

CANNOCK CHASE COUNCIL
MINUTES OF THE MEETING OF THE
HEALTH SCRUTINY COMMITTEE
TUESDAY, 19 JULY, 2011 AT 4.00 P.M.
IN THE CIVIC CENTRE, BEECROFT ROAD, CANNOCK

PART 1

PRESENT: Councillors

Bernard, Mrs. A. F. (Chairman)
Holder, M.J. (Vice-Chairman)

Beddows, J.

Davies, D.

Also Present: Councillor P. Jones, Staffordshire County Council Representative
Councillor J. Rowley, Cannock Social Care and Health Chairman
Mr. D. Loades, Staffordshire LINK Representative

(The Chairman explained that she had invited Councillor J. Rowley to attend meetings of the Committee in his role as Staffordshire County Council's Chairman of Cannock Social Care and Health. The Committee concurred with this request)

7. Apologies

Apologies for absence were received from Councillors G. D. Ball and G.N. Molineux.

8. Declarations of Interests of Members in Contracts and Other Matters and Restrictions on Voting by Members

<u>Member</u>	<u>Nature of Interest</u>	<u>Type</u>
Beddows, J.	Member of Mid Staffs NHS Foundation Trust	Personal

9. Minutes

AGREED:

That the Minutes of the meeting held on 7 June, 2011 be approved as a correct record and signed.

10. Items arising from Staffordshire County Council's Health Scrutiny Committee

The Chairman reported that as the Council's representative she had recently attended a meeting of the Staffordshire County Council's Health Scrutiny Committee. It was explained that the key issues discussed were the North Staffordshire and Burton Hospitals and the views of the Committee were sought on how she could develop the role for the benefit of Cannock Chase.

The Committee considered it important that the Chairman continued to attend meetings and report the concerns relating to Cannock Chase residents to the County Council's Health Scrutiny Committee and provide feedback on what was taking place.

Councillor Rowley reported that a review had been undertaken at the County Council of the Health Scrutiny Committee 19/07/11

rehabilitation of people who had suffered a heart attack and preventative measures for those considered to be at the lower level of mental health problems. Due to the impact of the recession and people losing their jobs there had been a rise in those suffering with depression and the number of people committing suicide had also risen. It was explained that the take up of the rehabilitation programme for people that had suffered a heart attack in Cannock Chase was low, particularly in the Norton Canes area. The Committee agreed to consider the cardiac rehabilitation programme.

The review had been carried out over a 12 month period and was soon to be released. The Committee requested Councillor Rowley to provide them with a copy of the information when available.

AGREED:

That the Committee be provided with a copy of the review undertaken by Staffordshire County Council into rehabilitation of people who had suffered a heart attack and preventative measures for those considered to be at the lower level of mental health problems, when available.

11. Staffordshire LINK Annual Report – 1 April 2010 – 31 March 2011 (Local Involvement Network)

The Committee received a presentation from Mr. D. Loades, Staffordshire LINK representative in respect of items from the 2010/11 Annual Report. It was explained that Mr. J. Davies who was an Independent Co-opted Member was no longer with LINK.

The Committee was informed that the structure of the new Staffordshire LINK had been in existence for almost a year and it was considered significant progress had been made in areas of its activity. A budget of £300,100 had been allocated from the County Council for 2011/2012. Link was an independent network made up of local people and organisations whose aim was to influence how local health and social care services were delivered. Through legislation LINK had powers to request information to be provided from the NHS and Social Services and could make recommendations for changes to be made. It was considered that the NHS and local authorities now recognised that by utilising the experience of those who used health and care services, they would improve.

A Co-ordinating Group oversaw the work of LINK and was made up of people with a wide range of skills, knowledge and experience. The role of the Group included, amongst others, –

- providing support to groups and individuals and ensuring high levels of integrity, honesty etc.
- ensuring the workplan was fully implemented and monitored
- establishing workplan project groups
- allocating resources from its budget and ensuring value for money
- making sure that key stakeholders were represented
- ensuring that LINKs duties under legislation were met
- ensuring engagement with the community and that people's views were sought
- referring issues to the local Health Overview and Scrutiny Committee if it was considered that recommendations were not being implemented
- raising awareness to encourage participation and providing appropriate training
- delivering high standards of governance

It was explained that highlighted throughout the report were the outcomes and impact of the work that had been carried out on the agreed priorities with the Community Council in the areas of acute and stroke services, dementia and respite care and Disability and Discrimination Act issues. Also detailed within the report were the improvements made in developing LINKs profile and the qualities of its staff and volunteers. It was noted that the percentage increase from 2009/2010 to 2010/2011 had risen by 940% for participants and 330% for organisations.

