

Swindon Borough Council

Adults' Health, Adults' Care and Housing Overview and Scrutiny Committee

Wednesday, 12 September 2018

Committee Room 6, Civic Offices

At 6.00 p.m.

Conservative Councillors

Maureen Penny (Chair)
Malcolm Davies
Mary Friend
Nick Martin
Caryl Sydney-Smith

Labour Councillors

Claire Crilly
Steph Exell
Julie Wright
Robert Wright

Co-Optees

Rosemary Curtis (Homeless Organisations Standing Together in Swindon)
Michelle Howard (Equalities Advisory Forum).
Kate Moore (Tenant Scrutiny Panel)
Carol Willis (Healthwatch)

Committee Officer: Rita Glen Gallo, 01793 463611, rglen-gallo@swindon.gov.uk

Swindon Borough Council can be contacted at the Civic Offices, Euclid Street,
Swindon, SN1 2JH (Telephone 01793 445500)

Access Arrangements - The venue is wheelchair accessible and an infrared receiver hearing system is provided. If you have any special requirements to enable you to attend the meeting or would like to receive any of the pages contained in this agenda in a larger print size, please contact the Committee Officer as soon as possible prior to the date of the meeting.

AGENDA

1. Apologies for Absence

2. Declarations of Interest

Members are reminded that at the start of the meeting, they should declare any known interests in any matter to be considered and also during the meeting if it becomes apparent that they have an interest in the matters being discussed.

3. Public Question Time

See explanatory note below. Please phone the Committee Officer whose name and number appears at the top of this agenda if you need further guidance.

4. Minutes (Pages 5 - 14)

To receive the minutes of the meeting held on 21st June 2018.

5. Performance for Adult Social Care Commissioning CDASS&H (Pages 15 - 28)

6. Great Western Hospital NHS Foundation Trust Update (Pages 29 - 36)

7. Update on Fire Safety to Residential Blocks of Flats CDCH (Pages 37 - 44)

8. Avon and Wiltshire Partnership NHS Trust Update (Pages 45 - 48)

9. Clinical Commissioning Group Update (Pages 49 - 62)

10. Work Programme DLDS (Pages 63 - 74)

Date of Despatch: 04 September 2018

Key:

CDASSH – Corporate Director Adult Social Services and Health

CDCH – Corporate Director Communities and Housing

DLDS – Director of Law and Democratic Services (Monitoring Officer)

Public Question Time - Swindon Borough Council remains committed to increasing its accountability to the public and to promoting active citizenship. 15 minutes will be allowed at the start of all Council meetings for questions to the Chair from the public about the work of the Committee (except for confidential matters, and matters relating to planning and licensing applications). We will give priority to those who submit questions in writing at least two days before the meeting. Questions must be relevant, clear, and concise. You may not use Public Question Time as an opportunity to make speeches or statements.

Questions in writing should be sent to the Committee Officer whose contact details appear on the agenda above, or to the Director of Law and Democratic Services. We will publish it, along with the answer, alongside the Minutes. The process associated with asking a public question is set out in the “Public Question Time at Council Meetings Protocol and Guidance” available from the Committee Officer named above or on the Council’s Website at:

<http://ww5.swindon.gov.uk/moderngov/ecCatDisplay.aspx?sch=doc&cat=13338&path=0>).

Terms of Reference:

To fulfil all the functions of an overview and scrutiny committee as they relate to:

- The review, scrutiny, and development of policy recommendations;
- The management of performance;
- The monitoring of progress towards delivering relevant strategies and corporate priorities; and
- The formulation of advice for the Cabinet, Council and other partners and stakeholders.

To have specific responsibility for (but not limited to) the scrutiny of:

- Adult Social Care;
- Community and Neighbourhoods; and
- Housing.

In addition, as these relate to Adults and Adult Social Care:

- The performance of services seeking to deliver healthy communities towards agreed local and national performance indicators;
- Health, health commissioning and service delivery;
- Public Health, Health promotion and the work of the Health and Wellbeing Board; and
- Health Integration and collaborative working and commissioning with Health agencies and providers and General Practitioners.

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ADULTS' HEALTH, ADULTS' CARE AND HOUSING OVERVIEW AND SCRUTINY COMMITTEE

THURSDAY, 21 JUNE 2018

PRESENT:- Councillors Maureen Penny (Chair), Claire Crilly, Malcolm Davies, Steph Exell, Mary Friend, Caryl Sydney-Smith, Julie Wright and Robert Wright.

Rosemary Curtis (Homeless Organisations Standing Together in Swindon), Michelle Howard (Equalities Advisory Forum) and Carol Willis (Healthwatch).

Apologies for absence were received from Councillors Nick Martin and Kate Moore (Tenant Scrutiny Panel).

1. Appointment of Vice Chair

Resolved – That Councillor Caryl Sydney-Smith be Vice-Chair of this Committee for the Municipal Year 2018/19.

2. Declarations of Interest

The Chair reminded Members of the need to declare any known interests in any matters to be considered at the meeting. No declarations were made.

3. Public Question

In accordance with Standing Order 28, Ms Samantha Wathen, Chair of “Keep our NHS Public Swindon”, submitted a written question requesting assurances that the Avon and Wiltshire Partnership (AWP) would not be using the Accident and Emergency Department at Great Western Hospital as a place of safety during the closure of Sandalwood Court Place of Safety for a trial period.

In Ms Wathen’s absence, the Chair advised the Committee that due to the late submission of the question, a response will be circulated after the meeting.

4. Minutes

Resolved -That the minutes of the meeting held on 28th March 2018 be confirmed and signed as a correct record.

5. Appointment of Co-optees

The Committee considered a report by the Director Law and Democratic Services regarding the appointment of Co-optees to the Adults’ Health, Adults’ Care and Housing Overview and Scrutiny Committee for the Municipal Year 2018/19.

Resolved - That the appointment of the following non-voting representatives be confirmed:

- Michelle Howard (Equalities Advisory Forum).
- Kate Moore (Tenant Scrutiny Panel)
- Carol Willis (Healthwatch)

- Rosemary Curtis (Homeless Organisations Standing Together in Swindon - HOSTS).

6. Clinical Commissioning Group Update

Ms Gill May, Executive Nurse at NHS Swindon Clinical Commissioning Group (CCG), presented a report providing the Committee with a performance update and a summary of key issues in relation to the planning and provision of health and social care services within the Borough. These included the Health Based Place of Safety in Swindon and the procurement of Swindon Extended Primary Care Access and GP Out of Hours Service.

Following the introduction of the report, Ms May and Mr Kevin McNamara, Director of Strategy, Great Western Hospital (GWH) NHS Foundation Trust, responded to members' questions and comments on the following issues:

- The need to undertake a cross services recruitment drive that would include the CCG, GWH and AWP, in order to attract key workers to Swindon.
- The work being undertaken by the Housing Department to ensure housing was provided for new healthcare staff.
- The number of Swindon patients accessing the Devizes place of safety over the past three months.
- The ways used to engage staff and stakeholders in the procurement process to commission Primary Care Extended Access and GP out of hour's services.

Resolved – (1) That the report be noted

(2) That the Executive Nurse at NHS Swindon Clinical Commissioning Group (CCG), be requested to include feedback at the next meeting of the Committee on the 360 Stakeholder Survey for 2018, conducted in April 2018.

(3) That a report regarding key worker recruitment be submitted by the Executive Nurse (CCG), Director of Strategy (GWH) and Managing Director (AWP) at a future meeting of the Committee.

7. Avon and Wiltshire Partnership NHS Trust Update

The Committee received a report by the Clinical Lead, Avon and Wiltshire NHS Partnership Trust (AWP), that highlighted the achievements of the organisation and provided a summary of the challenges it was facing. Mr Newlands Anning, Managing Director, Avon and Wiltshire NHS Partnership Trust (AWP), presented the report and drew the following key issues to member's attention:

- The AWP Transformational Programme, which entailed a review of the current models of care and development of new initiatives.
- The temporary closure of the Swindon Health based Place of Safety.
- The challenges faced by the service, including financial pressures, recruitment and retention, engaging and supporting staff and bed availability.
- The achievements accomplished by the service, including the establishment of the Acute Community Unit, the Adult Resource Centre, the reduction of out of area placements and the establishment of the Swindon Town FC sports group for service users.

Following the introduction of the report, Mr Anning responded to members' questions and comments on the following issues:

- The need to modernise Canal House for the benefit of the residents and the nearby community.

- The programmes for Mental Health patients to ensure their physical needs were also met.
- The work being undertaken to support patients during the three month pilot of the Acute Community Unit.
- The challenges for AWP as a Trust within a large geographical area to address financial, recruitment, retention and bed management issues.

Resolved – (1) That the report be noted.

(2) That, the Managing Director, Avon and Wiltshire NHS Partnership Trust (AWP), be requested to include updates in his next report on (a) the programmes used to ensure the physical needs of mental patients were met, and (b) the Acute Community Unit.

8. Great Western Hospital NHS Foundation Trust Update

Mr Kevin McNamara, Director of Strategy, Great Western Hospital (GWH) NHS Foundation Trust, submitted a report providing the Committee with a performance update and a summary of the following key issues in relation to the planning and provision of health and social care services provided by the hospital:

- The Care Quality Commission inspection in 2017 with nearly two thirds of services now rated as good or outstanding.
- The increase in demand for services within the Emergency Department.
- The impact of Swindon's increase in population and its effect on the hospital's capacity.
- The referral to treatment indicators, which were positive compared to national targets but had dipped during the winter months.
- The hospital's achievement of most of its cancer indicators, including the 31 day waits for diagnosis to first treatment, the 31 day wait for second treatment, the 62 day wait for first treatment from a referral from the NHS cancer screening services.
- The financial pressures on the hospital and the work being undertaken to reduce the deficit which will make the hospital eligible for some national Sustainability and Transformation funding.
- The work with other Trusts to submit a bid for capital funds to support the expansion of the emergency department and other parts of the estate due to lack of capacity at the hospital.
- The appointment of Julie Marshman as new Chief Nurse.
- The infection control regime, which saw no hospital acquired cases of MRSA blood stream infections in 2017/18.
- The excellent team work from hospital and Carillion staff during a major incident at the hospital.
- GP referrals and the fact that the majority were now being done electronically (digitally, maybe?).
- The new e-observations system enabling staff to manage patient observations electronically will be rolled out across the Trust this summer.
- The hospital's full accreditation again from UNICEF's Baby Friendly Initiative after a recent assessment.
- The success of the #EndPJParalysis campaign that sees patients up and moving out of their hospital bed. This helps them to get home quicker.

Following his introduction of the report, Mr McNamara, together with Councillor Brian Ford, the Cabinet Member for Adults, and the Director of Public

Health responded to members' questions and comments on the following issues:

- GWH's preparation for A&E pressures during the winter months.
- The breakdown of data provided for scrutiny by the Committee
- The national shortage of nurses and how GWH was addressing this.
- The distribution of medication in hospital wards on patient discharge.
- The waiting list for ophthalmology services.
- The bid for funding submitted to the National Executive to help deal with the population growth in Swindon.
- The need to attract developer's funding from the Section 106 Agreements and the Community Infrastructure Levy to address the population growth in Swindon.
- The myriad ways various health services were promoting preventative care on obesity and diabetes within the community.

Resolved – (1) That the report be noted.

(2) That the Executive Nurse at NHS Swindon Clinical Commissioning Group (CCG), circulate a range of key indicators to the Committee to assist them in selecting topics for scrutiny.

(3) Further to (2) above, a meeting be set up by the Committee Officer to discuss the key indicators and determine the way forward.

(4) Further to (3) above, the targeted indicators be submitted to the Director of Strategy for inclusion in future reports.

(5) That the Director of Strategy and the Executive Nurse at NHS CCG be requested to include an update on ophthalmology services in Swindon in their reports to be submitted at the next meeting of this Committee.

(6) That the Director of Strategy, Great Western Hospital (GWH) NHS Foundation Trust be requested to (a) include information regarding staffing levels at GWH in his report to the next meeting of this Committee and (b) circulate to members a copy of the presentation, "Rightsizing hospital capacity – planning for the future" that he had presented to the Committee in February 2018.

9. Performance for Adult Social Care Commissioning

Councillor Brian Ford, the Cabinet Member for Adults, presented a report that provided an update on performance and key issues relating to Adult Social Care commissioning. He drew attention to the financial pressures on the department and thanked officers for their hard work that had resulted in an under-spend of £612k in 2017/18 by Social Services. The Director of Health explained that the report had been structured to highlight the strengths and challenges of the work undertaken.

