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**Health in Dacorum
Agenda**

Wednesday 12 June 2019 at 7.30 pm

Conference Room 2 - The Forum

Scrutiny making a positive difference: Member led and independent, Overview & Scrutiny Committee promote service improvements, influence policy development & hold Executive to account for the benefit of the Community of Dacorum.

The Councillors listed below are requested to attend the above meeting, on the day and at the time and place stated, to consider the business set out in this agenda.

Membership

Councillor Beauchamp
Councillor Bhinder (Vice-Chairman)
Councillor Bowden
Councillor Durrant
Councillor England

Councillor Guest (Chairman)
Councillor Hollinghurst
Councillor Johnson
Councillor Maddern
Councillor Sinha

For further information, please contact Corporate and Democratic Support

AGENDA

1. COMMITTEE NOMINATIONS

2. MINUTES

To confirm the minutes from the previous meeting

3. APOLOGIES FOR ABSENCE

To receive any apologies for absence

4. DECLARATIONS OF INTEREST

To receive any declarations of interest

A member with a disclosable pecuniary interest or a personal interest in a matter who attends a meeting of the authority at which the matter is considered -

- (i) must disclose the interest at the start of the meeting or when the interest becomes apparent

and, if the interest is a disclosable pecuniary interest, or a personal interest which is also prejudicial

- (ii) may not participate in any discussion or vote on the matter (and must withdraw to the public seating area) unless they have been granted a dispensation.

A member who discloses at a meeting a disclosable pecuniary interest which is not registered in the Members' Register of Interests, or is not the subject of a pending notification, must notify the Monitoring Officer of the interest within 28 days of the disclosure.

Disclosable pecuniary interests, personal and prejudicial interests are defined in Part 2 of the Code of Conduct For Members

[If a member is in any doubt as to whether they have an interest which should be declared they should seek the advice of the Monitoring Officer before the start of the meeting]

5. PUBLIC PARTICIPATION

An opportunity for members of the public to make statements or ask questions in accordance with the rules as to public participation

6. RE-DEVELOPMENT OF THE WEST HERTS HOSPITAL TRUST ESTATE

7. HCC ADULT CARE SERVICES (Page 3)

8. HCC HEALTH SCRUTINY UPDATE (Pages 4 - 5)

9. WARD ISSUES FROM OTHER COUNCILLORS

10. WORK PROGRAMME

To agree the Work Programme going forward

Adult Care Services Report for Health in Dacorum Meeting of 12th June 2019

The current contracts for Lead Provider Support at Home, SAH (homecare) and Specialist Care at Home, SCAH are due to end in March 2020. SCAH provides up to four weeks of non-chargeable enabling care, to support people leaving hospital and prevent avoidable hospital admissions. Plans to commission a new service are underway, with the procurement process to start in July 2019.

The intention is to deliver more flexible, integrated support to maximise independence and wellbeing.

Provider failures have occurred and the transition of clients between SCAH and SAH is challenging due to a lack of mainstream capacity. It is intended to introduce a single contract for Strategic Lead Provider – Reablement and Support at Home to provide both in each area of the County. The County Council would aim to limit each provider to a maximum of three areas.

The aims are to simplify the transition and improve flow between the services, freeing up capacity and giving Strategic Lead Providers greater ability to forward plan and manage staff numbers, whilst providing a flexible service to meet the changing needs of an individual.

In January 2019, NHS England released the NHS Long Term Plan, a long and complex series of commitments for the NHS. It does not cover the issues of funding for Public Health and Social Care. It is anticipated that these will be addressed by the Government's Spending Review, which is expected in Autumn 2019. However it does provide an opportunity to further integrate Health and Social Care budgets (currently done through the Better Care Fund) where this can be locally agreed. The plan describes a number of options to achieve this:

Voluntary budget pooling of between a council and CCG

Individual service user budget pooling

The Salford model with the local authority asking the NHS to oversee a pooled budget for all adult health and social care services

The CCG and local authority ask NHS England to designate the council chief executive or director of adult social care as the CCG accountable officer

Options for social care and health integration and partnership working are anticipated to be explored further in the forthcoming Green Paper on adult social care.

In the Adult Social Care performance Monitor Quarter 3 2019/19, West Herts Hospitals Trust reported the highest percentages of delayed discharges of all the trusts used by Herts. CCGS, both for total delays and social care delays. The main reason was patients waiting for homecare.

C/Cllr Fiona Guest

Agenda Item 8

Hertfordshire Health Scrutiny Committee Report for the Health in Dacorum Meeting of 12th June 2019

At its meeting on 15th May 2019, the Health Scrutiny Committee considered the West Herts. Hospital Trust (WHHT) estate redevelopment. The NHS has not decided on the preferred way forward yet. There will be a public meeting in June 2019 to discuss the emerging way forward, then the decision will be made in July 2019. The Committee took no view on the preferred option. It split into four groups which asked questions on the following qualitative aspects of the proposals:

Safety and outcomes
Patient and carer experience
Workforce – satisfaction and sustainability
Transformation and future flexibility

In the patient and carer experience group it was asked how a decision could be made which would avoid setting the towns of west Hertfordshire against each other. WHHT acknowledged that this was difficult.

The Committee was provided with responses to the recommendations made at the NHS Quality Scrutiny held in March 2019.

The Committee had noted that WHHT had too much focus on process rather than outcomes. The Committee recommended a culture change to one that focuses on patient experience rather than staff processes. It recommended that WHHT should put into place a clear action plan to improve its overall rating to “Good” by the time of the next Care Quality Commission (CQC) inspection.

WHHT responded that it had an action plan to respond to all the CQC “must” and “should” recommendations in the 2018 inspection report. WHHT’s 2019 Quality Account is being finalised, setting out the key quality priorities for 2019/20. WHHT gives the assurance that it is committed to further developing and embedding a culture of Quality improvement and achieving a “Good” rating at the next CQC inspection.

The Committee had recommended that WHHT work with partners to ensure that simple tasks such as blood tests are carried out in primary care to provide a better, more accessible service for patients.

WHHT is finalising a joint service development and improvement plan with Herts Valleys Clinical Commissioning Group (HVCCG) to join up care provided by primary, community and secondary care clinicians.

The Committee recommended that WHHT’s focus is proportionately distributed between the Watford, St. Albans and Hemel Hempstead sites and maintained so that all patients receive an equal standard of care and focus.

WHHT recognises and supports this recommendation and recognises that there needs to be a more visible leadership focus at Hemel Hempstead and St. Albans hospitals. It has created a new management post to provide oversight and leadership at Hemel Hempstead and St. Albans. There is a Visible Leadership programme to ensure greater senior leadership presence at Hemel Hempstead and St. Albans.

C/Cllr Fiona Guest