

MINUTES of the meeting of the Health and Well-being Overview and Scrutiny Committee held on 6 December 2011 at 7.00pm.

Present: Councillors Wendy Herd, Amanda Arnold (substituting for Amanda Prevost), Victoria Holloway

Mr. Mike Riley

Apologies: Councillors Martin Healy, Sue Gray, Tunde Ojetola and Amanda Prevost.

In attendance: R. Harris – Head of Commissioning, People Services
A. Nicholls – Carers' Strategy Officer
J. Forbes-Burford – Project Director- Health Transition
B. Johnson – Interim Manager South West Essex Community Services
A. Pike – Chief Executive of the PCT
M Boulter – Principal Democratic Services Officer

21. MINUTES

The Minutes of the Health and well-being Overview and Scrutiny meeting held on 3 November 2011 were approved as a correct record.

22. DECLARATION OF INTERESTS

Councillor Arnold declared a general personal interest by virtue that she is a governor at Basildon and Thurrock University Hospital.

23. NHS SOUTH ESSEX CLUSTER - QIPP

The PCT was on target to save £42 million at the end of this financial year in comparison with its target of £55.7 million. The budget challenges of 2010/11 had been overcome.

The PCT felt it had worked well with external organisations such as the Council and GP practices and issues relating to patient waiting times were due to be rectified by next week. 90% of all patients under the PCT's care were seen within the 18 week guideline. It was added that the savings and the processes introduced to make the savings were being delegated across other organisations such as Basildon Hospital and GPs so that it was sustainable.

Members welcomed the report and agreed that a one or two page summary would be helpful in understanding the document.

RESOLVED that the report be noted.

24. UPDATE FROM NORTH EAST LONDON FOUNDATION TRUST

The Committee was taken through the key improvements of the organisation, namely:

- Compliance with NICE guidance in relation to the prevention of Venous Thromboembolism (VTE).
- Tissue viability Assessment.
- Improving Discharge Planning
- Improving Nutritional Assessment (including the use of red trays to signify a patient requiring help and attention when being fed)
- Reduce Harm from omitted and delayed medicines (this related to non-serious medicines and included the introduction of tabards saying 'do not disturb' for nurses distributing medicines on wards)

In relation to these points it was highlighted that continual monitoring of incidents (serious and minor) were recorded, assessed and lessons learnt from them. It was the aim of next year's plan to ensure the improved practices had been embedded effectively and were being delivered.

Members were informed that the improvements were checked internally through a quality and safety board and all objectives for next year were drawn up in consultation with the Council's portfolio holder and other senior officers.

Following a question it was confirmed that social workers attached to patients through the hospital were not assigned a specific number of cases and that it was based on the needs of the patient as to how many other cases a social worker could reasonably take on. It was also confirmed in the course of the conversation that Thurrock Hospital catered for thirty patients as well as a number of day services and clinics.

RESOLVED that the report is noted.

25. THURROCK SAFEGUARDING ADULTS PARTNERSHIP BOARD UPDATE

It was highlighted that adult safeguarding was a key aim of the Council as well as the specific departments that dealt with vulnerable adults. The report demonstrated that there was good partnership working across the Council and other partner organisations in this field.

Referrals of potential safeguarding concerns had increased significantly from 13 in 2004/05 to 348 in 2010/11. An Internal audit

review of the service showed it was performing well. The Annual Report also highlighted the work of the independent chair of the board who brought a wide experience and commitment to the work of the Board..

Members queried whether ambulance service professionals were considered in the figures relating to referrals and it was stated that they were and a breakdown of their involvement could be obtained.

There was a discussion on how Members were able to feed into the process and make referrals. All agreed that member training should be mandatory on this issue and a key contact list should be provided to help Members contact the right officers. One Member thought a mystery shopper exercise to ascertain if housing staff were able to make effective referrals would be useful.

RESOLVED: That

- i) Mandatory training for adult safeguarding be provided to all Members as part of the induction training each year.**
- ii) The Safeguarding Board be thanked for all their efforts related to the report and their continued work.**

26. THURROCK CARERS STRATEGY

The Committee was informed that carers contributed a significant amount of unpaid service to their relatives and friends and based on national statistics, there was potentially 15,000 carers in Thurrock. The Council was only reaching 3.5% of this number and the strategy was partly aimed at increasing the number of carers receiving advice and support from the Council.

The key aims of the Strategy were to:

- Raise awareness of support for carers and increase the number of carers accessing support services.
- Work in partnership with carers.
- Collaborate more with the Council, PCT, 3rd Sector and other organisations.

The twelve week consultation would start in January 2012 with community events and specific stakeholder meetings planned.

The Committee felt a joint PR campaign amongst the partners would help residents understand the key aims of the strategy and help them understand that everybody was working together. Officers noted this proposal. It was added that leaflets could perhaps be used to pro-actively contact carers rather than waiting for them to find the council

services. Officers stated that the independent organisation that would run the carers' programme would work to proactively contact carers.

RESOLVED that the report is noted.

27. WORK PROGRAMME

RESOLVED That:

- i) Black Mould is provided as a briefing note outside January's meeting.**
- ii) Dementia Strategy is deferred to February's meeting.**
- iii) It be ascertained whether the Housing Offices Reconfiguration report should be brought forward to February's Committee considering the budget deadlines.**

The meeting finished at 8.36pm.

Approved as a true and correct record

CHAIRMAN

DATE

**Any queries regarding these Minutes, please contact
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or alternatively e-mail mboulter@thurrock.gov.uk**