

HEALTH OVERVIEW AND SCRUTINY COMMITTEE

WEDNESDAY, 30 JANUARY 2013

PRESENT:- Councillors Claire Ellis (Chair), Ray Ballman (Vice-Chair), Steve Allsopp, Alan Bishop, Wayne Crabbe, Brian Ford, John Haines, Richard Hurley, Derique Montaut, Maureen Penny, Ann Richards, Rochelle Russell and Julie Wright

Jose Ortega (NHS Swindon and Swindon Borough Council), Michelle Howard (SEQOL), Sue Wald (Swindon Borough Council), Paul Bearman (NHS Gloucestershire and Swindon), Kevin Connor (AWP), Kevin McNamara (GWH NHS Foundation Trust), Heather Mitchell (SEQOL), and Dr. Peter Crouch.

Councillors Brian Mattock and Bob Wright were also in attendance.

44. Declarations of Interest

The Chair reminded Members of the need to declare any known interests in any matters to be considered at the meeting.

45. Public Question Time

Chris Watts, Acting President of the Wiltshire and Swindon branch of the GMB, referred to questions he had put at the last meeting of the Committee regarding disciplinary action taken by Carillion against GMB members working at the hospital, in apparent contravention of the Protected Disclosure Act ("Whistleblowers Act"), and action the Committee might take to ensure that staff are not intimidated into not reporting incidences of malpractice. He asked what was the Council's practice regarding the recording in the minutes of members' comments about issues raised in public questions. Mr Watts was advised that, in relation to public questions, the Council's practice is to record only the name of the questioner, a brief summary of the issue raised and whether a written answer was to be provided. In response to a supplementary question, the Chair agreed to pursue the Chief Executive of the Trust for answers to Mr Watts' previous questions.

Mr Watts concluded by asking that the officer(s) investigating the matters, the subject of his previous questions, be advised that these have no bearing on the on-going dispute with Carillion.

46. Minutes

Resolved - That the minutes of the meeting held on 14th November 2012 be confirmed and signed.

47. Avon and Wiltshire NHS Partnership Trust: Community Services Report

Kevin Connor, Area Director with the Avon and Wiltshire Mental Health Partnership NHS Trust, presented a report on the implementation of the redesign of Community Services, as agreed by NHS Swindon and Swindon Borough Council, and the current position and on-going work to continue to improve Mental Health Services in

Swindon. The report also set out the Trust's current position in addressing the findings of the recent NHS South SHA independent Review on governance and management arrangements, the recommendations from which review formed the basis of the objectives in the Trust's implementation plan, "Fit for the Future". In particular, Mr Connor drew the Committee's attention to part 5 of the report, which set out the key updates for January 2013.

Resolved – That the report be noted.

48. Chief Executive's Report - Great Western Hospitals NHS Foundation Trust

The Committee received a report of the Chief Executive of the GWH NHS Foundation Trust on key issues and developments at the Great Western Hospital. Kevin McNamara, Head of Communications and Stakeholder Engagement at the Hospital, presented the report on behalf of the Chief Executive, highlighting matters of particular significance and responding to members' questions and observations on the following issues:

- the change of provider of the shop in the main entrance to the Hospital and funding implications for the WRVS volunteer service
- the new automated telephone reminder service for patients
- the launch of the Hospital's Nursing strategy investment in nursing leadership and the base line for measuring the effectiveness of the new approach to nursing within the Trust
- falls prevention and possible links between prescribed sleeping tablets and night-time falls

Resolved – (1) That the report be noted.

(2) That the WRVS be advised of members' thanks and appreciation for its operation of the shop and for the patient services provided by that group through the hospital shop.

(3) That a report be made to a future meeting on the effectiveness of the new automated telephone reminder service for patients

(4) That summary information of the Hospital's falls cause analysis be made available to members, to include any identified correlation between falls and the use of prescribed sleeping medications.

49. NHS Swindon Chief Executive Report

Paul Bearman, NHS Gloucestershire and Swindon, presented a report of the Chief Executive, NHS Swindon, on current activity within NHS Swindon and updating the meeting on local and national health-related issues. In particular, it was noted that the NHS Commissioning Board had confirmed that, with conditions, the Swindon CCG had been authorised with effect from 18th January 3, and that, subject to the conditions being resolved before 31st March, the Swindon CCG would be fully authorised on 1st April 2013.

Resolved – That the report be noted.

