

Lancashire County Council

Health Scrutiny Committee

Minutes of the Meeting held on Wednesday, 4 March, 2015 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	Y Motala
Mrs F Craig-Wilson	B Murray
G Dowding	M Otter
K Iddon	N Penney
M Iqbal	D Stansfield

Co-opted members

Councillor Brenda Ackers, (Fylde Borough Council Representative)
Councillor Trish Ellis, (Burnley Borough Council)
Councillor Carolyn Evans, (West Lancashire Borough Council)
Councillor Bridget Hilton, (Ribble Valley Borough Council Representative)
Councillor Hasina Khan, (Chorley Borough Council)
Councillor Roy Leeming, (Preston City Council)
Councillor Jackie Oakes, (Rossendale Borough Council)
Councillor M J Titherington, (South Ribble Borough Council Representative)

1. Apologies

County Councillors B Dawson and A Schofield replaced County Councillors N Hennessy and A James respectively, and Councillor J Oakes replaced Councillor H Jackson of Rossendale Borough Council.

Apologies for absence were presented on behalf of Councillors Asjad Mahmood (Pendle Borough Council), and Julie Robinson (Wyre Borough Council).

2. Disclosure of Pecuniary and Non-Pecuniary Interests

None disclosed

3. Minutes of the Meeting Held on 13 January 2015

The Minutes of the Health Scrutiny Committee meeting held on the 13 January 2015 were presented and agreed.

Resolved: That the Minutes of the Health Scrutiny Committee held on the 13 January 2015 be confirmed and signed by the Chair.

4. Health and Wellbeing - update

The Chair welcomed Dr Sakthi Karunanithi, Director of Public Health, Adult Services, Health and Wellbeing Directorate and County Councillor Azhar Ali, Cabinet Member for Health and Wellbeing.

Dr Karunanithi presented the report, which provided an update on:

The Health & Wellbeing Strategy:

The three programmes of work – Starting Well, Living Well, Aging Well were underway and progressing well. The main risks to delivery had been identified. The Six Shifts Joint Strategic Needs Assessment (JSNA) was progressing well. Areas of synergy and opportunities for collaborative working were being identified and a final draft was to be presented to the next Health & Wellbeing Board (HWBB) Meeting.

The Better Care Fund (BCF) plan:

The plan had been approved and an implementation action plan had been developed by the Steering group on behalf of the HWBB.

The Relationship between the HWBB and Health Scrutiny Committee:

It was explained that Legislation underpinned the role of health overview and scrutiny committees in holding health bodies, including health and wellbeing boards, to account. The centre for Public Scrutiny had produced a report Spanning the System – Broader Horizons for Council Overview and Scrutiny to help support accountability through Overview and Scrutiny.

County Councillor Ali added that the Lancashire Enterprise Partnership was an important part of the contribution towards health and wellbeing; it was currently focussing on employment and economic development and he felt strongly that implications for health and wellbeing would need to be considered in planning and delivery, for example it was important to promote the living wage and, in terms of planned housing developments, ensure that appropriate services were in place. Seminars had already been held with housing providers to discuss and consider matters such as affordable housing and fuel poverty, and much work was ongoing behind that.

Work was also ongoing with the Head of Economic and External Relations to access European funds to support wellbeing services at a local level.

CC Ali reported that, following consultation with student councils about how best the county council could help support the emotional wellbeing of young people, an 18-month pilot had been launched through the mental health charity MIND who would work with a high school in every district in Lancashire to provide support with issues such as stress, bullying and cyber bullying. It was hoped that ultimately the project could be sustained over a longer period.

He reported also that a pilot had been launched in east Lancashire aimed at tackling obesity and getting communities more active.

He was looking forward to launching, later this year, an integrated wellbeing service to replace the current signposting service, provided by Help Direct. The vision was to provide a consortium of organisations delivering wellbeing services in the community at very local level to whom GPs could refer people for support.

Finally, CC Ali drew the Committee's attention to a report by the Lancashire Fairness Commission published earlier in the week and called 'Fairer Lancashire Fairer Lives'. It contained a number of recommendations and called on public, private and voluntary organisations to make changes to the services they provided to ensure everyone had a fair chance in life in terms of their prosperity, health and wellbeing.

Members raised a number of comments and questions and the main points arising from the discussion are summarised below:

- In response to a question about the number of CCGs that would contract at the levels set out in the plan, it was explained that the Health and Wellbeing Strategy was based on the Joint Strategic Needs Assessment and all CCGs had been part of determining the strategy. The CCGs would have to reflect the County Council's Health and Wellbeing Strategy in their two year and five year operating plans.
- It was explained that the Better Care Fund had been introduced after the Health and Wellbeing Strategy had been published and that much important work had been considered by the HWBB which had a very broad agenda. There had been an opportunity to refresh the strategy to fit with the current reality; it was suggested that, to some extent, the NHS was 'fire-fighting' and the work now coming through the BCF was therefore essential and necessary.
- It was explained that the HWBB was a strategic Board under which there were many partnerships operating at a lower level with varying degrees of success; it was hoped that all would be working well within the next six months.
- It was confirmed that health and wellbeing partnerships had evolved when the primary care trusts became clinical commissioning groups. The partnerships were not formal sub-groups of the HWBB and their contribution varied, but they provided crucial assistance to the H&WB function.

