

Agenda Item 5

HEALTHIER COMMUNITIES AND ADULT SOCIAL CARE SCRUTINY COMMITTEE

Meeting held Monday 16th April 2012

PRESENT: Councillors Clive Skelton (Chair), Ibrar Hussain (Deputy Chair), Janet Bragg, Qurban Hussain, Bob Johnson, Pat Midgley, Joe Otten, Peter Rippon, Jackie Satur, Gail Smith and Garry Weatherall

Sheffield Local Involvement Network (LINK) Members
Alice Riddell and Helen Rowe

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1. **WELCOME AND HOUSEKEEPING ARRANGEMENTS**

1.1 The Chair welcomed attendees to the meeting and outlined basic housekeeping arrangements.

2. **APOLOGIES FOR ABSENCE AND SUBSTITUTE MEMBERS**

2.1	<u>Apologies</u>	<u>Substitutes</u>
2.2	Councillor Janice Sidebottom	No substitute appointed
	Councillor Ali Qadar	Councillor Joe Otten
	Councillor Kathleen Chadwick	No substitute appointed
	Councillor Jane Bird	Councillor Pat Midgley
	Anne Ashby (LINK)	No substitute appointed

3. **EXCLUSION OF PUBLIC AND PRESS**

3.1 No items were identified.

4. **DECLARATIONS OF INTEREST**

4.1 There were no declarations of interest.

5. **MINUTES OF PREVIOUS MEETING**

5.1 The minutes of the meeting of the Committee held on 19th March 2012 were approved as a correct record, and there were no matters arising.

6. **PUBLIC QUESTIONS AND PETITIONS**

6.1 There were no questions or petitions received from members of the public.

7. **BIRCH AVENUE AND WOODLAND VIEW UPDATE**

7.1 Tim Furness, NHS Sheffield, presented Members with an update upon the dementia Care Homes at Birch Avenue and Woodland View. Jill Rhodes (South Yorkshire Housing Association), Dr. Peter Bowie (Clinical Director, NHS Sheffield), Sarah Burt (Sheffield Teaching Hospitals), Professor David Jolley (NHS Sheffield), and friends and relatives of the residents of the Care

Homes were also in attendance for this item. Sue Harding from the Birch Avenue and Woodland View Action Group spoke on behalf of the residents' relatives.

- 7.2 Mr. Furness provided an overview of the roles of the two Homes, and emphasised that, although aspiring to have excellent standards, it had not been specified that the two Homes would become 'Centres of Excellence' in the proposals agreed by NHS Sheffield.
- 7.3 He reported that revised contractual arrangements had now been agreed with providers, and funds had been secured for both Homes to ensure their success and survival in the long-term, as well as increased funding to ensure enhanced care was provided for residents with more challenging behaviour. He added that these changes had included a full review of ensuring that best value for money was achieved. He further noted that the number of people with dementia was increasing on a national level.
- 7.4 Mr. Furness went on to report that the Homes were moving away from the notion of a separate admissions bungalow, and towards a more inclusive model. He also added that residents were not moved from their rooms where possible, and were only moved once or twice a year at the very most, as creating a stable environment was extremely important.
- 7.5 Ms. Harding commented that members of the Action Group would welcome an opportunity to have a greater involvement in such areas of operation at the Homes, and welcomed a suggestion to possibly amalgamate the Action Group with the existing stakeholder group at the Homes, 'Support 67', and reconstitute the group to make it more effective.
- 7.6 **RESOLVED:** That the Committee;
- (a) thanks everyone for their involvement with the cause;
 - (b) welcomes granting members of the Action Group the opportunity to have a greater involvement in areas of operation at the Homes, as well as the possible amalgamation of the Action Group with the existing stakeholder group at the Homes, 'Support 67';
 - (c) requests that any moves of residents at the Homes be entirely for the benefit of the patients, and that a full consultation be carried out with all relevant parties before any move takes place, and
 - (d) requests that a full update on the situation be submitted to the Committee in six months' time.

8. **SHEFFIELD TEACHING HOSPITALS QUALITY ACCOUNTS**

- 8.1 Sandi Carman, Head of Patient and Healthcare Governance, Sheffield Teaching Hospitals Foundation Trust, and Neil Riley, Trust Secretary, Sheffield Teaching Hospitals Foundation Trust, presented Members with the Quality Accounts for 2011/12 for the Sheffield Teaching Hospitals.

- 8.2 Mrs. Carman informed the Committee that Foundation Trusts were required to produce an Annual Quality Report to sit alongside the Annual Report, and that specific reporting requirements were detailed in the NHS Foundation Trust Annual Reporting Manual 2011/2012. The report had two key aims, which were to report on the quality of services delivered by Sheffield Teaching Hospitals in the year 2011/2012 and to identify the Quality Improvement Priorities for 2012/13.
- 8.3 She went on to detail that Quality Improvement Priorities for 2012/13 were proposed in the following areas:
1. Reduce length of stay in hospital
 2. Improve discharge letters for GPs
 3. Making it easier to communicate with the organisation (improving feedback)
 4. Deliver harm free care – reviewing morality rates at the weekend
 5. Improve dementia awareness by promoting a good experience for those with mental health problems or dementia.
- 8.4 Mrs. Carman reported that version 0.4 was currently before Members, and that a final version would be produced at the end of April 2012, alongside a newspaper style easy-read document to complement the full report.
- 8.5 Members were concerned that priority one currently listed as ‘reduce length of stay in hospital’ gave out the wrong message, and that more suitable wording might be ‘ensure appropriate length of stay in hospital’, so that patients were not sent home before they were ready. Members also wished to see some comparison drawn within the report to national averages with regard to length of stay in hospital.
- 8.6 Members welcomed improvements in the presentation of the report, and requested that it be published somewhere on the document that members of the public could request a copy of the Quality Accounts if they so wished. It was noted that there were still high numbers of patients being readmitted into hospital after initial discharge, and Members wished to see more information provided regarding whether these patients were being readmitted for the same condition, or a different condition, and they wished this information to be included within the report.
- 8.7 **RESOLVED:** That the Committee thanks representatives from Sheffield Teaching Hospitals for the report.
9. **SHEFFIELD CHILDREN'S HOSPITAL QUALITY ACCOUNTS**
- 9.1 John Reid, Director of Nursing and Clinical Operations, Sheffield Children's Hospital Foundation Trust, reported upon the Quality Accounts for the Sheffield Children's Hospital for 2011/12.
- 9.2 He indicated that the purpose of the report was to summarise the