50. SEQOL Partner Organisation Update Report

Heather Mitchell (SEQOL), introduced a report providing the Committee with an update on matters relating to SEQOL. The report highlighted the continuing national interest in the work going on in Swindon in relation to the SEQOL social enterprise

model and employee ownership, as evidenced in the number of visits by representatives of key health organisations that SEQOL had hosted in recent weeks, and also drew the committee's attention to the Voluntary Sector event and Community events, scheduled for 8th February and 15th March respectively, aimed at building SEQOL's relationship with other local providers and to develop the way SEQOL works with local people and encourage them to have an active role in the way that services are developed.

Resolved – That the report be noted.

51. Alternative Medicines and Therapies

The Committee considered a presentation by Councillor Wane Crabbe on the topic of complementary and alternative medicines (CAMS) and therapies. Supported by several local providers and users of CAMS, who made their own representations to the Committee on their personal experiences of CAMS, specifically homeopathy, auricular acupuncture, chiropractic and osteopathy, Councillor Crabbe commented on his own positive experiences of osteopathic treatment, and suggested that there were many others in the local community who could benefit from CAMS that are not currently provided under NHS and can only be accessed privately or by means of the individual funding request process, a process that could take up to 12 weeks before treatment was forthcoming. He summarised what he saw as internationally available evidence of the effectiveness of CAMS, citing, in particular, the results of a study commissioned by the Northern Ireland government into the effects of complementary medicine and the outcome of a conference held on 9th October 2012 at the European Parliament in Brussels, that concluded that the potential that CAM has to maintain health, prevent ill health, promote healthier lifestyles and contribute to the sustainability of health systems should not be disregarded by the EU at a time when health funding is under so much pressure from economic and demographic pressures.

Following contributions from members and health colleagues on their views of the issues raised by Councillor Crabbe in his presentation, and in the individual presentations of CAMS users and providers, the Committee agreed that the issue of support for the more general provision under the NHS of complementary and alternative medicines be considered at the next meeting of the Committee for inclusion in the Committee's work programme for 2013/14.

52. Adults Services Performance Report

The Committee received a report providing an update on performance in Adults Services and Health. It was noted that the Health Overview and Scrutiny Committee had a key role in providing robust monitoring and challenge of performance of services for adults, and, to enable the Committee to identify priority performance measures for reporting and discussion at future meetings, members were invited to comment on the performance detailed in the report, based on the position at end of September 2012 and where data is available and is routinely reported.

Resolved – That the report, and the data relating to the performance in Adults Services and Health for the period to end September 2012, be noted.

53. Day Services Transformation Programme

Heather Mitchell (SEQOL), introduced a report providing an update on progress being made by SEQOL on the implementation of the commissioning requirements to remodel and develop adult day services. The Committee was advised that, in particular, the transformation related to the services currently provided out of the Clapham Hobbs site and noted that, as well as the modernisation of day services day services, SEQOL would be improving other services currently located within Clapham Hobbs, making them more accessible to service users.

Resolved – (1) That the move to personalised menus of care for day service clients currently using Clapham Hobbs be supported.

(2) That the move to community based services for the Footcare service be noted.

(3) That the move of the balance and falls clinic to SwICC be noted.

(4) That the change in the model of service delivery, resulting in SEQOL ceasing to use the Clapham Hobbs site, be supported.

(5) That it be noted that the Team Manager of Clapham Hobbs and Day Services Manager will implement robust action plans to ensure each service user has a plan for the change and that families or carers are aware of the change, date, transport changes and other pertinent information in advance of the move date. It was also noted that the change date would be incremental from January until March 2013.

54.

Asthma Update

Paul Bearman, NHS Gloucestershire and Swindon, introduced a report on the development of services and whole system care pathways of care for people diagnosed with asthma. It was noted that the provision of an integrated network of services providing urgent care services for sufferers remained a priority for the CCG, recognising that, in Swindon, the total spend on respiratory disease is £14.8m and there are approximately 14,000 people diagnosed with asthma.

Resolved – That the report, and developments to date in the development of services and care pathways for people diagnosed with asthma, be noted.

55.

Work programme report

The Committee received a report of the Director of Law and Democratic Services inviting members to review the Committee's work programme for 2012/13 and the work undertaken by the Committee to date.

Resolved – (1) That the report and the revised and updated Work Programme for 2012/13 be noted.

(2) That members and health partners be invited to put forward topics to the next meeting of the Committee for consideration to be included on the Committee's work programme for 2013/14.