable a reduction in inpatient beds and the expansion of community services and making investments to improve the patient environment.

A number of changes were proposed:

- Closure of the mental health inpatient unit at Leighton Hospital and transfer of services to either Millbrook Unit, Macclesfield or Bowmere Hospital, Chester. There would be three acute inpatient wards at Millbrook and adaptations made to Bowmere to accommodate extra services;
- The overall impact on inpatient beds was a reduction of 4; there would be no changes to bed numbers in Wirral during the implementation of the changes;

- CWP remained committed to improving the patient environment in South East Cheshire and the re-provision project team would report on the options for delivering this in March 2011.

RESOLVED: That the update report be noted.

65 QUALITY ACCOUNT - QUARTERLY REPORT

The Committee considered the Quality Quarterly Report which set out progress against each of the quality priorities identified in the Quality Account for 2009/10.

All priorities identified for Patient Safety had been achieved for the first quarter and were on track for the remainder of the year. For patient related performance CWP was performing on track or better when measured against key national priorities apart from in relation to the average length of stay which had increased. All targets for achieving quality improvement and innovation goals were also on course. Targets relating to patient safety and patient experience were also achieved. Members suggested that in future more ambitious targets may be needed and were advised that future targets would be more challenging.

One area of concern was around the average length of stay (measured in days). The aspiration of the Trust was for this average to show a reduction but the actual position showed an increase from 18 days in April to 24 in July. It was important that a service user's care and treatment was in the least restrictive environment possible and the Crisis Resolution Home treatment team facilitated the earliest discharge possible. The average length of stay would be monitored by the Trust's Performance and Compliance Sub Committee.

It was noted that medication errors and certain self harm incidents had increased along with minor injuries; Members were advised that minor injuries meant issues that could be dealt with on site without any need to go to Accident and Emergency. Members requested that more information was included in future on what was meant by medication errors and self harm incidents so it was clear whether there were any significant issues in these areas. It was noted that the Trust's Suicide Prevention Strategy was currently being revised and would be considered at a future meeting.

RESOLVED: That the report be noted.

66 TRANSFORMING COMMUNITY SERVICES PROGRAMME

The Committee considered a report on the Transforming Community Services programme as set out below:

- In Central and Eastern Cheshire all provider services currently run by the Primary Care Trust (PCT) would transfer to the East Cheshire Hospital Trust, apart from some physiotherapists for the Learning Disability service who were to transfer to the Cheshire and Wirral Partnership NHS Foundation Trust (CWP);
- In Wirral the provider services of the PCT would transfer to a social enterprise/community trust;
- In Western Cheshire the provider services of the PCT would transfer to CWP.

In each case the main changes related to how the services were be managed and service users should not experience any impact.

The proposals were currently under consideration by the Strategic Health Authority prior to implementation on 1 April 2011.

RESOLVED: that the current position be noted.

67 APPOINTMENT OF A CO-OPTED MEMBER

The Committee considered a report on the appointment of a co-opted Member.

The Committee's Procedure Rules provided for the Committee to "co-opt other appropriate individuals, in a non voting capacity, to the Committee or for the duration of a particular review or scrutiny". The Committee had previously considered co-option and had agreed that further discussions should taken place with officers of CWP, through the mid point meeting, regarding Service User and Carers representation.

The mid point meeting in September discussed the matter and expressed a preference for a service user rather than a carer to take up a co-opted place. CWP would be happy to progress this by contacting the patient members of the Patients and Public Involvement (PPI) Group to seek volunteers interested in taking up a co-opted place. If a number of volunteers came forward, the PPI Task Force would be invited to assess the applications so as to put forward one person to serve as a co-opted member of the Committee together with one named substitute. A co-opted member would not have voting rights. In accordance with the National Code of Conduct for Members, the co-opted member would not be able to be a Member of the CWP Foundation Trust Board. This process could be carried out during autumn with the formal appointment being made at the next meeting on 10 January.

RESOLVED: That approval be given to the procedure set out in the report to appoint one non-voting co-opted Member and one named substitute onto the Committee to represent the interests of service users.

68 WHITE PAPER - LIBERATING THE NHS

The Committee considered a report on the key points outlined in the NHS White Paper – Liberating the NHS: Equity and Excellence.

The White Paper contained 4 key themes:

- Patients would be given more information and choice;
- Health outcomes would be improved to among the best in the world;
- Doctors would be empowered to deliver results – by being put in charge of what services best met the needs of local people;
- Unnecessary bureaucracy would be removed, waste cut and the NHS made more efficient.

The White Paper proposed the abolition of Strategic Health Authorities, by 2012, and Primary Care Trusts, by 2013. GP consortia would be introduced to take over responsibility for commissioning most NHS services. A new independent body – the NHS Commissioning Board – would be established to allocate and

account for NHS resources, lead on quality improvements and promote patient involvement and choice. Responsibility for public health would be transferred to local authorities and a new consumer champion would be introduced known as HealthWatch.

RESOLVED: That the update on the NHS White Paper be received.

The meeting commenced at 2.30 pm and concluded at 4.00 pm

Councillor D Flude (Chairman)