

**SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE**  
**1 NOVEMBER 2012**

Minutes of the meeting of the Social & Health Care Overview & Scrutiny Committee of Flintshire County Council held at Delyn Committee Room, County Hall, Mold CH7 6NA on Thursday, 1 November 2012

**PRESENT: Councillor Carol Ellis (Chair)**

Councillors Marion Bateman, Peter Curtis, David Evans, Veronica Gay, Cindy Hinds, Stella Jones, Brian Lloyd, Mike Lowe, Dave Mackie, Hilary McGuill, Gareth Roberts, Ian Smith and David Wisinger

**APOLOGIES:**

Councillor Adele Davies-Cooke  
Gill Gilvani, Director of Nursing, Midwifery and Patient Services

**CONTRIBUTORS:**

Cabinet Member for Social Services, Director of Community Services, Head of Social Services for Children

For minute number 40: Representatives from Betsi Cadwaladr University Health Board:

Andrew Jones - Executive Director of Public Health, Janet Ellis – Primary and Community Services Programmes Manager, John Darlington – Assistant Director for Planning and Contracting, Yvonne Harding – Associate Chief of Staff for Nursing, Jackie Jones - Principal Public Health Development Specialist,

For minute number 41: Dawn Cooper – Head of Service Users Experience, Partnership Manager Health, Social Care and Well being Strategy.

For minute number 42: Head of Social Services for Adults

**IN ATTENDANCE:**

Learning and Social Care Overview and Scrutiny Facilitator and Committee Officer

**39. DECLARATIONS OF INTEREST (INCLUDING WHIPPING DECLARATIONS)**

Councillor H.J. McGuill declared a personal interest due to her being on Betsi Cadwaladr University Health Board Community Health Council.

**40. BETSI CADWALADR UNIVERSITY HEALTH BOARD**

Mr J. Darlington gave an update report on the services reviews and public consultation. The Public Consultation concluded at the end of October 2012 and a written response had been received from the Council. The next stage was to analyse the responses received, look at any new evidence and any counter proposals. It was envisaged that the Board would come to a conclusion by 31 December 2012.

Councillor H.J. McGuill gave thanks for the update and asked if a date had been set for the Board meeting and when feedback would be given to the public about the consultation. Mr J. Darlington said that the date for the Board Meeting was yet to be confirmed. He added that the Health Board had responded to comments as they were received, including those from the Council. Some key

issues had emerged and that analysis would be shared with the public when available. Councillor H. McGuill said that lots of suggestions had been made as to how to maintain services. Mr J. Darlington responded that evidence was a key issue and that every comment would be analysed and figures, such as population trends checked. The Chair said that not everyone had received a response. Mr J. Darlington said that every question would be answered personally by one of the team.

Councillor S. Jones asked if a business plan outlining time frame and costs involved had been produced. Mr J. Darlington said that the process would not be rushed and comments would be taken onboard. Details of costs have been collated and shared.

Councillor P.J. Curtis said that he wanted to see dialogue and negotiation built into the consultation process, so that people felt listened to and that everyone wanted to see a good National Health Service.

Councillor D.I. Mackie gave thanks for the update and asked how the Health Board would tackle differing issues across North Wales. Mr J. Darlington said that the Health Board wanted to do the best for all North Wales, and to drive quality for all in a fair way.

Councillor D. Wisinger said that he was concerned about transport issues. Mr J. Darlington said that transport was one of the big themes that came out of the consultation and that the Health Board would look at options to deliver healthcare in the home.

Councillor C. Hinds asked if the Health Board would report back decisions to the council in advance of public announcements. Mr J. Darlington said that there was open dialogue between Betsi Cadwalladr University Hospital Board and the Council. Mr A. Jones said that they wanted to work in partnership with the Council and that they would take back this request to the board.