The following key issues were drawn to members' attention:

- The ongoing work to reduce spend on Learning Disability services as spend per service user in Swindon remained high compared to other authorities.
- The identification of improvements to safeguarding services around adult services to better understand Domestic Abuse the impact of coercive and controlling behaviour (especially on older people); application of Mental Capacity when there are safeguarding concerns; quality assurance processes; and personalisation in safeguarding.
- The action plan set up for a care home to address concerns by the Care Quality Commission.
- The range of initiatives underway in Swindon to tackle obesity and promote physical activity include Football Fans in Training, Health

Walks, Park runs, and weight management programmes.

- The improvement in the Delayed Transfer of Care performance.
- The work with external partners and services across the council to identify opportunities to improve resilience and prevent long term conditions by promoting health and wellbeing amongst Swindon residents.
- The reduction in the number of older people being admitted into permanent care. This was due to timelier assessments, the effectiveness of the reablement service and the improved management oversight at first point of contact.
- The “Illegal Tobacco Community” Engagement events held to inform the public of the harms of illegal tobacco.
- The support provided by various areas of the community including carers and the Voluntary Sector.

Following the introduction of the report, the Cabinet Member for Adults, with the Director of Health, responded to members’ questions and comments on the following issues:

- The promotion of healthy living within the community, with a particular focus on diabetes and obesity.
- Partnership working between health providers to help those wanting a lifestyle change, particularly to prevent obesity and diabetes.
- The work undertaken by officers, resulting in the Social Services under-spend.
- The facilities provided for people with learning disabilities in Swindon.
- The procedure for assessing care homes and the agencies involved in this process.
- The Council’s recruitment of community volunteers and how the Council engages with them.

Resolved – (1) That the report be noted.

(2) That the Corporate Director Adult Social Services and Health be requested to include information on the areas savings had been made on within her report to the next meeting of the Committee.

(3) That the Corporate Director Adult Social Services and Health be requested to circulate the Adult’s Annual Complaints & Compliments Report before the next meeting of this Committee.

(4) That the Director of Health arrange the attendance of a representative from the voluntary sector at the next meeting of the Committee in order for them to discuss their joint working with the Council.

10. Green Paper - Rough Sleeping Strategy

The Head of Housing submitted a report setting out the key challenges facing the Council and its success in responding to recent increases in rough sleeping. Councillor Cathy Martyn, Cabinet Member for Housing and Public Safety, presented the report and explained that the Committee’s views were sought on the emerging priorities for the Rough Sleeper Strategy and the related bid to the Ministry of Housing Communities and Local Government for additional resources to support those sleeping rough. She explained that the Rough Sleepers Strategy correlated to the Homeless Strategy. The Committee was advised that the report also summarised the key priorities for the Rough Sleeping Strategy, which were:

- Working in partnership to prevent people sleeping rough in the first place – No One Arrives on the Street
- Rapid joined up multi-agency response when people do end up on the streets.
- Provide an Outreach Service for those with complex or multiple needs.
- In partnership, once housing solutions have been identified for individuals, then a range of services are to be made available to support them.
- Develop a range of accommodation and support solutions tailored to individual needs
- The need to tackle anti-social behaviour and crime as this encourages those sleeping rough to engage. This keeps Swindon safe and clean for all users.

Following the presentation of the report, Councillor Cathy Martyn, with the Head of Housing, responded to members' questions and comments on the following issues:

- The involvement of the voluntary sector when drafting the Rough Sleepers' strategy.
- The discussions to be undertaken on the development of the Green Paper: Rough Sleepers Strategy, with the Housing Cabinet Member Advisory Group to obtain their contribution.
- The multi-agency support being provided to the rough sleepers in Swindon.
- The number of houses that been approved to assist rough sleepers.

The Head of Housing responded to questions submitted by Councillor Crilly and it was agreed that the questions and responses be circulated to members.

Resolved - (1) That the report be noted.

(2) That the Committee Officer be requested to circulate the Head of Housing's response to Councillor Crilly's questions regarding the Green Paper: Rough Sleeper's Strategy.

(3) That the Head of Housing be requested to include information on the number and location of the houses bought by the Council to support rough sleepers in Swindon.

11. Work Programme 2018-19

The Committee considered a report by the Director of Law and Democratic Services on the results of the work programme consultation and the suggested priorities for the work for the Municipal Year, 2018/19. It was agreed that a Domestic Abuse Task Group be established and that members be requested to contact the Director of Health if they wished to sit on this group.

Resolved – (1) That the report be noted.

(2) That the Committee thanks all the contributors who had suggested topics for inclusion in the Committee's Work Programme for the Municipal Year, 2018/19.

(3) That the Wiltshire Police Force be requested to report to the Committee detailing their work relating to health issues.

4) That Members be requested to advise the Committee Officer if they wish to volunteer for the Domestic Abuse Task Group.

In accordance with Standing Order 28, Ms Wathen, Chair of the Keep our NHS Public, Swindon, submitted additional written question following the meeting regarding places of safety.

Question:

What assurances can AWP give that GWH A&E will not be used as a place of safety during the pilot period of the closure of Sandalwood Court Place of Safety?

Response:

“Since the temporary closure of the Swindon PoS, no Service Users have been taken to GWH ED as a result of no capacity within the East PoS.

It is important to note that a person detained in the community under a Section 136 may require assessment at GWH ED due to physical needs, but following this and once medically fit they will be transferred to the East PoS.”

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Councillor Crilly's questions and responses from the Head of Housing.

1. *What is the timetable for the completion and implementation of both the rough-sleeping and homelessness strategies?*

We have started the process with this Green Paper to Overview and Scrutiny Committee. We will consult with the Homelessness voluntary sector at their umbrella group "HOSTS" on 19th July. We will then feedback responses and develop this further with Overview and Scrutiny Committee and seek the views of the Health and Well Being Board which has representatives from key partner agencies. Recommendations will then be taken to Cabinet

2. *Who will be consulted on this and by what means?*

Please see above

3. *What exactly is being consulted on, given that the report suggests that government funding has been already been secured for specific items and the priorities are set out*

The headline Strategy is set out in Section 3.12 for comment

4. *Pg 55 3.1: Swindon's Rough sleeper count for 2017 was 45 - why is this number not used here?*

The number is historic as more recent counts and evidence from the multi-agency Rough Sleeper Panel show it to be considerably lower. Therefore the number of 45 is historic not particularly helpful

5. *Pg 58 3.12 Why do the proposals not include a "No Second Night on the street" policy?*

No second night out relates to a previous Government policy. However this is covered by the draft priority of ensuring that no-one should return to the streets

6. *Why has there been no consideration being given to a day-centre for rough-sleepers?*

The idea of a Day-Centre has previously been linked with the development of proposals for a further Temporary Winter Housing Provision for 2018/19. This will form part of our consultation with HOSTS

7. *3.12.3- Outreach services - How does this build on or differ from the current outreach service?*

We are looking to re-commission the Outreach Service with refreshed outcomes that relate to the new Rough Sleeper Reduction Strategy

8. 3.12.6

What does the support for rough-sleeper component of this actually look like?

What assurances can be given that this money will be used to directly support rough sleepers rather than to cleanse the town centre of rough sleepers?

All of the funding available under the successful Rough Sleeper Fund Bid will be used to support the homeless. This will provide support based on broad "Housing First" principles. This is direct support to individuals in their new homes that will enable them to sustain their new tenancies. For example, help with their Universal Credit claim, seeking work, volunteering or training opportunities, encouraging them to keep health related appointments, basic advice about running their own home and looking after themselves.

Performance for Adult Social Care Commissioning

Adult's Health, Adult's Care and Housing Overview and Scrutiny

Date: 12th September 2018

Author: Director of Adult Social Services
Wards: All
Parishes Affected: All

1. Purpose and Reasons

- 1.1 This report provides the Adults Care, Adults Health and Housing Overview and Scrutiny Committee with an update of performance and key issues relating to Adult Social Care commissioning and performance.
- 1.2 A key purpose of the Adults Care, Adults Health and Housing Overview and Scrutiny Committee is to hold commissioners and providers of Health and Social Care Services to account.
- 1.3 Any commissioner or provider of Health and Social Care Services in Swindon is required to provide information on the planning and provision of health and social care services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

2. Recommendations

The Committee is recommended to:

- 2.1 Note the report
- 2.2 Identify any areas of concern or interest that require further investigation.

3. Detail

Priorities and Pledges

- 3.1 This report informs Scrutiny Committee Members on the progress we are making in delivering the priorities and pledges set out in Swindon's vision for 2016-2020 around supporting vulnerable adults to live as independently as possible and enjoy safe and fulfilling lives (priority 4). The three pledges we are committed to in delivering this priority include:
 - 3.1.1 Working with the Clinical Commissioning Group (CCG) and GP surgeries to help people with long term health and social care needs to manage their health effectively with support from community groups and multidisciplinary teams (Pledge 26)
 - 3.1.2 Ensuring that more people and their carers are supported to live as independently as possible and reducing the length of time people need to spend in residential care. (Pledge 27)

Further information on the subject of this report can be obtained from Phillipa Lamb, 07818510484, plamb@swindon.gov.uk.

Performance for Adult Social Care Commissioning

Adult's Health, Adult's Care and Housing Overview and Scrutiny

Date: 12th September 2018

3.1.3 Reducing smoking prevalence to less than England average (Pledge 30)

3.2 This is an interim report to provide an overview of performance as at the end of June 2018. A more comprehensive report will be prepared for November. . Performance and activity data are provided in the Appendix. We have highlighted those performance areas which we jointly deliver with the Clinical Commissioning Group as part of the Better Care Fund (BCF)

What are the challenges that your organisation is facing?

Top Four Priorities	Progress & Next Steps	Impact/outcomes
Learning disability Services	Focussing on aligning spend on learning disability services with spend in similar authorities through service re-design (see paragraphs 3.1 to 3.3)	To deliver a service that appropriately supports service users to enable them to actively contribute to society
Adult Safeguarding	Work is ongoing to address the shortfalls identified by the safeguarding service audit and performance management of the service. Progress is being tracked and the impact monitored to ensure improvements are fully embedded across the service (see paragraphs 3.4 and 3.5)	Adults are appropriately safeguarded through timely identification of adults at risk and robust compliance with adult safeguarding processes.
Quality of Care Homes	Ongoing focus to support providers to drive quality improvements across the care homes in Swindon (see paragraphs 3.6 and 3.7)	A higher proportion of Swindon Care Homes judged as good or outstanding by CQC
Smoking	We will continue to work with partners and stakeholders to further embed tobacco control interventions into strategies, action plans, performance frameworks and pathways to further develop a whole system approach to encourage more people in Swindon to quit smoking (see paragraphs 3.8 and 3.9)	Smoking prevalence in Swindon is reduced

Learning Disability Services

3.1 Work is ongoing to reduce spend on Learning Disability services to align with spend in similar authorities. The 2018/19 budget for Learning Disability is £28.858m. The service has already achieved the £500k savings set for 2018/19,

Further information on the subject of this report can be obtained from Phillipa Lamb, 07818510484, plamb@swindon.gov.uk.

Performance for Adult Social Care Commissioning

Adult's Health, Adult's Care and Housing Overview and Scrutiny

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a further saving of £1m is planned for 19/20. The service re-design programme is making good progress in changing the approach to service delivery to enable individuals to become more independent.

- 3.2 Supporting people with a disability into paid employment is a national policy priority as well as a local pledge. At the end of June there are 36 adults in receipt of support who are in employment equating to 6% which is an improvement on last year's performance of 5.5%. There are an additional eight adults with learning disabilities who are no longer receiving long term support services who are in meaningful employment for 16 hours or more per week. The draft strategy for Supported Employment is on the agenda for Health and Wellbeing Board in October 2018 for approval. The strategy outlines priorities and headline actions for increasing the number of Swindon's vulnerable residents (particularly people with learning disabilities) who gain and retain paid employment in the open market or another meaningful employment related activity. The draft strategy is currently in circulation for consultation.
- 3.3 We continue to strive to undertake timely reviews within learning disability services but performance continues to be impacted by capacity, the drive to deliver savings, and the timely processing of data which has led to under reporting.

Adult Local Safeguarding Board

- 3.4 We continue to maintain and develop the profile of safeguarding adults. There has been a 16% decrease(232) in the number of referral received by the safeguarding team during quarter 1 2018/19 compared to the same period in 2017/18 (276). Nearly half the alleged abuse referrals took place at home (108), 12% (27) in supported accommodation, 9.4% in care home and 7.3% in care home with nursing. The concerns the majority of alleged abuse referrals related to were physical (63), financial (51), psychological (43) and neglect (40). The majority of referrals have come from care provider (61) and GWH staff (43). Fifty five referrals progressed to an enquiry, of which 33 were substantiated. In the majority of cases care management action was taken to address the abuse (10). Two outcomes resulted in criminal prosecution/police action. The categories of concern align with the national trends reported through the Safeguarding Adult Collect (Health and Social Care institute) Further benchmarking will be undertaken following the publication of the Local Adult Safeguarding Annual Report in October 2018.
- 3.5 The action plan to address the shortfalls within the quality of the safeguarding services are being tracked and the impact monitored to ensure improvements are fully embedded across the service. The Risk Enablement Panel continues to support adults who are considered high risk but are believed to have Mental Capacity.

