

INTEGRATED CARE AND WELLBEING SCRUTINY PANEL

Day: Thursday
Date: 9 November 2017
Time: 6.00pm
Place: Lesser Hall 2 - Dukinfield Town Hall

Item No.	AGENDA	Page No
1.	APOLOGIES FOR ABSENCE	
2.	MINUTES	
a)	TO APPROVE AS A CORRECT RECORD, THE MINUTES OF THE PROCEEDINGS OF THE INTEGRATED CARE AND WELLBEING SCRUTINY PANEL HELD ON 14 SEPTEMBER 2017	1 - 4
b)	TO RECEIVE THE MINUTES OF THE MEETING OF THE VOICE OF THE CHILD OVERVIEW PANEL HELD ON 13 SEPTEMBER 2017	5 - 6
3.	TAMESIDE ADULT SAFEGUARDING BOARD ANNUAL REPORT The Panel to meet Andrew Searle, Chair of the Adult Safeguarding Board; Paul Dulson, Head of Adult Assessment and Care Management; and Pam Gough, Safeguarding Adult Coordinator, to receive the Annual Report of Tameside Adult Safeguarding Board.	
4.	CHILDREN'S SERVICES IMPROVEMENT The Chair to provide an update on recent and on-going review and monitoring activity of Children's Services improvement.	
5.	UPDATE ON CURRENT REVIEW The Panel to receive an update on the progress of the current review and details of future working group meetings.	
6.	DATE OF NEXT MEETING To note that the next meeting of the Integrated Care and Wellbeing Scrutiny Panel will take place on Thursday 11 January 2018.	
7.	URGENT ITEMS To consider any additional items the Chair is of the opinion shall be dealt with as a matter of urgency.	

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Integrated Care and Wellbeing Scrutiny Panel

14 September 2017

Commenced: 6.00pm

Terminated: 7.25pm

Present: Councillors Peet (Chair), Cartey (Deputy Chair), Affleck, Cooper, Fowler, Patrick, T Smith, Sweeton, R Welsh.

Apologies for absence: Councillors Bowden, P Fitzpatrick, Kinsey, Middleton, Whitehead, Wills.

The Chair opened the meeting and received apologies.

13. MINUTES

The minutes of the meeting of the Integrated Care and Wellbeing Scrutiny Panel held on 27 July 2017 were approved as a correct record.

14. REVIEW OF INTERMEDIATE CARE PROVISION IN TAMESIDE AND GLOSSOP

The Panel welcomed Alison Lewin, Deputy Director of Commissioning, NHS Tameside & Glossop Clinical Commissioning Group; and Dr Alison Lee, Governing Body GP, to receive an update on the review and consultation process for the delivery of bed based intermediate care.

The Panel received a presentation with details of the review of intermediate care and the public consultation that is currently underway. Ms Lewin advised members that intermediate care is something which can be delivered in people's homes, in a community hospital or in a residential home. A variety of professionals can deliver this type of care, from nurses and therapists to social workers.

Intermediate care aims to avoid unnecessary hospital admission, improve independence following a stay in hospital and ultimately delay residential care until it is really needed. In order to strengthen the way local intermediate care services are delivered a wide range of public and patient consultation and engagement work has taken place during the last 2 years. The information gathered about the way residents would like to receive intermediate care has been an important part of the way that the new proposals have been developed.

The Panel heard that community based beds in Tameside and Glossop are delivered across two locations, with a total of 68 beds. There are 32 intermediate care beds in the Stamford Unit, Ashton-under-Lyne, with 36 beds located at Shire Hill, Glossop. The service is operated by Tameside Hospital (Tameside and Glossop Integrated Care NHS Foundation Trust), with all the beds used as a collective resource for patients to be placed at either location with a vacancy.

Ms Lewin advised members that there are a range of newly developed Home First services in operation to improve the home and community healthcare offer, this includes a digital health offer, IV Therapy team and social prescribing. By creating a single point of contact and building a comprehensive neighbourhood model this will mean that patients are able to have a range of health and social care needs met in their own home and without the need for acute services and hospital admission.