Councillor M. Bateman asked if the decisions to be taken in December would be final decisions and asked if the Board Members had local knowledge of Flintshire. Mr A. Jones said that there was a GP from Flintshire on the board. Councillor Bateman asked if they had a local knowledge of transport issues in Mold. Mr J. Darlington said that he had seen responses from Mold and would take these into account. Mr A. Jones said that transport was a major, recurring issue.

Councillor V. Gay expressed concerns about cross-border services with England and had not been aware of any research into cross border provision and the need for residents to access health care close to where they lived in Chester instead of having to travel further into North Wales. Mr J. Darlington said that it was the Health Board's job to manage the differences between the two countries and to ensure better integration and improved GP services. He confirmed that the £27 million Saltney/Dee contract would remain, whilst they wanted to provide services where clinically appropriate in North Wales and keep resources in North Wales. More services would be provided in Deeside, with GPs accessing hospital care for patients. It was not the intention to stop cross border patients and the Health Board would continue to use English hospitals for special services. Councillor Gay said that there were no large PCT practices in Saltney or Broughton.

The Chair referred to a report about beds in Glan Clwyd Hospital being 94% full in the summer and she said she was concerned about potential loss of local beds in community hospitals and the effects of winter illnesses. Mr J. Darlington said that the Health Board was aware of and plans for all year round pressures anywhere in the NHS and worked well with English counterparts. The Chair asked how enhanced care at home could replace 24 hour hospital care. Mr A. Jones said that modern healthcare was delivered in different ways and did not always equate to hospital beds and that the theme would be further addressed in the presentation about locality working.

Councillor McGuill asked if negotiations had started to secure land for a PCT centre in Flint. Mr A. Jones said that he would take this back to the Health Board.

Ms J Ellis gave a presentation to update Members on Locality Working in Flintshire. The report outlined a shift in services towards those that were community based and based on prevention and self care. She reported that joint working with Health and Social care in the local authority would improve services. Whilst there had been reductions in emergency admissions to hospital in North West Flintshire, this was not repeated in South Flintshire and North East Flintshire and this would be investigated. The average length of stay in hospital had decreased for North West and South Flintshire, but not North East Flintshire and this would also be investigated. Admissions resulting in discharge to usual place of residence had decreased slightly in North West Flintshire and would be investigated. There was work in progress concerning maximising the use of x-ray facilities and getting maximum number of patients at each session.

The Chair thanked Ms J. Ellis for her presentation.

Councillor McGuill said that the 3 localities or “hubs” for Flintshire had been referred to during the consultation process, but now there appeared to be only 2, based in Deeside and West Flintshire. Councillor McGuill also expressed concern that local x-ray facilities were not widely publicised or used by GPs as they had to be booked in advance. Ms J. Ellis replied that the Health Board recognised that they have not got x-ray services right and that GPs should be better informed about x-ray facilities at minor injuries units. Councillor McGuill asked how 2 hubs in Flintshire would work when there were 3 centres of population. Ms J. Ellis said that across North Wales there was not a hub planned in each locality.

The Chair said that she understood at the Consultation meetings that there would be 3 hubs and wanted to know when this changed to two given that South Flintshire was the largest populated area in the county. Mr J. Darlington said that this was all part of the Consultation.

Councillor Curtis said that he understood from the Consultation that there would be 3 hubs in Flintshire and that it should have been explained to people when taking part in the consultation. Ms J. Ellis said that she could not respond to this question, but would take it back to the Health Board.

Councillor Jones asked if the Health Board were confident that all of the GPs would be onboard with the proposals. Mr J. Darlington said that the experience in Denbighshire showed that at first GPs were not sure, but after becoming involved, they saw the benefits and got behind it.

Councillor Mackie gave thanks for the presentation and asked about the performance of re-enablement programmes. Ms J. Ellis said that she did not have information about this and would get back to him about this. The Director of Social Services said that 60% of service users in Social Services Re-enablement Services did not require long term support. Councillor V. Gay asked how far partnership working had progressed with the third sector. The Director of Community Services said that locality teams would be set up with the Local Authority, Health and Third Sector. He said that the local authority service was being developed and that they were now looking at partners. The Head of Children's Services said that locality teams did not presently include Children's Services. However the 3 locality leads had been invited to a forthcoming Children's Services Senior Management Team meeting to discuss this issue.

