At a meeting of Social Care Health and Housing Overview and Scrutiny Meeting held in The Council Chamber, Priory House, Chicksands 22 July 2019 from 10 am

Present: Cllr Mark Versallion (Chair)
Cllr David Bowater (Vice-Chair)

Members: Cllrs Phillip Crawley
Paul Duckett
Susan Goodchild
Cllrs Gladys Sanders
Mark Smith
Hayley Whittaker

Subs: Cllrs Gordon Perham

Members in Attendance: Cllrs Carole Hegley
Tracey Stock
Cllr Chatterley
Cllr Farrell
Cllrs Eugene Ghent
Cllr Spurr
Cllr Young
Cllr Dixon

Officers in Attendance: Stuart Mitchelmore
Assistant Director Adult Social Care/Deputy Director Community Health Services
Charlotte Gurney
Head of Housing Solutions
Tony Keaveney
Assistant Director Housing Services
Patricia Coker
Head of Partnerships and Performance
Paula Everitt
Scrutiny Policy Adviser

Others in Attendance
Michelle Bradley
Director of Bedfordshire and Luton Mental Health and Wellbeing Services - East London Foundation Trust (ELFT)
Paul Calaminus
Chief Operations Officer & Deputy CEO for Bedfordshire & Luton - ELFT
Dudley Mann
Medical Director - ELFT
Mike Thompson
Chief Operating Officer, Bedfordshire Clinical Commissioning Group (BCCG)
Nikki Barnes
Head of Infrastructure and Integration - BCCG
Sarah Frisby
Senior Communications and Engagement Officer BCCG

1. Apologies for absence
Cllr Ewan Wallace
2. Minutes

**RESOLVED** that the Minutes of the meeting of the Social Care, Health and Housing Overview and Scrutiny Committee held on 03 June 2019 be confirmed and signed by the Chairman as a correct record subject to the amendment below:-

Cllr Hayley Whitaker declared she had an honorary contract with the NHS England.

3. Members Interests

Cllr Philip Crawley declared he was an employee of Noah Enterprise - Homeless Outreach Service for item 15.

Cllr Mark Versallion declared his role as a non-executive Director of the Luton and Dunstable Hospital.

4. Chair’s announcements

The Chair, Vice-chair and Scrutiny Adviser had attended a Centre for Public Scrutiny event that raised the profile of important issues facing scrutiny and assurance in health and social care nationally.

Training event for Members had been welcomed. Training and development events would continue to be rolled out.

5. Petitions

None.

6. Questions, Statements and Deputations

None.

7. Call-in

None.

8. Requested Items

None.

9. Executive Members’ Update

The Executive Member for Adult Social Care and Housing Operations updated the Committee on service delivery and care that included:-

- That reassurances had been sought following a recent television programme that had revealed inadequate services for residents with learning disabilities.
- The Re-ablement Service, recently inspected by the CQC, had been assessed as ‘requires improvement’. The Director had immediately implemented changes to improve the service.
• An Executive Member Surgery initiative was planned and the Executive Member for Social Care and Housing Operations would be available to help Members deal with their case work load and to supplement Member training.

In response to a Member question, the Executive Member advised that the Older People’s Reference Group had been renamed the Older People’s Network and up and coming activities and virtual access to meetings would be shared.

The Executive Member for Health, Wellbeing and Communities gave an update of work being undertaken in her portfolio that included:-
• The completion of two projects funded by the Healthy Schools Grant (also referred to as the Sugar Tax fund).
• Future Member training that would include a development session on the NHS 10 year plan.

In response to a question, the Executive Member advised the projects funded by the Health Schools Grant supported healthy living rather than a reduction in sugar consumed in schools. Members were also advised that a Houghton Regis Health Inequalities plan was in development and would be shared with ward Members imminently.

The Executive Member for Assets and Housing Development updated the Committee on activities in his portfolio that included:-
• The development of eight housing sites across the district.
• The completion of the Housing Development Company was expected by the end of 2019 and would oversee housing projects going forward.
• The design of the Dunstable Health Hub was underway and Cllrs Hegley and Ghent would attend design meetings with officers.
• The Brook, Houghton Regis development would be considered by Development Management Committee in August.

In response to a question regarding the Ivel Valley Health Hub, the Head of Performance and Partnerships advised that significant progress had been made with NHS Property Services and terms for a lease agreement had been established. The outline business case was now in development with partner organisations.

