CHESHIRE EAST COUNCIL

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

held on Thursday, 14th January, 2016 at Committee Suite 1,2 & 3, Westfields, Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor J Saunders (Chairman) Councillor L Wardlaw (Vice-Chairman)

Councillors Rhoda Bailey, B Dooley, G Merry, A Moran and D Flude (sub for L Jeuda)

Apologies

Councillors D Bailey and L Jeuda

ALSO PRESENT

Councillor J Clowes – Cabinet Member for Adult and Health in the Community Brenda Smith – Director of Adult Social Care and Independent Living Dr Heather Grimbaldeston – Director of Public Health Annette Lomas – Projects and Performance Manager Rob Walker – Commissioning Manager Guy Kilminster – Head of Health Improvement Jacki Wilkes – NHS Eastern Cheshire Clinical Commissioning Group Rachel Wood - NHS Eastern Cheshire Clinical Commissioning Group Sue Cooke – NHS South Cheshire Clinical Commissioning Group Sue Milne - NHS South Cheshire Clinical Commissioning Group Tony Mayer – Mid Cheshire Hospitals NHS Foundation Trust James Morley – Scrutiny Officer

58 MINUTES OF PREVIOUS MEETING

RESOLVED – That the minutes of the meeting held on 26 November 2015 be approved as a correct record and signed by the Chairman.

59 DECLARATIONS OF INTEREST

There were no declarations of interest

60 DECLARATION OF PARTY WHIP

There were no declarations of party whip

61 PUBLIC SPEAKING TIME/OPEN SESSION

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

62 CARERS TASK AND FINISH GROUP NOVEMBER 2013 - JANUARY 2015

The Committee considered a report in response to the recommendations of the Committee's Carers Task and Finish Group which conducted a review between November 2013 and January 2015. The report outlined how the Council, NHS Eastern Cheshire and NHS South Cheshire Clinical Commissioning Groups were delivering key responsibilities outlined in the Care Act 2014 and Children and Families Act 2014 and how the task group recommendations had been included with the Joint Strategy for Carers of All Ages in Cheshire East 2016-2018.

The report provided a response to each of the Carers Task Group's recommendations and during the discussion members asked questions. The following points arose:

- Liquid Logic (computer software used to manage care records) was currently being used by Children's services and would be implemented for use by Adult Social Care services by April 2016.
- Services were not currently up to date on 12 month reassessments of care users' needs but those with greatest need were prioritised to ensure their care was appropriate. All service users would eventually have their reassessment. There needed to be a balance between conducting a quality assessment and completing all assessments in a timely manner.
- The Care Services Directory 2015 was shared at the meeting and was a useful tool to help carers and users access appropriate services. This directory was shared with GPs to ensure they knew about local services and the directory was available online.
- Transition officers had been appointed to support young carers transitioning to adults so that they received a seamless service.
- Joint events for social care staff and carer support services had been held to promote the role of carers and to ensure more carers were being identified with the support of other carers. Carers were also being involved in the development of new services/initiatives.
- GP contracting arrangements were currently changing and core services were being enhanced to take carers needs into consideration as a requirement.

The Committee was informed that the Joint Strategy for Carers of All Ages in Cheshire East 2016-2018 was due to be approved by all governing bodies in spring and had been influenced by the Task Group's Report.

RESOLVED – That the response to the Carers Task and Finish Group recommendations be noted.

63 WINTER WELLBEING AND WINTER PLANNING

The Committee gave consideration to three reports from Cheshire East Council, NHS Eastern Cheshire CCG and NHS South Cheshire CCG respectively into winter wellbeing and planning for winter pressures.

The report from the Council explained the role of the Winter Wellbeing Partnership which was formed in 2012. The Partnership had had a positive impact on improved co-ordination of activities by organisations and raised awareness in relation to the risks of cold whether. NICE guidance on excess winter deaths had helped services to identify and tackle issues e.g. lack of insulation and high energy prices leading to cold homes. Larger housing associations were also involved in helping their residents with heat efficiency. Cheshire East had a high proportion of elderly and vulnerable residents and winter mortality was higher than some other areas. The Council needed to compare with similar areas from across the country.

Through their System Resilience Groups (SRGs) the two Clinical Commissioning Groups (CCGs) developed plans for ensuring that health services were able to cope with the additional pressures that colder weather in the winter months brought.

Eastern Cheshire had developed a condensed plan with a focus on improving patient flows through the health and care system. The report suggested that East Cheshire NHS Trust was busy and under pressure but coping well. Primary Care services in Eastern Cheshire were also doing well with the uptake of the Flu Jab. It was suggested that more intermediate care beds might be needed to improve the discharge of elderly and frail from acute services.

South Cheshire operated its SRG with Vale Royal CCG on a Mid Cheshire Hospitals NHS Foundation Trust footprint. They suggested three areas of impact including a reduction in admissions, getting through hospital quickly and being discharged on time. The CCGs were working with community groups (e.g. Red Cross) to support people to be discharged from hospital sooner.

The Committee wished to receive further reports from the Council and CCGs in the autumn ahead of next winter to consider what preparations were being put in place and to see how this winter's initiatives had impacted on excess winter deaths and health outcomes for patients.

RESOLVED

(a) That the Committee requests an update on winter wellbeing and winter pressures planning from the Council and Clinical Commissioning Groups in six months time ahead of next winter.

64 HYPER ACUTE STROKE PATHWAY FOR SOUTH CHESHIRE PATIENTS

The Committee considered a report from Mid Cheshire Hospitals NHS Trust and South Cheshire Clinical Commissioning Group regarding a change in stroke services. There had been a national focus on changing services to stroke patients with a greater emphasis on an early treatment phase followed by a rehabilitation phase. With two separate phases services could be delivered in a different way with specialist treatment in the early stages of a stroke being provided at specialist centres and rehabilitation provided locally.

The Committee had considered similar proposals from Eastern Cheshire CCG in 2015 regarding the change of stroke services which would now be delivered by Stepping Hill and Salford Royal rather than locally at Macclesfield General Hospital. Currently Leighton Hospital provided stroke services in the South of the Borough and with current staffing of specialist consultants it was not able to provide a consistent 24/7 service.

The new service proposed providing hyper acute Thrombolysis at Leighton Hospital followed by 24/7 consultant covered care at North Staffordshire University Hospital for 72 hours. Patients would then be transferred back to Leighton for their rehabilitation. This model of care was proven to provide better health outcomes for stroke patients with some of those receiving thrombolysis seeing their stroke symptoms reversed.

The Committee was asked to support the proposed changes to services. Having supported the change to services in the Eastern Cheshire area the Committee also supported the changes proposed in the South.

RESOLVED – That the Committee supports the proposals to change stroke services provided by Mid Cheshire Hospitals NHS Trust.

65 WORK PROGRAMME

The Committee agreed to defer consideration of the work programme due to time constraints on the meeting.

RESOLVED – That this item be deferred to the next meeting.

The meeting commenced at 10.00 am and concluded at 12.45 pm

Councillor J Saunders (Chairman)