



**Buckinghamshire County Council**  
**Select Committee**  
Health and Adult Social Care

# Minutes

## *HEALTH AND ADULT SOCIAL CARE SELECT COMMITTEE*

Minutes from the meeting held on Tuesday 19 September 2017, in Mezzanine Room 1, County Hall, Aylesbury, commencing at 10.00 am and concluding at 1.00 pm.

This meeting was webcast. To review the detailed discussions that took place, please see the webcast which can be found at <http://www.buckscc.public-i.tv/>  
The webcasts are retained on this website for 6 months. Recordings of any previous meetings beyond this can be requested (contact: [democracy@buckscc.gov.uk](mailto:democracy@buckscc.gov.uk))

### **MEMBERS PRESENT**

#### **Buckinghamshire County Council**

Mr B Roberts (In the Chair)

Mr R Bagge, Mrs L Clarke OBE, Mrs B Gibbs, Mr M Hussain, Mr D Martin and Julia Wassell

#### **District Councils**

|               |                                 |
|---------------|---------------------------------|
| Ms T Jervis   | Healthwatch Bucks               |
| Mr A Green    | Wycombe District Council        |
| Ms S Jenkins  | Aylesbury Vale District Council |
| Ms J Cook     | Chiltern District Council       |
| Dr W Matthews | South Bucks District Council    |

#### **Others in Attendance**

Ms S Norris, Executive Director CHASC  
Mr N Dardis, Chief Executive, Buckinghamshire Healthcare Trust  
Ms J Bowie, Director Of Joint Commissioning  
Mr M Begley, Head of Operations (Aylesbury Vale & Milton Keynes), SCAS  
Mr A Batty, Head of Operations (South Bucks and East Berkshire), SCAS  
Ms L Patten, Chief Officer, Aylesbury Vale & Chiltern Clinical Commissioning Groups  
Dr T Kenny, Medical Director, Buckinghamshire Healthcare NHS Trust  
Dr M Thornton, GP, Trinity Health  
Mr P Dyson, Transport Services Manager, Amey Client Transport  
Ms F Ewing, Adults Reading Dev Co-ordinator



**South Bucks**  
District Council



## **1 APOLOGIES FOR ABSENCE / CHANGES IN MEMBERSHIP**

Apologies were received from Mr B Bendyshe-Brown, Mr S Lambert, Mrs M Aston and Mr C Etholen.

## **2 DECLARATIONS OF INTEREST**

There were no declarations of interest.

## **3 MINUTES**

The minutes of the meeting held on Tuesday 25<sup>th</sup> July were agreed as a correct record.

## **4 PUBLIC QUESTIONS**

There were no public questions.

## **5 CHAIRMAN'S UPDATE**

The Chairman reported on the following:

- The Inquiry report “Is the County Council ready for growth?” went to the Transport, Environment and Communities Select Committee for approval and would be presented to Cabinet on Monday 25<sup>th</sup> September.
- Events since the last meeting – Open Day at Thame Community Hospital and the Clinical Commissioning Groups AGM.
- Forthcoming events:
  - Milton Keynes CCG AGM (20 September)
  - Buckinghamshire Healthcare NHS Trust (BHT) AGM (21 September)
  - Committee Member visit to Stoke Mandeville and Wycombe Hospitals (25 September)
  - BHT Board meeting (27 September)
  - Committee Member visit to South Central Ambulance Service (3 October).

## **6 COMMITTEE UPDATE**

Committee Members provided the following update:

- Mr R Bagge attended BHT’s last Board meeting on 25<sup>th</sup> July and gave an update on the key points. Attached is a copy of his update.
- Ms S Jenkins attended the CCGs recent AGM and reported that it had been an interesting event but not well attended by members of the public and felt it should have been better publicised.
- Ms J Wassell reported that she had co-hosted a “Festival of Wellbeing” event on behalf of the Chairman of the Council with over 350 attendees.
- Ms T Jervis reported that a colleague went to the Thame Community Hospital open day and said that it had been well attended and feedback on the community hubs had been positive.

## **7 SOUTH CENTRAL AMBULANCE SERVICE**

The Chairman welcomed Mr M Begley, Head of Operations (Aylesbury Vale and Milton Keynes), Mr A Battye, Head of Operations (South Bucks and East Berkshire) and Ms L Patten, Chief Officer (Aylesbury Vale & Chiltern Clinical Commissioning Groups).

The following main points were made during the presentation:

- South Central Ambulance Service operates as a fully integrated organisation with over 3,600 staff, 608 vehicles with a population of around 7 million.
- All Ambulance Trusts were facing increased pressure.
- SCAS received a “Good” CQC rating but recognised areas to improve and focus which included – shift patterns, shift over-runs, late meal breaks and the ability to stand staff down to complete face-to-face training.
- There were a number of alternative care pathways in Buckinghamshire, including MuDAS (Multi-Disciplinary Assessment Service), Mental Health, GP surgeries (including Out of Hours GPs) and the Falls team.