The public consultation exercise opened on 23 August 2017 and will run until 15 November 2017. The proposals for the future delivery of intermediate care have been built around past engagement, with a choice of three options to choose from. The options are:

- **OPTION 1:** Maintain current arrangements.
- **OPTION 2:** All bed-based intermediate care in a single location at the Stamford Unit.
- **OPTION 3:** Develop a scheme of bed based intermediate care within local private homes

The Panel heard that the consultation states Option 2 as the preference, with the benefits of the location of the Stamford Unit and proximity to wider services at Tameside Hospital. The aim will be to reduce transfers to improve the continuity of care and transition as a 'step down' from hospital and allow patients to receive the required support to enable a safe and effective return to their own home.

Research has been undertaken to show that between April 2015 and May 2017; 847 service users stayed at Shire Hill, of which only 40% lived within 5 miles of it, with 84% living within 5 miles of the Stamford Unit. Between the same period 1279 service users stayed at the Stamford Unit and 96% of them lived within 5 miles of it.

The Panel asked about the number of intermediate care beds that will be on offer if Option 2 was to prevail, namely the apparent reduction from current 68 beds to 64 beds at the Stamford Unit. Panel members wanted to know how the local intermediate care offer compares with other areas and the ability of the Stamford Unit to facilitate a rise from 32 to 64 beds in a single location.

Ms Lewin advised members that data from a national audit of intermediate care shows that our local bed based intermediate care offer is sufficient and above other areas. The range of Home First services will continue to be developed, which will ultimately reduce the need for intermediate care beds and avoid unnecessary hospital admission. The number of beds is sufficient and frequent monitoring will be undertaken to identify and address any potential challenges relating to capacity.

The Stamford Unit currently provides 32 intermediate care beds across one floor and with a second floor currently unoccupied and underutilised this will allow the unit to comfortably support 64 beds going forward. It is important to note that intermediate care is part of a journey for patients returning to their own home, with a plan for intermediate care to be needed for a maximum of 6 weeks. Some patients will require services for much less time meaning beds do become available, with an effective hospital discharge plan providing notice to the service.

RESOLVED: That Ms Lewin and Dr Lee be thanked for their attendance.

15. CHILDREN'S SERVICES IMPROVEMENT

The Chair discussed the Panel's approach to the monitoring of improvement activity and made reference to a report presented to Overview (Audit) Panel on 11 September 2017 which provided clarity around individual roles and responsibilities of a number of monitoring functions, namely Scrutiny and the Voice of the Child Overview Panel.

The Scrutiny Panel will provide support and challenge to the implemented change, whilst remaining outcome focused and a critical friend to the improvement process and plan. The Voice of the Child Overview Panel will undertake specific work to ensure that the voice and lived experience of children is reflected within the improvement activity.

It was agreed that a small cohort of panel members will meet with Team Managers and staff from the Children's Social Care Duty and Safeguarding teams to learn more of day-to-day operations with regards workforce pressures, the impact and pace of change and current challenges. The Chair discussed with members that it is important for findings from this meeting to be documented in a timely fashion with any significant findings to be shared with the Executive Member at the earliest opportunity to support the improvement journey.

RESOLVED:

(1) That the report presented to Overview (Audit) Panel on 11 September 2017 be circulated to panel members by email.

(2) That once finalised, details of the meeting with Children's Services be circulated to members by email and as a calendar invitation.

16. UPDATE ON CURRENT REVIEW

The Panel received an update on the first working group meeting of the Homecare Provision review which took place on 7 September. The group met with Sandra Whitehead, Assistant Executive Director, Adult Services and Dave Wilson, Team Manager to receive a comprehensive overview of how homecare is delivered and managed locally.

RESOLVED: Members of the Homecare Provision working group to be notified of arrangements of future meetings by email and as a calendar invitation.

17. DATE OF NEXT MEETING

To note that the next meeting of the Integrated Care and Wellbeing Scrutiny Panel will take place on Thursday 9 November 2017.

