

# **CHESHIRE EAST COUNCIL**

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

held on Wednesday, 13th January, 2010 at Committee Suite 1,2 & 3,  
Westfields, Middlewich Road, Sandbach CW11 1HZ

### **PRESENT**

Councillor Rachel Bailey (Chairman)  
Councillor G Baxendale (Vice-Chairman)

Councillors S Bentley, D Flude, S Furlong, S Jones, W Livesley, A Moran,  
J Wray, C Andrew, C Beard, A Martin, C Tomlinson and A Thwaite

### **Apologies**

Councillors A Knowles and R Domleo

#### **1 DECLARATION OF INTERESTS/PARTY WHIP**

There were no declarations of interest made.

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

There were no Members of the Public present who wished to address the Committee.

#### **3 MINUTES OF PREVIOUS MEETING**

RESOLVED: That the minutes of the meeting of the Committee held on 18 November 2009 be approved as a correct record.

#### **4 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 30 November.

RESOLVED: That the minutes be received.

#### **5 NORTH WEST AMBULANCE SERVICE**

Sarah Byrom, Director of Performance and Patient Experience and Tim Butcher, Assistant Director Performance Improvement, North West Ambulance Service (NWAS) briefed the Committee on Infection Control and the Foundation Trust application.

NWAS had received an unannounced inspection by the Care Quality Commission (CQC) in July 2009 of its infection control procedures; a Warning Notice was issued and an Inspection Report outlined specific areas for improvement. NWAS

already had 92 Infection Control Staff Champions, a Specialist Paramedic of Infection Control and over £100,000 investment into the deep cleaning of vehicles. These measures were strengthened by:

- A comprehensive audit programmed to ascertain cleanliness levels;
- A deep clean of all vehicles that was completed by the end of September 2009 – this meant the vehicle was taken off the road and all fixtures and equipment cleaned using specialist materials, this was undertaken every 6 weeks;
- An on-going programme of deep cleaning;
- A review of all procedures and training/learning materials for staff;
- Recruitment of 3 more Infection Control Specialist Healthcare professionals.

A follow up inspection was carried out by CQC on 3 November 2009 and NWAS was declared fully compliant. The Trust was committed to maintaining high levels of cleanliness and had an Audit Programme to ensure continuous monitoring of levels and a mandatory staff training programme in place.

The Foundation Trust status was still a priority for the Trust who had revised the timeline to enable a focus on delivering performance. NWAS was committed to a comprehensive public consultation which would focus on vision and values, future direction of travel, governance and membership. The consultation would be carried out using various methods including using existing forums and meetings, specifically targeted events, staff engagement and website and electronic communication. The current programme was to submit the business plans and financial model in April 2010 and consultation to be undertaken between July 2010 – September 2010; this would see a potential authorisation date of April 2011.

Members discussed the presentation and raised the following points:

- What standards of cleanliness applied to subcontractors? In response the Committee was advised that the same standards of cleanliness applied to all providers and monitoring procedures would be advised to a future meeting;
- The target membership for Foundation Trust status was 8000 including staff;
- What progress had been made in relation to the Nantwich Co-Responders/First Responders scheme? In response, the Committee was advised that there was a strong commitment by NWAS to resolve this issue and a Working Group had been set up, chaired by the Chief Executive of the Primary Care Trust, an update would be made at the mid point meeting; NWAS had around 3500 successful Community First Responders Schemes in the North West;
- NWAS would try to attract membership as part of its Foundation Trust application from a wide variety of groups and it was suggested that the Youth Council be consulted about engaging young people.

RESOLVED: That the update from the North West Ambulance Service be noted.

## **6 THE FINANCIAL SITUATION OF CENTRAL AND EASTERN CHESHIRE PRIMARY CARE TRUST AND CHESHIRE EAST COUNCIL (ADULT SOCIAL CARE SERVICE)**

Fiona Field, Director of Governance and Strategic Planning, Central and Eastern Cheshire Primary Care Trust (CECPCT), briefed the Committee on the financial situation of the PCT. The PCT was committed to achieving financial balance by March 2011. PriceWaterhouseCoopers (PWC) had validated the PCT Sustainability Plan as deliverable by the PCT. PWC had identified the top 20 providers and the PCT was working with these to identify and deliver efficiencies. The PCT had engaged with GPs to deliver savings around the prescribing budget. There were no figures available at the moment regarding the impact of the recent severe weather but there had been a rise in trauma cases in acute trusts among all age groups and an increase in cases of Chronic Obstructive Pulmonary Disease.