Further information on the subject of this report can be obtained from Phillipa Lamb, 07818510484, plamb@swindon.gov.uk.

Performance for Adult Social Care Commissioning

Adult's Health, Adult's Care and Housing Overview and Scrutiny

Date: 12th September 2018

Quality of Care homes

- 3.6 There is one private residential care home that has recently been judged as inadequate by CQC in Swindon. This home is being monitored on a weekly basis by Adult Social Care Commissioning Team and a focussed inspection by CQC is planned for quarter 2.

	% Nationally	% Swindon (Q1 18/19)	No. Swindon (Q1 18/19)
Residential (Older People /Physical Disability and Learning Disability)			
Inadequate	1%	2%	1
Requires Improvement	21%	18%	7
Good	76%	69%	27
Outstanding	2%	10%	4
Nursing			
Requires Improvement	28%	22%	3
Good	66%	78%	11
Outstanding	2%	0%	0

- 3.7 The Commissioning Team undertakes annual quality assurance visits and supports providers to make improvements. The Care Home Forum meets throughout the year with shared chairing by a provider representative and the Head of Commissioning. The Forum attendance continues to improve, and commissioners visit the individual homes to encourage more active engagement. Commissioners also meet with CQC bi-monthly to triangulate information regarding particular providers who may be of concern. The Care Home framework is in preparation and a new service specification is being developed to provide clarity for residential and nursing home providers on the future commission intentions from both CCG and SBC in relation to quality and outcomes.

Smoking

- 3.8 Smoking continues to be the biggest preventable cause of ill health and early death as well as the leading cause of health inequality. The smoking prevalence in adults in Swindon for 2017 (latest available data) is 17.3% which means Swindon is statistically similar to the England average of 14.9%. Although this has increased from the 2016 figure of 14.9%, the Swindon trend for smoking prevalence in adults is encouraging. Between 2011 and 2017 smoking

Performance for Adult Social Care Commissioning

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prevalence in Swindon has decreased by 0.93% each year compared to 0.85% in England. There are an estimated 7,000 fewer adult smokers in Swindon in 2017 compared to 2011. Smoking is far more common among unskilled and low income workers than among professional high earners. Smoking rates amongst workers in our routine and manual jobs are higher than our rates for adults overall. Smoking prevalence for this cohort in Swindon in 2017 is reported as 26.2% which is similar to the England average of 25.7%. Our smoking in pregnancy at the time of delivery (SATOD) prevalence rate for 2017/18 was 11.3% which equates to approximately 320 women.

- 3.9 There are a number of initiatives planned for 2018/19 to encourage more people to quit smoking. For example, we are increasing the number of smokefree places across Swindon – e.g. play parks and newly created District Centres to further normalise a smokefree lifestyle including the Great Western Hospital site on 01 January 2019. Swindon is launching the Health Optimisation programme in July 2018 where patients on the muscular skeletal pathway will be offered and signposted to support to quit smoking or lose weight to improve their health outcomes at every opportunity. We will continue to work with partners and stakeholders to further embed tobacco control interventions into strategies, action plans, performance frameworks and pathways to further develop a whole system approach.

What have you done well?

Top five achievements	Progress to date & Next Steps	Impact/outcomes
Managing demand and financial pressures	Forecast outturns at year end is a balanced budget for public health and a slight under-spend for Adults as at June 2018. Services are on target to achieve 2018/19 savings. Initiatives to manage demand successfully being implemented (see paragraph 3.10 and 3.11)	Demand and future cost pressures are effectively managed.
Delayed transfers of care - DTOC	Delayed Transfers of Care has significantly reduced and continues to be effectively managed following the successful delivery of the Adult Social Care re-design Transformation Programme (see paragraphs 3.13 and 3.14)	Fewer patients are having their discharge from hospital delayed when they are medically fit to leave hospital.

Further information on the subject of this report can be obtained from Phillipa Lamb, 07818510484, plamb@swindon.gov.uk.

Performance for Adult Social Care Commissioning

Adult's Health, Adult's Care and Housing Overview and Scrutiny

Date: 12th September 2018

Front Door	We continue to focus on helping people to maintain and prolong their independence through improving our first point of contact /front door. Our aim is to divert people into community based solutions where that is the right thing to do, and for those who do need help, we need to make sure they get it quickly (see paragraph 3.15)	The front door is more effective in dealing with people with lower level needs through the provision of better information, advice and signposting. The right people (i.e. those with higher levels of need) are progressing to assessment and service.
Reablement	There continues to be significant improvements in the Reablement Service. Swindon Borough Council's Reablement and Fessey House programme has received highly commended in the HSJ (Health Service Journal) 2018 Value awards (see paragraph 3.16 to 3.17)	More people are supported to live independently at home following an episode of care.
Permanent admissions to Residential Care and Nursing Homes	Admissions to residential and nursing care continues to be effectively managed (see paragraphs 3.18 and 3.19)	More people are supported to live independently at home following an episode of care.

Managing Demand and financial pressures

- 3.10 The latest forecast outturn position as at June 2018 across Adults is an underspend of £301k at year end. To date, we have achieved £1.813m of savings, 48% of the challenging target we set ourselves for 2018/19 of £3.726m. Public Health is forecasting a balanced budget at year end.
- 3.11 The number of people who might need social care services in the future is expected to rise significantly at a time when funding is decreasing. We are successfully adopting a strength based approach as outlined in our Adult Social Care Strategy. This involves initially entering into conversations with people who seek support building on strengths, understanding what people can do, and how communities, families and friends can help. Where people need ongoing support, we work towards sharing this responsibility with the individual, their families and their communities. Our aim is to meet people's needs in a personalised way which delivers the outcomes that people seek.
- 3.12 A new project has been approved to focus on reducing loneliness and isolation in local areas so that people are happier and enjoy the best quality of life. This will build on our experience of mobilising local people and building community

Further information on the subject of this report can be obtained from Phillipa Lamb, 07818510484, plamb@swindon.gov.uk.

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capacity. This is an important project as there are significant and lasting impacts associated with loneliness and isolation.

Delayed Transfers of Care (DToC) – (BCF Scheme and Indicator)

- 3.13 A delayed transfer of care is where a patient is ready and safe to leave hospital care, but unable to do so, and remains occupying a hospital bed. Swindon Borough Council, Swindon CCG, Great Western Hospital, and Wiltshire Council continue to work together to tackle the blockages leading to patients having their discharge from hospital delayed.
- 3.14 Delayed Transfers of Care attributable to social care has significantly reduced following the successful delivery of the Adult Social Care re-design Transformation Programme launched in April 2017. The provisional DToC data for end of July 2018 indicates further improvement with 0.84 bed days lost due to discharge delays attributable to social care compared to 13.06 in July 2017. As at end of July 2018, there were no joint attributable delays (e.g. NHS and social care). The main areas of reduction in delays attributable to social care have been due to more timely completion of social work assessment, speedier transfers to residential and nursing care, and less delays in waiting for a care package at home.
- 3.15 The latest published DToC performance as at end of June 2018 is 1.05 bed days per 100,000 population lost due to discharge delays attributable to social care against a target of 2.67. This is significantly better than the average for the South West (4.35). Our cumulative year to date (YTD) performance per 100,000 population, April 2018 to June 2018, for delayed discharge attributable to social care is 0.97 days which is below the average for the South West (4.4). The YTD total delayed bed days per 100,000 population for Swindon attributable to NHS, Social Care or Both, for April 2018 to June 2018, is 5.94 which is also significantly better than the average for the South West (10.5). Swindon has been identified as the best performing health and social care system in the South West for managing transfers of care.

Front Door

- 3.16 We continue to focus on helping people to maintain and prolong their independence through improving our first point of contact /front door. Our aim is to divert people into community based solutions where that is the right thing to do, and for those who do need help, we need to make sure they get it quickly. So far this year we have received 3177 contacts, and it is pleasing to see that a higher proportion of these are now being dealt with more effectively at the front door compared to the same period last year. Only 40.1% of these contacts (1274) progressed to an assessment of need, compared with 47.8% last

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Performance for Adult Social Care Commissioning

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year. From April 2018 to the end of June 2018, 34.7% of people progressed to a service following an assessment compared with 42.6% last year. With the front door becoming more effective in dealing with people with lower level needs through the provision of better information, advice and signposting, we should see the right people (i.e. those with higher levels of need) progressing to assessment and service.

Reablement (BCF Scheme and Indicator)

- 3.17 There continues to be significant improvements in the Reablement Service. From 1st April to June 2018, 150 episodes of homecare reablement have been completed. The average number of days to re-able an individual is 20 days, with 60.6% gaining independence following the service and not requiring ongoing support. We have also improved the number of people receiving reablement at any one time. The average number of people receiving reablement in a week as at June 2018 is 48 compared to 37 people previously. These improvements have been achieved through changing staff rostering and working more efficiently.
- 3.18 Swindon Borough Council's Reablement and Fessey House programme has received highly commended in the HSJ (Health Service Journal) 2018 Value awards. The award recognises how the service has worked in partnership with Great Western Hospital to reshape reablement services. This has avoided people being admitted to residential and nursing placements when it is not in their best interests, and reduced delayed discharges from hospital when the patient is medically fit with a home-first approach. The team found that in 45% of cases where someone was discharged to residential care, they would have achieved a better outcome if had they returned home with appropriate support to help them regain their independence. During 2017/18, the Council increased the number of people benefitting from the reablement service from 300 to 485 (a 163 per cent increase), saving more than £1.9m for the health and social care economy.

Permanent admissions to Residential Care and Nursing Homes (BCF scheme and Indicator)

- 3.19 Admissions to residential and nursing care continues to be effectively managed and remain below target for older adults (aged 65 and over). From April 2018 to June 2018, 26 older people have been admitted to permanent care: 12 to a nursing home placement and 14 to residential care. Amongst these first time permanent admission to care, 5 people were admitted with mental health needs and 21 people were admitted with personal care/physical support needs (older people). Permanent Residential and Nursing Admissions 65 years per 100,000 of the population is 77.08 as at June 2018 which is below the target of 165.27 (lower is better).

Performance for Adult Social Care Commissioning

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- 3.20 For younger adults from April 2018 to June 2018, one person with mental health needs has been admitted to a residential placement. Permanent Residential and Nursing Admissions 18-64 year olds per 100,000 of the Population is 0.74 as at June 2018 which is better than the target of 2.96 (lower is better). Where possible, we place people in Care Homes and Extra Care Housing that are owned by Swindon Borough Council to reduce budget pressures.

4. Supporting Information

- 4.1 None

5. Alternative Options

- 5.1 None

6. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

- 6.1 There are no direct financial implications arising from this report. Any financial pressures resulting from changes in demand for social care services will be identified and included within the Council's Medium Term Resourcing Plan.

Legal and Human Rights Implications

- 6.2 None.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 6.3 None

Diversity Impact Assessment

- 6.4 None.

Risk Management

- 6.5 None.

