

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

**FRIDAY, 28TH OCTOBER, 2011**

**PRESENT:** Councillor L Mulherin in the Chair

Councillors R Charlwood, C Fox,  
S Armitage, J Chapman, A Hussain,  
W Hyde, J Illingworth and S Varley

Co-opted Members – J Fisher, S Morgan, B  
Smithson and P Truswell

### **24 Late Items**

Although there were no formal late items, the Board was in receipt of the following additional information, circulated by the Principal Scrutiny Adviser:

An e-mail from an outreach officer of RP Fighting Blindness in support of the request for scrutiny into the arrangements for meeting the needs of blind and visually impaired people in Leeds (minute 28 refers)

### **25 Declarations of Interest**

The following Members declared personal/prejudicial interests for the purposes of Section 81(3) of the Local Government Act and paragraphs 8-12 of the Members Code of Conduct:

Councillor Armitage declared a personal interest as the Chair of Swarcliffe Good Neighbours on issues relating to the care of elderly people

Councillor Fox declared a personal interest as a member of Otley Action for Older People Management Committee on issues relating to the care of elderly people

Joy Fisher declared a personal interest through knowing the nominated speaker seeking a request for scrutiny and many of those present for this item, in her role as a member of the Alliance of Services Experts (minute 28 refers)

### **26 Apologies for Absence and Notification of Substitutes**

Apologies for absence were received from Councillor Bruce and Councillor Kirkland

### **27 Minutes**

minutes approved at the meeting  
held on Friday, 25th November, 2011

**RESOLVED** - That the minutes of the Scrutiny Board (Health and Well-being and Adult Social Care) meeting held on 21<sup>st</sup> September be approved

**28 Request for Scrutiny- Arrangements for meeting the needs of Blind and Visually Impaired people in Leeds**

The Board considered a report of the Head of Scrutiny and Member Development setting out a request for scrutiny relating to the current arrangements for meeting the needs of Blind and Visually Impaired people in Leeds. A copy of the request made by Mr Victor Jackson, was appended to the report

Members noted that a Deputation to Full Council on this matter was scheduled to be presented at its meeting on 16<sup>th</sup> November

The Board heard from Mary Naylor MBE who had been nominated to speak on this matter

Members were informed that following the changes to the provision of services for blind, visually impaired and dual sensory loss people in Leeds, there were major concerns by service users about the loss of venues for the range of groups which had been formed which as well as providing the opportunity for socialisation also provided help, motivation and continued support for people living with these conditions

Concerns were also highlighted in respect of:

- the provision at Fairfax House; that as a drop-in centre this was adequate but not as a day centre due to its location; its design – i.e. an office building - and its lack of basic facilities suitable for service users
- the monitoring of complaints within Adult Social Care in view of the concerns about the provision which had been raised, although it had been stated by Senior Officers within the Department that no complaints had been received in respect of this provision
- the impact of the changes on carers, in that the previously guaranteed respite provided by the regular group meetings at Shire View, had ceased
- the need to ensure provision for the future
- that Shire View which had been a centre planned for and by people with visual impairments, remained empty
- that the current unstable situation was causing fear and concern and that without the support networks provided by service users and volunteers, those people newly diagnosed with visual impairment would not have the same opportunities when dealing with their new situation which could lead to isolation and loss of confidence

As deputations to Council were usually referred to Executive Board for consideration, the Scrutiny Board considered that a working group be established as a logical way forward, comprising members of the Scrutiny Board which would meet before the Executive Board meeting as this would

enable the working group's recommendations to be put directly to the Executive Board

**RESOLVED –**

- i) To note the report and to thank Mary Naylor for her presentation
- ii) To note that a deputation on the issues raised would be presented to Council at its meeting on 16<sup>th</sup> November 2011
- iii) That a working group of the Scrutiny Board (Health and Well-being and Adult Social Care) be established to consider the issues raised and that a meeting be arranged prior to the Executive Board meeting to enable the working group's findings to be submitted to the Executive Board

## **29 NHS Foundation Trust Proposals**

The Board considered a report of the Head of Scrutiny and Member Development seeking its views on the plans of local NHS Trusts to become NHS Foundation Trusts. Copies of the consultation documents on the proposals in relation to Leeds Community Healthcare NHS Trust, The Leeds Teaching Hospitals NHS Trust and Yorkshire Ambulance Service NHS Trust were appended to the report

The following people attended for this item:

Dennis Holmes – Deputy Director Strategic Commissioning – Adult Social Care

Karl Milner – Director of External Affairs for Leeds Teaching Hospitals

Brian Steven – Deputy Chief Executive of Leeds Teaching Hospitals Trust

Emma Fraser – Head of Performance, Contracting and Business Planning at Leeds Community Healthcare NHS Trust