18. URGENT ITEMS

The Chair reported that there were no urgent items for consideration at this meeting.

CHAIR

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Voice of the Child Overview Panel

13 September 2017

Commenced: 6.00pm

Terminated: 7.10pm

Present: Councillors T Smith (Chair), Sidebottom, M Smith, R Welsh

Apologies for absence: Councillors J Lane, Pearce, Peet

1. CHAIR'S WELCOME AND INTRODUCTION

The Chair welcomed members to the first meeting of the Voice of the Child Overview Panel. It was discussed that the Panel will have responsibility to ensure that the voice and lived experience of children is reflected in the improvement activity. It is important that focus is placed on providing supportive and constructive checks to existing policies, procedures and partnership working.

2. TERMS OF REFERENCE

Members received a draft paper outlining the proposed Terms of Reference for the Panel.

Resolved: That the Terms of Reference is approved and adopted by the Panel.

3. UPDATE ON OFSTED INSPECTION AND MONITORING VISIT

The Panel received copies of the full Ofsted inspection report published on 9 December 2016; and the Ofsted letter from the monitoring visit which was undertaken on 8 and 9 June 2017. A summary of the Voice of the Child findings within the Ofsted report was also provided to draw particular attention to findings and recommendations within the report which will influence future work and enquiry of the Panel.

Members discussed the challenges that services now face in order to improve and the way by which improvements are both measured and monitored. With Ofsted identifying a number of areas in need of improvement relating to the voice of the child, the work of this panel will aim to ensure any failings are addressed in a way that significantly improves outcomes for all children who find themselves in touch with Children's Services.

The Chair also discussed the need for transparency in the way that service improvements and outcomes are relayed between Children Services, partner agencies and Elected Members to drive on-going improvement. This includes important messages such as improvement progress and achievements to continued challenges where a shared approach and responsibility may be needed.

Resolved: That close attention is placed on future Ofsted monitoring activity and the direction of the Panel's activity.

4. OPPORTUNITIES TO IMPROVE OUTCOMES FOR CHILDREN

Members discussed how the Panel will look to engage directly with children, as well as looking at some of the processes for gathering, recording and learning from the voice and lived experiences of children and young people.

It was discussed how important the voice of the child can be when acting as a flag for a range of problems and potentially unidentified issues within a service. There is a need for an appropriate level of open and honest feedback systems, both for children to be heard and for staff to raise any concerns with managers and Elected Members.

A key part of the improvement journey is to ensure children are encouraged to be fully engaged by feeling comfortable, safe and confident to express their views on a range of procedures and decisions which will ultimately affect them in the short, medium and long-term.

5. WORK PROGRAMME

The agreed area of work and future activity includes:

- For an initial meeting to be arranged with the Children in Care Council to learn more about the ways in which the voices and lived experiences of children are represented.
- To look at the wider engagement with children beyond children in care.
- To further explore best practice and professional guidelines.
- To map out how the voice of the child is heard in individual cases, how it is recorded, how it is acted upon and the ways by which collective learning and improvements are achieved.
- To explore how the voice of the child is collated across caseloads to draw out the learning points for wider service development.
- To benchmark with an area that is judged to be 'Good' by Ofsted with regards to the voice of the child.
- To review other sources of evidence that will improve the way that services review and act upon a range of findings and outcomes, e.g complaints.

Resolved:

(1) For an informal meeting to be arranged before 1 November 2017, for members to meet with young people from the Children in Care Council.

(2) For details of the meeting with the Children in Care Council to be circulated to members by email and as a calendar invitation.

(3) For the Panel to receive a paper at the next meeting on 1 November 2017, with details of best practice and professional guidelines to ensure the voice and lived experiences of young people are incorporated within all aspects of Children's Services.

6. DATE OF NEXT MEETING

To note that the next meeting of the Voice of the Child Overview Panel will take place on Wednesday 1 November 2017

7. URGENT ITEMS

The Chair reported that there were no urgent items for consideration at this meeting.

CHAIR