7. Consultees

- 7.1 Director of Adult Social Care, Deputy Director of Adult Social Care, Cabinet Member for Adults' Health and Social Care, Director of Public Health and Adult Social Care Managers.
- 7.2 The Director of Finance (Section 151 Officer) and the Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

Performance for Adult Social Care Commissioning

Adult's Health, Adult's Care and Housing Overview and Scrutiny

Date: 12th September 2018

8. Background Papers

8.1 None.

9. Appendices

9.1 Appendix 1 – Performance and Activity Data 1 April to 30 June 2018



Adult Social Care Performance Dashboard Summary of Provisional Results 30th June 2018

Indicator	NA 2016/17	PYA 17/18 Y/End	Annual Target	June 18 Actual	Good is..
Enhancing Quality of Life					
% of Service Users who receive self directed support (M)	89.4	84.4	100	87.34	high
% of Services Users who receive a direct payment (M)	28.3	22.9	30	23.8	high
% of Carers who receive self directed support (M)	83.1	29.3	36	21.92	high
% of Carers who receive a direct payment (M)	74.3	28.7	34	21.36	high
% of Mental Health adults in paid employment (M)	7	14	11	13.9	high
% of Mental Health adults living independently with or without support (M)	54	71.1	84	82.1	high
% of learning Disability adults living independently in their own home or with their family (Q)	76.2	73.9	72	74.34	high
Delaying and Reducing the Need for Care					
Permanent admissions to residential & nursing care for Younger Adults aged 18-64 per 100K population (M)	12.8	13.37	10.37	0.74	low
Delayed bed days attributable to NHS Social Care or Both per 100k population - Average of year so far (M)	NA	13.26	8.91	5.94	low
Ensuring People have a Positive Experience of Care and Support					
% of Waiting times of Clients Assessments completing within 28 days (M) Local Measure	NA	85.2	85	81.5	high
% Waiting times of Client Assessments starting within 5 days of contact (M) Local Measure	NA	74.8	85	74.6	high
% Waiting times of end of assessment to provision of services within 28 days (M) Local Measure	NA	83.2	89	93.3	high
Safeguarding adults whose Circumstances make them Vulnerable					
100% of safeguarding decisions made within 2 days of date of referral (Q) Local Measure	NA	91.2	97	99	high

KEY

NA: National Average

Reporting Frequency (M) Monthly

Reporting Frequency (Q) Quarterly

PYA: Previous Year Actual

Reporting Frequency (A) Annually



Adult Social Care Performance Dashboard Summary of Provisional Results 31st March 2018

Indicator	NA 2016/17	PYA 17/18 Y/End	Annual Target	Jun 18 Actual	Good is..
Better Care Fund					
Delayed bed days attributable to Social Care- All days (M). Snap shot end of month figure per 100,000 population	NA	0.52	2.67	1.05	low
Permanent admissions to residential & nursing care for Older Adults per 100K population (M)	610.7	489.13	661.07	77.08	low

Learning Disability Service Users who have received a review (M) Local Measure	NA	44.4	75	6.1	high
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Corporate Pledges

Increase % of clients receiving a service, who have receive an annual review (M) Local Measure	NA	56.3	75	12.4	high
Increase % of Carers Assessed or Reviewed (M)	NA	72	70	15.32	high
Delayed bed days attributable to social care- All days (M) per 100,000 population. Year to date figure	NA	4.7	2.67	0.97	low
% of adults with Learning Disabilities in paid employment	5.7	5.76	5	5.96	high

KEY

NA: National Average

Reporting Frequency (M) Monthly

Reporting Frequency (Q) Quarterly

PYA: Previous Year Actual

Reporting Frequency (A) Annually

socserv/wginfo/PI2017/18/Scrutiny Reports

Appendix One: Background activity and performance Data

Number of service users receiving Permanent Nursing & Residential care in Swindon between April 18 to June 18

Primary Support Reason	18-64 Year Olds				65+ Year Olds			
	Nursing Care		Residential Care		Nursing Care		Residential Care	
	April-Jun 17	April-Jun 18	April-Jun 17	April-Jun 18	April-Jun 17	April-Jun 18	April-Jun 17	April-Jun 18
Physical Support: Access and Mobility Only	0	0	0	0	0	2	0	0
Physical Support: Personal Care Support	5	7	12	8	186	145	203	199
Sensory Support: Support for Visual Impairment	0	0	0	0	1	1	3	5
Sensory Support: Support for Hearing Impairment	0	0	0	0	2	2	0	0
Sensory Support: Support for Dual Impairment	0	0	0	0	1	0	0	0
Support with Memory and Cognition	0	1	1	1	46	45	71	70
Learning Disability Support	2	2	158	154	3	2	36	36
Mental Health Support	3	3	32	33	8	10	29	30
Totals	10	13	203	196	247	207	342	340

Number of service users receiving Community Services in Swindon between April 18 to June 2018

Primary Support Reason	Services to help users maintain mobility & independence; Adaptations, Equipment, & Telecare (e.g. home alarms & sensors)		Preventative services to support users during crisis & help remain independent; Crisis support, hospital discharge services & reablement		Community Services to help users remain independent & living in the community; Homecare services, day care support, direct payments, short term breaks	
	April-Jun 17	April-Jun 18	April-Jun 17	April-Jun 18	April-Jun 17	April-Jun 18
Learning Disability Support	50	59	10	3	498	512
Mental Health Support	5	4	1	4	60	69
Physical Support - Access & Mobility only	314	327	1	1	7	7
Physical Support - Personal Care Support	131	124	46	52	263	274
Sensory Support - Support for Dual Impairment	2	0	0	0	3	3
Sensory Support - Support for Hearing Impairment	3	2	0	0	0	1
Sensory Support - Support for Visual Impairment	4	5	1	0	9	9
Support with Memory & Cognition	2	1	1	1	10	9
18 -64 Year Old Total	511	522	60	61	850	884
	April-Jun 17	April-Jun 18	April-Jun 17	April-Jun 18	April-Jun 17	April-Jun 18
	April-Jun 17	April-Jun 18	April-Jun 17	April-Jun 18	April-Jun 17	April-Jun 18
Learning Disability Support	11	12	2	2	48	40
Mental Health Support	13	13	8	3	36	38
Physical Support - Access & Mobility only	714	707	7	9	15	16
Physical Support - Personal Care Support	361	336	418	445	758	705
Sensory Support - Support for Dual Impairment	6	3	0	1	13	10
Sensory Support - Support for Hearing Impairment	9	9	3	5	5	5
Sensory Support - Support for Visual Impairment	13	9	2	6	17	15
Support with Memory and Cognition	25	27	1	3	49	44
65+ Year Old Total	1152	1116	441	474	941	873

Great Western Hospital NHS Foundation Trust Update

Adults Care, Adults Health and Housing Overview and Scrutiny Committee

Date: 12th September 2018

Author:	Kevin McNamara, Director of Strategy & Community Services Great Western Hospitals NHS FT
Wards:	Swindon
Locality Affected:	Swindon
Parishes Affected:	Swindon

1. Purpose and Reasons

- 1.1** This report provides the Adults Care, Adults Health and Housing Overview and Scrutiny Committee with an update of key issues relating to Great Western Hospitals NHS Foundation Trust.
- 1.2** A key purpose of the Adults Care, Adults Health and Housing Overview and Scrutiny Committee is to hold providers of healthcare services to account.

As a provider of healthcare in Swindon, Great Western Hospitals NHS Foundation Trust is required to provide information on the planning and provision of healthcare services within the Borough and consult with the Committee on any planned substantial changes or developments.

Recommendations

The Committee is recommended to:

- 1.3** Note the report
- 1.4** Identify any areas of concern or interest that require further investigation.

2. Detail

This is a general update from Great Western Hospitals NHS Foundation Trust.

Further information on the subject of this report can be obtained from Kevin McNamara, Director of Strategy, Great Western Hospitals NHS Foundation Trust - 01793 604676, kevin.mcnamara1@nhs.net

Great Western Hospital NHS Foundation Trust Update

Adults Care, Adults Health and Housing Overview and Scrutiny Committee

Date: 12th September 2018

Top Five Challenges	Process (Steps Taken)	Outcomes (Going Forward)
<p>1. Emergency Department – Maintaining consistently good performance against rising demand</p> <p>Current performance in July was 91.8% of patients seen, treated or admitted within 4 hours against a national target of 95%.</p> <p>ED attendance has increased from 6,177 in July 2017 to 7,272 in July 2018 – a significant upsurge and only partly explained by the hot weather. This means the Trust will have seen a 10% increase in attendance in Q1 this year compared with 2017 which, when seen alongside the performance improvements is good work by the Trust and demonstrates the improvements being made.</p>	<p>Enhancements we have made have had a positive impact on efforts to improve 4 hour ED performance during the first half of 2018.</p> <p>Earlier this year the Trust agreed a revised trajectory with NHS Improvement of 91.2%, which we are achieving. However the Trust continues to pursue improvements in performance towards the national standard of 95%.</p> <p>This has involved a significant amount of work to develop new processes at the front door as well as focussing on reducing the number of patients in hospital who are waiting for a care packages elsewhere. Whilst there is still much work for us to do as a system, this work involving the CCG and SBC has been very positive and has made a significant contribution to flow and ultimately the impact at the front door.</p>	<p>Our focus now, after a period of performance improvements is to manage this progress consistently as we head through the winter months.</p> <p>Looking ahead, work is also underway to expand the Ambulatory Care Unit as a shorter term measure on the ground floor to help increase capacity so that more patients can be streamed to Ambulatory Care, and therefore reduce the need for admission. This work is due to complete in early December.</p> <p>As briefed to the committee last time, the Trust also awaits the outcome of a national bid for funds to expand ED and increase the number of beds to help meet current and future demand. An announcement is likely in November.</p> <p>With increased pressure, it is essential we maintain the focus on safety at our busiest times. We routinely monitor and report publicly on the Hospital Standardised Mortality Rates – a measure of the expected number of deaths in a hospital – and we continue to perform well against this measure.</p> <p>This includes continued focus on early intervention for sepsis and a range of other safety initiatives that are part of our 500 lives campaign – a goal to save an extra 500 lives between 2015-2020.</p>
<p>2. Cancer – Performance</p> <p>The Trust achieved the two week wait target for all cancers in Q1 with a performance of 95.1% against a</p>	<p>Whilst 62 day performance has been achieved there has been a rollover of some patients into July and also into August and September (specifically on the Urology pathway) that will cause performance to fall below</p>	<p>We expect to achieve the national standard by November 2018.</p>

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Great Western Hospital NHS Foundation Trust Update

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Date: 12th September 2018

<p>national standard of 93%. However we missed the 93% target for symptomatic breast patients (89.9%).</p> <p>62 day wait from the time of an urgent GP referral to treatment was also achieved overall – 93.1% against a national standard of 85%.</p>	<p>standard.</p> <p>This is the subject of sustained weekly focus with Executive-led Cancer Oversight Committee meetings together with weekly calls with NHS Improvement focussing on all tumour sites.</p> <p>This includes specific work on resolving pressure points along tumour site timed pathways, working with North Bristol Trust on treatment dates for Urology patients and revised 62 day performance trajectories.</p> <p>Communication between tertiary providers is being strengthened through weekly provider to provider telephone calls.</p> <p>For breast symptomatic waits, an improvement plan is in place and an additional Breast Registrar is now in post, which will have a positive impact.</p>	
<p>3. Ophthalmology – Waiting lists</p> <p>Ophthalmology waiting times are the subject of further focus at this time with the appointment of an independent provider to help the Trust deliver improvements in the waiting list backlog.</p>	<p>Additional capacity is being provided to supplement capacity and reduce appointment delays. The ophthalmology waiting list has so far been reduced from 1,420 to 886, in a recent 6 week period follow the engagement of an external provider.</p>	<p>We will continue the clinical and administrative work to ensure patients are seen in a timely manner by an appropriate clinician. We expect the list to be at a manageable level by the end of October 2018.</p>
<p>4. Diagnostic – performance</p> <p>A national standard is in place for diagnostic tests to be completed within 6 weeks of referral. Early diagnosis helps improve outcomes and</p>	<p>Radiology and endoscopy are the main area of focus albeit with some other smaller diagnostic specialities.</p> <p>A detailed action plan is in place for both areas.</p> <p>For Radiology the action plan in place has begun to deliver</p>	<p>Against the overall standard, based on the improvement work, we forecast improved performance to be 90% in November with 98% in March 2019.</p> <p>For Radiology specifically to improve equipment resilience and capability, a Managed Equipment Service is in development to support a</p>

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Great Western Hospital NHS Foundation Trust Update

Adults Care, Adults Health and Housing Overview and Scrutiny Committee

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<p>therefore this represents an important measure for the Trust and an area of significant focus at this time following deteriorating performance. In June the Trust achieved 78.9% against the national target of 99%. This has partly been driven by a lack of capacity and the increase in the number of fast track referrals over the past number of months.</p>	<p>improved performance albeit with further work to do. This includes utilising a mobile CT scanner on site to increase capacity and working with an independent Ultrasound provider from September. Other work includes refining processes and space within the department and increasing Radiology Support Workers as well as Radiographers with 9.8 WTE of newly qualified Radiographers due to start in September and October.</p> <p>For Endoscopy an action plan is in development but performance is expected to decline in September due to staffing and capacity issues over the summer.</p> <p>Additional contributory factors here include a new pathway introduced in May 2018 for Colorectal Cancers, which meant they go straight to test and resulted in an additional 75 fast track colonoscopies, which is the equivalent of an additional 15 theatre lists.</p>	<p>comprehensive equipment replacement programme through 2019/20.</p>
<p>5. Stroke – performance and procedures</p>	<p>On average the Trust sees c10 stroke patients admitted to hospital each week and is an area we have been providing additional resource and focus since earlier this year to help ensure that we are meeting national standards.</p> <p>National standards include measures such as whether patients are admitted directly to a Stroke ward, the amount of time stroke patients spend on a dedicated stroke ward, time to brain imaging, amount of therapy support provide and a range of other measures. These are then summarised into ratings from A-E</p>	<p>Key challenges for the Trust in this area include bed occupancy across the Trust routinely over 100%, which makes ring fencing Stroke beds more challenging at our busiest times.</p> <p>Actions taken to improve the care for Stroke patient includes: implementation of Standard Operating Procedures and micro-management of each patient along the pathway to ensure very close scrutiny of delays. Improved identification of Stroke in ED to enable quicker admission and additional resource provided from the community service to the acute for</p>

