SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE 13 DECEMBER 2016

Minutes of the meeting of the Social & Health Care Overview & Scrutiny Committee of Flintshire County Council held in the Delyn Committee Room, County Hall, Mold on Tuesday, 13 December 2016

PRESENT: Councillor Carol Ellis (Chair)

Councillors: Paul Cunningham, Andy Dunbobbin, Veronica Gay, David Healey, Cindy Hinds, Ray Hughes, Dave Mackie, Hilary McGuill, Mike Reece, Ian Smith, David Wisinger and Matt Wright

APOLOGY: Councillor Adele Davies-Cooke

ALSO PRESENT: Chief Executive

CONTRIBUTORS: Councillor Christine Jones, Cabinet Member for Social Services; Chief Officer (Social Services); Senior Manager, Children and Workforce; Senior Manager, Integrated Services, Lead Adults; Senior Manager, Safeguarding and Commissioning; and Service Manager, Disability, Progression and Recovery - Adult Services

Representatives of Betsi Cadwaladr University Health Board

Jonathan Falcus, Assistant Director of Community Services (minute number 51)

Andrew Roach, Director of Mental Health & Learning Disabilities (minute numbers 51 & 52)

IN ATTENDANCE: Social & Health Care Overview & Scrutiny Facilitator and Committee Officer

50. DECLARATIONS OF INTEREST (INCLUDING WHIPPING DECLARATIONS)

There were no declarations of interest.

51. <u>BETSI CADWALADR UNIVERSITY HEALTH BOARD (PRESENTATION)</u>

The Chair welcomed Jonathan Falcus, Assistant Director of Community Services and Andrew Roach, Director of Mental Health & Learning Disabilities of Betsi Cadwaladr University Health Board (BCUHB) to the meeting.

Mr. Falcus, who was attending on behalf of the Area Director East, Rob Smith, gave a detailed update on work being undertaken in a number of areas to improve health and social care in Flintshire. This involved collaborations with Social Services officers and representatives from Mental Health Services and the independent sector to produce a plan to identify improvements to help facilitate patient discharge from hospital. Recommendations from this work would be shared with the Chief Executive of the BCUHB and the six North Wales authorities to promote the development of support to the independent sector and improve patient flow.

Information was also given on the expansion of Community Resources teams in Flintshire and Wrexham to develop a 24/7 response service to care in the community. Merged funding streams and primary care development monies were being used to achieve this more coherent service which would enable capacity to respond to unscheduled events outside normal working hours. The initiative involved recruitment of additional resources such as District Nurses and generic workers, as well as extending access to Occupational Therapists and Physiotherapists until 6/7pm on weekdays. A further element was to develop a Frailty Assessment Unit which was a multi-disciplinary approach to creating a care plan in preparation for any potential crisis. The introduction of hubs would enable patients to be assessed for their care needs.

The Chair said that a concern had been raised about smoking outside hospitals. It was agreed that the Facilitator would forward this to Mr. Rob Smith for a response as he was Chair of the Smoking Cessation Group at BCUHB.

Councillor Hilary McGuill felt that the early intervention approach through the Frailty Assessment Unit could be ineffective, as patients generally needed hospital care at the point of such a crisis. Mr. Falcus acknowledged that some patients' needs were better addressed at district general hospitals, but there was clear evidence that the early assessment would benefit some other patients to identify potential options available if a crisis were to occur in consultation with families/carers. In response to other queries, he confirmed that the Single Point of Access was now operational and that teams were in regular contact. Explanation was also given on training/education to implement care plans with support from the Community Resources teams.

The Chair praised the services of Deeside Community Hospital and highlighted the importance of these facilities, including the new building in Rhyl, in caring for patients outside district general hospitals. Mr. Falcus said that the transformation of Community Resources teams would give an opportunity to respond better to individuals' needs and that pathway plans involved the use of community hospitals and 'step-up/step-down' beds.

Councillor Matt Wright welcomed the recruitment of additional District Nurses as this commitment had been made on the closure of community hospitals. He sought clarification on how many would be recruited and the timescale involved, asking how these would link to GP services as seen with the new health centre model in Prestatyn. Mr. Falcus spoke about a phased approach to the recruitment process, with current advertisements out for District Nurse posts and Occupational Therapists due to be advertised before Christmas. The exact number of additional staff would depend on the working hours of those appointed, however it was known that an additional two Occupational Therapists and two Physiotherapists were being sought. In total, it was hoped to recruit an extra 22 multi-disciplinary members to the Community Resources team in addition to recruitment for the Wrexham area to enable cross-area working.

Councillor Veronica Gay felt that community hubs were not likely to work in areas such as Saltney where services were linked with the Countess of Chester Hospital. Mr. Falcus gave assurances that community services (mainly involving home care) would be equally accessible by all residents in Wales, including those with a GP based in England.