performance of Trust in 2011/12 in relation to quality of care, and to set the quality priorities for 2012/13 in consultation with families, governors and agency partners.

- 9.3 He reported that Sheffield Children's NHS Foundation Trust was one of the best performing Foundation Trusts in the country, as recorded by Monitor (the Foundation Trust regulator), and he believed that the freedom permitted to concentrate on what was best for children had continually led to the best use of resources for families. He reported that the reputation was built on the high satisfaction survey results and the quality of care provided. He added that a more accessible version of the report was also being produced and would be made available at the end of April 2012.
- 9.4 Mr. Reid stated that areas where improvements were needed at Sheffield Children's Hospital had been identified, for example, provision of car parking, renewed ward accommodation, signage around the building, more facilities for parents and easier access to out-patient departments. He added that a £40 million scheme was planned to improve facilities at the site, including increased parking, which would take place over a three year period. Mr. Reid reported that, in the expanded building, 70% of the new rooms would be single en-suite rooms which was a great change from the current ward-based operation.
- 9.5 He reported ongoing high numbers of people accessing the Accident and Emergency facility, primarily because they could be guaranteed to see a doctor within four hours, whereas they might be waiting a good deal longer for a doctor's appointment at their local GP surgery.
- 9.6 Concerns were raised from Members about the long waiting times for families accessing the Children and Adolescent Mental Health Service (CAMHS). It was clarified that the waiting times for CAMHS had not increased, yet remained an issue for the tier three level of mental health care. An action plan had been formulated to attempt to reduce these waiting times.
- 9.7 **RESOLVED:** That the Committee thanks representatives from Sheffield Children's Hospital for the report.

10. YORKSHIRE AMBULANCE SERVICE QUALITY ACCOUNT

- 10.1 The Committee received the Quality Accounts for the Yorkshire Ambulance Service (YAS) for 2011/12.
- 10.2 The report indicated that YAS, like all NHS provider trusts, was required to publish annual Quality Accounts which provided information for service users and the public on the quality of their services.
- 10.3 The report stated that, for everyone at YAS, providing high quality patient care was the number one priority, and that progress made had once again been acknowledged by the Care Quality Commission (CQC), which agreed in January 2012 that YAS had met the full requirements for continued

registration with them, meaning that all of the essential standards of quality and safety were being achieved.

10.4 **RESOLVED:** That the Committee;

(a) notes the contents of the report now submitted, and

(b) requests that a representative from the Yorkshire Ambulance Service attend a future meeting to answer Members' questions.

11. **URGENT ITEM: REVIEW OF CARE4YOU RESOURCE CENTRES**

11.1 The Committee received a report of the Director of Care and Support, Communities Portfolio, regarding the proposed closure of the Care4you Resource Centres at Sevenfields and Hazlehurst. In attendance for this item were Tim Furness, NHS Sheffield, Eddie Sherwood, Sheffield City Council, and Councillor Mary Lea, Cabinet Member for Heath, Care and Independent Living.

11.2 Mr. Sherwood presented the report to the Committee, explaining that, during December 2011 and February 2012, the Council had undertaken formal consultation on a proposal to decommission Hazlehurst and Sevenfields; two resource centres managed by the Council's Care4you service. He outlined the reasons behind the selection of 'Option 5' in relation to the future of the Resource Centres at Sevenfields and Hazlehurst, which was to 'Decommission 42 beds in the current buildings and commission alternative care elsewhere based on current needs and demand.'

11.3 He added that, on 4th April 2012 a petition had been presented to full Council opposing this proposal and Council had referred the petition to this Scrutiny Committee. He explained that Cabinet was likely to consider the matter in May 2012 and would be informed by the consultations so far, the petition, the Council debate and the deliberations of this Scrutiny Committee.

11.4 **RESOLVED:** That a special meeting of the Committee be held on 30th April 2012 at 1000 hours in order to fully consider the issue, with all relevant parties to be invited to attend.

11.5 (**NOTE:** At the commencement of the meeting, the Chair indicated that the above item was to be considered as an urgent item under Council Procedural Rule 26 of the Council's Constitution, in view of the need to facilitate the arrangements for a special meeting in connection with the Resource Centres as soon as possible.)

12. **DATE OF NEXT MEETING**

12.1 The next meeting of the Committee would be a special one-item agenda meeting to be held on 30th April 2012 at 1000 hours in a Committee Room at the Town Hall to consider the Review of Care4you Resource Centres in

full.