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Great Western Hospital NHS Foundation Trust Update

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Date: 12th September 2018

	<p>in terms of performance with A being the best. At present Swindon is graded at E with a goal of achieving level C by June 2018.</p> <p>As data is submitted retrospectively, we do not yet know whether we have achieved that level but are confident improvements have resulted in improved care, which will be demonstrated in improvements against the standard.</p> <p>Of the many different areas we measure the key ones are:</p> <ul style="list-style-type: none">• Direct admission to the Stroke Unit currently stands at 84.6% for July against the standard of 90% - this represents the Trusts best performance since May 2011 with an additional target for patients to be admitted direct within four hours.• Brain imaging within 1 hour and 12 hours. 1 hour performance in July was 63% against a standard of 50% and 12 hour performance was 92.6% against a standard of 90%.• Thrombolysis assessment - standard 90% which we consistently meet.• Therapies – this is split across OT, Physiotherapy and Speech and Language Therapy and is an area where improvements have been made but the Trust is still currently underperforming.	therapy.
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Great Western Hospital NHS Foundation Trust Update

Adults Care, Adults Health and Housing Overview and Scrutiny Committee

Date: 12th September 2018

Top Five Achievements	Process (Steps Taken)	Outcomes (Going Forward)
1. Pharmacy performance. This has been an issue raised by members in previous meetings, particularly with regards to delays for medicines at discharge. I am pleased to report that this is an area where the Trust has been performing well since February this year with a turnaround time of less than 2 hours for 82% of patients (against a target of 80%).	We have also put a sustained focus on improving safety and have seen a consistently low level of critical dispensing errors – 0.02% in June. We have also benefited from a Medicines Optimisation Team (MOP) in place to cover Saturn, Neptune, Mercury and Jupiter wards with dedicated pharmacy support to improve (to take away) TTA times.	Our focus is on sustaining the improvements we have already achieved and optimising processes.
2. Maternity and neonatal safety collaborative	We have significantly improved new born preterm babies' chances of survival and reduced their risk of developing serious brain bleeds and gut complications through delayed cord clamping. This work is being led by Neonatal Consultant Dr Sarah Bates and is being well received nationally.	Ninety per cent of all premature arrivals at the Great Western Hospital now benefit from this simple yet significant procedure and we are now one of the best hospitals in the world for offering this treatment.
3. New Deputy Chief Nurse appointed	Tania Currie has been appointed as the new Deputy Chief Nurse for the Trust. Tania is already a familiar face to many, having worked for the Trust for several years. Her most recent role has been Divisional Director of Nursing for Planned Care.	Tania will continue her focus on staff engagement, for which she has been listed as a finalist for the Nursing Times Workforce Summit Awards in the Best wellbeing and staff engagement initiative category.
4. Staff Awards	Trust hosted its Staff Excellence Awards in tribute to all staff who go above and beyond for patients every day. Nine awards were handed out at the event at Swindon's Steam Museum on Friday 22	

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Great Western Hospital NHS Foundation Trust Update

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Date: 12th September 2018

	<p>June.</p> <p>Nerissa Vaughan, Chief Executive, personally thanked the 300-strong crowd at the celebration and the winner of the coveted patients choice award was Samantha Richards, Uro-Oncology Clinical Nurse Specialist</p>	
5. NHS 70	<p>We achieved a significant spike in engagement with staff and the public during our NHS 70 celebrations, which started with a live interview with BBC Wiltshire from 9-10 and the programme included a mixture of live and pre-recorded interviews with staff from GWH.</p> <p>Specially commissioned artwork, was unveiled in the GWH Atrium during the afternoon, while winners of an artwork competition for pupils from Eldene School, Croft Primary School and the Chalet School were announced.</p> <p>NHS70 Parliamentary Awards were also given to:</p> <ul style="list-style-type: none"> • Sammi Cunningham, Mortuary and Bereavement Services Manager, for Care and Compassion • Lyndel Moore, Cancer Nurse Consultant, for Excellence in Cancer Care • Chris Pearce, Nurse Consultant, for Lifetime Achievement • The Neonatal Team, for Patient and Public Involvement 	<p>We saw positive coverage on BBC Wiltshire and Talk Radio, both have very significant audiences across our key communities</p> <p>We also had a two page spread in the print version of the Swindon Advertiser and two more stories online.</p> <p>BBC Wiltshire also ran a 70 Voices campaign leading up to the NHS 70 celebrations too where many of our staff were recorded talking about what the NHS means to them.</p> <p>Social activity was phenomenal with a substantial peak in our Facebook engagement showing we reached 10,475 people a 610 percentage increase.</p>

Further information on the subject of this report can be obtained from Kevin McNamara, Director of Strategy, Great Western Hospitals NHS Foundation Trust - 01793 604676, kevin.mcnamara1@nhs.net

Great Western Hospital NHS Foundation Trust Update

Adults Care, Adults Health and Housing Overview and Scrutiny Committee

Date: 12th September 2018

3. Alternative Options

4.1 None.

4. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

4.1. None.

Legal and Human Rights Implications

4.2. None.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

4.3. None

Diversity Impact Assessment

4.4. None.

Risk Management

4.5. None.

5. Consultees

5.1. The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

6. Background Papers

7.1 None.

7. Appendices

8.1 None.

Further information on the subject of this report can be obtained from Kevin McNamara, Director of Strategy, Great Western Hospitals NHS Foundation Trust - 01793 604676, kevin.mcnamara1@nhs.net

Update on Fire Safety to Residential Blocks of Flats

Adults' Health, Adults' Care and Housing Overview and Scrutiny

12th September 2018

Author: Cabinet Member for Housing and Public Safety
Wards: All
Parishes Affected: All

1. Purpose and Reasons

- 1.1 To give an update on the management and fire safety improvement works to the Council's residential blocks of flats.
- 1.2 To allow the Members of the Overview and Scrutiny Committee to review and comment on changes to management arrangements and delivery of fire safety improvement works.
- 1.3 Fire safety work is directly linked to the Council's Priority 1: "Improve infrastructure and housing to support a growing, low-carbon economy."

2. Recommendations

The Committee is recommended to:

- 2.1 Note the progress with delivery of fire safety improvement works and changes to management arrangements.

3. Detail

- 3.1 The Council reviewed its fire safety measures in place for all its residential blocks of flats following the Grenfell Tower fire on 14th June 2017. This identified fire safety improvement works which were approved by Cabinet on 18th October 2018 following recommendations from this Committee.
- 3.2 The Government issued a Building a Safer Future report in May 2018 following an independent review of building regulations and fire safety, which is referred to as the 'Hackitt report'. The Government's Building Safety Programme has also issued an advice note in relation to the replacement of flat entrance fire doors due to some manufacturers' doors failing fire safety tests.

Fire safety improvement works

- 3.3 Cabinet authorised safety fire safety improvement works shown as follows:
 - 3.3.1 DMJ – new front entrance fire doors, additional hard-wired smoke detectors and intumescent grills (£150,480)
 - 3.3.2 Six 10-storey general purpose blocks of flats – new internal fire doors, passive protection to protected shafts (escape stairway) and intumescent grills (£525,000)

Further information on the subject of this report can be obtained from Gerry O'Connor, tel. 01793 463452 or go'connor@swindon.gov.uk.

Update on Fire Safety to Residential Blocks of Flats

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- 3.3.3 George Hall Court – installation of fire suppressive system (£255,000)
 - 3.3.4 Medium rise blocks of flats – emergency escape lighting (£135,000)
 - 3.3.5 A tender was advertised for new front entrance and internal fire doors along with a sprinkler system in January 2018. When tenders were returned this identified that combining the two packages of work increased the cost beyond the available budget.
 - 3.3.6 Therefore, the installation of a new fire doors and sprinkler system were re-advertised in separate work packages. Tenders were returned and preferred bidders selected in May 2018. Unfortunately, the preferred bidder for fire doors withdrew prior to award of works. They cited that this was due to them only wanting to fit an approved internal fire door set in the general-purpose high-rise blocks of flats. However, a pre-start meeting with the supplier identified that they didn't have resources in place to manage this contract and their schedule of rate price for fitting the internal fire doors was significantly lower than other contractors that tendered for the works.
 - 3.3.7 The key aspect of installing a sprinkler fire suppressive system is the siting of the Cold Water Storage tanks (CWSTs) due to the large volume of water that needs to be stored and the weight or extra load on the structure of the building. Further work has been required to clarify the installation requirements for the sprinkler system at George Hall Court, particularly in relation to pipework, boxing and options for siting of the CWSTs.
 - 3.3.8 Extensive work has been undertaken to ensure that appropriate front entrance fire doors are to be fitted at the DMJ and contractors are competent to deliver fire safety works. Consultation is planned to take place with residents at the DMJ and George Hall Court during September 2018 to explain what fire safety work is planned to be carried out. Fire safety works are currently planned to start on site in October 2018.
 - 3.3.9 Our in-house workforce have fitted the independent hard-wired smoke detectors (supplementary to the fire alarm system) to flats in the DMJ. There are 59 tenanted and 13 leaseholder flats in the DMJ. We've completed the installation of 51 tenanted flats and have appointments for a further four flats. We have an appointment to install the detectors to one leaseholder flat. We will continue to work with tenants to fit the hard-wired smoke detectors and take enforcement action to complete the works as necessary.
 - 3.3.10 We completed the installation of escape or emergency lighting to 28 medium-rise blocks of flats, which has also improved the lighting to the
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Further information on the subject of this report can be obtained from Gerry O'Connor, tel. 01793 463452 or go'connor@swindon.gov.uk.

Update on Fire Safety to Residential Blocks of Flats

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communal areas and led to positive feedback from tenants in these blocks of flats.

3.3.11 The passive protection to the shafts (escape stairways) and intumescent grills form part of the specification for works with the fire doors and will be carried out at the same time.

- 3.4 It is essential to ensure that front entrance doors to individual flats are fire resistant to maintain the fire compartment between flats and communal areas. Officers are ensuring that all new front entrance fire doors, where remedial or repair work is required, that these have a primary fire safety test certificate to demonstrate that they meet the requirement in Building Regulations guidance for fire resistance and smoke control from both sides.
- 3.5 All fire safety work is only undertaken after taking advice from the Council's Building Control team or independent Fire Risk Assessor to scrutinise the impact of any proposed works. In addition, Building Regulation approval and certification is only to be undertaken through the Council's Building Control team.

Fire safety management arrangements

- 3.6 At present, Fire Risk Assessments (FRAs) and the management of fire safety is delivered through the Council's corporate Health & Safety team. In addition, Housing staff undertake FRAs to the medium and low-rise blocks of flats. The repair work arising from FRAs is delivered through the Housing Property Maintenance Team. This has identified the need to make sure that FRAs are undertaken by competent persons. These arrangements make it difficult to monitor performance and increases the risk of non-compliance.
- 3.7 Therefore, it is proposed to simplify the management arrangements to ensure that the roles and responsibilities for commissioning, delivery and monitoring of fire safety work is clearly defined. In future, the Housing Property Maintenance Team is to be responsible for arranging FRAs, planning and delivery of fire safety repair works, instructing premises managers in relation to site arrangements, planning fire safety improvement works and instructing responsible persons on their duties. The corporate Health & Safety team will be responsible for auditing and notifying the responsible persons on performance.
- 3.8 The Council has increased capacity to deliver fire safety work by creating two new posts. A Fire Safety Manager and Fire Safety Officer are to be appointed to manage, administer and deliver fire safety works. Recruitment is taking place and management changes are planned to be implemented in October 2018.
- 3.9 Specialist refresher awareness training has been carried out to ensure staff understand their role and responsibilities for fire safety, which should help to ensure that building defects, such as fire doors not closing properly or door

Further information on the subject of this report can be obtained from Gerry O'Connor, tel. 01793 463452 or go'connor@swindon.gov.uk.

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closers missing etc., are reported and rectified quickly to mitigate the risk of spread of fire in the event of an incident.

