

## **Lancashire County Council**

### **Health Scrutiny Committee**

**Minutes of the Meeting held on Tuesday, 22 April, 2014 at 10.30 am in Cabinet Room 'C' - The Duke of Lancaster Room, County Hall, Preston**

#### **Present:**

County Councillor Steven Holgate (Chair)

#### **County Councillors**

M Brindle	A James
Mrs F Craig-Wilson	M Otter
G Dowding	N Penney
N Hennessy	B Yates
M Iqbal	

#### **Co-opted members**

Councillor Brenda Ackers, (Fylde Borough Council Representative)  
Councillor Paul Gardner, (Lancaster City Council Representative)  
Councillor Bridget Hilton, (Ribble Valley Borough Council Representative)  
Councillor Liz McInnes, (Rossendale Borough Council Representative)  
Councillor Julie Robinson, (Wyre Borough Council Representative)  
Councillor Mrs D Stephenson, (West Lancashire Borough Council Representative)  
Councillor M J Titherington, (South Ribble Borough Council Representative)  
Councillor Dave Wilson, (Preston City Council Representative)

#### **1. Apologies**

Apologies for absence were presented on behalf of County Councillors Andrea Kay, Yousuf Motala and Bev Murray, and Councillors Julia Berry (Chorley Borough Council), Tim O'Kane (Hyndburn Borough Council), Betsy Stringer (Burnley Borough Council) and David Whalley (Pendle Borough Council).

#### **2. Disclosure of Pecuniary and Non-Pecuniary Interests**

None disclosed.

### **3. Minutes of the Meeting Held on 4 March 2014**

The Minutes of the Health Scrutiny Committee meeting held on the 4 March 2014 were presented

**Resolved:** That the Minutes of the Health Scrutiny Committee held on the 4 March 2014 be confirmed and signed by the Chair.

### **4. Cabinet Member Response to the Care Complaints Task Group**

The Chair welcomed County Councillor Tony Martin, Cabinet Member for Adult and Community Services, and Mike Banks, Interim Director of Commissioning to present the final response to the recommendations of the Care Complaints Task Group. He also welcomed to the table County Councillor Chris Henig who had chaired the Task Group.

The recommendations of the Care Complaints Task Group report had been accepted in full. The Adult Services, Health and Wellbeing Directorate had produced an action plan, endorsed by County Councillor Martin, which was included in Appendix A to the report now presented.

The report of the Task Group can be accessed via the following link:

<http://council.lancashire.gov.uk/documents/s31896/Appendix%20A.pdf>

One of the recommendations of the Task Group was that:

- **The Cabinet Member for Adult & Community Services consider having a 'single point of access' for people who wish to complain as a means of simplifying the procedure.**

County Councillor Martin explained that the creation of a single point of access locally was proving to be more difficult than had first been envisaged. He suggested that a copy of the Task Group report be sent to the relevant Secretary of State asking him to look at how the reporting of complaints could be streamlined nationally.

Locally, there were currently many access points in what was a multi-agency service involving the county council, the NHS, care homes, Healthwatch etc.

Different agencies needed their own access points and the view being applied was that 'no door should be the wrong door'; it was recognised as important to ensure that any complaint was passed to the correct point and that all concerns were addressed in an appropriate way.

Members were most disappointed and emphasised that current government thinking appeared to support the view that a single point of access was the way forward.

The point was made that there was an increased chance of human and/or systemic failures if there were multiple points of access and the Cabinet Member and the Directorate were asked to pursue the recommended single point of access and report back to the Steering Group in six month's time.

The point was made that there could be many people dissatisfied with the service they were receiving who did not actually make a complaint and it was important therefore to ensure that information was available, at the point of registration, to ensure that staff and residents at care homes were aware how to make a complaint. The Chair explained that this suggestion fell outside the remit of the task group but it would be looked at along with other issues by the Steering Group of the Health Scrutiny Committee.

**Resolved:** That,

- i. The response from the Cabinet Member for Adult and Community Services to the issues raised in the Task Group Report be received;
- ii. The action plan to the issues raised and the progress made to date be noted; and
- iii. An update on progress towards achieving a single point of access for people who wish to complain be provided to the Steering Group in six month's time.

## **5. Report of the NHS Health Check Task Group**

The report explained that in summer 2013, the Centre for Public Scrutiny (CFPS) had been commissioned by NHS England to work with six scrutiny development areas to pilot a review on how the NHS Health Check Scheme was working at a local level. The pilot was to use the Return on Investment Model designed by the Centre for Public Scrutiny.