During the discussion the following questions and issues were raised:

- In response to a question about increased traffic, particularly in light of HS2 development, SCAS confirmed that they continue to engage with those responsible for HS2 to ensure their concerns are heard about increased traffic and the effects this would have on SCAS response times.
- In response to a question about the changes to how the response targets would be measured in future, SCAS explained that it was looking at how best to model the service to meet these changes. SCAS were regularly rated as a top performer and those presenting felt confident that this would continue under the new target response measures.
- The national shortage of paramedics was acknowledged. There had been a 52% vacancy rate which had been reduced to around 20%. SCAS were also working innovatively on ways to retain staff as this was also recognised as a challenge.
- The National Fire Brigade Union had stopped fire crews attending cardiac situations but in Bucks, there were some fire crews who were providing this.
- Concern was expressed about the amount of hours lost by SCAS due to handover delays but Members heard that SCAS was working closely with the Hospital Trust to reduce these delays. It was noted that Wexham Park Hospital had introduced a new system whereby the ambulance crew would be met by a nurse. It was acknowledged that reducing handover delays relied on partnership working and that the whole system needed to work seamlessly. The A&E Delivery Board, of which SCAS was a member, looked at the handover delays on a regular basis.
- In response to a question about key performance indicators, one of SCAS’s measures was around the number of calls answered within a specific time. All calls were recorded and monitored as part of quality assurance measures.
- In response to a Member comment about SCAS having 608 vehicles for population of 7 million, the presenters confirmed that there could be no downtime of fleet and there were plans to procure more vehicles with possibly less cars and more ambulances.
- There were plans and discussions around developing a Blue Light hub to maximise available space around the county for all emergency services. In Wycombe, it was noted that the ambulance service needed a bigger and newer space as soon as possible.
- A smart App had been developed entitled “Save a Life” which detailed where the nearest defibrillator was situated and instructions on how to save a life through CPR. Members were encouraged to sign up to the App and to promote it within their local communities.

The Chairman thanked Mr Begley and Mr Batty for their presentation. He asked that the outstanding questions be submitted to SCAS after the meeting for a written response which would then be circulated to the Committee.

**Action: Committee & Governance Adviser**

Full details of the discussion can be found on the webcast.

## 8 CARE CLOSER TO HOME

The Chairman welcomed Dr T Kenny, Medical Director (Buckinghamshire Healthcare NHS Trust) and Dr M Thornton, Clinical Director (FedBucks). They were also joined by Ms L Patten, Chief Officer (Aylesbury Vale and Chiltern CCGs) and Mr N Dardis, Chief Executive (BHT).

The following main points were made during the presentation:

- The pilot had been running for 6 months so the figures reported were for a 5 month period.
- 600,000 patient contacts were made outside of the Hospital annually.
- £1m had been invested to expand the community services.
- The Hospital Trust was working very closely with all its partners to develop the community services model, with GPs playing a vital role.
- Prevention and early intervention were key in developing the community hubs.
- There was general recognition amongst local GPs that they could influence the plans for the community hubs and an example was given around whether to have ultrasound or x-ray provision at the hubs and GPs were consulted as part of the decision-making.

During discussion, the following questions were asked and comments made:

- In response to a question about public engagement, Dr Kenny explained that the engagement process was ongoing and did not rely on just one event. A series of events had taken place and attendees were asked for their ideas of what they wanted to see in a community hub and from that, a number of themes had been developed.
- A Member commented that it was encouraging to see that Healthy Minds were part of the services available at the community hubs.
- Concern was expressed about whether the hubs were tackling health inequalities and whether the services were being accessed by all groups within a local community.
- In response to a question about additional financial resources being made available for the hubs, Dr Kenny reported that £1m had been invested in the hubs.
- A Member suggested that the Stakeholder Engagement Group used Facebook to increase its engagement with the public.
- Being able to provide chemotherapy to patients closer to home would be a key benefit of the hubs.
- Parking was still recognised as a major problem at the Community hub sites.
- In response to a question about stress levels, Dr Kenny agreed to look at including staff absence due to stress as one of the staff indicators.

**Action: Dr Kenny**

- Dr Kenny agreed to report back to the stakeholder engagement group on the terminology used to describe some of the services, for example, frailty clinics, the Falls service. More punchy and positive terminology was suggested.

**Action: Dr Kenny**

- Members agreed that a geographical breakdown of where the patients come from who were using the Community hubs would be a useful inclusion in the final end of pilot report.

**Action: Dr Kenny**

**RESOLVED:**

**The Committee AGREED to form a Task & Finish Group to review the report in full and to draft a response to the Hospital Trust to help inform the final report on the pilot scheme, due in March 2018.**

The full discussion can be viewed on the webcast.

**9 ACCOUNTABLE CARE SYSTEM**

Ms L Patten, Mr N Dardis and Ms S Norris provided the Committee with a briefing on the Accountable Care System and what this means for the residents of Buckinghamshire. A copy of the presentation is attached.

**10 VASCULAR SERVICES UPDATE ON PROM PROJECT**

The Chairman explained that the vascular services item had been to Committee twice over the last 12 months and the written report in the papers provided Members with a further update on this service. Due to time constraints, the Chairman asked Members to refer any comments and further questions to Mrs E Wheaton, Committee & Governance Adviser who would collate the responses and send them to NHS England.

**Action: Committee Members**

**11 ACCESSIBILITY & PROMOTION OF SERVICES FOR ADULTS WITH LEARNING DISABILITIES**

The Chairman welcomed Ms J Bowie, Joint Director of Commissioning, Mr P Dyson, Transport Services Manager and Ms F Ewing, Adults Reading Development Co-ordinator.

Members heard from the officers about the progress made on all the recommendations made in the Inquiry report. The report went to Cabinet in June 2016 so this was the 12 month recommendation monitoring.

**RESOLVED:**

**The Committee AGREED to delegate assigning the RAG status to each recommendation to the Chairman, with the assistance of Mr S Lambert and Mrs M Aston who were Members of the original inquiry group.**

**12 COMMITTEE WORK PROGRAMME**

The Committee discussed the agenda items for the November meeting and agreed the following.

- Hospital Discharge Inquiry – 6 month recommendation monitoring;
- Care Homes;
- The scoping document for the next inquiry;
- Adult Social Care Transformation Plans.

**13 DATE AND TIME OF NEXT MEETING**

The next meeting is due to take place on Tuesday 28<sup>th</sup> November 2017 at 10am in Mezzanine Room 1, County Hall, Aylesbury.

## CHAIRMAN