Future fire safety works

- 3.10 Some leaseholders in medium and low-rise blocks of flats still have standard front entrance doors which are not fire or smoke resistant. Officers will continue to work with leaseholders to get these replaced and take enforcement action in line with protocols with the Fire Service, where needed.
- 3.11 The installation of a fire suppression system will be a high priority for any future improvement or refurbishment works to residential high-rise blocks of flats. A budget has allocated a budget of £100k for design work to refurbish the first two high-rise blocks in the south of the town. A consultant has been appointed to assess and determine options for the future use of the DMJ tower. At present, there is an under-occupation in the commercial part of the building and extensive consultation will be required with residents prior to any future change of use or refurbishment. A fire suppressive system will be included in any future options for the DMJ tower.
- 3.13 The Council continues to work very closely with Dorset and Wiltshire Fire & Rescue Service (DWFRS) and have arrangements in place for regular training sessions so that they are familiar with buildings and able to practice their operational arrangements for tackling a fire in the residential high-rise blocks of flats.

Fire risk assessments

- 3.14 The purpose of a fire risk assessment is to evaluate the risk to people from fire, taking into account existing fire safety measures, and to determine whether additional measures are necessary.
- 3.15 A tender was advertised for new FRAs to be carried out to all the Council's low and medium-rise blocks of flats. A specialist contractor is in the process of being appointed with surveying work likely to start during October or November 2018. This is the first phase of a comprehensive exercise to help drive quality and enable further learning in the assessment process during a highly dynamic period of activity in the development of FRAs.

Stay put and prepare to evacuate policy

- 3.16 The Council has implemented the 'stay put and prepare' policy in line with guidance from DWFRS, which is still valid and remains in place. The 'stay put' policy is set out in the Fire Safety Action Plan (FSAP) for all the Council's high-rise and tower block in Swindon.

Further information on the subject of this report can be obtained from Gerry O'Connor, tel. 01793 463452 or go'connor@swindon.gov.uk.

Update on Fire Safety to Residential Blocks of Flats

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- 3.16.1 Where a fire occurs in a flat, the residents alerts others in the flat and make their way out of the building
- 3.16.2 If a fire starts in the common parts, anyone in these areas should make their way out of the building
- 3.16.3 All other residents not directly affected by the fire are expected to 'stay put and prepare to evacuate. This policy does not prevent people from leaving the building in the event of a fire.
- 3.16.4 The Fire Service remain committed to this approach and advise that residents may put themselves at more risk or get in the way and prevent them from tackling a fire if a simultaneous approach was taken to evacuate high-rise or tower block of flats.
- 3.16.5 The Fire Safety Action Plan Notice has been updated on all the floors in the DMJ.
- 3.17 Following advice from DWFRS a 'stay put' and prepare to evacuate policy is still in place for all our high-rise blocks of flats. This policy does not prevent people from leaving the building in the event of a fire.

4. Alternative Options

- 4.1 The Council has a duty of care and is unable to delegate its responsibilities for fire safety to its residents living and visiting its blocks of flats. Fire safety work is currently being planned in accordance with latest guidance and current benchmark standards.

5. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

- 5.1 The cost of initial fire safety work was approved at Cabinet on 18th October 2018. In addition, a further £250k has been included in the Housing Revenue Account (HRA) capital programme for fire safety works arising out FRAs to be carried out during this financial year, 2018/19.
- 5.2 Furthermore, a budget of £140k has been allocated to appoint a specialist contractor to undertake FRAs to the medium and low-rise blocks of flats. The first phase is planned to start imminently and any savings will remain within the revenue budget.
- 5.3 The procurement of a specialist contractor to undertake FRAs and delivery of fire safety work is to be undertaken in accordance with Standing Orders and the Council's Financial Regulations.

Further information on the subject of this report can be obtained from Gerry O'Connor, tel. 01793 463452 or go'connor@swindon.gov.uk.

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Legal and Human Rights Implications

- 5.4 The Homes and Community Agency sets out the current regulatory framework for local authorities and registered providers that own and manage social housing for rent in England, which places a duty on the Council to comply with all relevant legislation.
- 5.5 The Government's Social Housing Green Paper published on 14th August 2018 states that legislation is to be introduced to overhaul the system to improve fire safety and communication with residents. It also proposes a review of the Decent Homes Standard as part of the system to improve fire safety.
- 5.6 There is also a duty under The Regulatory Reform (Fire Safety) Order 2005 to ensure that general fire safety precautions are suitable and sufficient. There is a minimum requirement to ensure that a Type 1 FRA (communal area inspection only) is undertaken, which is carried out to identify any remedial works and action plan to improve fire safety.
- 5.7 There is also a further requirement under the Housing Act 2004 to assess the risk from fire under the current Decent Homes Standard for category 1 hazards identified through the Housing Health & Safety Rating System (HHSRS). For example, defective compartmentation may be considered to be a significant fire risk and likelihood of harm in the event of a fire (by allowing fire and smoke to other parts of the dwelling).

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

Diversity Impact Assessment

- 5.8 A Diversity Impact Assessment has been completed, which has identified that the fire safety improvement works do not have adverse impacts. However, it has identified the need to support vulnerable and disabled residents living in flats to ensure that they are not put at unnecessary risk. An annual review of the DIA is to be carried out, which will also include an assessment of all residents living in high-rise blocks of flats to check that they are able to evacuate the building in the event of a fire.

Risk Management

- 5.9 It is essential to procure high quality work where fire safety is prioritised, particularly in relation to flat front entrance fire doors and sprinkler systems.
- 5.10 Extensive risks are identified through the management of fire safety works and it is proposed that these are managed through the Housing Service Risk Register.

Further information on the subject of this report can be obtained from Gerry O'Connor, tel. 01793 463452 or go'connor@swindon.gov.uk.

Update on Fire Safety to Residential Blocks of Flats

**Adults' Health, Adults' Care and Housing
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6. Consultees

6.1 None.

7. Background Papers

7.1 None.

8. Appendices

8.1 None.

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Avon and Wiltshire Partnership NHS Trust Update

Adult's Health, Adult's Care & Housing Overview & Scrutiny Committee

Date: 12th September 2018

Author: Newlands Anning, Operations Manager
 Wards: All Wards
 Locality Affected: All Locality Area
 Parishes Affected: All Parish Area

1. Purpose and Reasons

- 1.1 This report provides the Adults Care, Adults Health and Housing Overview and Scrutiny Committee with an update of performance and key issues relating to Avon and Wiltshire Mental Health Partnership NHS Trust.
- 1.2 A key purpose of the Adults Care, Adults Health and Housing Overview and Scrutiny Committee is to hold Commissioners and providers of Health and Social Care Services to account.
- 1.3 Any Commissioner or provider of Health and Social Care Services in Swindon is required to provide information on the planning and provision of health and social care services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.
- 2.2 Identify any areas of concern that require further investigation.

3. Detail

- 3.1 What are the challenges that your organisation is facing?

Top Five Priorities	Progress & Next Steps	Impact/outcomes
Financial Austerity	Trust Wide Financial Improvement Plan.	Following review changes have been made through the Trust Transformation Programme to some models of care, which include PCLS and the ACU.

Further information on the subject of this report can be obtained from Newlands Anning, Managing Director, 01793 836821

Avon and Wiltshire Partnership NHS Trust Update

Adult's Health, Adult's Care & Housing Overview & Scrutiny Committee

Date: 12th September 2018

Recruitment and Retention. (Band 5/6 Nurses)	Trust wide and local recruitment drives. Workforce programme within the BSW STP.	Improvement in recruitment of community nurses which has then led to a reduction of temporary/ agency workers.
Bed Pressures	Trust-wide bed Management process, Local Acute Care Pathway	Reduction of DTOC in wards, currently 0%. Minimal OOA placements throughout the year.
High Quality / Safe provision of care.	CQC inspection September 2018	Await inspection and CQC rating.
Engage and support the Staff	Trust-wide Staff Survey/ LIA programme. Local Staff Engagement Forum.	Improvement in positive responses to survey. Alongside a reduction in absence levels.

3.2 What have you done well?

Top five achievements	Progress to date & Next Steps	Impact/outcomes
Acute Community Unit (ACU)	Pilot project now 2.5 months since "go live" date	Model has supplemented home treatment and assisted to facilitate early discharges from acute ward.
Adult Resource Centre (ARC)	Educational/ learning groups and activity timetable established and operational.	Model has supported community treatment for older adult service user group, and supported inter-agency working.
Out of Area placements	Local Acute Care Pathway has minimised OOA placements for Swindon residents.	Continuation of embedding processes with addition of ACU and ARC.
Community Team	The Royal College of	First Recovery team within

Avon and Wiltshire Partnership NHS Trust Update

Adult's Health, Adult's Care & Housing Overview & Scrutiny Committee

Date: 12th September 2018

Accreditation	Psychiatrists' Combined Committee for Accreditation have made a decision to accredit Swindon Recovery Team.	the Trust to receive accreditation demonstrating high levels of quality service provision within Swindon.
LIFT Psychology	Swindon LIFT Psychology offers a wide range of support, from psycho-educational courses to one-to-one intervention depending on individual needs.	Delivery and achievement of high access rates for IAPT services in Swindon, offering a range of therapeutic interventions. Including psychological therapies to people suffering from conditions such as depression, anxiety, work-related stress, eating problems as well as long term physical health problems such as Chronic Obstructive Pulmonary Disease (COPD), diabetes and chronic heart disease, which can impact on their mental health

4. Health Based place of Safety

- 4.1 39 people detained under Section 136 during Quarter 1 of 2018/19. (17 weeks)
Equates to an average of 2 people detained per week.

5. Alternative Options

- 5.1 None

6. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

- 6.1 There are no financial and procurement implications contained within this report.
Any emerging financial and procurement implications will be detailed if the committee

Avon and Wiltshire Partnership NHS Trust Update

Adult's Health, Adult's Care & Housing Overview & Scrutiny Committee

Date: 12th September 2018

wishes to investigate the issue further or to make recommendations for improvement.

Legal and Human Rights Implications

- 6.2 There are no legal and human rights implications contained within this report. Any emerging legal and human rights implications will be detailed if the committee wishes to investigate the issue further or to make recommendations for improvement.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 6.3 None.

Diversity Impact Assessment

- 6.4 A DIA has not been done for the purposes of this report.

Risk Management

- 6.5 None.

7. Consultees

- 7.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

8. Background Papers

- 8.1 None.

9. Appendices

None.

Clinical Commissioning Group Update

Adult's Health, Adult's Care & Housing Overview & Scrutiny Committee

Date: 12 September 2018

Author:	Executive Nurse, Swindon CCG
Wards:	All Wards
Locality Affected:	All Locality Area
Parishes Affected:	All Parish Area

1. Purpose and Reasons

- 1.1 This report provides the Adults Care, Adults Health and Housing Overview and Scrutiny Committee with an update of performance and key issues relating to Swindon CCG.
- 1.2 A key purpose of the Adults Care, Adults Health and Housing Overview and Scrutiny Committee is to hold Commissioners of Health and Social Care Services to account.
- 1.3 Any Commissioner of Health and Social Care Services in Swindon is required to provide information on the planning and provision of health and social care services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.
- 2.2 Identify any areas of concern that require further investigation.