- The Cabinet Member undertook to provide the Committee with information about the scope and role of the integrated wellbeing service referred to in his presentation, which would be launched later his year.
- It was considered important to avoid duplication and to ensure that organisations dovetailed together. CC Ali agreed that it was important to have a whole-system joined-up approach and in some areas progress had been good whilst in others it was acknowledged that there was some way to go.
- Regarding housing, a question was asked about what opportunities there were for owner- occupiers to obtain grants to enable them to maintain their property to an adequate standard, and how housing would integrate with the 'living well' strand of the H&WB strategy. CC Ali agreed that there was a need to work with district councils and also with the private sector to try to reinvigorate the housing market. Work was already ongoing with social landlords to address matters such as fuel poverty and infrastructure issues. In terms of the private sector, CC Ali said that he would like to see a licensing scheme introduced.
- One member referred to recent legislation, which introduced a cap on charges to pay for care, and asked what advice had been given to those people who would be affected by this. She was particularly concerned about elderly people who might not understand the implications of residential care and she asked whether this would be picked up by Help Direct in its expanding role as a wellbeing service. In response, it was suggested that this Committee receive an update on the implications of the Care Act via the Scrutiny Officer and that the Head of Care Act Implementation might attend a meeting to explain further if necessary. CC Ali confirmed that there was an intention to provide similar information to the public.
- Regarding the new wellbeing service Sakthi explained that a wellbeing workforce was currently being commissioned. This was a new type of workforce aimed at providing consistent, co-ordinated standards. Priorities included self-management, social isolation, and low-level mental wellbeing.
- Regarding a specific question about the capacity of the occupational therapy service, it was explained that this was being picked up as part of the re-design of the social care service. Members were reassured that much progress had been made and that, if requested, colleagues in Social Care would provide further information. It was noted that a key area of social care was re-ablement and a key part of this was occupational therapy. CC Ali undertook to pass on the Committee's concerns about the capacity of the occupational therapy service to cope with current demand.
- It was suggested that road safety was relevant to health and wellbeing and that 20 mph zones were part of this, for example around schools and in residential areas. CC Ali confirmed that, under the restructured county council, road safety would fall within public health, which would allow a re-think about how services would be delivered. In some areas 20mph zones were working well, but in others they were not. The Police and Crime Commissioner had listened to concerns around enforcement and a pilot was currently being conducted in the Chorley area. The Committee was assured that road safety was a priority and consideration was currently being given to how best to integrate road safety with public health.

- Clarification was sought about progress in rolling out 20mph areas and zones and CC Ali undertook to provide an update to the Committee from highways officers.
- Members were very pleased to hear about the initiative to engage with high school children and also the obesity pilot referred to in CC Ali's presentation. It was confirmed that the pilot was not just about obesity itself but included advice about things such as food poverty, cooking, and nutrition
- In response to a question about the progress of health checks, Sakthi undertook to provide a detailed update to the Committee. He acknowledged that it was important to identify people who would benefit from such health checks, and it was also important also to consider what follow up action was then taken.
- In response to a question about the possible impact of changes to the Help Direct service on the Welfare Rights service, it was confirmed that there would be no negative impact; access to the Welfare Rights Service would be through the wellbeing service. It was acknowledged that some people did not have the capacity to cope with what was essentially a telephone based service and it was confirmed that officers would, if necessary, visit applicants in their home.
- In response to a question how CCGs were to be supported in tackling health inequalities given that there appeared to be reducing levels of public health support, the Committee was assured that the county council was working closely with CCGs and looking at pooled budgets. The county council had adopted the Marmot principles some two years ago, but it would take time to see the results.

The Chairman thanked the Director for Public Health and the Cabinet Member for Health and Wellbeing for their attendance. He felt that many useful issues had been raised which could feed in to the work planning session to be held after the next meeting of this Committee on 14 April.

Resolved: That the report be noted.

5. Report of the Health Scrutiny Committee Steering Group

On 7 November the Steering Group had met to discuss the new congenital heart disease review prior to consultation. A summary of the meeting was at Appendix A to the report now presented.

On 28 November the Steering Group had met with officers from West Lancashire CCG and Southport and Ormskirk Hospital Trust to discuss breast services at Southport Hospital. A summary of the meeting was at Appendix B to the report now presented.

Resolved: That the report be received.

6. Work Plan

Appendix A to the report now presented set out a draft work plan for both the Health Scrutiny Committee and its Steering Group, including current Task Group reviews.

Wendy Broadley reminded members that there was to be a 2015/16 work planning workshop following the next meeting of this committee on 14 April 2015.

She reported that a Motion had been carried at a meeting of the county council's Full Council on 26 February 2015 part of which said that:

"The county council resolves that the chairman and chief executive of the North West Ambulance Service and north west CCGs be requested as a matter of urgency to attend a meeting of the LCC Health Scrutiny Committee Steering Group to advise what measures are being undertaken to improve response times across the county including those areas most affected by poor Red 1 performance."

Councillor Jackson of Rossendale Borough Council had mentioned at a previous meeting of this Committee that Rossendale Borough Council was conducting a piece of work relating to ambulance response times. It was suggested and agreed that the Steering Group engage with those councillors when taking forward arrangements for the meeting with NWAS.

It was considered most important to include in the work plan an item through which the Committee could be reassured that appropriate and proper governance arrangements were in place across organisations within the health service, and that any governance issues arising were dealt with correctly. It was considered important, as part of that, to seek assurance that whistleblowers were listened to and protected, and that supportive HR policies were in place. It was suggested also that there should be a pan-Lancashire, strategic approach and that the role of non-executive directors in holding organisations to account and the effectiveness of relevant inspectorate bodies be considered. It was agreed that this would be a very relevant piece of work, the scoping of which would need careful consideration.

Members were informed that, in advance the work planning workshop, they would be provided with a list of suggested outline topics

Resolved: That the work plan, as now amended, be noted.

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>

Resolved: That the report be received.

8. Urgent Business

No urgent business was reported.

9. Date of Next Meeting

It was noted that the next meeting of the Committee would be held on Tuesday 14 April 2015 at 10.30am at County Hall, Preston.

I Young
County Secretary and Solicitor

County Hall
Preston