John Weeks, Strategic Director People, briefed on the Local Authority budget process – a pre-budget booklet was now available and a formal consultation process underway. In adult services a reduction of £3 million was proposed for 2010 – 11 and building based services were being looked at as well as transport, in conjunction with partners. The redesign of Social Care had meant detailed analysis of services leading to redesigned teams so that complex cases could be dealt with by qualified social workers with less complex cases being dealt with by other staff. The focus would be on reablement - an early targeted intense intervention aimed at addressing and improving a mental or physical disability. Quality of all services would be closely monitored.

A Scrutiny Budget Task Group had been established with representation from each of the Scrutiny Committees. Special meetings would be held for each Scrutiny Committee to look at the budget in relation to the Committee's remit.

RESOLVED: That the current position in relation to the financial situation of the Council and the Primary Care Trust be noted.

## **7 VISION AND STRATEGY FOR INTEGRATED CARE**

The Committee considered a report on a proposed programme of work being developed by the Council and its NHS partners. The Council had previously approved a report on Jointness between the Council and PCT and this report outlined work undertaken to progress the joint approach as well as identifying specific recommendations for taking forward joint working.

The programme of integrated working had adopted a vision to improve the health, care and wellbeing of all Cheshire East's people with two objectives:

- To improve the experience and outcomes for people who use services;
- To reduce costs and improve efficiency.

Outcomes for people were that they should:

- Find it easier to get the help they need;
- Have more choices available to them;

- Gain greater control of the resources made available to address their needs;
- Get quicker and more effective results.

The initial priorities had been identified as integrating pathways from within Urgent Care, Services for sick children, young children and families, and households that use care services frequently.

A compact had been agreed and signed by all partners – Cheshire East Council, Central and Eastern Cheshire PCT, Cheshire and Wirral Partnership NHS Foundation Trust, East Cheshire Hospitals Trust, Mid Cheshire Hospital NHS Foundation Trust, Cheshire East Community Healthcare - who were committed to working together to improve efficiency and reduce costs.

RESOLVED: That the current position of integrated working between the Council and its NHS partners be noted and supported.

## 8 TRANSFORMATION OF SERVICES FOR ADULTS PHASE 2

The Committee considered a report of the Strategic Director People on the current position with the Transformation of Services for Adults Phase 2. The principles underpinning the transformation were:

Delight Customers – easy access to services, locally based services, services that kept people safe and well for as long as possible, personalised services with choice and control over resources, most issues and enquiries resolved at the first point of contact;

Manage costs – better and more flexible use of council and partners resources and assets, services provided by people/organisations best placed to deliver, sharing support services where possible, provide services core to business, better use of appropriate technology, outcomes measured and improvements evidenced;

Develop culture – lean services to suit customers, active engagement and involvement of customers and all partners, experiment with new methods, invest and support people, work as one team across organisational boundaries.

The report listed progress in a number of operational areas - the first locality team had been launched in Wilmslow in July 2009 and other areas were to be rolled out by February 2010. There had been an increase in Direct Payments and Individual Budgets and evidence suggested users were purchasing leisure services to improve outcomes within their individual budgets which would have implications across the wider Council. Progress in other areas of the transformation programme included:

- reduction of in-house provision of routine domiciliary care as this could be provided by the independent sector, focus the in-house service on reablement;
- a review of use of buildings within Adult Services aimed at rationalising and localising functions across services;
- rationalise the current stock of Community Support Centres and create a purpose built new facility, subject to a business case;
- review current provision of the hot meals service;

- review shared transport service jointly with Head of Regeneration and the PCT;
- approve and progress specific joint commissioning and integrated service provision initiatives with the PCT.

Members of the Committee congratulated staff of the homecare service for continuing the service during the severe weather and similarly the hot meals service. Members raised concern over whether personalisation could put vulnerable people at risk through having informal arrangements.

RESOLVED: That the report be noted and safeguarding vulnerable people be considered further at a future meeting.

The meeting commenced at 10.00 am and concluded at 12.15 pm

Councillor Rachel Bailey (Chairman)