Clinical Commissioning Group Update

Adult's Health, Adult's Care & Housing Overview & Scrutiny Committee

Date: 12 September 2018

3. Detail

3.1 What are the challenges that your organisation is facing?

Top Priorities	Progress & Next Steps	Impact/outcomes
Health Based Place of Safety – Swindon (Section 136 of the Mental Health Act (MHA) is an emergency power which allows a person to be taken to a Health-Based Place of Safety (HBPoS) from a public place, if a police officer considers they are suffering from mental illness and in need of immediate care)	NHS England has authorised the temporary consolidation of two of three HBPoS Suites in Swindon and Salisbury to a third site in Devizes in Wiltshire for 12 months to provide an opportunity to address the CQC improvement requirements, particularly around assessment times and to meet the requirements of The Policing and Crime Act 2017. On the 26 March 2018, Swindon HBPoS within the Sandalwood Court site closed temporarily for 12 months. During the period of temporary re-location, engagement will be undertaken with the population of Swindon and individuals using the service. This will then lead to recommendations to NHS England	For the period 1 May 2018 to 30 June 2018, 14 Swindon residents were taken to the Devizes HBPoS suite - these numbers are consistent with the position when Swindon operated a HBPoS in Sandalwood Court. The assessment times were: <ul style="list-style-type: none"> • 0 - 12 hours: 7 people • 12 - 24 hours: 6 people • 24 - 48 hours: 1 person This demonstrates a high level of compliance with the Police and Crime Act 2017 and addresses the Care Quality Commission concerns regarding assessment times. Of the 14-people subject to Section 136 of the MHA, 10 were discharged, with 4 requiring in-patient admission. Initial feedback from Wiltshire Police is as follows: Since the introduction of the Police and Crime Act 2017 and the temporary move of the Swindon HBPoS

Clinical Commissioning Group Update

Adult's Health, Adult's Care & Housing Overview & Scrutiny Committee

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	<p>and NHS Improvement.</p> <p>Longer term arrangements in relation to these PoS suites will be subject to an NHS England assurance process.</p>	<p>[move to Devizes], no people with a mental health need have been taken into Swindon custody.</p> <p>Positive, good relationships with the HBPoS, at Green Lane Hospital, Devizes, where the unit is staffed 24/7 by a dedicated and skilled workforce, whereas in Swindon it was formerly staffed on a needs-led basis, often by agency or bank staff. i.e. police would often be asked to wait outside the Swindon PoS unit whilst staff were located and then spent time preparing for the person held under S136 of MHA to be admitted to the unit – during this time, often up to an hour, the person would be waiting outside in a police car.</p>
<p>Swindon CCG 360 stakeholder Survey 2018</p> <p>(Please see appendix 1 for general information about the survey)</p>	<p>There are a few areas where the CCG did not perform so well as previous years. Of note is the need to improve engagement with hard to reach groups.</p>	<p>During September 2018 some staff from the CCG are taking place in an engagement exercise with the homeless community in Swindon via links with Threshold. During the engagement staff will be discussing with those they meet their healthcare experiences.</p> <p>As part of the engagement relating to the temporary closure of the Place of Safety Suite the CCG is working</p>

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	<p>Leadership of the CCG: within this category several responses indicated individuals neither agree or disagree with statements about the clinical leadership of the CCG, as a result we recognise the need to build time into the clinical leader's programme to ensure greater visibility in their work across all stakeholders.</p>	<p>with Avon and Wiltshire Mental Health Partnership Trust, Swindon Advocacy Movement and Healthwatch Swindon to ensure there is engagement with those less likely to participate in discussions.</p> <p>The CCG's monthly newsletter 'New-Bites' will start to include more information about what the CCG's plans and priorities are.</p> <p>The CCG has started to meet with voluntary sector organisations to look at how we can build stronger links and work together.</p> <p>Following on from initial work started in 2017, further engagement is underway to link with the diverse population / hard to reach groups in Swindon.</p> <p>The CCG would hope to improve the knowledge across all stakeholders of who the clinical leaders and wider leadership team are. We want to promote an open and listening organisation to our partners.</p> <p>As an immediate action the CCG has offered the opportunity for those who strongly disagreed with any of the statements in the survey to meet individually with</p>
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		Nicki Millin, Accountable Officer. No one has yet taken up the offer.
Maternity Transformation across the BANES, Swindon and Wiltshire Local Maternity System, or LMS	<p>The BANES, Swindon and Wiltshire Local Maternity System, or LMS, over the past 15 months has worked with women and families, its staff and partner organisations from across Bath & North East Somerset, Wiltshire and Swindon, to co-create a vision for maternity services and together they have developed a Maternity Transformation Plan to set out what they need to do to get there.</p> <p>A 12-week consultation is being planned from early October. The consultation is being led by Wiltshire CCG on behalf of the Bath & North East Somerset, Swindon & Wiltshire Local Maternity System.</p> <p>The proposals which will be in the consultation are just that, a proposal. No decisions have been made yet. choice. The consultation document is</p>	No decisions will be taken until after public consultation has been completed and public responses fully considered by Wiltshire, Bath and North East Somerset, Swindon and Somerset CCG Boards.

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	awaiting approval by NHS England.	
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3.2 What have you done well?

Top achievements	Progress to date & Next Steps	Impact/outcomes
<p>Merger of Eldene Health Centre with Victoria Cross Surgery and the closure of Nythe Branch Surgery</p>	<p>Swindon Clinical Commissioning Group has worked closely with Victoria Cross Surgery following its merger with Eldene Health Centre on 31 March 2018.</p> <p>The closure of Victoria Cross' Nythe Branch Surgery took place on 1 April 2018. Since the closure of the branch surgery patients have been able to book appointments at Victoria Cross Surgery or Eldene Health Centre.</p> <p>Initially there were some technology issues at Eldene Health Centre causing some delays with patients</p>	<p>Victoria Cross Surgery has had a Care Quality Commission Inspection in April and the overall rating was good and it also received good ratings for the five areas that make up the overall rating – safety, effectiveness, care, responsiveness and leadership.</p> <p>Patients have found the additional opening hours at Victoria Cross Surgery and Eldene Health Centre beneficial compared to the previous opening hours at the Nythe Branch Surgery.</p> <p>The Friends and Family test responses have been positive in relation to the move from the Nythe Branch Surgery to Eldene Health Centre</p> <p>Since the 18 June these issues have been resolved as both sites are now using the same IT systems.</p>

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	<p>making appointments.</p> <p>Prior to the merger there were concerns about potential transport issues for people who used the Nythe Branch Surgery getting to Victoria Cross or Eldene Health Centre</p>	<p>Patients who previously attended the Nythe Branch Surgery have been using cars, buses and dial a Ride to get to Eldene Health Centre. There have been no complaints about transport and people have praised the use of the Dial a Cab Service which some are using.</p>
Swindon CCG 360 stakeholder Survey 2018	<p>Swindon CCG's 360 overall Stakeholder Survey results are positive and in the detailed findings the CCG has performed well on:</p> <ul style="list-style-type: none"> • Monitoring and reviewing services • The effectiveness of working relationships with the CCG • The leadership of the CCG has the necessary blend of skills and experience • Feeling able to raise concerns about the quality of local services • Confidence in the CCG to act on feedback it receives about the quality of services it commissions • How the CCG involves patients 	<p>The CCG has reviewed its terms of reference for its Patient and Public Engagement Forum and how it will function and provide comment and challenge to what the CCG is doing.</p> <p>The CCG has developed a Stakeholder Engagement Strategy and action plan, and this shows the priorities areas for the CCG.</p>

Clinical Commissioning Group Update

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	<p>and the public.</p> <ul style="list-style-type: none">• 44 of the Swindon CCG's stakeholders completed the survey. The overall response rate was 71%. The national response rate was 59%	
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Clinical Commissioning Group Update

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4. Alternative Options

4.1 None identified

5. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

5.1 N/A

Legal and Human Rights Implications

5.2 N/A

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

5.3 N/A

Diversity Impact Assessment

5.4 N/A

Risk Management

5.5 N/A

6. Consultees

6.1 The Director of Finance (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

7. Background Papers

7.1 None

7.2 Appendices

7.3 Appendix 1: Overview of 360 survey

7.4 Appendix 2: 360 Stakeholder Survey Summary Report Strategy (*The appendix is available online at the Council's website or on request from Committee and Member Services*).

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Overview of 360 survey

Clinical Commissioning Groups (CCGs) need to have strong relationships with a range of health and care partners to be successful commissioners within the local system. These relationships provide CCGs with on-going information, advice and knowledge to help them make the best possible commissioning decisions.

The CCG 360° stakeholder survey is a key part of ensuring these strong relationships are in place. The survey allows stakeholders to provide feedback on working relationships with CCGs. The results from the survey will serve two purposes:

1. To provide a wealth of data for CCGs to help with their ongoing organisational development, enabling them to continue to build strong and productive relationships with stakeholders. The findings can provide a valuable tool for all CCGs to be able to evaluate their progress and inform their organisational decisions.
2. To feed into improvement and assessment conversations between NHS England and CCGs. The survey will form part of the evidence used to assess whether the stakeholder relationships continue to be central to the effective commissioning of services by CCGs, and in doing so, improve quality and outcomes for patients.

In each area of the survey no targets are set by NHS England for each CCG, however, there are comparisons with the previous 2 years of responses. The first survey was undertaken in 2014. Between 15 January and 28 February 2018 Ipsos MORI carried out a 360° stakeholder survey of all CCGs and behalf of NHS England.

- Stakeholders have the opportunity to take part in the survey via a telephone call with a member of the Ipsos MORI team or directly via an on-line route. Reminders are sent to stakeholders during the survey period, however, it is up to individuals if they respond.
- Within the survey, stakeholders were asked a series of questions about their working relationship with the CCG. In addition, to reflect each core stakeholder group's different area of expertise and knowledge, they were presented with a short section of questions specific to the stakeholder group they represented.
- In the category of upper tier/unitary local authority stakeholder, four names were put forward to Ipsos MORI and the data shows all four contributed. For the Health and Wellbeing Board three names were submitted and the data shows all three contributed.
- 44 of the Swindon CCG's stakeholders completed the survey. The overall response rate was 71%. The national response rate was 59%.
- The CCG has a set number of names it can put forward to Ipsos MORI in different stakeholder categories. However, the CCG does not know who in each category took part in the survey.
- The report is positive and in the detailed findings the CCG has performed well particularly when compared to national and cluster groups.

The comparisons offer a starting point to inform wider discussions about the CCG's ongoing organisational development and its relationships with stakeholders. For example, they may indicate areas in which stakeholders think the CCG is performing relatively less well, for the CCG to discuss internally and externally what improvements can be made in this area, if any.

Work Programme 2018/19

Adults' Health, Adults' Care and Housing

Overview & Scrutiny Committee

Date: 12th September 2018

Author:	Director of Law & Democratic Services
Wards:	All Wards
Locality Affected:	All Localities
Parishes Affected:	All Parish Areas

1. Purpose and Reasons

- 1.1 Each Overview and Scrutiny Committee is requested to have a work programme that details the activities that it will be undertaking during the Municipal year.
- 1.2 The work programme details the various topics and issues that each Committee intends to look into during the coming year with the aim of producing evidence based recommendations intended to provide service improvements for Cabinet and external agencies/bodies to consider.
- 1.3 Under the Council's Constitution, Overview and Scrutiny Committees are required to agree a work programme at the start of the municipal year outlining their priorities and likely outcomes of considering these issues.

The work programme is developed taking into account:

- Corporate priorities and objectives, including the Cabinet Forward Plan.
 - Partnership strategic priorities and objectives.
 - The interests and concerns of Members, Council officers, members of the public and other stakeholders such as community and voluntary groups and local businesses.
- 1.4 Committees are encouraged to review the work programme on a regular basis to ensure it remains relevant and to prioritise the workload of the Committee.
 - 1.5 Members are reminded that the work programme must also take into account:
 - The workload of the Committee and of individual members.
 - The capacity of the Scrutiny Unit and other officers to support a review.
 - The resource implications of carrying out a review.
 - The timescales for a review.
 - The most appropriate method of carrying out a review e.g. Committee meeting, Task Group, Member Champion review.
 - 1.6 The Local Government and Public Involvement in Health Act 2007 have presented the Adults' Health, Adults' Care and Housing Overview and Scrutiny Committee with a role, remit and powers regarding local health matters.

Further information on the subject of this report can be obtained from Contact Rita Glen-Gallo, 01793 463410, rglen-gallo@swindon.gov.uk

Work Programme 2018/19

Adults' Health, Adults' Care and Housing

Overview & Scrutiny Committee

Date: 12th September 2018

- 1.7 The Adults' Health, Adults' Care and Housing Overview and Scrutiny Committee is encouraged to be mindful of its role and remit when considering a work programme for the 2018/19 Municipal Year.

2. Recommendations

The Committee is recommended to:

- Consider and discuss the Chair's proposal for the 2018/19 work programme.
- Approve the proposed Work Programme for the 2018/19 Municipal year.
- Appoint Members to any Task Groups agreed by the Committee.

3. Detail

- 3.1 It is important that Overview and Scrutiny adds value to the work of the Council and the Borough and produces tangible outcomes for local people that result in real service improvements. Selecting the right topics is crucial to ensure that Overview and Scrutiny will be effective.

The work programme will be reviewed at every Committee meeting or as the Committee sees fit to ensure that it remains relevant and that Members and Officers have sufficient capacity to effectively achieve its objectives.

- 3.2 The Work Programme attached at Appendix 1 includes these suggestions and the Committee is asked to approve the work programme for the 2018/19 Municipal year.
- 3.3 Attention is drawn to the Scrutiny Process Flowchart, attached at Appendix 2, which is aimed at assisting the Committee in identifying how they could influence policy development.
- 3.4 To assist Members in developing the Committee's Work Programme, a copy of the current Cabinet Work Programme and Forward Plan, for the period 14th May 2018 to 14th May 2019, is included as Appendix 3. This appendix can be inspected on the Council's website (links listed below) and copies can be obtained from the Committee Officer. A hard copy will be available for inspection at the meeting.
- 3.5 At its meeting held on 11th July 2018, the H&W Board considered the Health Watch Swindon annual report for 2017/18. As part of the consideration of this report, the Health and Wellbeing Board discussed Healthwatch Swindon's inspection visit of the new NHS town centre facility, and expressed concern that neither the NHS Property Services or NHS England had responded in respect of recommendations made in the Healthwatch Swindon's report. The Board requested that this Committee consider adding the Healthwatch Swindon's report in respect of the new Swindon Health centre to their work programme and that they seek a response

Work Programme 2018/19

Adults' Health, Adults' Care and Housing

Overview & Scrutiny Committee

Date: 12th September 2018

from NHS property Services or NHS England to outstanding issues arising from the report.