Rob Webster – Chief Executive Leeds Community Healthcare NHS Trust

The Chair stated that a representative of West Yorkshire Ambulance Service was expected, following their request to attend

The Board was informed of the work being undertaken by the local NHS Trusts to become Foundation Trusts which whilst retaining the primary purpose of providing health care free at the point of delivery, would provide greater local involvement and accountability; be free from central government control; be self-governing and have new financial freedoms to raise capital which could then be reinvested into the Trust to provide new services

Members were informed that the work towards Foundation Trusts had led to an increased focus on what was currently happening within the Trusts and that changes and improvements would come with Foundation Trust status

In summary the key areas of discussion were:

- the pros and cons of Foundation Trust status with details being provided of the increased monitoring and checks and balances which would be needed arising out of the situation at Mid

Staffordshire NHS Foundation Trust together with the possibility of creating the best possible health service for the city; creating seamless, professional integrated services and being an employer of choice

- the importance of the governance arrangements of the new Trusts
- staff training and career development across the whole structure, not solely medical staff and the need for proper staffing levels
- the need for social inclusion in terms of recruitment, with concerns that currently some groups and areas of Leeds were not represented in certain professions amongst hospital staff
- public involvement in the membership of the Foundation Trusts and the need to broaden this beyond the LS postcode to take into account areas of Leeds with Bradford and Wakefield postcodes
- that for governance arrangements, Electoral Wards might be more appropriate to align with rather than parliamentary constituencies due to the proposed parliamentary boundary changes and the fact that one constituency includes part of Leeds and part of another area
- how NHS and private care would be managed; how the two streams of patient care would be segregated and how pressure on patients to opt for private care would be avoided
- the financial pressures on Foundation Trusts
- quality, whether this would improve through achieving Foundation Trust status, if so, the reasons for this and how this would be measured
- the structures which would be in place for engaging and involving the public, beyond Governing Bodies
- scrutiny arrangements, that this important element would remain, with it being confirmed that this Board would retain its current role and that further scrutiny of the Foundation Trusts would also come from the Governors

#### **RESOLVED –**

- i) To note the report and the information presented and that the following comments be included in relation to the proposals:
- the need to include all the postcodes which cover the Leeds area in terms of the membership of an NHS Foundation Trust
  - that local Council Ward boundaries should be used when seeking members to join the Trust
  - the importance of future proofing, particularly the taking on of the new Health and Well-being Boards
  - the importance of integration of Health and Council services in terms of governance arrangements
  - the need for socially inclusive recruitment to reflect the diversity of the population of Leeds in all of its areas
  - the need for quality to be assured

- the need for clear definition in relation to NHS patients and private patients, including the governance arrangements
- ii) That a further report setting out the Board's draft consultation response to the proposals be submitted to the next meeting for approval

### 30 Health Inequalities

Further to minute 11 of the Board meeting held on 22<sup>nd</sup> July 2011, where Health Inequalities was identified as an area of review within the Board's work schedule, to consider a report of the Head of Scrutiny and Member Development outlining proposals for an inquiry into this subject. Appended to the report for information was a copy of the inquiry undertaken in 2009/10 by the former Scrutiny Board (Health) entitled – *Promoting Good Public Health: The Role of the Council and its Partners*, together with the latest recommendation tracking report, last updated in April 2011

Dennis Holmes was joined by Rob Kenyon, Head of Partnerships – Adult Social Services for this item

It was noted that some of the actions arising from recommendations of the previous inquiry had not been completed, with the Chair requesting a further update on these outstanding issues at the November Board meeting

The following comments were made:

- that key areas, such as the availability of alcohol – regulated by licensing regulations and public open space – regulated by planning policies – needed to be considered, with concerns being raised that centrally there were no links between all of these issues which related to people's health
- the previous scrutiny inquiry, with the Chair referring to work being done by Trading Standards around tobacco which would be included in the Board's inquiry on reducing smoking. Members were informed that Trading Standards had also expressed an interest in being involved in the Health Inequalities inquiry
- the importance of the JSNA in providing information from across the city to inform the debate on this matter and the difference in life expectancy rates depending upon where people lived in Leeds was stated
- that most of the work done by the previous Board on health inequalities was based on the Marmot report, with an alternative publication 'The Spirit Level: Why Equality is Better for Everyone' being suggested, as this presented a different view which could be of use

Members were advised by Councillor Chapman, Chair of Children's Services Scrutiny Board, that her Board would like to continue receiving feedback on the issues around teenage pregnancy and that she would be happy to relay information to both Boards which might be of use in their work

#### **RESOLVED -**

- i) To note the report and the information provided
- ii) That an updated recommendation tracking report be submitted to the next meeting which focussed on those recommendations

made in the previous Board's inquiry, which as at April 2011, remained outstanding

- iii) That further information be provided on 'The Spirit Level'
- iv) To note the request for wider involvement of Partners and Council Departments in the Board's inquiry and that a wider list of possible participants be drawn up for the Board's approval