Following expressions of interest Lancashire County Council and South Ribble Borough Council's Scrutiny Committees had been invited to carry out a joint review as part of the pilot.

A joint scrutiny task group was created with four councillors from each scrutiny committee. The Centre for Public Scrutiny appointed an Expert Advisor to work with the Joint Task Group.

Councillor Mick Titherington, South Ribble Borough Council, had chaired the task group and now presented the report, including the recommendations, which would be considered by the Cabinet Member for Health and Wellbeing.

The Chair invited members to comment on the task group report and a summary of the main points arising is set out below:

- It was suggested that if health checks were available through pharmacies and supermarkets this could capture busy, working people who find it difficult to get to their GP, and also those people who are reluctant to see their GP perhaps because they are fearful.
- Or surgeries should be held later and/or at weekends to enable people to more easily access the service; there was a need for the NHS to adapt its approach in order to maximise take-up of health checks.
- Also people whose family history put them at higher risk should be identified at an early stage.
- One member cautioned against unnecessary tests, which in turn can cause stress and anxiety.
- It was recognised that there was no single solution and the recommendations therefore were asking that further studies be undertaken to ultimately increase the uptake and effectiveness of health checks.
- The report acknowledged concern about the availability and reliability of data and this was welcomed given some concerns raised previously about discrepancies in population figures locally. It was noted, however, that data collection teams within the NHS were reducing.
- It was considered very important for those people who are identified to be 'at risk' following a health check to then be properly signposted to obtain appropriate help and advice.
- As Public Health England had commissioned the work, there was optimism that the report produced by the Centre for Public Scrutiny would lead to changes in the approach to health checks nationally; six separate reports had been produced and, whilst different authorities approached the issues in different ways, their conclusions were very similar and there were real concerns about the way in which health checks were progressing. The local report would be considered by the Cabinet Member for Health and Wellbeing who would decide what action would be taken in response.

**Resolved:** That,

- i. The recommendations of the Task Group, as set out in the report at Appendix A be supported; and
- ii. The Cabinet Member for Health and Wellbeing be asked to provide an interim response to the task group's report within three months.

## **6. Report of the Health Scrutiny Committee Steering Group**

On 21 February the Steering Group had received an update from Debs Harkins, Director of Health Protection and Policy, on Public Health issues. A summary of the meeting was at Appendix A to the report now presented.

On 14 March the Steering Group had met with Dr Jay Chillala from Central Manchester University Hospitals and Julian Blackhouse from the Institute of

Diabetes to discuss the issue of diabetes. A summary of the meeting was at Appendix B to the report now presented.

**Resolved:** That the report of the Steering Group be received.

## **7. Recent and Forthcoming Decisions**

The Committee's attention was drawn to forthcoming decisions and decisions recently made by the Cabinet and individual Cabinet Members in areas relevant to the remit of the committee, in order that this could inform possible future areas of work.

Recent and forthcoming decisions taken by Cabinet Members or the Cabinet can be accessed here:

<http://council.lancashire.gov.uk/mgDelegatedDecisions.aspx?bcr=1>

It was reported that a task group was currently being established to look at the future distribution of Disabled Facilities Grants in Lancashire. It was to be carried out in partnership with Chorley Borough Council. There was to be a one day event to which district councillors would be invited to discuss related issues.

**Resolved:** That the report be received.

## **8. Urgent Business**

The Chair invited Councillor Paul Gardner to raise a matter at this point.

Councillor Gardner was most concerned about recent articles in the local media concerning reports from the Care Quality Commission (CQC) without any prior notification to the local elected member(s). It was confirmed that the Health Scrutiny Committee receives a few days advance notice from the CQC of reports to be published; Wendy Broadley, Overview and Scrutiny Officer undertook to forward on a filtered list of forthcoming CQC reports to members of the Health Scrutiny Committee. She explained that it was hoped that the Committee could begin to develop a more meaningful relationship with the CQC over the coming months which would allow more input from the Committee about forthcoming inspections.

**Resolved:** That Members of this Committee would receive information provided to the Health Scrutiny Officer by the CQC about forthcoming reports.

## **9. Date of Next Meeting**

It was noted that the next meeting of the Committee would be held on Tuesday 10 June 2014 at 10.30am at County Hall, Preston.

I M Fisher  
County Secretary and Solicitor

County Hall  
Preston