Task Group Reviews

- 3.6 The Committee is required to undertake individual reviews throughout the municipal year and proposals for reviews should be proposed and discussed at the Committee meeting.

4. Alternative Options

- 4.1 The Committee can choose not to have a detailed work programme although it is recommended that it is best practice to do so.

5. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

- 5.1 There are no financial or procurement implications arising as a result of this report. Any expenditure arising as a result of an item on the Committee's work programme will be met by the Overview and Scrutiny Support budget, subject to the approval of the Committee.

Legal and Human Rights Implications

- 5.2 Section 21 of the Local Government Act requires every local authority to establish an overview and scrutiny function to hold the Executive to account, undertake policy development and review, monitor and improve performance.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

There are no other direct implications arising as a result of this report. Any further implications will be identified when a topic is reviewed by the Scrutiny Committee and in any recommendations made by the Scrutiny Committee.

Diversity Impact Assessment

- 5.3 No Diversity Impact Assessment is required at this stage, any DIA that is required during review of topics included within the work programme will be identified at the appropriate stage.

Risk Management

- 5.4 No risk management issues have been identified at this stage. Any risk management issues will be identified at the appropriate time when a topic is under review by the Scrutiny Committee and if it makes any recommendations.

Further information on the subject of this report can be obtained from Contact Rita Glen-Gallo, 01793 463410, rglen-gallo@swindon.gov.uk

Work Programme 2018/19

Adults' Health, Adults' Care and Housing

Overview & Scrutiny Committee

Date: 12th September 2018

6. Consultees

- 6.1 The Director of Finance (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

7. Background Papers

- 7.1 None.

8. Appendices

- 8.1 Appendix 1 – Work Programme for 2018/19.

- 8.2 Appendix 2 – Scrutiny Process Flowchart.

- 8.3 Appendix 3 – Cabinet Work Programme and Forward Plan, for the period 14th August 2018 to 14th August 2019. (This appendix can be inspected on the Council's website and copies can be obtained from the Committee Officer. A hard copy will be available for inspection at the meeting.)

Internal link:

<http://sbcvpwmmgv02:9070/mgListPlanItems.aspx?PlanId=639&RP=285>

External link:

<http://ww5.swindon.gov.uk/moderngov/mgListPlanItems.aspx?PlanId=639&RP=285>

Adults' Health, Adults' Care and Housing Work Programme 2018-19

Terms of Reference of the Committee

To fulfil all the functions of an overview and scrutiny committee as they relate to –

- the review, scrutiny, and development of policy recommendations
- the management of performance
- the monitoring of progress towards delivering relevant strategies and corporate priorities
- the formulation of advice for the Cabinet, Council and other partners and stakeholders

To have specific responsibility for (but not limited to) the scrutiny of:–

- Adult Social Care
- Community and Neighbourhoods
- Housing

In addition, as these relate to Adults and Adult Social Care:

- The performance of services seeking to deliver healthy communities towards agreed local and national performance indicators
- Health, health commissioning and service delivery
- Public Health, Health promotion and the work of the Health and Wellbeing Board
- Health Integration and collaborative working and commissioning with Health agencies and providers and General Practitioners

In accordance with Section 7 of the Health and Social Care Act 2001 (as amended), the Adults' Health, Adults' Care, and Housing Overview and Scrutiny Committee will undertake scrutiny of local health service providers jointly with Children's Health, Social Care, and Education Overview and Scrutiny Committee.

Reports for noting

Reports with a recommendation "to note the report" will be included in a separate section at the back of the Agenda and will not be heard at the committee meeting, unless specifically requested by a Member of the Committee.

Review of the Work Programme

The work programme will be reviewed at every meeting of the Adults' Health, Adults' Care and Housing Overview & Scrutiny Committee to ensure that it remains relevant, to ensure that Members and Officers have sufficient capacity to deliver the work programme and to include any additional items on the work programme, if appropriate, to ensure that Members and Officers have sufficient capacity to deliver the work programme and to include any additional items on the work programme, if appropriate.

Contact details

Committee Officer: Rita Glen-Gallo
Email: rglen-gallo@swindon.gov.uk
Tel: 01793 463611

21 st June 2018			
Item	Objectives	Scope	Witnesses
Co-optees Appointment	To agree membership	To confirm the appointment of Co-optees to the Committee.	Chair
Performance update reports	Members are requested to raise questions in advance so that the relevant Stakeholder is available for questioning at the meeting.	To receive regular performance reports from Commissioners and Providers.	Adult Social Care Commissioning (ASCC) GWH AWP
Section 136 update and procurement of Swindon extended primary care access and GP Out of Hours service.	To update the Committee	Receive an update report from Clinical Commissioning Group	NHS Swindon Clinical Commissioning Group (CCG)
Green Paper - Rough Sleeping Strategy	To update the Committee		Head of Housing
Work Programme discussion	Consider and discuss the Chair's proposal for the 2017/18 work programme.	To set the work programme for the forthcoming municipal year and agree Task and Finish Groups and Membership on to those group.	Chair

12 th September 2018			
Item	Objectives	Scope	Witnesses
Performance update reports	<p>Members are requested to raise questions in advance so that the relevant Stakeholder is available for questioning at the meeting.</p> <p>Receive an update of the CCG prescribing project to understand success and impact of the project</p>	<p>To receive regular performance reports from Commissioners and Providers.</p> <p>Receive an update report from Clinical Commissioning Group</p>	<ul style="list-style-type: none"> Avon & Wiltshire Mental Health Partnership (AWP) (to include Section 136 – Place of Safety). Joint report from NHS Swindon Clinical Commissioning Group (CCG) and Great Western Hospital (GWH) (to include update on the Calming Café) and Maternity Transformation Plan Adult Social Care Commissioning (ASCC)

12 th September 2018			
Standards and Safety of High Rise Council Housing	Update the Committee	Review of changes undertaken	<ul style="list-style-type: none"> Head of Housing

6 th November 2018			
Item	Objectives	Scope	Witnesses
Performance update reports	Members are requested to raise questions in advance so that the relevant Stakeholder is available for questioning at the meeting.	<p>To receive regular performance reports from Commissioners and Providers.</p> <p>AWP report to reflect support offered to families of those with emotional disorders</p>	<ul style="list-style-type: none"> Avon & Wiltshire Mental Health Partnership (AWP) (to include place of safety in Devizes) Joint report from NHS Swindon Clinical Commissioning Group (CCG) and Great Western Hospital (GWH) Adult Social Care Commissioning (ASCC)
Population projections in Swindon – effect on health and social service delivery	Update the Committee		<ul style="list-style-type: none"> Director of Health
Supported Employment Strategy	Update the Committee		<ul style="list-style-type: none"> Strategic Planning Manager
Provision for Rough Sleepers	Update the Committee	Review of changes undertaken over the past year.	<ul style="list-style-type: none"> Head of Housing
Social Care: The Green Paper on Older People	Update the Committee		<ul style="list-style-type: none"> Strategic Planning Manager

29th January 2019

Item	Objectives	Scope	Witnesses
Performance update reports	Members are requested to raise questions in advance so that the relevant Stakeholder is available for questioning at the meeting.	To receive regular performance reports from Commissioners and Providers.	<ul style="list-style-type: none"> • Avon & Wiltshire Mental Health Partnership (AWP) • Joint report from NHS Swindon Clinical Commissioning Group (CCG) and Great Western Hospital (GWH) (to include an update on the Victoria Cross Surgery and Eldene Health Centre merger) • Adult Social Care Commissioning (ASCC)
Domestic Abuse	Update the Committee		<ul style="list-style-type: none"> • Cherry Jones

5th March 2019

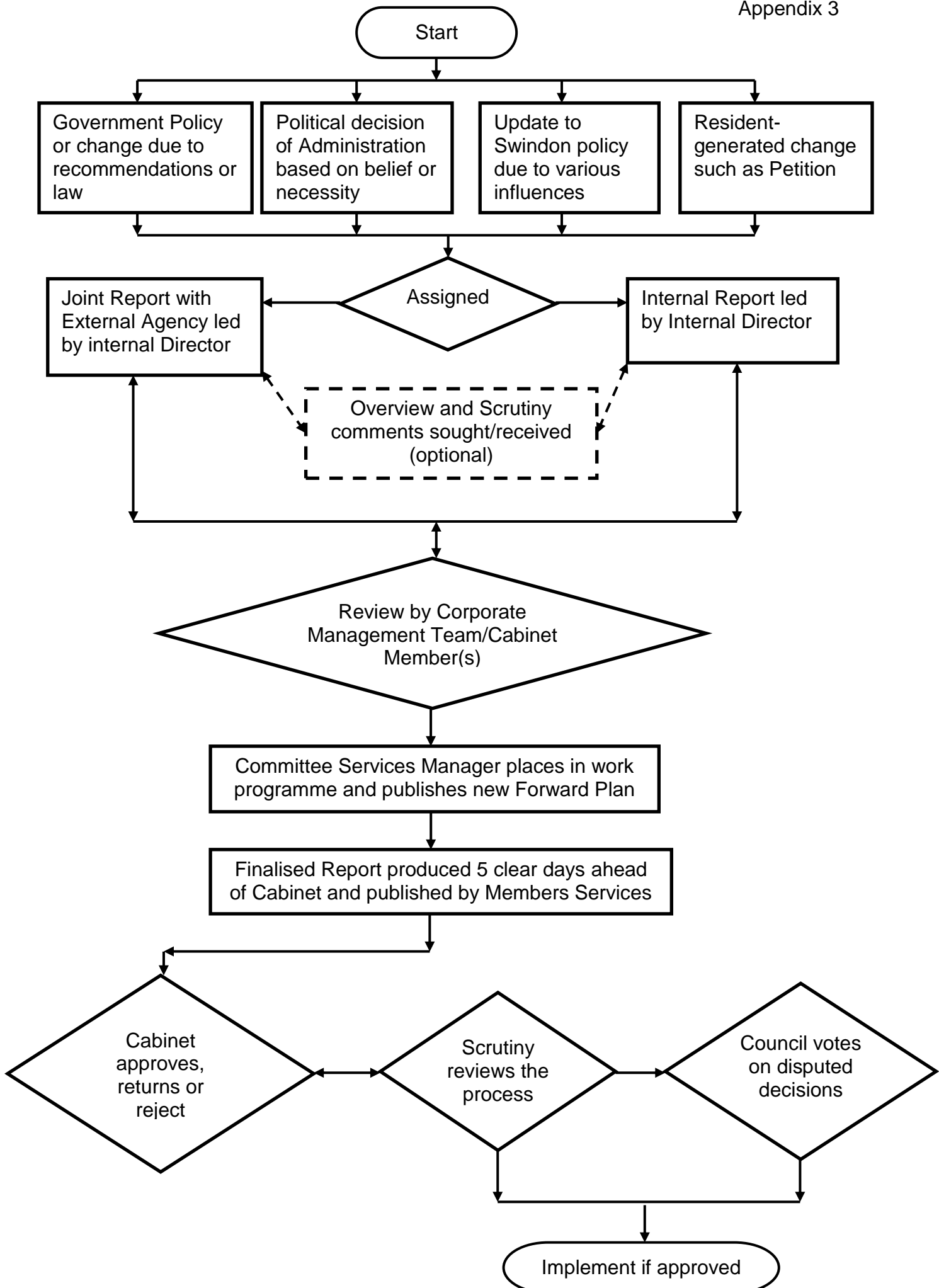
Item	Objectives	Scope	Witnesses
Performance update reports	Members are requested to raise questions in advance so that the relevant Stakeholder is available for questioning at the meeting.	To receive regular performance reports from Commissioners and Providers.	<ul style="list-style-type: none"> • Avon & Wiltshire Mental Health Partnership (AWP) (to include Community calming places) • Joint report from NHS Swindon Clinical Commissioning Group (CCG) and Great Western Hospital (GWH) • Adult Social Care Commissioning (ASCC)
Housing Performance	To present an update.		<ul style="list-style-type: none"> • Head of Housing

30th April 2019			
Item	Objectives	Scope	Witnesses
Quality reports	To review quality reports to be submitted by Great Western Hospital and Avon & Wiltshire Mental Health Partnership		<ul style="list-style-type: none"> • Great Western Hospital (GWH) • Avon & Wiltshire Mental Health Partnership

ADVISORY GROUP

Item	Objectives
<u>Domestic Abuse</u>	To liaise with the working group being led by Cherry Jones, Director of Health, on how the Committee could support the groups' work.

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