### **31 Review of Children's Congenital Cardiac Services in England : Inquiry report**

The Board received a report of the Head of Scrutiny and Member Development summarising the main issues identified by the Joint Health Overview and Scrutiny Committee (HOSC) which comprised the 15 top-tier local authorities across Yorkshire and the Humber and was formed to consider and respond to the Review of Children's Congenital Cardiac Services in England and the associated reconfiguration proposals. A summary of the Committee's recommendations to the Joint Committee of Primary Care Trusts – the decision-making body - were included in the report, for information

Copies of the full HOSC report were available at the meeting

The Chair informed the Board of the work undertaken by HOSC and the efforts made to question fully the rationale and evidence behind the proposals, whilst at the same time making a clear, strong and evidenced case for the retention of the service provided at the LGL; this being one of an eight-centred model proposed by HOSC which also proposed the retention of the other northern centre, in Newcastle

In terms of the number of procedures required to be carried out at the Leeds Centre as part of the proposals, Members were informed that the LGL was confident it could deliver that number and with only three surgeons currently, were nearly at that figure. Whilst work to recruit a fourth surgeon was underway, the uncertainty around the Leeds Centre was having an impact on this recruitment exercise

The Chair informed the Board that she would be speaking in Westminster on 9<sup>th</sup> November 2011 to present the Yorkshire and Humber Regional Scrutiny Report and its findings to the Health Minister at a meeting organised by the Leeds Children's Heart Surgery Fund which all of the region's MPs and Peers had also been invited to attend

The Board congratulated the HOSC for an excellent Inquiry and Karl Milner, Director of External Affairs for Leeds Teaching Hospitals thanked Leeds City Council for the lead it had taken on this important issue and stated that in terms of scrutinising the options provided by the NHS Medical Director, no other region had done as much or provided such a comprehensive and well presented document

In relation to the parallel consultation on Adult Congenital Cardiac Services, the Chair informed the Board that the view of HOSC was that consultation should have been undertaken jointly; that there was a need for consistency of service for children with congenital heart problems who then grew into adults with congenital heart problems; that it was the same

surgeons treating children and adults and that any decision should not be taken in isolation

It was noted that a decision on the proposals was expected on 14<sup>th</sup> December 2011, although it was accepted that this date could change

**RESOLVED** - To note the main issues and recommendations of the Joint Health Overview and Scrutiny Committee (Yorkshire and the Humber)

## **32 Crisis Centre - Proposed Terms of Reference**

Further to minute 68 of the Scrutiny Board (Adult Social Care) meeting held on 16<sup>th</sup> February 2011 where the Board agreed to review the exit strategy for the Crisis Centre following its decommission, Members considered a report of the Head of Scrutiny and Member Development setting out details of the proposed inquiry into this matter. Appended to the report were the draft terms of reference agreed by Scrutiny Board (Adult Social Care) at its meeting on 13<sup>th</sup> April 2011 (minute 95 refers)

Dennis Holmes, who was in attendance for this item explained that the draft terms of reference had been drawn up at a specific point in time, i.e. April 2011 and that as the Centre had closed in July 2011, some of them might not be relevant, whilst other matters not referred to in the terms of reference might need consideration

Members discussed the amount of data which would be available, with a suggestion that after the initial 2-3 months of data being looked at, that data for 6 months and then a year could be considered

The Board considered how to proceed and it was suggested that a monitoring report on the reprovion of services and the impact of change on service users since the closure of the Crisis Centre would be more appropriate rather than an inquiry

**RESOLVED** - That instead of an inquiry into the Crisis Centre, the Director of Adult Social Care be asked to submit a monitoring report to a future Board meeting setting out reprovion of services and the impact of change on service users since the closure of the Crisis Centre, supported by data providing information on the alternative services and pathways offered to those people who used, or would have used the Crisis Centre

## **33 Work Schedule**

The Head of Scrutiny and Member Development submitted a copy of the work programme for the 2011/12 Municipal Year which had been populated with six priority areas for scrutiny identified at the July meeting

### **RESOLVED –**

- i) To note the Work Schedule and to agree the amendments in terms of the establishment of a working group to consider the issues raised in relation to the provision of services for blind and visually impaired people in Leeds (minute 28 refers) and the change of approach to an examination of issues following the closure of the Crisis Centre (minute 32 refers)

- ii) To note the contents of the Executive Board minutes dated 7<sup>th</sup> September 2011 and 12<sup>th</sup> October 2011 and the Forward Plan covering the period 1<sup>st</sup> October 2011 – 31<sup>st</sup> January 2012

### **34 Date and Time of the Next Meeting**

Friday 25<sup>th</sup> November 2011 at 10.00am (Pre-meeting for all Members at 9.30am)