

CHESHIRE EAST COUNCIL

Minutes of a meeting of the Health and Adult Social Care Overview and Scrutiny Committee

held on Thursday, 2nd April, 2015 at Committee Suite 1,2 & 3, Westfields,
Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor M Simon (Chairman)
Councillor J Saunders (Vice-Chairman)

Councillors R Domleo, L Jeuda, S Jones, G Merry and A Moran

Apologies

Councillors C Andrew

ALSO PRESENT

Councillor J Clowes – Portfolio Holder for Care and Health in the Community
Councillor S Gardiner – Deputy Cabinet Member
Mike Moore – North West Ambulance Service NHS Trust
Julie Treharne – North West Ambulance Service NHS Trust
Jim Britt – West Cheshire Clinical Commissioning Group
Fiona Field – South Cheshire Clinical Commissioning Group
Emma Leigh – Eastern Cheshire Clinical Commissioning Group

OFFICERS PRESENT

Dr Heather Grimbaldeston – Director of Public Health
Ann Riley – Corporate Commissioning Manager
Rob Walker – Commissioning Manager
Mark Wheelton – Corporate Commissioning Manager: Leisure
Rob Rogers – Project Manager
Steve Cottle – Programme Manager: Crewe Lifestyle Centre
Dan McCabe – Resource Manager: Care4CE
James Morley – Scrutiny Officer

88 MINUTES OF PREVIOUS MEETING

RESOLVED – That the minutes of the meeting held on 5 March 2015 be approved as a correct record and signed by the Chairman.

89 DECLARATIONS OF INTEREST

There were no declarations of interest

90 DECLARATION OF PARTY WHIP

There were no declarations of party whip

91 PUBLIC SPEAKING TIME/OPEN SESSION

There were no members of the public present who wished to speak

92 AMBULANCE SERVICES - UPDATE FROM NWAS AND FIRST RESPONDERS

The Committee gave consideration to a presentation from North West Ambulance Service NHS Trust (Nwas) regarding its recent performance information and ongoing service development in Cheshire East. Mike Moore, Nwas Sector Manager for South Cheshire, and Julie Treharne, Nwas Head of Communications, provided the presentation and took questions from the Committee. Jim Britt, West Cheshire Clinical Commissioning Group (CCG), also attended the meeting as lead for joint commissioning of ambulance services for Cheshire CCGs.

The presentation provided contained performance information for response times and volume of activity for both Eastern Cheshire and South Cheshire CCG areas. The information illustrated the following points:

- There had been an overall rise in activity of approximately 10% across both CCG areas.
- In both CCG areas there were fewer G1 responses however significantly more R2 responses which suggested that more cases were being given the more severe R2 rating when previously they may have been G1. This had a significant impact on response time performance as R2 required a response within eight minutes whereas G1 was 20 minutes. There was a similar pattern with fewer G4 responses but significantly more G3.
- There was more R1 and R2 999 calls received from mid December 2014 to end of January 2015 than there had been the previous year. It was suggested that this may be due to colder weather this year and higher levels of illness, particularly amongst older people.
- Patient handover and ambulance turnover at both Macclesfield District General Hospital and Leighton Hospital was particular good compared to targets. This was attributed to good working practices and relationships between ambulance crews and hospital staff.

The presentation also included an overview of initiatives being put in place and the development of Nwas services to cope with increases in demand and specific challenges in Cheshire East, particularly in rural areas. The following points were made:

- Community First Responders were teams of volunteers who lived and worked in communities, trained by Nwas to response to certain calls to ensure a quick response and provide care and support until emergency ambulance arrives. 1275 emergency calls were responded to by Cheshire East first responders in 2014/15
- The Cheshire Co-response initiative involved eight firefighters operating in the Nantwich area who were trained by Nwas to

provide rapid life saving interventions. 166 emergency calls were responded to by the Fire Co-responders in 2014/15.

