



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 29 January 2019, in Mezzanine Room 1, County Hall, Aylesbury, commencing at 10.05 am and concluding at 12.30 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)

MEMBERS PRESENT

Buckinghamshire County Council

Mr B Roberts (In the Chair)
Mr R Bagge, Mrs L Clarke OBE, Mrs A Cranmer, Mr N Hussain, Mr S Lambert, Mr D Martin, Julia Wassell and Mr G Williams

District Councils

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|-------------|--------------------------|
| Ms T Jervis | Healthwatch Bucks |
| Mr A Green | Wycombe District Council |

Members in Attendance

Others in Attendance

Mrs E Wheaton, Committee and Governance Adviser
Ms C Morrice, Chief Nurse, Buckinghamshire Healthcare NHS Trust
Dr T Kenny, Medical Director, Buckinghamshire Healthcare NHS Trust
Mr P Shah, Chairman, Buckinghamshire Local Pharmaceutical Committee
Mr R Patel, Vice-Chairman, Local Pharmaceutical Committee

1 APOLOGIES FOR ABSENCE / CHANGES IN MEMBERSHIP

Apologies were received from Mr B Bendyshe-Brown, Mr C Etholen, Dr W Matthews, Ms C Jones and Ms S Jenkins.

2 DECLARATIONS OF INTEREST

Mr G Williams declared an interest as Deputy Cabinet Member for Children's Services.



South Bucks
District Council



3 MINUTES

The minutes of the meeting held on Tuesday 20th November 2018 were agreed as a correct record.

The Chairman referred to the updated report from Bucks Healthcare NHS Trust which was published as part of the agenda papers for the meeting.

4 PUBLIC QUESTIONS

There were no public questions.

The Chairman updated the Committee about an outstanding question from a member of the public in relation to community hubs. The response would be circulated once received.

5 CHAIRMAN'S UPDATE

The Chairman reported the following:

- The next Bucks Healthcare NHS Trust Board meeting would take place on Wednesday 30th January at 9am, Florence Nightingale, Walton Street in Aylesbury.
- The NHS long term plan was published at the beginning of January.
- The Adults residential short breaks consultation runs from 16th January to 27th February. The Committee had set-up a task & finish group to review the proposals and prepare a response for the Cabinet Member. The Chairman encouraged members of the public to make their own representations to the consultation – details on the Council's website.
- Planning permission had been granted to the Swan Practice in Buckingham for the Lace Hill development. The Chairman would keep the Committee updated on progress with the project.
- Awaiting publication of the Green Paper on Adult Social Care future funding.
- The Chairman and Committee Member, Ralph Bagge attended a meeting with representatives from the Hospital Trust to discuss the key findings and recommendations in the Child Obesity report.

6 COMMITTEE UPDATE

Julia Wassell reported that she had received a number of concerns from carers in relation to the current consultations around Seeleys and Thrift Farm.

Ms T Jervis, Chief Executive, Healthwatch Bucks provided an update on their key areas of work which included the following.

- Urgent Care – use of 111 and urgent care.
- Dignity and Self-Harm – access to support.
- Reablement project
- Maternity – birth plans (looking to cover a longer length of time)
- Getting Bucks involved – at the December meeting, the terms of reference and the function of the engagement group were discussed. The next meeting would be in February.

7 BUCKS HEALTHCARE TRUST - QUALITY AND PRIORITIES

The Chairman welcomed Ms C Morrice, Chief Nurse, Bucks Healthcare NHS Trust and Dr T Kenny, Medical Director, Bucks Healthcare NHS Trust. He went on to explain that the Select Committee prepared a statement to the Trust's Quality Account for 2017/18 and highlighted a few areas of concern. This item would be an opportunity to hear from the Trust's

representatives about the improvements being made in these areas alongside other key improvement projects.

Ms Morrice confirmed that the Trust was committed to learning when things go well and replicating them and learning where things do not go well and making the necessary improvements. 2019/20 would focus on improving quality within the Hospital setting as well as looking at what quality in the home looks like.

