

Notes
Health Scrutiny Steering Group
Monday 16 March 2015
B18b, 14.00

Present:

- County Councillor Steven Holgate
- County Councillor Fabian Craig-Wilson
- County Councillor Yousuf Motala
- County Councillor Margaret Brindle

- Wendy Broadley, LCC, Principal Overview and Scrutiny Officer

Notes of last meeting

Clarification was sought for acronyms, "BCF" and "VFM". These were clarified to be the Better Care Fund and value for money.

The notes of the Steering Group meeting held on 23 February were agreed to be correct.

1. Lancashire Care Foundation Trust – inpatient facility update

The Officers who attended to deliver the update were:

- Sue Moore, Chief Operating Officer, Lancashire NHS Foundation Trust
- Debbie Nixon, Chief Operating Officer, Blackburn with Darwen CCG

Key points from the update and discussion were as follows:-

- It was reported that The Harbour, Blackpool, is now operational. It is the largest inpatient mental health unit in Lancashire with 154 beds and is specifically utilised for the most unwell patients.
- The transition of patients commenced on 10th March 2015. This was 4 weeks later than initially decided, however the opportunity to install specialised detectors arisen and was taken.
- The Blackpool and Chorley patients have been relocated from their units to the Harbour, and the opportunity has been taken to bring forward the relocation of Psychiatric Intensive Care Units (PICU), and a small number of patients from Ormskirk. In the near future advanced care from Ribblesdale and two wards at Lytham will also relocate.
- CC Craig-Wilson requested to be emailed about location of the units in Lytham.
- CC Holgate highlighted that a number of empty units will now be left behind and enquired as to whether there was a responsibility to reuse these, citing the Chorley site which offers opportunity in terms of non-elected care.
- It was explained that it is possible that the Trust will look to to depressurise the acute site in Preston by utilising Chorley.
- WB asked how many beds have been relocated from the Ormskirk unit.
- SM reported there were four PICU beds relocated. The total activity in the last year is less than 1 bed, with very few coming from the locality. With regard to the overall program, all CCG's have been given clear guidance that the bed base for PICU patients will be The Harbour.

Appendix A

- CC Craig-Wilson enquired about travel arrangements.
- Members were informed that there is a bus from Blackpool to directly outside the Harbour site. The bus companies have been contacted and have agreed to drop off on both sides of the carriageway. Preston bus/train station is considered to be the central hub for travelling to the premises.
- CC Brindle noted how poor travel is in East and stressed how dependant this area is on Yorkshire bus services.
- SM noted that the Trust have looked at a partnership with bus services but will be reimbursing fares for the time being. This will be reviewed once fully operational and if issues are raised, this arrangement could be reconsidered.
- CC Motala noted that in Preston City Centre, the Bus services provide for vulnerable people and it would be worth investigating further.
- CC Motala also noted how some patients are being kept overnight in cells and this is detrimental for their wellbeing in some cases.
- DN explained that the Trust is executing a lot of work with the Police and that every provider organisation had to sign a declaration of effective coordination to try and alleviate this issue.
- SM noted that at The Harbour there has been the creation of private sitting rooms, bathrooms and bedrooms. In the event that a service user is very ill, it is deemed better for them to wait in an appropriate location which will aid the patient's well-being. A street triage approach will bring together Police, Ambulance service and mental health specialists, who will collectively report to an incident and decide on the best course of action at the actual scene itself. It was noted that taking mental health patients to cells makes them feel as if they have done something wrong. Also, patients can be waiting for hours for a clinician in A&E and it is more beneficial for them to travel directly to the location of clinicians instead.
- It explained that the Birmingham model has been studied as it has been very productive, with a 50% reduction in B6 admissions. This was deemed a good model to investigate as the City has similar socio-economic circumstances to Lancashire.
- CC Craig Wilson noted that this is welcomed with consideration of the suicides in cells which can happen when patients are placed in cells. The mental health of young people was highlighted as a big issue. It was emphasised that the placement of young people into adult wards can be uncomfortable, with young patients feeling out of place. Therefore, the developments with patient care was welcomed.
- SM/DN made note of the valuable discussion on transport, explaining that there is no point having a great building (the Harbour) if nobody can get there.
- WB expressed the need to disseminate information around travelling to The Harbour.
- SM agreed and explained that there is a "Welcome to the Harbour" pack and webpage.

- WB highlighted that it has been a long process getting to the point the Trust is at with the Harbour and Members have had involvement in this. Therefore, it was suggested that Members could visit the Harbour, but would want to see it as a fully functioning facility.
- SM agreed this would be a good idea and could accommodate around 20 people across the range of wards. There have been many changes including, the reorganisation of shift patterns and a change of uniform, as previously it was difficult to decipher who were staff and who were service users. Due to the abovementioned, SM explained that the sense of wellbeing in the building is profound.

- SM voiced that there will be particular focus upon the physical health needs of mental health patients. SM noted that the evidence is clear, if a patient has a mental health condition and physical problems, life expectancy is 15-20 years lower.
- WB & SM agreed to liaise about a Member visit to The Harbour over the next couple of months. The main "official" opening of The Harbour was informed to be in September.

2. Work planning workshop

A work planning work shop was to be held after the April Committee (14th)

- WB queried whether the Steering Group's approach over the last 12 months could be refreshed. WB noted that Steering Group have been dealing with what hasn't been picked up at Health Scrutiny Committee. WB suggested an approach akin to a task group.
- CC Holgate suggested that the functionality of Trusts should be scrutinised. Reference was made to the happenings at Morecambe Bay and therefore, CC Holgate put forward a generic look at non-execs.
- WB suggested scrutinising CQC via monitoring what they are doing and their inspection regime. WB explained that CQC make the report, set out requirements and inspectors then review if these have been implemented.
- CC Motala stressed the importance of ensuring this is carried out properly as it could paint LCC in a bad light if the process was not adhered to correctly.
- WB suggested steering discussion for Committee around three aims – the NHS System, Social Care and Health Inequalities. WB asked what could be done to scrutinise these.
- CC Holgate stated that Steering Group and Health Scrutiny Committee need to ensure the abovementioned are performing their duties properly. It was expressed that CQC exhaust a large amount of resources going into organisations and setting action plans and inspecting year on year, however improvements are not sufficient. The need for absolute cultural change was stressed.
- It was noted that time has been expended with visitor updates when a briefing note would suffice.
- CC Craig-Wilson explained that it is valueless when organisations deliver a glowing self-report.
- Steering Group also raised that the impact of the restructure upon services needs to be considered.
- WB explained she will compile a draft outline agenda and run it by the Steering Group.

3. Dates/topics of future meetings

- 13 April – Healthier Lancashire programme/NWAS re ambulance response times
- 11 May – tbc
- 1 June - tbc