HEALTH OVERVIEW AND SCRUTINY PANEL 30 JUNE 2016 7.30 - 9.05 PM



Present:

Councillors Phillips (Chairman), Tullett (Vice-Chairman), G Birch, Finnie, Hill, Mrs Mattick, Mrs Temperton and Thompson

Co-opted Member:

Dr David Norman, Co-opted Representative

Also Present:

Richard Beaumont, Head of Overview & Scrutiny Dr Lisa McNally, Consultant in Public Health Gill Vickers, Director of Adult Social Care, Health & Housing Councillor Ian Leake, Chairman of the Overview and Scrutiny Commission Andrew Morris OBE, Chief Executive, Frimley Park NHS Foundation Trust Councillor Sarah Peacey

Apologies for absence were received from:

Councillor Virgo

56. Election of Chairman

RESOLVED that Councillor Ms Phillips be elected Chairman of the Health Overview and Scrutiny Panel for the 2016/17 Municipal Year.

Councillor Phillips in the Chair

57. Appointment of Vice-Chairman

RESOLVED that Councillor Tullett be elected Vice-Chairman of the Health Overview and Scrutiny Panel for the 2016/17 Municipal Year.

58. Minutes and Matters Arising

RESOLVED that the minutes of the meeting of the Panel held on 14 April 2016 be approved as a correct record and signed by the Chairman, subject to a correction of the spelling of 'collaborative' in the ninth paragraph of minute 48 [Bracknell Urgent Care Centre].

59. Declarations of Interest and Party Whip

There were no declarations of interest nor any indications that members would be participating while under the party whip.

60. Urgent Items of Business

There were no items of urgent business.

61. **Public Participation**

There were no submissions under the Council's Public Participation Scheme for Overview and Scrutiny.

62. Heatherwood Hospital Redevelopment

Sir Andrew Morris OBE, Chief Executive of Frimley Health NHS Foundation Trust, attended the meeting and briefed the Panel on plans to redevelop Heatherwood Hospital. He explained that the existing buildings at Heatherwood were no longer fit for purpose and it would cost some £23m to restore and maintain them. Instead it was proposed to provide a brand new planned care centre offering a better environment for patients and staff, and a clear future role for Heatherwood Hospital.

The proposal was to develop new facilities providing six operating theatres offering general surgery and most specialties but mainly orthopaedics. There would be 40 inpatient beds (and an eight bed private patient space to generate income) together with 22 day case spaces and endoscopy facilities. This would ease pressure on the extremely busy sites at Wexham and Frimley. It was intended to site the new facilities on part of the woodland behind the existing buildings (subject to planning permission) with the majority of those existing buildings to provide a site for redevelopment with housing, which would generate a substantial capital receipt to part fund the development. The Trust was in detailed discussions with the Royal Borough of Windsor and Maidenhead about the proposals since they involved development in the Green Belt.

The proposals also included the redevelopment of the existing 'Block 40' of the hospital to provide new administrative offices for the Trust, together with dedicated space for education and training. In addition there was potential for provision of a primary care hub which will offer GP and other specialist care delivered outside of a hospital setting. The total estimated cost of the redevelopment was £77m and relied upon around £35m being raised from the sale of land for housing, the remainder being a loan from the Department of Health.

Arising from questions posed by members, Sir Andrew indicated:

- The generally positive feedback to the proposals following a consultation open day at Ascot Racecourse.
- The support from local GPs to the provision of a GP hub at Heatherwood and the success of GP hubs operating in the Surrey Heath area, particularly in relation to reducing emergency admissions to hospital.
- Given a favourable outcome to the dialogue with Windsor and Maidenhead, it was hoped to submit a planning application for the proposals in the autumn 2016, a start on site in June 2017 and completion in the summer of 2019.
- If the proposals were not approved, it was unlikely that it would be possible to retain any facilities for surgery at Heatherwood and probably only outpatient services would continue. That would also require an expansion of surgical facilities at the Frimley and Wexham hospitals.

The Panel thanked Sir Andrew for his presentation and wished him every success in bringing the proposals to fruition.

63. Berkshire Healthcare Trust

The Panel received the outcome of the recent inspection of the Berkshire Healthcare NHS Foundation Trust by the Care Quality Commission (CQC). The overall assessment rating for the Trust was 'Good' and a summary of the findings from the CQC report was attached to the report. It was understood the Inspection had been thorough and included visits to many of the Trust sites and facilities across Berkshire. A member and officer had attended the 'Quality Summit' held by the CQC following the inspection.

The Panel was pleased to note the report.

64. The Patient's Experience

The Panel considered a report presenting current information from the NHS Choices website, for the NHS Foundation Trusts providing most secondary and acute NHS services to Bracknell Forest residents. The information included details of NHS Choices users ratings, Care Quality Commission (CQC) inspection ratings, recommendations by staff (for a friend or relative), infection control and cleanliness data, and a mortality rate indicator.

The Panel was informed that since the information was compiled, the CQC had issued an overall 'Good' rating for Wexham Park hospital. The Panel noted the report.

65. Quality Accounts 2015/16

The Panel considered the comments on the Quality Accounts sent by the Panel to the Royal Berkshire NHS Foundation Trust, Frimley Health NHS Foundation Trust, Berkshire Healthcare NHS Foundation Trust and the South Central Ambulance NHS Foundation Trust.

