

Healthier Communities and Adult Social Care Scrutiny and Policy Development
Committee

Meeting held 18 September 2013

PRESENT: Councillors Mick Rooney (Chair), Janet Bragg, Katie Condliffe, Roger Davison (Deputy Chair), Tony Downing, Adam Hurst, Martin Lawton, Jackie Satur, Diana Stimely, Garry Weatherall, Joyce Wright and Denise Reaney (Substitute Member)

Non-Council Members (Sheffield Healthwatch):-

Anne Ashby

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1. APOLOGIES FOR ABSENCE

1.1 Apologies for absence were received from Councillor Sue Alston and Councillor Denise Reaney attended the meeting as the duly appointed substitute, and Helen Rowe (Sheffield Healthwatch).

2. EXCLUSION OF PUBLIC AND PRESS

2.1 No items were identified where resolutions may be moved to exclude the public and press.

3. DECLARATIONS OF INTEREST

3.1 There were no declarations of interest.

4. MINUTES OF PREVIOUS MEETING

4.1 The minutes of the meeting of the Committee held on 17th July 2013, were approved as a correct record, subject to the amendment of item 6 - Sheffield Clinical Commissioning Group - Commissioning Intentions 2013/14, which was amended by the substitution of the word 'relationship' for the word 'role' in paragraph 6.6(c)(i) and, arising therefrom, it was reported that:-

- (a) in the light of the refurbishment works at St Luke's Hospice being completed in October/November 2013, it was suggested that Members visit the Hospice in January 2014, and the Policy and Improvement Officer was requested to contact the Hospice to discuss a convenient date and time for the visit, and to inform Members accordingly;
- (b) further to the Committee's request, at a previous meeting, for a response from Councillor Mary Lea, Cabinet Member for Health, Care and Independent Living, in connection with the Council's proposal to no longer provide, free of charge, individual small items of daily living equipment

costing less than £50, and regarding the setting aside of funds, for a hardship fund, to assist those who could not afford daily living equipment, a response had been received from Jan Sutton, Service Manager, Housing, Care and Support Service, indicating that, after further analysis of this proposal, it had become clear that it was not possible to make the anticipated savings on equipment under £50 and the proposal had not been implemented, and was currently under review; the Service was considering alternative ways to achieve the required savings within the Equipment and Adaptations budget and discussions had commenced with the Sheffield Community Equipment Learning Service (SCELS) to look at value for money; the Service was also looking at the Council's policy of equipment and adaptations to review whether this was fit for purpose;

- (c) a response had been received from John Reid, Director of Nursing and Clinical Operations, Sheffield Children's Hospital Foundation Trust, indicating that the Asthma Audit would be repeated in November 2013, to pick up those children with acute exacerbations that resulted from upper viral infections, which generally did not start until winter, and that he would arrange for a copy of the Audit to be forwarded to the Policy and Improvement Officer, who would then forward it to Members;
- (d) a response had still not been received to the letter sent to the Secretary of State for Health, expressing the Committee's concerns regarding the lack of a national framework and regulation for male circumcisions;
- (e) it was agreed that the Policy and Improvement Officer would try and arrange a briefing session for Members and Sheffield Healthwatch representatives, in connection with the joint Yorkshire and Humber Health Overview and Scrutiny exercise on the review of adult congenital heart disease services;
- (f) the Policy and Improvement Officer had recirculated the report containing an update on End of Life Care for Children provided by the NHS Care Commissioning Group, which had previously been sent to Members by Emily Standbrook-Shaw on 6th June, 2013, and it was agreed that no further action was required on this matter;
- (g) the Policy and Improvement Officer would chase up a response from the Health and Wellbeing Board with regard to the contracts that have been let to voluntary and faith sector organisations around offering help and advice to patients with mental health, drug and alcohol problems;
- (h) in the light of the confusion as to the precise nature of Councillor Adam Hurst's inquiry, relating to the Malnutrition Universal Screening Tool, Councillor Hurst indicated that he was prepared to let this matter rest;
- (i) a discussion on communication issues between the Sheffield Teaching Hospitals Foundation Trust and Sheffield Healthwatch had taken place; and
- (j) Tim Furness, Director of Business Planning and Partnerships, Sheffield

Clinical Commissioning Group (CCG) had forwarded the CCG's Communications Plan in terms of its commissioning intentions for 2014/15, outlining when the Group planned to involve the public and patients, to the Policy and Improvement Officer, who had subsequently circulated it to Members of the Committee; the full Communications Plan would not be available until October 2013, and the Policy and Improvement Officer would circulate this to Members of the Committee.