Councillor Bateman asked if the decisions were final. Mr A. Jones said that the Board would make decisions that would be taken forward.

The Chair asked if after reviewing the consultations, if some areas needed to change, would they go out to consultation. Mr J. Darlington said that new evidence would be responded to accordingly, possibly with amendments but nothing could be confirmed at the moment.

Councillor Jones asked who would scrutinise the Health Board's decisions. Mr A. Jones said that the Chair of the Board reported to the Welsh Government.

Mr A. Jones then introduced a report into Partnership approaches to Prevention and Early Intervention, The Importance of the Early Years. He said that it was vital that investment was made in early years development in order that children reached their full potential in later life. The Health Board had a number of priorities to improve child health. In Wales, a third of pregnant women smoked throughout their pregnancy. All midwives were now trained in smoking cessation and carbon monoxide monitoring had been introduced. Other health staff work with schools to prevent young people start smoking.

The Head of Children's Services said that substance misuse did not feature in the list of priorities. She said that Foetal Alcohol Syndrome was a huge issue of concern and had resulted in numerous adoption breakdowns and that it was equally important to put the message across about the dangers of drinking in pregnancy. Ms Y. Harding said that because of the lower numbers of Foetal Alcohol Syndrome babies, this was not a priority project. She said that specially trained midwives could offer support to pregnant women with alcohol issues, who were sometimes difficult to spot. There numbers were low but the intensity and impact of their behaviour was high.

Councillor Bateman asked about availability of emergency contraception for young people should minor injuries units close. Ms Y. Harding said all school nurses were trained to provide emergency contraception and that there had been good success rates at schools. The King Street Clinic, Mold had a sexual health service all day on a Monday.

Ms Y. Harding then gave an update in Children's Services and CAMHS. She said that Neonatal services had formed part of the review into Children's Services. The proposal to close North Wales facilities and contract out to Arrowe Park, Wirral

was based on evidence and standards. Currently the hospitals in North Wales did not meet British Association of Perinatal Medicine standards. Ms Harding advised that:-

- The three North Wales hospitals would retain Acute 24 hour children's wards.
- Issues around staffing and management would be resolved. There would be more work in the community around accident prevention.
- Additional health visitors were being trained.
- Families First partnership would replace Cymorth.
- Child and Adolescent Mental Health Service Flintshire, no breaches recorded on the waiting list target with children seen and assessed within 16 weeks of referral.

The Head of Children's Services expressed the difficulty for some clients in accessing Community Mental Health Services, as conditions of referral were that the young person was in a steady placement. This did not take into account young people in and out of residential mental health units such as Tier 4. Ms Y. Harding said she would take this question back to the Health Board.

Councillor D. Evans asked if the Children's Community Mental Health Teams worked with parents. Ms Y. Harding replied that it depended on the consent of the young person and said that the Health Board had undertaken an assessment of the levels of involvement with parents. She said that she would take back the comments to the Health Board.

The Chair thanked the contributors from Betsi Cadwaladr University Health Board for their presentation on behalf of the members of the committee.

#### **RESOLVED:**

That the presentation be noted.

#### **41. NORTH WALES (DRAFT) INFORMATION AND CONSULTATION CARERS STRATEGY**

Ms D. Cooper presented the draft Information and Consultation Carers Strategy which outlined how Betsi Cadwaladr University Health Board had worked together with Local Authorities across North Wales and the 3<sup>rd</sup> sector to develop the above strategy, as required by the Carers Strategy (Wales) Measure. This Measure, for the first time, placed a duty on Health Services to meet the needs of carers. The strategy would assist in identifying, informing, recognising the needs of, and signposting carers to appropriate services. Flintshire already had a commissioning strategy in place for carers services. Money allocated to North Wales for the implementation of the Measure was £97,000 in the first instance with a further £97,000 once the strategy was approved by Welsh Government.

