

**CANNOCK CHASE COUNCIL**  
**MINUTES OF THE MEETING OF THE**  
**HEALTHIER COMMUNITIES, HOUSING AND OLDER PEOPLE SELECT COMMITTEE**  
**TUESDAY, 22 JANUARY, 2008 AT 4.00 P.M.**  
**IN THE CIVIC CENTRE, BEECROFT ROAD, CANNOCK**  
**PART 1**

PRESENT: Councillors

Beddows, J. (Chairman)

Ball, G.D.                      Grice, Mrs. D.  
Davis, Mrs. M.A.

Also Present:	Councillor D.I. Dixon	Staffordshire County Council
	Ms. H. Perren	Mid Staffs General Hospitals NHS Trust
	Ms. D. Adams	Mid Staffs General Hospitals NHS Trust
	Ms. A. Ames	Patient and Public Involvement Forum (PPIF)
	Mr. J. Bletcher	South Staffordshire Primary Care Trust (PCT)
	Mr. P. Smith	District Director of Social Care and Health (Staffs County Council/CCDC)
	Mrs. H. Heath	Chase Tenants' and Residents' Federation (CTRF)
	Mr. A. Derry	Chase Tenants' and Residents' Federation
	Mrs. D. Whitehouse	Chase Tenants' and Residents' Federation

(Apologies for absence were received from Councillors K.L. Bennett, J. Burnett, D.N. Davies, C. Mitchell, G.N. Molineux and J. Toth).

Prior to commencement of the meeting, the Chairman asked that a minute's silence be held as a mark of respect for former Deputy Leader of the Council, Councillor Reg Butler.

**45. Minutes**

AGREED:

That the Minutes of the meeting held on 4 December, 2007 be approved as a correct record.

**46. Hospital Infection Control**

Ms. Adams, Mid Staffs General Hospitals NHS Trust gave a presentation to Members' in relation to Infection Prevention and Control.

She reported that infection prevention control was the responsibility of everyone, it was the Trust's top priority and it was being managed. Furthermore, the Trust monitored infections through monthly trust board support, management support and a steering group.

Ms. Adams reported that an investment of £300k had been provided to enable the Trust to purchase equipment, £212k was available for education and training, £100K for housekeeping and £180k for a deep clean of the hospital each year.

She indicated that MRSA (Methicillin Resistant Staphylococcus Aureus) was carried on the skin of 30 per cent of people and C.Diff (Clostridium difficile) was carried in the gut of 5 per cent of the healthy population and 20 per cent of elderly persons. The mortality rate of MRSA was 30 per cent and C.Diff was 15 per cent. Tests were carried out in the hospital's laboratory to determine if patients carried either of the infections.

Prevention of the C.Diff infection included prescribing antibiotics and screening patients, whilst screening for MRSA involved taking nose swabs, eradication therapy and re-screens. There was also an action plan in place in an attempt to tackle the infections.

Members' were then invited to ask questions.

Members' asked if there had been any attempt to change the current system with regard to the public visiting patients. Ms. Perren reported that information was contained outside each ward in relation to hand washing and visitor times had been reduced. She also reported that with the recent breakout of the Norovirus visitors were asked to take sensible precautions when visiting patients.

Ms. Adams also reported that attempts had been made to try and alleviate problems with the cleanliness of wards such as advising the public not to bring in additional sets of clothes for patients due to the risk of exposure to infections.

A representative of the PPIF reported that she had witnessed patients leaving their wards in nightwear to go outside and stated that this exposed others to infection. Ms. Adams stated that the hospital could not stop patients leaving their wards, however they hoped patients would co-operate.

#### **47. Mid Staffs General Hospitals NHS Trust**

Ms. H. Perren, Head of Marketing and Business Development provided Members' with a progress report.

In relation to the Foundation Trust application, a decision would be made by Monitor (the organisation that regulates Foundation Trusts) on 31 January, 2008 and should the application be successful, the Trust would be given authorisation from 1 February, 2008.

She reported that with regard to the campaign to reduce Healthcare associated infection, tables within the report provided information on the number of MRSA and C.Diff cases which had been identified at the Trust as at the end of December 2007.

Members were also advised that the refurbished A & E department at Stafford Hospital

was officially opened in December and the first phase of work involving minor injuries accommodation, reception and waiting areas was completed in May 2007 with a separate waiting area for children.

She reported on the plans to relocate the existing services at Cannock Hospital from level 1, to levels 2 and 3 and that a construction contractor had started work to relocate Hollybank and the Rheumatology ward to Valley Ward. She indicated that the dining room would close to staff and visitors in February 2008 and a retail outlet to be run by Subway would open on Level 2.