An 'Enter and View' programme had been undertaken the purpose of which was to observe the delivery of health and care services and to collect the views of those using them. Those applying to become an authorised enter and view visitor received full training, with some volunteers now being part way through the process. All volunteers had to undergo an enhanced CRB check.

Burton Hospital had been visited to follow up on concerns with respect to standards of care on a particular Unit. The University Hospital of North Staffordshire to follow up on an action plan following a complaint and Mid Staffs. Hospital to look at dementia care. A programme of visits would continue to be carried out to hospitals, care homes and day care units during 2011/12.

It was explained that LINK did not investigate individual patient's issues but looked at trends that occurred. Dentists had recently been requested to complete questionnaires as concern had been raised that some were charging pregnant women for dental treatment. Other projects were to monitor infant mortality and the issue of getting patients in hospital back to their homes.

Mr. Loades informed the Committee that, as they were no doubt aware, major changes were taking place to the NHS which made LINK's role even more critical in helping care providers to understand the new arrangements and the implications. The new NHS Health Bill currently going through Parliament included proposals for the transition from LINKs to HealthWatch. Staffordshire LINK had put a proposal to the Department of Health to become a HealthWatch pathfinder.

The Chairman informed Mr. Loades that he would be welcome to attend future meetings.

AGREED:

That a representative from LINK be invited to attend future meetings.

12. Mid Staffordshire NHS Foundation Trust Performance Report for June 2011

Consideration was given to the NHS Foundation Trust Board Performance Report for June 2011. The Head of Environmental Health explained that the Board received monthly in depth performance monitoring information. He was concerned that the information was not in a user friendly form and asked whether the Committee wanted to continue to receive copies of the monthly reports.

Members considered that the performance information contained within the report was extremely difficult for the average person to understand. They considered it had been written by a professional person aimed at professional people working within the medical profession. Members did not like the style of the report and would have preferred to have comparison figures included in order that they could assess whether progress was being achieved.

The Committee was of the opinion that it would be more beneficial for a representative from the

Hospital Trust to be invited to attend a future meeting in order that the performance figures could be explained. The Head of Environmental Health agreed to report the concerns back and ask if the information was available in a more reader friendly format.

Mr. Loades from LINK reported that he would be able to provide the Committee with a summary document that was being prepared relating to targets which would be available shortly.

AGREED:

That the concerns of the Health Scrutiny Committee with respect to the format of the Mid Staffordshire NHS Foundation Trust Performance Report be reported back to them.

13. Discussion regarding the attendance of the Chief Executive of Mid Staffordshire NHS Foundation Trust at a future meeting

The Head of Environmental Health informed the Committee that he had been informed that Lyn Hill-Tout, the Chief Executive of the Mid Staffordshire NHS Foundation Trust was willing to attend meetings of Health Scrutiny Committees.

AGREED:

That the Chief Executive of Mid Staffordshire NHS Foundation Trust be invited to attend the next meeting of the Committee.

14. Health Scrutiny Objectives and Work Programme

The Chairman explained that the Work Programme had been agreed and a time table would be prepared.

A Member raised concern that now that planning permission had been granted for the Energy Recovery Facility at Kingswood Lakeside site that Members had the correct information on the impact on health that this could have to those living near to the site.

The Head of Environmental Health explained that it could be beneficial to invite a representative from the Health Protection Agency to attend a meeting in order to discuss this issue, although they had attended a Parish Council meeting.

AGREED:

That the following be added to the Work Programme:-

- (A) The impact of the Energy Recovery Facility on those living near to the site
- (B) Cardiac Rehabilitation programme

15. Date of Next Meeting

The Committee noted that the date of the next meeting was 13 September, 2011.

CHAIRMAN

(The meeting closed at 5.15 p.m.).