- The ambulance service's role had changed from the traditional role of picking patients up for treatment at hospital to more treatment being administered at the scene with fewer cases being taken on to hospital. The skills set and decision making responsibility of paramedics had evolved since they were introduced in 1981.
- As demand for health services increased there was a motivation across the NHS to change where and how patients were treated to reduce pressures on hospitals and emergency departments. This included ambulance services dealing with 999 calls in different ways and directing patients to the most appropriate service.
- Educating the public and health and care service partners about services and their appropriate use was an ongoing challenge. Reducing the gap between public expectation and the services on offer would help to reduce unnecessary demand for services and improve patient outcomes.

During the Committee's discussion about the presentation the following points arose:

- NWS tracked people with long term conditions who regularly called 999 to access with partners whether there were issues which needed to be addressed to reduce demand on 999.
- Peaks and Plains had worked with NWS and Macclesfield District General Hospital to support patients who were injured as a result of falls to see if adaptations to homes could be made to reduce incidents and ensure homes were suitable for a patient to be discharged. Members wanted to see this initiative continued and expanded across the Borough with other housing associations and health services.
- NWS had been working with nursing and care homes to ensure their staff knew how to deal with falls and other incidents to reduce demand from homes for ambulance services and hospital visits. All care homes had a responsibility to ensure they made the correct choices for their service users to achieve the best outcomes.
- It was noted that in Eastern Cheshire CCG area there was a GP linked to each care homes who checked up on residents and support staff in making choices during incidents.
- NWS performance was worst during December 2014 when only 40% of acute responses had been made within the eight minutes target. During the 2014 winter months the NHS had struggled nationally to cope to unprecedented demand and targets had not been reached by many trusts.
- The rise in demand for ambulance services had been approximately 10% which was unprecedented. CCGs had only commissioned services for a 1% rise in demand and the service struggled to cope with demand due to limited resources.
- As well as providing 999 and ambulance services, NWS hosted the North West NHS 111 service. This provided an opportunity for synergy between 999 and 111 services. It was suggested that the

Committee should receive a presentation on 111 services at a future meeting.

- 999 and A&E were the most well know and publicised health services in the country. If demand for these services was to be reduced more needed to be done to promote all other services to ensure the public was knowledgeable enough to choice the most appropriate services when they needed them.

RESOLVED – That the presentation be noted and an item on the NHS 111 service be added to the work programme.

93 CARING FOR CARERS: A JOINT STRATEGY FOR CARERS OF ALL AGED IN CHESHIRE EAST 2015 - 2018

The Committee gave consideration to the Joint Strategy for Carers of All Ages in Cheshire East 2015-2018 which had been developed by the Council, Eastern Cheshire Clinical Commissioning Group (CCG) and South Cheshire CCG.

Rob Walker, Commissioning Manager for Carers, Ann Riley, Corporate Commissioning Manager, and Fiona Field from South Cheshire CCG attended to take questions about the strategy, which had been agreed at the Health and Wellbeing Board on 24 March 2015. During the discussion the following points arose:

- Young Carers and Adult Carers had been included in the same strategy when they previously had separate strategies.
- The strategy provided an agreement between the three commissioners about how they were to support carers ensuring that services commissioned by each organisation complemented each other.
- An action plan was currently being developed between the three commissioners to agree how the strategy would be implemented. This would include consideration of feedback from carers events and the Committee's Carers Task and Finish Group report.
- Members felt the strategy had missed a key priority for carers, which had come out of carers events, that they should only have to tell their story to service providers once and not have to repeat themselves constantly.
- Members also believed the strategy did not adequately explain what "partnership working" involved. It was explained that this would become more clear through the action plan.
- The Committee believed that the same services and support should be available to all carers, including self funders, yet this was not clear in the strategy. The strategy needed to be more explicit about which carers would be able to access particular services and be able to receive them free of charge.
- Members wished to see more emphasis in the strategy on supporting carers to support each other through carer networks enabling them to share issues and offer advice.
- The Committee wanted to ensure that all young carers will be able to access an assessment and that this should be explicit in the strategy and action plan.

