

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **Adults and Health Committee**
held on Monday, 18th July, 2022 in the Committee Suite 1,2 & 3, Westfields,
Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor J Rhodes (Chair)
Councillor A Moran (Vice-Chair)

Councillors J Clowes, A Critchley, S Gardiner, L Jeuda, A Kolker, D Murphy,
J Weatherill, N Wylie and D Edwardes

OFFICERS IN ATTENDANCE

Jill Broomhall, Director of Adult Social Care
Shelley Brough, Head of Integrated Commissioning
Mark Hughes, Senior Commissioning Manager
Stephen Kelly, Senior Communications Officer (Attended virtually via Microsoft Teams)
Roisin Beressi, Principal Lawyer (Adults & Education)
Pete Kelleher, Head of Service (*Care4CE*)
Patrick Rhoden, Lead Finance Business Partner (Attended virtually via Microsoft Teams)
Karen Shuker, Democratic Services Officer
Andrew Turner, Public Health Consultant (Attended virtually via Microsoft Teams)
Deborah Upton, Senior Lawyer, Governance
Dr Matt Tyrer, Director of Public Health

13 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor B Evans (Councillor D Edwardes attended as a substitute) and Councillor P Butterill.

14 DECLARATIONS OF INTEREST

There were no declarations of interest.

15 MINUTES OF PREVIOUS MEETING

That the minutes of the meeting held on 30 May 2022 be approved as a correct record.

16 PUBLIC SPEAKING/OPEN SESSION

There were no public speakers.

17 THE BROCKLEHURST CENTRE - FUTURE OPTIONS

The committee considered a report detailing the steps taken as part of the consultation and the key findings that have emerged during the consultation period on the future of the Brocklehurst Centre and the future of dementia day opportunities in Macclesfield.

A presentation provided a virtual walk through for members of both facilities and outlined the benefits the facility be relocated to the Mayfield Centre. The committee heard that COVID 19 had severely impacted on the ability of day opportunities services to operate at full capacity and some services (including The Brocklehurst Centre) remained closed, where the buildings have been unable to facilitate safe social distancing for the individuals who attend.

Following the consultation process, based on the feedback from stakeholders the recommended option would be to close the provision of day opportunities at The Brocklehurst Centre and relocate the service to a dedicated dementia unit within the Mayfield Centre.

Comments and questions were received from members in relation to the following:

- Potential development of the site in future;
- Would the equipment and furniture from the Brocklehurst Centre be used elsewhere;
- Concerns around anti-social behaviour if the Brocklehurst Centre was closed;
- Due to an ageing population was there confidence that the facility at Mayfield would be flexible enough and be able to adapt to meet people's needs;
- Consideration to be given to carer's needs as well as those people using the facility;
- Reassurance was sought that the correct message would be communicated to residents, that Cheshire East had a continued commitment to day care, and that the reasons for the closure were clearly outlined.
- There would be opportunities in the future to look at the Brocklehurst Centre site and what it could be used for from a social care perspective.

Members were sympathetic towards the proposed closure of the Brocklehurst Centre but agreed that it had served its purpose and the Mayfield Centre was best placed to meet the needs of those people using the service and their families and carers.

RESOLVED (Unanimously)

That the provision of day opportunities at The Brocklehurst Centre be closed and the service to The Mayfield Centre.

The committee adjourned for a short break.

18 FINANCIAL INCENTIVES TO SUPPORT SMOKING CESSATION

The committee had previously considered a discussion paper summarising the evidence for the effectiveness and cost-effectiveness of financial incentive schemes in helping people to successfully quit smoking and agreed to receive a subsequent report at the 18 July meeting which sought a decision on whether to implement a financial incentive scheme as a pilot project.

Since the last report the following highlights were outlined by the Director of Public Health:

- The publication of the 'Khan Review: making smoking obsolete' which stated that the current rate of decline needed to be accelerated by 40% to achieve the government's smokefree 2030 target. The review included a specific recommendation to provide financial incentives to support pregnant women to stop smoking.
- The 'All Together Fairer' report which highlighted that in terms of smoking at delivery rate Cheshire East is an outlier compared to some parts of the country.
- The Child Death Overview Panel annual report presented at the Health and Wellbeing Board highlighted the risks of smoking and reported that smoking was one of the top five modifiable risk factors for preventing avoidable child death in Cheshire.
- There was clear evidence from the Cochrane review that financial incentive schemes work to reduce the number of people who smoke.

Comments and questions were received from members in relation to the following:

- Sought reassurance that there were processes in place to prevent people defrauding the system;
- Had the geographical area for the pilot been identified yet;
- Were reasons identified as to why Cheshire East was an outlier;
- How would success of the pilot project be measured;
- Would money be better spent elsewhere to prevent people starting smoking;
- Clarification was sought in respect of if other members of the household did not partake in the project would this mean pregnant women would be excluded from the project;
- Understood reasons for some scepticism of the pilot project but overall supportive of any method that resulted in a reduction in smoking.

RESOLVED:

That the Adults and Health Committee agreed to the undertaking of a pilot scheme of providing financial incentives to support pregnant women and other smokers in their household to quit smoking.

19 TERMS OF REFERENCE FOR THE PLACE PARTNERSHIP COMMITTEE

The committee received a report which provided an update on the new governance arrangements for local Health and Care services and were asked to support the Terms of Reference for the new Place Partnership Board.