When asked about the proposed location of a Frailty Assessment Unit in Flintshire, Mr. Falcus would advise the Committee of the outcome once options had been explored.

Mr. Andrew Roach, who had recently been appointed as Director of Mental Health & Learning Disabilities, gave an update on the key developments in Mental Health Services. Amongst the expectations detailed in the Special Measures improvement framework, challenging ambitions were being set in the Mental Health Strategy which was due for completion by March 2017. The interim framework which set out the vision for Mental Health Services over the next three years would be shared with key partners, service users and carers in January to ensure it met the aspirations of all concerned.

Councillor Paul Cunningham relayed a concern about a patient being inappropriately placed on a Dementia ward which had impacted on their health. Mr. Roach said that such cases were unacceptable and should not continue.

The changes were welcomed by Councillor David Healey who had concerns about the lack of beds available for individuals with mental health issues and the need for patients to have access to Welsh translators if needed. He pointed out that placements outside the area meant additional travel for families which could have a negative effect on the patient's health. Mr. Roach said that acute beds in the locality were sought where possible, and that improved processes had led to a significant reduction in the number of out of area placements. In response to calls for a rapid response team, Mr. Roach said that the transformation programme would look at the potential for a crisis intervention team involving pathways to avoid individuals being subject to a 'revolving door' process.

Councillor Cindy Hinds referred to lengthy delays at Accident & Emergency units and felt that patients with mental health issues should be able to access an alternative area. Mr. Roach agreed that an appropriate place of safety should be provided and that investment was needed in psychiatric liaison services to signpost patients to support, however there was not enough capacity at the present time to fulfil those aims.

RESOLVED:

That the update be noted.

52. THE FUNCTION AND PURPOSE OF FLINTSHIRE COMMUNITY MENTAL HEALTH TEAMS

The Chief Officer (Social Services) presented a report on the function and purpose of the Flintshire Community Mental Health Teams (CMHT) which were jointly funded and managed by the Council's Social Services and Betsi Cadwaladr University Health Board (BCUHB).

An overview was given on service eligibility, resources of the teams and links with key third sector organisations to support patients. The Local Primary Mental Health Support Service (LPMHSS), which was co-located with the CMHT

at Aston House in Deeside, was noted to be the lowest resourced team per 1000 population of the six counties in North Wales. Details were shared on current caseload of the Secondary Care team where additional service demand for young people was being monitored. Examples were shared of typical referrals received on a daily basis.

In praising the level of detail in the report, the Chair asked what options were available to individuals in need of therapy if new referrals were closed, which was a noted area of concern. Mr. Andrew Roach of BCUHB said this was representative of how services had been run historically but gave assurance that individuals continued to be supported by the Care Co-ordinator. As part of his new role, Mr. Roach said that capacity and demand for psychological services were being evaluated to feed into the Mental Health Strategy.

In response to a question from Councillor Paul Cunningham, the Service Manager (Disability, Progression & Recovery) replied that CRUSE offered general bereavement support to both adults and children, with support also accessible by children from Barnardo's Young Carers. Counselling in schools was available through educational social workers.

Councillor Dave Mackie spoke about the impact on emergency services from continued non-urgent calls. Mr. Roach said that this was seen as a national issue and that some individuals with personality disorders may not necessarily meet the criteria for secondary care but would require specialist pathways.

Councillor Andy Dunbobbin referred to the specialist psychological services for ex-services personnel and asked about engagement with armed forces charities. The Service Manager said that any details of charities would be forwarded to the Care Co-ordinator. On the need to meet increasing pressures, Mr. Roach explained the approach to the Strategy in understanding areas of demand to manage resources and identifying a range of preventative measures.

Councillor David Healey commended the work of the CMHT which had received positive feedback from service users. He felt that more resources were needed to avoid lengthy delays and asked about the approach to recovery planning. The Service Manager described recovery as the basis of the work of the team and explained that the care and treatment plans, produced by the Care Co-ordinator and the individual, set out a range of goals for the individual with support given to achieve them at their own pace.

In response to questions from Councillor Hilary McGuill on specialist psychological services, Mr. Roach explained that whilst a range of low to medium level support was available, there was a limited number of Clinical Psychologists to deal with more challenging disorders. He was unable to clarify at this stage where additional resources would be recruited but said that the multi-disciplinary model would form part of the Mental Health Strategy.

Following comments from Councillor Cindy Hinds on the need to prioritise Mental Health, Mr. Roach said that the direction was to carry out robust benchmarking and understand how to effectively deploy resources.

The Chair proposed that the Committee request a further update on the service at a future meeting. Mr. Roach said that an update could be given on the Mental Health Strategy in March 2017.

