

SCRUTINY BOARD (HEALTH AND WELL-BEING AND ADULT SOCIAL CARE)

WEDNESDAY, 25TH JULY, 2012

PRESENT: Councillor J Illingworth in the Chair

Councillors P Truswell, G Hussain,
T Murray, C Fox, S Armitage, S Varley,
S Bentley and M Robinson

CO-OPTED MEMBERS Joy Fisher, Sally Morgan, Betty Smithson
and Emma Stewart

16 Chair's opening remarks

The Chair welcomed everyone to the meeting, particularly Joy Fisher, Sally Morgan and Betty Smithson as returning Co-opted Members from the previous municipal year and Emma Stewart, who was attending her first meeting as a Co-opted Member of the Board since 2010/11

17 Late Items

Whilst there were no formal late items, the Board was in receipt of the following supplementary information:

A questionnaire for the draft dementia strategy (minute 21 refers)

18 Declarations of Interest

As co-Chair of the Leeds Local Involvement Network (LINK) Steering Group, Joy Fisher declared a significant interest in the agenda item on Leeds LINK Annual Report for 2010-2011 (minute 23 refers)

No other declarations were made at this point in the meeting although a further declaration was made during the meeting (minute 23 refers)

19 Apologies for Absence and Notification of Substitutes

Apologies for absence were received from Councillor Walker and Councillor Bruce

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20 Minutes

The Chair reported that he had not had the opportunity to consider the draft version in detail and that they would be made available for approval at the September meeting

21 Living Well with Dementia in Leeds - draft local dementia strategy

The Board considered a report of the Director of Adult Social Care setting out the proposed steps to improve services and quality of life for people with dementia, their families and carers. Appended to the report was a copy of the joint Leeds City Council/NHS Leeds draft local strategy entitled 'Living Well with Dementia in Leeds' which had been launched for public consultation document with 30th September 2012 being the closing date for comments. A copy of the consultation questionnaire which accompanied the draft strategy was circulated at the meeting

Attending for this item were:

- Dennis Holmes (Deputy Director) – Leeds City Council, Adult Social Services
- Mick Ward (Head of Commissioning) – Leeds City Council, Adult Social Services
- Tim Sanders (Integrated Commissioning and Transformation Manager, Dementia) – NHS Leeds and Leeds City Council

Addressing the meeting, the Deputy Director outlined that the principal aim of the draft strategy was to make the City of Leeds more 'dementia friendly'. Noting that, at its previous meeting in June 2012, the Scrutiny Board had identified dementia as a specific work area it was highlighted that this provided an opportunity for the Scrutiny Board to comment on the draft strategy as part of the wider consultation process

It was highlighted that dementia had been identified as a national priority and while Leeds had a track record for being an early implementer of a number of initiatives in this area, the draft strategy should be regarded as Leeds' formal response to the national imperative

In response to Members' comments and questions, the following issues were discussed:

- Exploitation and abuse of dementia sufferers; the need for workers in all adult care settings to be aware of this; to know the reporting mechanisms if this was suspected and the role of the Adult Safeguarding Board in addressing these issues

- The importance of training especially for medical staff dealing with people with dementia who also had other, often unrelated, health issues that required treatment
- Links between dementia and suicide and the difficulty in forming conclusions on this, often as a result of coroners' verdicts
- The numbers of people with dementia as set out in the report; the basis of this information and the likelihood that the number of dementia sufferers from BME groups was higher than indicated
- The importance of early diagnosis of the condition but also ensuring people with symptoms similar to early onset dementia were not misdiagnosed. It was also noted that there was some evidence to suggest it might take up to 12 months for some sufferers to seek professional help
- The need to ensure connections were being made between those people with the condition and the support services that were available
- That whilst nationally dementia was a priority, no new funding was available so delivery against the strategy would need to be funded through existing resources. However the importance of efficiencies generated through service integration across the local Health and Social Care economy was highlighted
- The use of Admiral Nurses - a model of care but currently not in use across Leeds that provided support to the carer rather than the patient
- The need to ensure that at the point of diagnosis plans were put in place for the future, particularly around financial issues, i.e. power of attorney
- Younger people with dementia and the need to ensure if they required full-time care, this was in an age-related setting
- The role of GPs and that the three CCGs in Leeds had the issue of dementia identified within their target training programme
- That family support should be provided, possibly through the provision of family conferences
- Residential care; the need to ensure this was of high quality; the difficulties when couples were separated due to care needs and the potential role of extra care housing schemes
- Bereavement support for families and the role hospices could have in providing help and advice to Local Authorities and the NHS in this area