During discussion, the following main points were made:

- In response to a question around prevention, Dr Kenny explained that the CATS service (Community Assessment Treatment Service) was a standalone service within the hubs. The purpose of the hubs was to keep people healthy and in their own homes for longer by providing care closer to home. Part of this was about pro-actively going out to GP practices asking them to identify their most frail patients and putting preventative measures in place to avoid crisis situations.
- It was acknowledged that the use of the word “hub” can be confusing as it was being used across the system in slightly different ways.
- In response to a question about the monitoring and reviewing of the services provided within the hub, Dr Kenny explained that there was a very active stakeholder group who were involved in developing the hubs and the technical steering group which looked at the key performance indicators and had general oversight of the piece of work.
- In response to a question around how the five GP practices were identified, Dr Kenny explained that for the preventative piece of work, it was primarily around those nearest to the hubs but the services provided in the hubs were open to all practices across Bucks.
- There was work currently underway to look at populations of around 30,000 and looking in more detail at the needs of each area. It was acknowledged that the needs would be different, for example, in areas with more children there would be a focus on providing more services for children.
- It was agreed that the development of the new models of care would come back to the Committee over the coming months.

Action: Committee & Governance Adviser

- The Comprehensive Geriatric Assessment was a national tool used to identify frailty needs. It was described as a well-developed “gold” star tool.
- In response to a question about the vision for frailty cafes, Dr Kenny explained that people want to reduce duplication and have clear direction of where to go for services. Discussions with patients and the voluntary sector had highlighted the need to be flexible and responsive to peoples’ needs.
- On behalf of the Committee, the Chairman offered to review the draft frailty advice leaflet. Dr Kenny and Ms Morrice agreed that this would be helpful and they would share an early draft at the appropriate time.

Action: Dr Kenny and Ms Morrice

- Over the last nine months, the national definitions around Sepsis had changed and the new definition was “suspicion to needle time”. Sepsis still required national development and work was currently taking place to improve the reporting of this both locally and nationally. Suspicion to needle time would be reported in the next quality account.
- Dr Kenny confirmed that patients requiring emergency antibiotics could receive them in the ambulance or a Hospital setting.
- The clinical team understand sepsis and the training referred to in the report was relevant to the whole team and focussed on keeping the patient safe.

- There were key indicators around sepsis, for example, a patient would not be discharged if they still had a high temperature.
- Re-admission rates were published and regularly scrutinised to see whether anything could have been done differently to avoid a readmission.
- The NHS had introduced a standardised approach to quality improvement. A training programme had been introduced to standardise the quality standards across the Trust.
- The ambition would be to have no healthcare acquired pressure ulcers but where there were cases, service leaders were held to account.
- A number of factors affect MRSA including hygiene and a patient's own health, in terms of the medicines they were taking. Observing good hand hygiene was one of the key factors in minimising MRSA cases.
- Automated, ultra-violet, cleansing methods had been introduced at the front door.
- There was no national definition of what was meant by avoidable cases and it would be hard to define due to external factors.
- There was always a challenge around undertaking a de-contamination programme as it required emptying the space.
- A Member asked about the results from the Friends and Family test. The A&E team had worked hard to improve the patient experience. The results continued to be a priority and were used to drive service improvement.
- Complaints were seen as a way to improve services and there was a drive towards more local resolution of complaints. It was suggested that compliments as well as complaints should be published.
- Ms Morrice confirmed that there would not be the same delay in getting the information relating to the quality accounts.

The Chairman thanked the presenters.

8 LOCAL MEDICINE SUPPLIES

The Chairman welcomed Mr P Shah, Chairman of the Local Pharmaceutical Committee and Mr R Patel, Vice-Chairman of the Local Pharmaceutical Committee. The Chairman also introduced Mr M Dias, Policy Officer, Bucks County Council.