10. East London NHS Foundation Trust (ELFT) Mental Health Services Update

The Committee considered a report and presentation from Director of Bedfordshire and Luton Mental Health and Wellbeing Services - East London Foundation Trust (ELFT) that provided an overview of the Mental Health services provided by ELFT. The presentation highlighted key areas of development that included:-
• Community Mental Health teams to support residents in their homes.
• Crisis support teams that included the ambition to provide urgent health assessments and home treatment 24 hours a day and 7 days a week.
• A Mental Health hub initiative jointly funded by the Police and Crime Commissioner and ELFT.
In light of the report and presentation, Members of the Committee discussed the following in summary:-

- In respect of new working arrangements with Primary Care, the Director was confident that plans and pathways through a ‘one front door’ approach would benefit residents in need of mental health services and help GPs with their workload in line with the blueprint outlined in the NHS 10 year plan.
- In response to a question that checks had been put in place to ensure the redesigned services had actually helped residents, the Director advised the outcome-based contract operated by ELFT measured service satisfaction levels and that services had been accessed in a timely and responsive manner.
- A Member had received concerns from Ash Ward in-patients about their care. In response, the Director advised there had been shortfall in the number of filled vacancies and bank staff had been employed. Newly trained staff would join the workforce imminently and help to provide continuity of care and meet the demand of the service. Concerns raised at the meeting would be investigated.
- Whether concerns raised in the Healthwatch report ‘I am not my mental illness’ had been addressed, the Director advised that plans had been put in place to resolve the concerns of residents raised in this report. Feedback from residents using ELFT services had been received and would be submitted to the next meeting for consideration.

The Director advised the Committee that the transformation of services was due for completion by 31 March 2020.

RECOMMENDED

1. ELFT patient feedback be reported at the 16 September 2019 meeting.
2. That following the transformation of services, ELFT return in May/June 2020 to update the Committee on the impact of the changes.
3. That a Member be arranged to visit ELFT in-patient facilities. That proposals for the ELFT facility in Bromham be submitted to a future meeting of the Committee.

11. East London NHS Foundation Trust (ELFT) Community Health Services Update

Assistant Director Adult Social Care/Deputy Director Community Health Services introduced a report that advised on the services provided by Bedfordshire Community Health Services and delivered by ELFT. The Assistant Director was a joint appointee across ELFT and Central Bedfordshire Council Adult Social Care Services and would oversee enhanced community services in line with the NHS 10 year plan that included:-

- Single point of access
- Introduction of a Primary Care Home in July 2019
- Community Based therapy service
- Joint working in Primary Care.

ELFT and Central Bedfordshire would continue to work together in partnership to help people at home and ease the length of stay in hospitals. The re-designed service aimed to give a bigger voice to the patient about their care. A member briefing session would be arranged and expand on the new arrangements.
In light of the report, Members of the Committee discussed the following in summary:-

- **Assurances** were sought that lessons would be learnt from case studies where the discharge had not gone well and checks on vulnerable patients' care was followed up by Community Teams. The Director advised that outcomes for individuals would be the key to success. Incidences where care had not gone well would be escalated to Director level and officers would meet regularly to discuss feedback from residents.

- **Whether the service could meet the demand and financial pressures.** As with Mental Health Services, new ways of working and the multi-disciplinary approach would help to meet demand. The involvement of the voluntary sector and communities as a whole was an important element in the new approach and would help with budget pressures.

- **During the introduction of the new ways of working, patient feedback was critical to measure successful outcomes.** Members proposed that Healthwatch be approached to undertake an independent survey of residents who received Community Health services in Central Bedfordshire.

**RECOMMENDED**

1. An update on feedback obtained from residents on transformed Community Services delivery be submitted to the SCHH OSC meeting on 27 January 2020.
2. Healthwatch be requested to seek feedback from residents on their experiences on the transformed Community Services and also report to the January 2020 meeting.

Meeting adjourned.

12. **Hydrotherapy Pool Service Temporary Closure**

The Chief Operating Officer, Bedfordshire Clinical Commissioning Group, presented a report that advised the Committee that due to health and safety reasons, the Hydrotherapy Pool at Gilbert Hitchcock House had been closed. An options appraisal had been produced and would be discussed with patient users and stakeholders before a conclusion was reached.

The evidence collated from professional therapists as to the importance of the Hydrotherapy pool service for residents was inconclusive, however, interim arrangements had been put in place. The outcome of the engagement work would be presented to the Committee on 25 November 2019.

**RECOMMENDED** Bedfordshire Clinical Commissioning Group report the results of engagement, quality impact assessment and equality impact assessment be considered at the meeting schedule on Monday 25 November 2019.