The Director of Community Services welcomed the strategy and the funding which would enable partnership working to heighten the profile of carers. He said the cost of the anticipated increase in carer assessments would need to be addressed in future years. In 2011-12, Flintshire undertook 673 carer assessments. If this increased, the council would need additional funding and would work in partnership. The Director of Community Services said that the third sector played a

central role in providing services for Carers and Flintshire commissioned services in excess of £400,000.

Councillor D. Wisinger welcomed the news and asked how carers accessed information about support. Ms D. Cooper said that the role of the strategy would be to sign post carers to relevant third sector services. The Partnership Development and Performance manager said that NEWCIS provided information and newsletters to carers and that she could be contacted if information was required.

Councillor S. Jones asked if the £97,000 was for Flintshire or North Wales. Ms D. Cooper confirmed that it was for North Wales and for training purposes, not new services. After the first year of operation statistics would be submitted to the Welsh Assembly to inform them on decisions for funding years 2 and 3.

**RESOLVED: -**

(a) That the Social and Health Care Overview and Scrutiny Committee support the submission of the strategy for approval to the Welsh Government and the ongoing work of the partnership.

(b) That the Social and Health Care Overview and Scrutiny Committee be updated once the Welsh Assembly have made their findings known.

**42. ADULT PROTECTION REPORT APRIL 2011 TO MARCH 2012**

The Head of Social Services for Adults presented a report to inform Members about the activity and developments within Adult Safeguarding over the year, specifically Adult Protection and Deprivation of Liberty Safeguards. In 2011-12, 250 Adult Protection referrals were received by Flintshire, of these 186 progressed to a full investigation and 64 referrals were screened and were dealt with by the relevant Team Manager. The annual increase in referrals was due to increased awareness and training. The new Social Services Bill would affect the coordination of and priority given to Adult Safeguarding at a strategic level across the country. A pressure bid had been agreed by the Council for an additional £45k for 2012-13 with full year effect of £90k for future years.

Councillor D.I. Mackie asked if individual cases were looked at in isolation or if a name did appear on several occasions, was this linked? The Head of Social Services for Adults said that checks were made to see if any alleged perpetrators had previous records and if any evidence was found this would be discussed. He added that trend analysis of cases also identified cases of a similar nature.

Councillor D. Evans expressed concern at the majority of alleged abuses occurring in the home, (96 cases) and in care homes and residential places (31 cases), and the highest number of persons alleged to be responsible for abuse were independent sector staff (61 persons). He said that more information was needed about independent sector staff alleged abuses in the home and care home setting.

Councillor M. Bateman asked if there was a reason why the majority of cases involved women over 65 years of age in their own homes. The Head of Social Services for Adults said that many women were carers and were vulnerable to abuse from people at home. Staff such as district nurses and care staff who went in

to people's homes had received training in abuse and were also likely to identify more new cases.

**RESOLVED:-**

That Members consider Flintshire's Annual Adult Protection Monitoring Report for the period April 2011-March 2012.

**43. FORWARD WORK PROGRAMME**

The Learning and Social Care Overview and Scrutiny Facilitator introduced the report to consider amendments to the Forward Work Programme for the Committee.

She proposed that the Integrated Family Support Service be deferred to the New Year. The next meeting in December would include Transport Policy, Fostering Inspection, CCSSIW Annual Letter and performance reporting to include update on Llys Jasmine. The Mental Health Measure update would be deferred.

**RESOLVED:**

That the Forward Work Programme be received and amended to reflect the above suggestions.

**44. DURATION OF MEETING**

The meeting commenced at 2.00 p.m. and ended at 4.48 p.m.

**45. MEMBERS OF THE PRESS AND PUBLIC IN ATTENDANCE**

There was one member of the press in attendance.

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**Chair**