Department of Health Guidance stated that the Quality Accounts submitted by NHS providers, being a measure of the quality of the service delivered to local communities and stakeholders, should contain observations of Overview and Scrutiny Committees. Officer drafts of the comments had been circulated to Panel Members for endorsement before submission to the respective Trusts for consideration.

The Royal Berkshire NHS Foundation Trust and the Berkshire Healthcare NHS Foundation Trust had responded to the Panel answering questions and in a number of cases adding additional information to the Quality Account as requested by the Panel. Their responses were appended to the report.

The Panel noted the report and appendices and thanked the Head of Overview and Scrutiny for his work in drafting the comments for the Panel.

66. Departmental Performance

The Panel considered the Quarterly Service Report of the Director of Adult Social Care, Health & Housing covering the period January to March 2016 in relation to those matters concerning health. The Panel welcomed the new Director, Gill Vickers, to the meeting, acknowledging that the report had been prepared before she had taken up her post.

With reference to the Department performance indicators:

- Three indicators for 'Delayed transfers of care' were showing red and performance was declining. Further work was being done to pinpoint the reasons for delay eg. failure to put in place a domiciliary care package promptly or delay in social worker assessment.
- Further investigation was also being undertaken into indicator L180 'Time taken for ForestCare customers to receive the service from enquiry to installation' where although this was showing green, performance had declined.

Arising from questions and discussion the following points were noted:

- Additional information on NHS Health Checks showed good performance, generally the best in Berkshire and above the national average. The smoking quit success rate was 78%, well above the 60% target.
- Although the numbers of older people needing support in residential and nursing care who were unable to continue to fund their support was increasing, every assistance was being given to self-funders to make their money go further.
- The new community team structure for Older People and Long Term Conditions was continuing to settle in, which it was hoped would contribute to bringing down the above average sickness rate. Staff would continue to be monitored to seek ensure they were correctly placed to manage their work successfully and progress would be reported at a future meeting.
- The changes at ForestCare were aimed at giving the service the flexibility it needed to expand to provide emergency personal care to customers where this was required. This was being introduced with appropriate recruitment and training measures to ensure staff had the necessary skills to deliver the enhanced service.
- The Year of Self-Care had been a great success with very good rates of participation. The benefits of a locally chosen programme had been confirmed with very good feedback and the pleasing involvement of many local companies. Success rates were being monitored through the existing range of performance indicators.
- Arising from concerns about the level of domiciliary care available for the community, steps had been taken to boost recruitment and ways of establishing more of a career path for carers were being looked into.

The Panel noted the report.

67. Executive Key and Non-Key Decisions

The Panel received and noted the schedule of Executive Key and Non-Key Decisions relating to health.

68. Overview and Scrutiny Bi-Annual Progress Report

The Panel received and noted the Overview and Scrutiny progress report setting out the activity and developments over the period December 2015 to May 2016.

69. Working Group on GP Capacity

The Panel received a progress report on the work of the Working Group reviewing General Practitioner (GP) capacity. The Working Group aimed to hold two more meetings and complete its work in order issue a draft report to the meeting of the Panel in September. The Chairman said that if there was to be any slippage on that date, it would need to be reviewed by the Panel.

70. Member Feedback

Panel Members provided a number of oral updates on their specialist roles.

Councillor Hill – NHS England had been considering issues for international recruitment in the wake of the referendum result. There was uncertainty over future arrangements for EU residents coming to work in the UK and what effect the Transatlantic Trade and Investment Partnership (TTIP) between the US and the EU would now have.

Councillor G Birch – There were some particular concerns around the effect of the BREXIT vote on drugs in the NHS. Further information on this and on the Cancer Fund may be available by the time of the next meeting.

Councillors Thompson and Mrs Temperton – The Bracknell Health & Wellbeing Board had met on 29 June 2016 and consideration of the following items was noted:

- A presentation on the 'New Vision of Care' had been made illustrating the emphasis being placed on the importance of moving to a model of self-care. This relied on a collaborative approach to doing things differently and might be a useful presentation and discussion item for the Panel at a future meeting.
- The sustainability and transformation plan being formulated was an overarching plan for health and care services across a wide area including Bracknell Forest. These plans should not impede the introduction of any local projects or programmes coming forward in the meantime.
- The Emotional Health and Wellbeing Strategy was a very good policy promoting health in children and young people. This was coupled with a positive report on action and progress of CAMHS.
- A report entitled 'Families in a Strong Community' detailed work on providing a neighbourhood based programme of very early support and intervention for vulnerable families in Bracknell Forest.

Councillor Mrs Mattick – Berkshire Healthcare NHS Foundation Trust had recently held a staff awards ceremony which she had attended. A number of Board members were reaching the end of their term of office and new members would need to be appointed. Councillor Mrs Mattick had also attended the Dementia group at Frimley Park hospital.

Councillor Mrs Phillips – The Comprehensive Local Plan contained elements related to health on which comments were invited. Councillors Hill, Mrs Mattick and Mrs Temperton expressed an interest in assisting the Chairman to formulate comments on behalf of the Panel.

Councillor Mrs Phillips drew attention to the public consultation on a change to the out of hours service for GPs in Sandhurst. Some members of the Panel had met with the Practice Manager and, having reviewed the matter, were supportive of the proposed change. This would be communicated to the Clinical Commissioning Group.

CHAIRMAN

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