13. **Responses to Dunstable Health Hub Consultation**

The Committee considered a report from the Chief Operating Officer, Bedfordshire Clinical Commissioning Group (BCCG), that set out the outcome of the engagement work it had undertaken on the proposed Dunstable Health Hub. There had been a good response to the engagement work, strong support for the proposals and
suggestions about the services that might be included in the building. However, there was concern about access, parking and public transport to the facility.

The BCCG Board had agreed to finalise the joint business case with Council colleagues. The Head of Partnerships and Performance advised the timeline for approval of the outline business case was October 2019 and full business case by April 2021. The Hub was due to be built by June 2022. Key meetings for Ward Members to meet the design team would be arranged.

In light of the report, Members discussed the following in summary:-

- Whether 1,000 respondents represented a good sample of responses to the consultation. The Senior Communications and Engagement Officer BCCG advised it was an excellent sample and had raised valid concerns.
- It was confirmed that Dunstable Town Council Members had been consulted on the proposals.
- Assurance that concerns raised by residents on access, parking and public transport could be overcome.
- In response to a question about progress on the outline business case, the Head of Partnerships and Performance advised it would be finalised by January 2020.

The Head of Partnerships and Performance also reported that progress had been made with NHS Property to secure the Biggleswade Hospital Site for development for the Hub in Biggleswade.

NOTED the update.

Meeting adjourned.

14. Your GP Surgeries are Changing Campaign

The Chief Operating Officer, BCCG, delivered a report that set out its approach to introduce and promote alternative staff roles available at local GP practices. The campaign was part of a national drive to build resilience into the workforce and address the decline in GP numbers.

The Committee welcomed the campaign and felt they had a role to play when disseminating information to local parish councils and residents. It was proposed that Members be provided with an A4 information sheet for this purpose.

RECOMMENDED

1. The Committee welcomed the multi-media campaign and Members would take the opportunity to raise the profile of the campaign with local residents.
2. An A4 information sheet be provided to Members by the BCCG.

3. Homelessness and Rough Sleepers’ Strategy
Head of Housing Solutions introduced a report that explained the requirement for a local authority to review its Homelessness Strategy following the publication of the Government’s Rough Sleepers’ Strategy. The draft Homelessness and Rough Sleepers’ Strategy had been developed in partnership with Homeless Agencies and Services within Central Bedfordshire and the final version was required by winter 2019.

The report set out the 5 key legislative changes outlined in the Homelessness Reduction Action Plan that had significant implications for the service. The numbers of people seeking homelessness advice and assistance continued to rise, however, there was a lack of suitable affordable accommodation to meet the demand.

Engagement work with providers and customers had been undertaken and it was evident that there were a number of areas in which the Council could improve its offer. The draft strategy was also out to public consultation and feedback from all the engagement work would be taken into consideration.

In light of the report, Members discussed the following areas in summary:-

- That a joined up approach to sustainable and affordable housing growth be established through the Housing Enabling Strategy and Homelessness and Rough Sleepers’ Strategy.
- That representatives from faith groups be encouraged to liaise with housing officers and advise details of homeless or rough sleepers who needed urgent help and advice.
- That access to self-help advice be made available for those residents too embarrassed to approach the Council when they first get into difficulty.
- Street link, and who to contact when a member of the public wished to report a rough sleeper, be promoted by the Council. There seemed to be a misconception that a resident needed to be homeless before help was available to them.

In conclusion, the Committee would receive the final draft of the Strategy that incorporated all engagement work feedback at their November meeting, and officers were thanked for a comprehensive piece of work.

**RECOMMENDED** the feedback, outlined above, be considered and included in the final draft of the Homelessness and Rough Sleepers’ Strategy.

4. **Joint Health Overview and Scrutiny Committee Update**

At a recent meeting of the Joint Health Overview and Scrutiny meeting (JHOSC), Members considered the BLMK Communications consultation, a Healthwatch report on the NHS Long Term Plan that was highly commended and discussion regarding the non-participation of Luton Borough Council in JHOSC meetings.
5. SCHH OSC 2019/20 Work Programme and Executive Forward Plan

The Committee considered the current Work Programme and Executive Forward Plan. The Work Programme was approved subject to the addition of the following items:

- September 2019 - ELFT Mental Health Services Customer Feedback.
- November 2019 – Final draft Homelessness and Rough Sleepers’ Strategy.
- January 2020 – ELFT Community Services transformation outcome.
- June 2020 – ELFT Mental Health Services – Transformation of Services outcome.

Chair ..........................................................

Dated ..........................................................