## Meeting of the Full Council – 22 October 2015

# Report on the Health Scrutiny Committee meetings on 15 July and 1 September 2015

#### **Chair: County Councillor Steven Holgate**

The agenda and minutes of the meetings may be viewed on the County Council's web site via the following link:

http://council.lancashire.gov.uk/mgCommitteeDetails.aspx?ID=182

#### 15 July 2015

#### Falls in Care Homes

The report explained that, at the June meeting of this Committee members had met with North West Ambulance Service (NWAS) who had highlighted that ambulances were sometimes requested by residential care homes to pick up someone who had fallen and put them back in bed.

The report now presented provided members with:

- An overview of the assistance that Lancashire County Council (LCC) and partners provide to private residential homes regarding training, advice and guidance on falls
- Evidence that LCC are working with NWAS and other partners to reduce the number of falls in care homes
- The policies that homes should have in place to deal with falls
- Assurance that LCC care home staff are fully trained in dealing with falls

Following a lengthy discussion it was agreed that:

- i. The Cabinet Member for Adult and Community Services be asked to ensure the establishment of a county wide working group to address falls prevention, with a specific focus on developing data sharing protocols, best practice and the total cost to the whole health and social care economy of falls;
- ii. The Clinical Commissioning Groups (CCGs) be asked to provide the Committee with feedback and evaluation on their commissioned services relating to falls prevention and support;
- iii. The Committee be provided with information on the Lancashire Healthy Homes assessment and data relating to complaints regarding falls;
- iv. District based data on the CCG commissioned services relating to falls prevention and support be provided to the Committee via the Scrutiny Officer; and
- v. The CQC be asked for clarification on safe staffing levels in all residential and nursing homes in particular at night and in relation to managing falls.

# Report of the Health Scrutiny Committee Steering Group

It was reported that on 11 May the Steering Group had met to finalise the work plan and discuss a range of current and outstanding issues. A summary of the meeting was at Appendix A to the report presented.

## Work Plan

A draft work plan for both the Health Scrutiny Committee and its Steering Group, including current Task Group reviews was presented and discussed.

# 1 September 2015

# Joint Working - fragmented commissioning amongst partners

The report explained the concerns about fragmented commissioning and delivery of services exist at both a national and local level. It provided members with:

- An overview of commissioning responsibilities for health and social care.
- An overview of the Governance arrangements in Lancashire.
- Examples of activity intended to help determine future commissioning priorities.

It was agreed that:

- i. Officers be invited back to the November meeting of the Committee once the funding situation was a little clearer to continue the discussion on what the priorities would be.
- ii. Healthier Lancashire be invited to deliver a Bite Size Briefing

# Report of the Health Scrutiny Committee Steering Group

It was reported that on 22 June the Steering Group had met to with the Care Quality Commission to discuss the process for inspections of Acute Trusts. A summary of the meeting was at Appendix A to the report presented.

On13 July the Steering Group had met with Lancashire Teaching Hospitals Trust regarding the review of their clinical services strategy and the current financial position following an inspection by Monitor. A summary of the meeting was at Appendix B to the report presented.

## Work Plan

A draft work plan for both the Health Scrutiny Committee and its Steering Group, including current Task Group reviews was presented.

There was a discussion on potential different ways to address scrutiny topics and it was agreed that a range of options for how health scrutiny could be delivered in the future be produced for consideration by the Committee.