Whilst the Board welcomed the report, the draft strategy and the opportunity to formally respond, Members highlighted a desire to consider the draft action plan produced following analysis of all the consultation responses

RESOLVED -

- a) To note the publication of the draft dementia strategy and the period of public consultation ending 30th September 2012
- b) That the Principal Scrutiny Adviser draft and circulate to all Board Members a proposed formal consultation response on behalf of the

- Scrutiny Board (Health and Wellbeing and Adult Social Care), with a final draft to be submitted to the September 2012 meeting for approval
- c) That following analysis of all the consultation responses, a draft action plan be submitted to the Board for consideration at a future meeting

22 Combating Loneliness in Leeds

Following discussions at the previous meeting on potential areas of work for Scrutiny Board (Health and Wellbeing and Adult Social Care) for the 2012/2013 municipal year, Members considered a report of the Head of Scrutiny and Member Development providing further information on the subject of loneliness; its impact on current and future health and social care needs in older populations and its links to a range of chronic conditions

Appended to the report was a copy of the Local Government Association's document entitled 'Combating Loneliness – A guide for local authorities' – which formed part of the Campaign to End Loneliness, together with The Leeds Initiative publication entitled 'The Time of Our Lives – Ageing Well in Leeds – A Framework of Principles for Organisations that work with Older People in Leeds 2012-2016'. This included The Time of Our Lives Charter which had been signed up to by Councillor Wakefield, Leader of Leeds City Council and Linda Pollard, Chair of NHS Airedale, Bradford and Leeds PCT Cluster

Attending for this item to provide further information and respond to questions and comments from the Board were:

- Dennis Holmes (Deputy Director) – Leeds City Council, Adult Social Services
- Mick Ward (Head of Commissioning) – Leeds City Council, Adult Social Services

Addressing the meeting, the Head of Commissioning highlighted that through its work over a number of years, Leeds had contributed to the LGA report with some specific areas of good practice identified in the report

It was suggested that there may be some correlation between loneliness/social isolation and dementia. Reference was also made to some of the work Leeds was undertaking as part of the Age Friendly City Network

The following issues were discussed:

- The role of Neighbourhood Networks and the importance of not adopting a 'one size fits all' approach. The positive influence of these schemes in helping people's overall feeling of wellbeing. Difficulties associated with measuring these benefits were recognised, as was the need to identify tangible outcomes in order to convince other organisations, including health professionals, to (part) fund such

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community projects. It was highlighted that work on devising a methodology for measuring outcomes was being undertaken with the assistance of a Professor at the London School of Economics

- The need for data not to be target driven but to contain narrative to explain individual stories behind the statistical data
- Loneliness could not be seen just as an issue for older people and the need for different strategies for different groups
- The importance of having an age-friendly city and the work being progressed on this with other Core Cities
- The importance of community assets and infrastructure, e.g. bus services, libraries, day centres, lunch clubs etc in helping to combat loneliness, balanced with difficult financial decisions local authorities were having to take in the current economic climate
- The development of Neighbourhood Plans as part of the Localism Agenda and the opportunity for Adult Social Care representatives to be involved in shaping these with regard to older people, particularly in respect of the housing strategy
- The role of Area Teams in encouraging and supporting new initiatives within localities and the concept of volunteering both by older people who have retired and wish to be of service and younger people keen to develop new skills and obtain work experience

The Board expressed a wish to carry out further work on this subject and hear from some Third Sector organisations and/or individuals involved in delivering community projects that promote 'wellbeing' and may help combat loneliness across the City

RESOLVED –

- a) To note the report and discussions
- b) That a further report be presented to the September meeting which
 - summarises the issues raised by Members
 - provides further information on the Neighbourhood Networks including the services/offer available and the gaps in provision and
 - identifies potential contributors/witnesses to provide evidence as part of a Scrutiny Inquiry

Following this item, Councillor Armitage and Councillor Robinson left the meeting)

23 Leeds Local Involvement Network - Annual Report (2011/12)

The Board considered the Leeds Local Involvement Network (Leeds LINK) Annual Report for 2010-2011

In accordance with paragraphs 19-20 of the Members Code of Conduct, Councillor Truswell declared that he was a member of the LINK Steering Group as he felt it was in the public interest to do so

Attending for this item to outline the report, provide further information and respond to questions and comments from the Board were:

- Arthur Giles – Co-Chair of Steering Group, Leeds LINK
- Stuart Morrison – Community Development Officer – Leeds LINK

The Chair welcome the LINK representatives attending and invited them to introduce the report which provided details on the structure and membership of the organisation and outlined the main areas of work that had been carried out during 2011/12

