

## **HEALTH OVERVIEW AND ADULT SOCIAL CARE SCRUTINY COMMITTEE**

MEETING, 3<sup>RD</sup> SEPTEMBER, 2013

Present – Councillors Spencer (Chairman), Donaghy (Vice-Chairman), L. Byrne, C. Burrows, M. Connell, Darvesh, Hall, G. Harkin, Iqbal, Irving, Morgan, Radlett and Wilkinson.

### Lay Member

Ms. R. Haworth - Healthwatch

### Also in attendance

Councillor Mrs. Thomas - Executive Cabinet Member Deputy Leader's Portfolio

Councillor Bashir-Ismail - Cabinet Member for Public Health

Dr. J. Bene - RBH NHS Foundation Trust

Ms. S. Long - Clinical Commissioning Group

Ms. M. Asquith - Director of Children's and Adults Services

Ms. W. Meredith - Director of Public Health

Ms. R. Tanner - Assistant Director Care Management and Adults Provider Services

Mr. A. Crook - Assistant Director Integration and Older People Provider Services

Mr. M. Veigas - Chief Officer Support

Mrs. V. Ridge - Deputy Democratic Services Manager

Apologies for absence were submitted on behalf of Councillors Clare and Greenhalgh and Mr. G. Evans.

Councillor Spencer in the Chair.

## **5. MINUTES OF THE PREVIOUS MEETING**

The minutes of the meeting of the Committee held on 23<sup>rd</sup> July, 2013 were submitted.

Resolved – That the minutes be signed as a correct record.

## **6. MINUTES OF THE GREATER MANCHESTER WEST MENTAL HEALTH FOUNDATION TRUST JOINT SCRUTINY COMMITTEE**

The minutes of the meeting of the Greater Manchester West Mental Health Foundation Trust Joint Scrutiny Committee held on 17<sup>th</sup> June, 2013 were submitted.

Resolved – That the minutes be noted.

## **7. THE COMMITTEE WORK PROGRAMME 2013/2014**

The Deputy Chief Executive submitted a report which set out the remit of the Committee and also put forward a proposed work programme for 2013/2014.

Resolved – That the proposed work programme for 2013/2014 be approved.

## **8. HEALTH AND SOCIAL CARE INTEGRATION**

The Director of Public Health submitted a report and gave a presentation which updated members on the progress of the delivery of integrated health and social care services in Bolton and across Greater Manchester.

The report detailed the proposals for bringing the work of integrated care, Healthier Together and Primary Care together at a Greater Manchester level and outlined the joint work that was on-going with local partners.

The report went on to outline Bolton's vision and model for health and social care in Bolton and reminded members of the aims of delivering integrated care and the principles that would guide this.

A practical example was provided which demonstrated how the existing system was not as effective as it could be and how the use of integrated services could be improved in order to enhance the customer experience. The Integrated Model would aim to:

- provide a multi-disciplinary health and care team which would serve a population cluster of approximately 30,000 people based around primary care;
- designate patients with multiple long term conditions and/or at high risk of hospital admission and the frail elderly with a care coordinator who would be responsible for developing and coordinating the patient/client care;
- include adult community nurses, social workers, physiotherapists, occupational therapists, community psychiatric nurses and generic workers; and
- enable people to remain independent with greater confidence to manage their own care supported by community assets.

The multi-disciplinary team would also systematically identify individuals at high risk of future health and social care need and provide advice, support and assistance to enable people to remain healthy, happy and independent for longer. The Staying Well approach was being piloted in 6 practices and early evaluation had been positive.

Additional information was provided in relation to Bolton's Integrated Health and Social Care Plan which included details of:

- partners and governance;
- Governance structure;
- levels of intervention according to risk stratification;
- the new service model;
- the Staying Well Pilot and Checklist Tool;

- the Integrated Care Model;
- the investment proposition; and
- the Evaluation Framework.

The report also listed the key milestones that had been achieved to date and those outstanding together with further action and next steps and timescales in order to continue to develop the Integrated Model.

In order to supplement the report and the presentation, members were provided with a copy of a paper that had been considered at an AGMA meeting on 28th June, 2013. It provided details on how the work that was on going in Bolton linked in to the work at a Manchester level on the Healthier Together reconfiguration of hospital and acute services. It outlined the work undertaken in the last month within Greater Manchester to align the three programmes of Integrated Care, Healthier Together and Primary Care which would provide a common base to the whole system reform work and strengthen the out of hospital reform programmes, the output of which would provide the context for the potential public consultation on the configuration of in hospital services in November/December, 2013.

Following consideration of the report and presentation, the following observations/comments were made:-

- The need to encourage and support family/friends in their role as carers;
- The financial needs of the individual and how they were identified;
- The importance of all partners embracing the proposals and the need for this to be monitored by this Committee;
- Details on how the cluster of general practices would operate in practice; and
- Would the proposals enhance the service for the elderly who have mobility issues.

Resolved – That the report and presentation be noted.

## **9. MEMBERS BUSINESS**

The Committee was informed that a number of questions had been submitted by Councillor C Burrows for consideration under Standing Order 36, viz:-

1. Are there any plans to merge the Bolton and Wigan NHS trusts?
2. If there are do you intend to carry out a consultation process and if so, when? Furthermore, if you do not intend to carry out a consultation, why not?
3. Will you be using outside consultants in any merger proposal and what will be the cost?
4. Would any merger bring about a downgrading of any services?
5. What impact would a merger have on patient care?
6. Has a risk assessment been carried out to assess the effect on patient care?
7. Would a merger bring about more redundancies and impact on employee's terms and conditions.

In response to the above questions Dr J Bene, Acting Chief Executive from the Foundation Trust confirmed that there were no plans to merge Bolton and Wigan NHS Trusts. As such questions 2 to 6 were therefore not applicable as a merger was not planned. She also confirmed, however, that Bolton NHS Foundation Trust and Wroughtington, Wigan and Leigh NHS Foundation Trust were discussing means in which they could collaborate in terms of support services to help with the savings plans in both Trusts. There were no planned redundancies or impact on employee's terms and conditions as a result of these discussions at the present time.

The Committee also received the extracts of minutes of other meetings of the Council relevant to the remit of this Committee:-

(a) The Executive Cabinet Member Deputy Leader's Portfolio held on 8<sup>th</sup> and 25<sup>th</sup> July, 2013

Resolved – (i) That the questions submitted and the response provided be noted.

(ii) That the minutes be noted.

(The meeting started at 5.00p.m. and finished at 5.45 p.m.)

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## **NOTES**