

Minutes of the Meeting of the Health and Wellbeing Overview and Scrutiny Committee held on 13 January 2015 at 7.00 pm

Present: Councillors Charles Curtis (Chair), Charlie Key (Vice-Chair), Yash Gupta (MBE), Terry Brookes and Mark Coxshall

Ian Evans, Thurrock Coalition Representative

Apologies: Kim James and Christine Ludlow – HealthWatch Representatives

In attendance: D. Maynard, Head of Public Health
M. Payne, Health Needs Assessment Manager
L. Green, Thurrock CCG
M. Ansell, Acting Interim Accountable Officer, Thurrock CCG
B. Malinowska, Thurrock CCG
J. Joses, Thurrock CCG
R. Harris, Director of Adults, Health and Commissioning
M. Boulter, Democratic Services Officer

Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website.

24. Minutes

The Minutes of the Health and Well-being Overview and Scrutiny Committee, held on 16 December 2014, were approved as a correct record.

25. Declarations of Interests

No interests were declared.

26. Items raised by HealthWatch

No items were raised.

27. Tier 3 Weight Management Update

The Committee learnt that Tier 3 weight management was the responsibility of the CCG and that Tiers 1 and 2 were the responsibility of Public Health. Tier 4, which included bariatric surgery, was currently the responsibility of the NHS Specialist commissioning team, although discussions were being had on moving this responsibility over to the CCG.

The proposal was for all seven Essex CCGs to pool their procurement in order to obtain one provider for the Tier 3 service, which would deliver value

for money. It was confirmed that the Tier 3 service would remain a local service and would only affect around twenty people a year. At present an interim Tier 3 arrangement was in place until the provider had been appointed.

Members were assured that Public Health and the CCG were working together to ensure people progressed through the tiers in the proper manner.

Public Health representatives briefly took the Committee through the various projects and initiatives that were in place to encourage residents to stay active and highlighted these had been provided on the basis of consultation with GPs and residents.

RESOLVED: That:

- 1. The committee notes the pan Essex Procurement of Tier 3 Weight Management and the procurement timeline.**
- 2. The Committee notes the Tier 3 Management engagement taking place in Thurrock.**
- 3. The Committee agrees that Thurrock CCG proceed with the engagement and the procurement timeline as given in the report.**

28. Developments in Primary Care

The committee was made aware of the positive projects being undertaken, which included:

- The successful bidding for £250,000 to provide weekend GP walk-in services in four hubs across the borough. This would hopefully be realised by the end of January or early February.
- The planning of new health provision for Purfleet.
- More duties coming under the responsibility of the CCG.

The challenges for the future included:

- Changing the behaviour of 18-34 year olds away from using A&E over normal GP routes.
- Rejuvenating the GP workforce to encourage new GPs to set up practice in Thurrock.
- Improve some GP premises.
- Population growth.

A Member congratulated the CCG on their good work but wondered what real improvements would be made to service provision. Representatives replied that consultations had been fruitful and the messages coming back from those were for better access to local services and therefore the introduction of four weekend walk-in hubs was responding to the needs and desires of residents.

The Committee learnt that the Council was working with the CCG to tackle some of the challenges which included finding new premises for GPs and trying to reduce demand on GP surgeries through the work of the Local Area Co-ordinators seeking community solutions.

It was confirmed that the four hubs would be located in Grays, Tilbury, Corringham and South Ockendon.

In relation to younger people over using A&E all agreed that a campaign was needed to change attitudes. Evidence suggested that most were registered with a GP but the walk-in centre was simply more convenient. Some councillors pointed out that this usage may be due to younger people working full time or not being able to get a GP appointment easily.

RESOLVED: That:

- 1. The development of four locality hubs for extended primary care access in Thurrock be noted.**
- 2. The progression and implementation of the primary care strategy be noted.**
- 3. The development of the health care offer for Purfleet as a result of the regeneration programme be noted.**
- 4. The intention of Thurrock CCG in relation to primary care commissioning be noted.**

29. Future of Thurrock Walk in Centre

The Grays Walk-in Centre was opened in March 2010 and contained both a walk-in centre and a GP surgery. Both services were up for renewal soon and it was an opportunity for the CCG to re-examine walk-in provision across the borough. The GP list at the centre was the responsibility of the NHS but this part of the service would remain in the current premises regardless of provider.

A robust consultation had already taken place to understand who used the centre and what they felt it should be used for in the future. It was discovered that access to local services was important for residents and also that GPs wanted more equality across the borough in how walk-in services were provided. Four options were identified from this consultation for the future of the walk-in centre and Option 4, through discussion and debate with professional and patient bodies, was decided as the preferred option. Option 4 recommended to close the walk-in centre in its current location and provide a weekend service in four locations across the borough. The CCG was proposing to consult for eight weeks on this issue.

The Committee briefly discussed the difficulties of getting GP appointments and the value of having walk-in centres. The Committee also learnt that an equality impact assessment had been completed on the consultation and would be accessible to residents with various impairments.

RESOLVED: That the future consultation and its associated plan be supported and agreed.

30. Children's Joint Strategic Needs Assessment (JSNA) / Demography (JSNA)

Officers outlined how they proposed to change the way the Joint Strategic Needs Assessment (JSNA) would be managed in the future. With the responsibility for the JSNA now with the council the decision was made to review and streamline completions of JSNAs. The new process had been approved by the Health and Well-Being Board. In the future the JSNA would be produced in sections instead of producing a Thurrock wide large document. Examples of the sections included Demographics, Children's Services, Wider Determinates and Adult Services. A project timeline had been agreed for completing the various sections with final completion of all sections by end of March 2016. A JSNA steering group had been established with representatives from a range of stakeholders to manage the project. For each section a task and finish group would be established who would become the owners of the finished product. The task and finish group would agree how each section would be produced at the beginning to frame the section and agree with the various owners for completions and timelines, each section included service users views.

Further proposals had been agreed to make the JSNA process more digital so that people could interact with the content better and find sections easier. Also, instead of revising and reissuing each JSNA section every year, the documents would be updated every six months to refresh data and wording and give confidence to readers that the JSNA would be up to date. Every update would then be communicated to Members and key stakeholders digitally.

The Vice-chair stated he was confident with the revised process and felt it was an improvement to current practice.

RESOLVED: That

- 1. The committee support the new process and priorities set out in the report relating to the production of JSNAs.**
- 2. The Committee support the regular six monthly process to update JSNAs**

31. Budget 2015/16 - Proposed Fees and Charges

The Committee was informed that residential charges were set nationally and that all charges were now charged to their fullest extent permissible by law. It was clarified that certain charges, such as domiciliary care, was means tested. For example, only forty to fifty people actually paid the full cost for double handed care. The £1 million collected by the Council per year for domiciliary care covered only a third of the entire cost of that service.

The charges were increased over the previous few years and it was explained that central government had increased the upper limits of charges at various times for certain services, although provider services such as domiciliary care were not affected by central government setting rates. Thurrock's full charge for hourly domiciliary care was £13 although a national body recently recommended the national rate should be £15.50. Care providers were under pressure to freeze their charges in the current economic climate.

RESOLVED: That the fees and charges be noted and the comments above be forwarded to Budget setting council.

32. Work Programme

RESOLVED: That the work programme be noted.

The meeting finished at 8.41 pm

Approved as a true and correct record

CHAIR

DATE

**Any queries regarding these Minutes, please contact
Democratic Services at Direct.Democracy@thurrock.gov.uk**