- The Health and Wellbeing Board had agreed that it would receive progress reports for delivery of the strategy by the Joint Commissioning Leadership Team (JCLT). The Committee also wanted to monitor the strategy in its scrutiny capacity and requested an opportunity to examine the action plan once it was available along with a response from the commissioners to its Carers Task and Finish Group report.

RESOLVED

- (a) That the Strategy be noted and the Committee's comments be submitted to the authors for consideration.
- (b) That a response to the Carers Task and Finish Group report from the responsible commissioners be received at a future meeting.
- (c) That the responsible commissioners be requested to share the action plan for the Strategy with the Committee when appropriate.

94 LEISURE AND HEALTHIER LIFESTYLE OPPORTUNITIES

The Committee received a presentation on the development of leisure and healthy lifestyle opportunities in Cheshire East. Mark Wheelton, Commissioning Manager for Leisure, introduced the presentation by explaining how plans for the development of leisure services would contribute to the Council's strategic outcome 5 "people live well and for longer".

Dan McCabe, Resource Manager for Care4CE, provided an overview of lifestyle groups currently being provided in Wilmslow and Macclesfield leisure centres for people with learning difficulties (LD). The day service for adults with LD had started two years ago and developed into a successful and valuable group for users and their families. Utilising the leisure centres as a base, and using some of the facilities in its activities, the groups had helped adults with LD to develop skills and build their confidence enabling them to become more independent, improve their health and wellbeing, and find employment opportunities. The groups collaborated with many partners in health and social care such as signposting users and setting up specific appointments with other services in a convenient location.

Steve Cottle, Programme Manager, provided a walk through presentation of the new Crewe Lifestyle Centre which was currently being built. The 3D design software allowed the Committee to see how the Lifestyle Centre would look once it was completed and how adult social care and children services would be integrated into the building enabling them to work closer together and benefit from the leisure facilities on site to better meet the needs of their service users. The building was designed to be adaptable making it a versatile facility for a variety of services to use and was easily accessible for all users. It was suggested that the Committee might hold a future meeting at the Lifestyle Centre once it was completed to promote the concept for other parts of the Borough and enable members to see how the centre works in more detail.

Rob Rogers, Project Manager, explained the latest position in relation to the development of lifestyle services in Congleton. Plans for Congleton were in a

formative stage and consultation with local people was taking place to establish what they wanted. The current site of the leisure centre was not adequate for a full lifestyle offer similar to Crewe however it did incorporate outdoor leisure facilities and it was considered important to maintain these. Feedback from residents was that they would like to see refurbishments made to the current leisure centre including replacement of the swimming pool and changing facilities. It had also been established that the local adult social care services in Congleton were happy with their current locations and not interested in being part of a lifestyle centre offer. Mark Wheelton requested that the Committee appoint a local member of the Committee to be a champion for lifestyle in Congleton to assist in the development of the project. It was noted that elections were due to take place in May 2015 and it would not be appropriate to appoint a champion at this stage.

RESOLVED – That the presentation be noted.

95 WORK PROGRAMME

The Committee was requested to consider its work programme and make recommendations for items which should be carried forward for the Committee to consider after the Borough elections. The following items arose:

- Access to GP services
- The impact of planning and development on health services
- Development of ambulance services
- Mental Health and Dementia
- Integration of health and care services
- Respite Care
- Health and Wellbeing Board

The Committee also agreed that the existing items contained within the work programme should be retained to enable the Committee which was formed after the elections to assess whether they should be retained.

RESOLVED – That the work programme be updated as discussed.

96 CHAIRMAN'S ANNOUNCEMENTS

It was acknowledged that Councillors C Andrew, R Domleo and S Jones would not be standing in the elections in May 2015 and would therefore no longer be members of the Committee. The Chairman wished to put on record the Committee's thanks to those members who were stepping down for their commitment and positive contribution of the work of the Committee.

The meeting commenced at 10.05 am and concluded at 1.10 pm

Councillor M Simon (Chairman)