Members enquired whether the Littleton Ward would be closing. Ms. Perren stated that it had been identified to close at some point but there was no timescale in place and no staff consultations had been carried out, therefore the Ward would stay open for the time being.

#### **48. Choice Based Lettings**

Mr. I. Tennant, Head of Housing reported that the 'Somewhere to Live' booklet provided Members' with information on how the choice based lettings scheme operated although the booklet would require further revisions in terms of working with the Sub-Regional group to identify a better word to use than 'bid' when trying to acquire a property.

He reported that one of the principals of the scheme would change, whereby there would be no targets or quotas, and anyone registered could make an expression of interest for a property. He stated that this would address some of the comments made in the consultation recently carried out.

The Head of Housing advised that he had visited East Staffs Borough Council and Lichfield City Council to view how their choice based lettings schemes operated and had identified a number of points which could be included in the Cannock Chase scheme.

In response to a number of questions, the Head of Housing advised that letters to those people who should re-register for housing do go missing, however a facility exists for re-instatement and most people keep in contact with the Council on a regular basis. In respect of the need for additional resources, the Head of Housing stated that a report would be submitted to Cabinet which would provide an indication of the resources that were needed to run the scheme.

#### **49. South Staffordshire Primary Care Trust**

Mr. J. Bletcher, Head of District Partnerships provided Members' with a report concerning the key areas for health improvement that would be contained with an improving Health and Wellbeing Block within the LAA (Local Area Agreement)..

He reported that Government guidance had indicated that the refreshed LAA would be highly focused consisting of up to 35 key areas each identified through an indicator chosen from a national list of nearly 200.

The proposed key indicators for health improvement would be: -

- Alcohol related hospital admissions

- Drug users in effective treatment
- Effectiveness of child and adolescent mental health service (CAMHS)
- Obesity among primary school children in reception year OR obesity among primary school children in year 6
- All age, all cause mortality rate
- Carers receiving needs assessment or review and a specific carer's service or advice or information
- Number of vulnerable people who are supported to maintain an independent living
- Under 18 conception rate
- 16 + current smoking rate prevalence

## 50. **Staffordshire County Council Health Scrutiny Committee**

Councillor Mrs. M.A. Davis the representative appointed to Staffordshire County Council's Health Scrutiny Committee reported that meetings had been held on 13 December, 2007 and 14 January, 2008.

### West Midlands Ambulance Service

She reported that Peter Mutagh from West Midlands Ambulance Trust gave a presentation to Members' in relation to the continued emergency centres independent review. He advised that new centres would be located in Tollgate, Merry Hill and Leamington Spa and the projects would be complete by December 2008.

Councillor Davis also reported on a recent meeting with the West Midlands Ambulance Service since merging and that a number of targets showed that there was no change in relation to call-outs etc.

### G.P. Out of Hours Service

Councillor Davis advised that the West Midlands Ambulance Service had been unsuccessful in securing a tender for the G.P. out of hour's contact which had been won by Badger Harmony, who would take over from 1 April, 2008. Furthermore, a six month review would take place to review how the service was operating.

### Palliative Care

A consultation was expected to take place which would include planning for the future in respect of palliative care. It was important that there was a smooth transition of the elderly from hospital to their homes where they could be cared for.

### North Staffs

A report was received on the Child and Adolescent Health Services and a Work Programme provided an overview of the current position.

With regard to Children and Adolescent Mental Health, currently cases were taking 6 weeks to be reviewed but it was expected that the time would be reduced to 5 weeks.

### Work Programme

She reported that the Work Programme of the Health Scrutiny Committee included teenage sexual health and teenage pregnancy.

### Carers Day

It was reported that a carers' day was recently held at Lichfield City Council which was an open event to the public and was a success. It was hoped that Cannock Chase Council would organise a similar event.

## **51. Proposed Health Centre Development**

Mr. Bletcher reported that a meeting had been held today with G.P.'s and a one week timescale had been given for responses. A report would be made available to the Committee on 26 February, 2008. He also advised that it was proposed that the 5 G.P. practices would relocate to the new Health Centre and that there was a succession plan in place for example if a G.P. was retiring in 3 years.

Members stated that the proposed health centre discussions should take into account other services that need to be located at the facility and not just G.P.'s and the Health and Wellbeing centre. Mr. Bletcher reported that he would take this into account and provide Members with the information at the next meeting.

He reported that the Government had announced in December 2007 that they wanted an access centre in every area that could deal with patients who wanted to see a G.P. other than during normal hours.

## **52. Work Programme**

AGREED:

- (A) That the Work Programme be noted
- (B) That the Annual Health Check be considered as part of the Work Programme for the next meeting
- (C) That a report relating to the proposed Health Centre be considered at the next meeting

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CHAIRMAN