

Integrated Care and Wellbeing Scrutiny Panel

11 January 2018

Commenced: 6.00pm

Terminated: 7.40pm

Present: Councillors Peet (Chair), Cartey (Deputy Chair), Affleck, Bowden, Buglass, Cooper, P Fitzpatrick, Fowler, Kinsey, Mills, Ryan, T Smith, R Welsh, Wills.

Apologies for absence: Councillor Patrick.

The Chair opened the meeting and received apologies.

The Panel observed a one minute silence as a gesture of respect to the recent death of the Executive Leader of the Council, Councillor Kieran Quinn.

25. MINUTES

The minutes of the meeting of the Integrated Care and Wellbeing Scrutiny Panel held on 9 November 2017 were approved as a correct record.

26. REVIEW OF URGENT CARE IN TAMESIDE AND GLOSSOP

The Panel welcomed Jessica Williams, Programme Director of Care Together, to receive an update on the review and consultation process for the delivery of Urgent Care in Tameside and Glossop.

It was reported that urgent care consists of any form of medical attention needed on the same day which is not life threatening and requires prompt assessment and treatment. This includes a range of injuries and medical conditions which can be dealt with effectively without the need to attend hospital.

The Panel heard that the Care Together programme is committed to making the urgent care system in Tameside and Glossop as simple as possible in order that a person's journey through illness to recovery is clear, easy to access and of high quality. Current services don't always work together as well as they could and the consultation includes proposals for improvement.

There is a significant need to generate more capacity for Accident & Emergency (A&E) at the hospital to care for the sickest people. In order to show demand across services, the presentation provided data relating to attendances at Tameside's urgent and emergency care centres. It showed that:

- The Ashton Walk In Centre currently sees around 154 people per day, with many conditions being non-urgent and requiring self-care support.
- A&E at the hospital sees on average 236 people per day, of which around 80 are judged to have only minor and non-emergency health needs.

Health systems need to ensure that those in most need of emergency care receive the quickest treatment. From October 2017, there was a national requirement to provide a streaming service at every A&E department. In addition to this, we are mandated to provide an Urgent Treatment Centre which is led by GPs, open 12 hours a day, 7 days a week.

Ms Williams informed the Panel that we want to ensure our services are easy to understand so that people receive appropriate care first time, in the right place and do not have to visit

multiple services for the same issue. To enable improvements to happen a number of outcomes have been identified in order for plans to be achieved.

- A simpler system
- An efficient system
- Care closer to home
- Reduce pressure on A&E
- Sustainability

The Panel heard that as part of wider Care Together consultation and engagement, work has been carried out to talk to residents with the view to developing proposals for the future of urgent care in Tameside and Glossop. This has included talks with Practice Neighbourhood Groups and ensured protected and under-represented groups have their voices heard on urgent care.

Feedback has told us that defining and understanding what is 'urgent' can be a problem and that communications on this need to improve. Residents also want a simpler means of access and consistent opening times to avoid confusion, even if this means less choice. The 12 week public consultation on Urgent Care has run from 1 November 2017 and will end on 26 January 2018.

Proposals show a simplification of access to urgent care services with the planned introduction of a 12 hour GP-led Urgent Treatment Centre (UTC) at the Hospital site and across Neighbourhood Care Hubs. The UTC will have access to urgent diagnostic equipment such as X-Ray and ECG. Patient records will be accessible and up-to-date wherever a person is seen to aid safer transfer when specialist care is needed.

The consultation provides two options for urgent care delivery, with no preference. Both options create additional bookable appointments at the UTC and a single location for walk in access that removes the need for a person to 'self-triage'. The options differ in the number of locality hubs and weekend access.

The Panel asked about the future of the GP surgery based at Ashton Primary Care Centre if urgent care services are relocated to the hospital site.

Ms Williams informed members that the centre would remain as an enhanced hub and GP surgery. The plan will be for more services from the hospital to be moved into the centre and it is also important to note that more work is required to increase the number of appointments available within general practice across Tameside and Glossop.

The Panel asked about the risks associated with a shortage of GPs nationally and potential issues this may cause at a local level to ensure new delivery plans for urgent care are achievable and able to make a real difference.

Ms Williams advised that GP shortages remain an issue nationally and this is no different in Tameside. Both delivery options for urgent care bring workforce challenges, including GPs. A wider and more specific piece of work will need to be undertaken for how to manage GP capacity, the support from Go-to-Doc and patients having access to the right professional which may not always be a GP. This work will also include the way health services are supported within the community and the role of pharmacists.

RESOLVED:

(1) That Ms Williams be thanked for attending the meeting.

(2) That following outcomes from the consultation and the decision on urgent care, the Panel receive a future update on delivery plans and timescales.

27. CHILDREN'S SERVICES IMPROVEMENT

The Panel welcomed James Thomas, Director of Children's Services; and Gani Martins, Interim Assistant Director, Children's Services, to receive an update directly related to outcomes and improvement work.

It was reported that following the appointment of the new Director of Children's Services in October 2017, progress has been made to strengthen leadership and management arrangements across Children's Services. It was also important to firstly ascertain and understand the level of work needed to improve services and outcomes for children, with the involvement of staff and partners.

Mr Thomas informed members that Ofsted judgements from the initial inspection in 2016 and subsequent monitoring visits have all been accurate and fair in their assessments. The monitoring visits have commented that while services are improving in parts, the progress and pace is too slow.

To address this, work was undertaken quickly to produce a new improvement plan, which was essential to move towards the next phase. A copy of the new plan was shared with members and it was confirmed that attention is now placed on barriers of the service and the application of core practice standards, which need to be consistently achieved.

The improvement plan and the vast amounts of work being undertaken are focused on the getting things right, in the right places. The work undertaken is not just to meet Ofsted requirements, but is aimed to improve outcomes for children and families by listening to their voice and experiences.

The Panel asked about the challenges faced by the services at this stage of improvement.

Mr Thomas informed members that demand on services is extremely high and around 20% above our statistical neighbours. This is something that can be typical for services judged as inadequate and will require on-going attention in relation to decision making, working with partners, application of thresholds and risk.

It was also reported that workforce pressures exist with regards to the general recruitment and retention of social workers. The turnover of locum social workers is too high and there is a need to strengthen management by creating a systematic approach to address standards expectations. A new recruitment drive is planned to address this in part.

RESOLVED:

(1) That Mr Thomas and Ms Martins be thanked for attending the meeting.

(2) That regular contact is maintained with Children's Services to provide regular updates on progress and timescales.

28. UPDATE ON CURRENT REVIEW

The Panel received an update on the most recent working group meeting of the Homecare Provision review. Members met with managers from Adult Services to receive information relating delivery of services and planned changes.

RESOLVED: That work is now undertaken to collate findings from all of the working group meetings of the review.

29. NEW REVIEW TOPIC

The Panel selected Suicide Prevention as the next review topic from the Annual Work Programme for 2017/18.

RESOLVED: That the review of Suicide Prevention be undertaken during period January to April 2018.

30. ESTABLISHMENT OF WORKING GROUP

The Chair invited panel members to express an interest in joining the new working group for the review of Suicide Prevention.

RESOLVED:

(1) That Councillors Peet (Chair), Cartey (Deputy Chair), Bowden, Buglass, Kinsey and Mills will join the new working group.

(2) Details of future working group meetings to be circulated to members by email and as a calendar invitation.

31. DATE OF NEXT MEETING

To note that the next meeting of the Integrated Care and Wellbeing Scrutiny Panel will take place on Thursday 15 March 2018.

32. URGENT ITEMS

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

CHAIR