During discussion, the following main points were made:

- Planning was underway for a smooth transition of medicine supplies to ensure minimal impact on patient healthcare.
- Pharmacists had always dealt with shortages very well and this was an ongoing scenario in community pharmacy.
- Community Pharmacists would always make the right clinical decision for the patient and would consult with the GP if all sources of any particular medicines had run out.
- Government had advised pharmacists not to stockpile medicines in light of Brexit and the Local Pharmaceutical Committee were working with community pharmacists to manage the process.
- The Pharmaceutical Services Negotiating Committee were working with the Department of Health on issues and working groups had been set-up to develop a number of protocols, for example, a Serious Shortage Protocol (SSP).
- Networking between community pharmacists had improved.
- Locally, the Bucks LPC was working with all relevant health providers to ensure minimal impact. One person co-ordinating any shortages.
- Mr Shah confirmed that there were 97 pharmacists, including those providing online services. Pharmaceutical Needs Analysis looked at the concentration of pharmacists and at present, the number in Buckinghamshire was satisfactory and all were running efficiently.
- A response had not yet been received from the letter sent by the Pharmaceutical

Services Negotiating Committee to the Government Health and Social Care Select Committee. The letter requested measures to be put in place to ensure that community pharmacists had quicker and clearer reimbursement and stock availability information.

- As well as pharmacists holding 4-6 weeks of stock, wholesalers were also holding the same amount of stock to ensure a good 12 week supply.
- Mr Shah acknowledged that there had been problems with the supplier of the flu vaccine last year and a miscommunication also led to problems but lessons had been learnt. A flu Committee had been set-up locally to ensure the same issues did not happen this year.
- In response to a question about the morale of community pharmacists, Mr Shah explained that the role of the community pharmacist had changed and become more service orientated rather than just a dispensing role.
- Mr Shah reassured the Committee that key partners were constantly communicating with each other and planning both locally and nationally in relation to shortages.
- In response to a question about online repeat prescriptions and some patients being unable to do this, Mr Shah explained that there were exceptions if patients are unable to do this, then the pharmacist would help.
- Healthwatch Bucks had undertaken a piece of work around pharmacists which looked at key trends. The report could be viewed on Healthwatch Bucks website – www.healthwatchbucks.co.uk
- Community pharmacists work collaboratively and share supplies and this would continue over the coming months.
- A Member suggested sending a press release to the media to reassure people about medicine supplies.

The Chairman thanked the presenters.

9 SUPPORT FOR CARERS - DRAFT REPORT

The Chairman explained that a day of evidence gathering was held in October and the draft report reflects the key findings and areas of recommendation coming out of this day.

A Member stressed the importance in providing a consistent approach from managers in their support for carers, effectiveness of signposting services and the consistency of high quality support given to carers.

A Member was concerned about the lack of support for employees who are carers and felt that recommendations 6, 7 and 8 were particularly important.

A Member highlighted the role of the Select Committee and the importance of their work programme and felt the report should be re-titled to reflect that it was an inquiry rather than a review.

It was suggested that there should be a differentiation between services for young carers and adult carers in terms of the single point of access. A Member also felt that there were not as many recommendations specifically for young carers and suggested that this could be reflected in the report.

A Member suggested broadening the recommendation around developing a corporate training programme to include other partners within the ICS.

The Committee & Governance Adviser was thanked for her work in supporting the Inquiry Group and preparation of the draft report.

The Chairman confirmed that the report would be presented to Cabinet on Monday 25th March.

10 COMMITTEE WORK PROGRAMME

Members noted the work programme.

The Chairman confirmed that the Chief Executive of Frimley Hospital Trust would be invited to attend a future meeting to discuss Wexham Park Hospital.

11 DATE AND TIME OF NEXT MEETING

The next meeting is due to take place on Tuesday 19th March 2019 at 10am in Mezz 1, County Hall, Aylesbury.

CHAIRMAN