Arthur Giles outlined that it had been a busy 12-month period for the LINK, both in terms of the work it had done locally and its involvement in planning for the future and the establishment of local Healthwatch, which would form the new patient and public engagement body as part of the wider NHS reforms detailed in the Health and Social Care Act 2012. Mr Giles also took the opportunity to thank all of the Leeds LINK's volunteers and staff for their hard work, dedication and contributions throughout the year

In brief summary, the key areas of discussion were:

- The under-representation of some specific groups within Leeds LINK, in particular:
 - working aged adults
 - people from BME communities
 - younger people
- The use of social media to connect and engage with people in particular younger people
- Difficulties associated with making the subject of health and wellbeing interesting
- Team building exercises through major employers and whether Leeds LINK could consider this approach when trying to attract and engage working-aged adults in the work of the LINK
- Financial details presented in the annual report, including clarification about the level of discretionary budget and the relationship with Shaw Trust (the host organisation). It was suggested that the financial details provided could benefit from a brief commentary
- The move to Healthwatch in April 2013 and the likely transitional arrangements

RESOLVED - To note the report and the comments made

24 Review of Children's Congenital Cardiac Services in England: Update on the work of the Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber)

The Board considered a report of the Head of Scrutiny and Member Development on the review of Children's Congenital Cardiac Services in England, following the announcement of the Joint Committee of Primary Care Trusts' (JCPCT) decision on the future service model, which was for Liverpool

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and Newcastle to be the children's heart surgical units for the North of England

Appended to the report was a copy of the report considered by the Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber) at its meeting held on 24th July 2012, which included a summary of that Committee's previous recommendations; details of the assessment panel scores of the 11 hospitals involved in the review and the Children's Heart Surgery Fund's response to the decision made in respect of services at Leeds General Infirmary

The Chair updated the Board and stated that the unanimous decision of the Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber) had been to refer the decision of the JCPCT to close the Children's Heart Surgery Unit in Leeds to the Secretary of State for Health and that work would commence on the collation of information to support that Committee's case

The Principal Scrutiny Adviser informed Members that the Scrutiny Board (Health and Wellbeing and Adult Social Care) retained the power to make a similar referral to the Secretary of State

The Board discussed this and was of the view that such were the implications of the JCPCT's decision on the LGI and patient care in Leeds, that it was appropriate to refer the decision to the Secretary of State

RESOLVED - That the decision taken by the JCPCT to close the Children's Heart Surgery Unit in Leeds be referred to the Secretary of State by Scrutiny Board (Health and Wellbeing and Adult Social Care) on the basis of the impact of the proposals being deemed as not in the interests of local health services

25 Work Schedule

Members considered a report of the Head of Scrutiny and Member Development on the Board's work schedule for the year. Appended to the report was a copy of the Executive Board minutes from 20th June 2012; the Council's Forward Plan of Key Decisions from 1st August 2012 – 30th November 2012 and a Department of Health publication entitled 'Local Authority Health Scrutiny – Proposals for consultation' which asked for views on the Government's intentions to strengthen and streamline the regulations on local authority health scrutiny following amendments to legislation encompassed within the Health and Social Care Act 2012

With reference to the previous Board's Scrutiny Inquiry into reducing smoking in Leeds, Members received in the pre-meeting, a draft of the Director of Public Health's response to the Board's recommendations. Members were informed that subject to receiving further comments from West Yorkshire Trading Standards, it was hoped to submit a further report to the September Board meeting

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The Principal Scrutiny Adviser drew the Board's attention to the Department of Health's proposals on how health scrutiny would operate in the future. A one-off ad-hoc Working Party was proposed to look at this in detail and submit a response to the consultation which ended before the next scheduled Board meeting, with a report being brought back to the September meeting for formal approval

Ahead of the Board meeting scheduled for September 2012, the Chair outlined his intention to progress work around the Local Development Framework and the importance of this reflecting and taking into account the Council's pending Public Health duties as part of the legislative changes detailed in the Health and Social Care Act 2012. The Chair outlined that it was intended to bring forward a report for the Board's consideration to a future meeting

RESOLVED -

- a) To note the Executive Board minutes and current Forward Plan
- b) That a Working Party be established to consider and prepare a response to the consultation on local authority health scrutiny regulations and that a report on this be submitted to the September 2012 meeting
- c) To note the Chair's proposed activity around the Local Development Framework and the Council's Pending Health duties under the Health and Social Care Act 2012
- d) That an outline work schedule be submitted to the September 2012 meeting, which reflected the discussions and decisions taken at the meetings in June 2012 and July 2012

26 Date and Time of the Next Meeting

Wednesday 26th September 2012 at 10.00am with a pre-meeting for all Board Members at 9.30am