5. PUBLIC QUESTIONS AND PETITIONS

5.1 There were no questions raised or petitions submitted by members of the public.

6. ADULT SOCIAL CARE LOCAL ACCOUNT 2012/13

6.1 The Executive Director, Communities, submitted a report on the progress made on the Adult Social Care Local Account 2012/13, and inviting feedback from Members on the approach being taken, along with the design, structure and content of the early stages of the first draft of the report.

6.2 Ben Arnold, Development Officer, Business Strategy, Communities, introduced the report and responded to questions from Members of the Committee as follows:-

- It was appreciated that some service users, particularly those who had no one to assist them, would find the questionnaire difficult to complete, due to its size and level of detail, but the Authority was bound by national guidelines in terms of its size and contents.
- Details of the budget in terms of the funding available with regard to helping people with learning difficulties find employment could not be provided at the meeting, but such details could be obtained and included in the final report.
- The annual report of the Complaints Team was to be published in October 2013, and the relevant details from the report, which would include the level of detail now requested, would be included in the final draft of the Local Account.
- The reason for the relatively high number of patients being discharged from hospital into care homes for them to recover, which resulted in more people being admitted on a permanent basis, was possibly due to the lack of preparatory work in terms of assessing patients' physical ability and their homes, in terms of relevant adaptations.
- It was accepted that there were too many graphs in the report and efforts would be made to look at whether the information could be portrayed in some other format.

6.3 The following comments were also made:-

- It would have been helpful to see the questionnaire so that the list of

questions could be seen.

- It would have been helpful to have the detailed information on complaints to enable Members to provide feedback. As well as the proposed information in terms of complaints, as detailed in the draft report, there should be further detail in terms of what action had been taken, how many complaints had been referred to the Ombudsman and comparable statistics with other local authorities.
- In terms of the graphs, it would be useful to include information to show why the Authority had performed well or poorly during certain years.
- More accompanying information was required in terms of the statistics regarding the number of patients being discharged from hospital into care homes for them to recover, which resulted in more people being admitted on a permanent basis, as the relatively high figures, as detailed in the graphs, during 2011/12 and 2012/13, contradicted what the Service was aiming to achieve in terms of intermediate care.
- The case studies need to be more visually attractive and interesting, whilst still being easy to read. There needs to be better arrangements in terms of planned discharges for patients leaving hospital and planning was required, at an early stage, in order to assess whether patients leaving hospital could be discharged to their homes, rather than care homes.
- Details of performance should be included in the report, whether good or bad, together with details of how the Service's budget had been allocated.
- There should be some reference in the report where decisions and policies had been made on a national level.
- The 'I statements' were welcomed, but would be better if they were linked to something, such as the four outcomes.
- There could possibly be too many comparables in terms of the graphs, and it may be preferable just to have two comparables, such as surrounding areas.

6.4 RESOLVED: That the Committee:-

- (a) notes the contents of the report now submitted, together with the comments now made; and
- (b) requests Ben Arnold to consider the suggestions now raised in terms of the contents and layout of the Adult Social Care Local Account 2012/13.

7. DATE OF NEXT MEETING

7.1 It was noted that the next meeting of the Committee would be held on Wednesday, 20th November 2013, at 10.00 am in the Town Hall.

(NOTE: Item 7 on the agenda – Memory Management Service Developments – Interim Report – was withdrawn from consideration on the grounds that Jason Rowlands, Director of Planning, Performance and Governance, Sheffield Health and Social Care NHS Foundation Trust, was unable to attend the meeting.)

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