The Place Partnership Board was comprised of three parts sitting together as one Committee; the ICB Committee, the S75 Committee and the Consultative Forum. The Section 75 Committee and the ICB Committee/Director had both been agreed and the Terms of Reference are the final part of the Place Partnership Board.

In practice, decisions would be made by the ICB Director or the ICB, and the S75 Committee, and the Consultative Forum would be asked for its views and would have an influencing role. The long-term intention, once the secondary legislation was in place, would be that funding would be devolved to Place.

The Terms of Reference include Executive and Non-Executive Directors across the NHS Providers, Primary Care, Healthwatch and the VCFSE sector, and there would be three seats available for the authority, one from each of the three main parties, as well as a number of officer seats. The Terms of Reference had been circulated to all partners and were due to be agreed within the next four weeks.

Comments and questions were received from members in relation to the following:

- The importance of Place must remain paramount;
- Welcome the role of the three representatives from the three main parties, however these would only be part of an influencing board, not a decision-making board.
- Concerns raised in the role of scrutiny in respect of the Place Board and Joint Scrutiny;
- Important that those members who do sit on the committee are alert to any review of modifications to the Terms of Reference

The committee agreed that it was a step in the right direction and that the three committee places that had been allocated should be seen as a positive.

RESOLVED: (Unanimously) That:-

- 1)The report be noted;
- 2)The Adults & Health Committee support the Terms of Reference for the Place Partnership Board as set out in Appendix One of the report;
- 3) Corporate Policy Committee be asked to consider and appoint to the membership.

20 TRAILBLAZER BLAZER PROGRAMME UPDATE

The committee received an update on the Adult Social Care Charging Reform Trailblazer Programme which included the following:

- Timeline and road map;
- The possible benefits and risks of being part of the programme;
- A programme of governance and delivery;
- An oversight of the elements that had been delivered to date.

Comments and questions were received from members in relation to the following:

- Was there any indication that the benefits were outweighing the risks;
- How would the council ensure that there were enough staff given the current recruitment issues and retention of staff in social care;
- What would happen if all care reforms were put on hold;
- Due to the nature of the market in Cheshire East, Had the government given any suggestion on how much would it cost, or given any indication of the support it would offer authorities like Cheshire East who had specific structures for whom costs would be significantly higher than those where most people were already paying local authority rates.

It was agreed that a report would be brought back to committee on the Fair Cost of Care element.

The committee thanked the team for their hard work and agreed that it would be beneficial to be at the forefront which would allow them to make suggestions and highlight any issues throughout the programme.

RESOLVED:

That the update be noted.

21 UPDATE ON PUBLIC HEALTH GRANT

The committee received a report which summarised the allocation of the public health ring fenced grant to key areas of spend over the last 3 years.

The majority of the grant was spent on commissioned services in line with the council's statutory responsibilities. The top 3 areas of spend had been

- Children's 0-19
- Substance Misuse
- Sexual Health

The committee heard that a review was underway in response to emerging need post Covid-19 and the changing needs of residents.

Comments and questions were received from members in relation to the following:

1. What areas of the children's 0-19 service been the funding been spent on;
2. Were there any areas at risk due to the ongoing pandemic that the council would not be able to meet the commitments of;
3. What mechanisms were in place for extreme weather conditions
4. Previously Cheshire East Council has had the responsibility to pay retrospectively where it has incurred the cost of its residents using HIV services out of area, what was the figure for last year?
5. How were public health going to deal with the significant rise in rates, and the increased costs due to the rise in sexually transmitted diseases in older people?

It was agreed that a written response would be provided outside of the meeting in relation to questions 4 and 5.

RESOLVED:

That the report be noted.

22 WORK PROGRAMME

Consideration was given to the Committee's work programme.

It was agreed that the following items would be added to the work programme, dates to be confirmed:

- Fair Cost of Care.
- Social Care Reform: Local Assurance programme.

RESOLVED:

That the work programme be approved subject to the inclusion of the amendments outlined above

23 MINUTES OF SUB-COMMITTEE

RESOLVED:-

That the minutes of the Cheshire East Health and Wellbeing Board be received and noted

The meeting commenced at 10.00 am and concluded at 12.10 pm

Councillor J Rhodes (Chair)

Response to questions raised at 18 July Adults & Health Committee

Agenda Item 9 (Minute No.21) Public Health Grant

1. Previously Cheshire East Council has had the responsibility to pay retrospectively where it has incurred the cost of its residents using HIV services out of area, what was the figure for last year?

Response: HIV treatment and care services are commissioned directly by NHS England specialist commissioning and no charge is made to the local authority irrespective of where service users may reside.

2. How were public health going to deal with the significant rise in rates and the increased costs due to the rise in sexually transmitted diseases in older people?

Response: The sexual health service is inclusive and welcoming of all ages and looks to provide options for patients who don't wish to attend the service, including postal testing. The service has also developed an older service user group. They provide sexual health information in local publications, such as Cheshire Cheese which is distributed across the county and has a high number of readers who are 50+. They have also been promoting access to PrEP and provided updates on Monkeypox in recent weeks through social groups for older LGBT+ people at a number of locations across Cheshire East.