RESOLVED:

- (a) That the Committee notes the structure of the Flintshire Community Mental Health Teams (CMHT);
- (b) That the Committee understands the referral process to the CMHT and typical presentation of those being referred; and
- (c) That the Committee request a further update on the service as it progresses and an update on the Mental Health Strategy in March 2017.

53. QUARTER 2 IMPROVEMENT PLAN 2016/17 MONITORING REPORT

The Chief Officer (Social Services) introduced the regular update report to consider progress towards the delivery of the impacts set out in the 2016/17 Improvement Plan, focussing on the areas of under-performance relevant to the Committee during Quarter 2.

Reasons were given for under-performance on the timeliness of child protection conferences, where the vast majority of cases had met the target. Whilst this remained a high priority for the service, resources were often at full capacity to respond to an increasing demand and a number of conferences were being held simultaneously. As the only red risk area, the fragility and sustainability of the care home sector remained a challenge. Events were being held with key partners to identify improvements, positive discussions were ongoing with colleagues in Health and a newly appointed Project Manager, Gill Bailey, would be working with independent sector providers.

Councillor Dave Mackie referred to improving access to Child & Adolescent Mental Health Services (CAMHS) and said he had been informed there was no waiting list. The Senior Manager (Children & Workforce) advised that BCUHB was reporting positive progress in refocusing its procedures and reducing waiting times. He advised that a request would be made for information about assessment target timelines for inclusion in the next quarterly report. In response queries. the Senior Manager (Safequarding further Commissioning) shared details of the e-learning training platform to raise awareness of safeguarding amongst the workforce. The Chief Officer advised that the draft Safeguarding Policy included a recommendation for mandatory safeguarding training to Members. He also clarified that the report would be corrected to reflect that the Facebook page for care homes was now live.

In response to queries raised by Councillor Andy Dunbobbin, the Senior Manager (Safeguarding & Commissioning) spoke about the development of one page profiles of care homes and the format/frequency of meetings of the corporate safeguarding panel. She accepted the point that wording on the target for the number of care homes as a 'service of concern' and those in 'escalating concerns' could be misleading.

On the delayed transfer of care, the Senior Manager (Integrated Services, Lead Adults) said that cases involved a range of complex needs and that more detail would be shared in the report scheduled for January 2017.

Councillor Hilary McGuill commended the services provided by Marleyfield Daycare Centre but raised concerns that this facility was being underused. The Senior Manager agreed to provide a response to Councillor McGuill once her rota visit report had been received. She gave assurance that daycare was not being reduced by stealth and that all available options were explained to individuals as part of the 'What Matters' conversation which enabled them to make an informed choice. Individuals were instead choosing alternative options such as Dementia Cafés. Councillor Christine Jones pointed out that Dementia Cafés were open every day in six different communities and also offered support for carers. Discussion took place about the various names given to Dementia Cafés and the relocation of the facility in Buckley.

On the safeguarding training for Members, Councillor Ian Smith asked that consideration be given to evening sessions.

In addition to the recommendations, the Chair proposed that regular updates be given to the Committee on the red risk issues and to note the work taking place.

RESOLVED:

- (a) That the Quarter 2 Improvement Plan Monitoring Report for the Living Well priority be noted;
- (b) That regular updates on the situation with the red risk issues be received; and
- (c) That the Committee notes the work being undertaken and the actual position.

54. ROTA VISITS

Councillor Hilary McGuill gave positive feedback on the staff and activities at the Marleyfield daycare centre, noting the issues raised under the previous item.

RESOLVED:

That the information be noted.

55. FORWARD WORK PROGRAMME

In presenting the Forward Work Programme for consideration, the Facilitator advised that the provisional budget meeting on 19 January 2017 would be cancelled.

Councillor Hilary McGuill referred to the annual accounts of Double Click and was informed that these were outside the remit of the Committee. As a

social enterprise, the accounts were subject to monitoring by the Board which met regularly with officers. An update on Double Click had been scheduled for the Committee's meeting in April 2017.

Councillor Cindy Hinds commented that Dementia should be classed as an illness and therefore funded by the Health sector. Explanation was given on joint funding arrangements and availability of early medication.

The Chair spoke about the lack of Elderly Mentally Infirm (EMI) placements for people with advanced Dementia requiring 24 hour care and asked that this be included on the Forward Work Programme, along with an update on residential care.

RESOLVED:

- (a) That the Forward Work Programme be updated accordingly; and
- (b) That the Facilitator, in consultation with the Chair of the Committee, be authorised to vary the Forward Work Programme between meetings, as the need arises.

56. MEMBERS OF THE PRESS AND PUBLIC IN ATTENDANCE

There was one member of the press in attendance.

Chair	
(The meeting started at 2pm and ended at	4.15pm)