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GATESHEAD METROPOLITAN BOROUGH COUNCIL

CARE, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE MEETING

Tuesday, 31 October 2017

PRESENT: Councillor S Green (Chair)

Councillor(s): N Weatherley, M Charlton, C Bradley, W Dick, K Ferdinand, B Goldsworthy, M Goldsworthy, M Hood, P Maughan, R Mullen, I Patterson, J Simpson, A Wheeler and M Hall

APOLOGIES: Councillor(s): D Bradford and J Lee

CHW60 MINUTES OF LAST MEETING

RESOLVED – That the minutes of the last meeting held on 12 September 2017 were approved as a correct record.

CHW61 BLAYDON GP PRACTICE

The Committee received an update on the consultation on the future of Blaydon GP led practice.

Blaydon GP Led Practice is a GP practice based at Blaydon Primary Care Centre. The practice delivers essential, additional and enhanced services to 1,996 patients.

The current contract is delivered by Gateshead Community Based Care Ltd and has been extended until 30 June 2018. NHS Newcastle Gateshead CCG has commenced a period of engagement with patients and stakeholders to assist in the forming of options regarding the future of the practice. Phase one included engaging with members of the public on how they currently use the GP practice. Phase two is a period of consultation to consider the options available for the future of the service.

The engagement phase (phase one) took place between 1 – 15 September and included letters to patients, a survey, and liaison with various groups and stakeholders.

Patients reported in the feedback that the service they receive is either very good or good.

Patients also reported that they seem generally happy with the GP surgery and have left more positive comments than negative. In terms of improvements, respondents were more likely to say there is a need to see a regular GP and have less reliance

on the use of locums. Patients would like to have consistent and reliable access to quality healthcare services, and feel it is important to have continuity of care. They would also like it to remain in its current location.

Phase two (6 November 2017 – 14 January 2018) will focus on consulting on the options available for future provision of the service. The methodology includes:

- Writing out to patients (with details about what is being consulted on, how to get involved)
- Patient information – this includes information about the options involved and commonly asked questions
- Survey – available online and in paper form – this will focus on the options decided by the Primary Care Commissioning Committee
- Letters, patient information and surveys will be translated as appropriate
- Linking with local community groups
- Use of social media with promoted posts via Facebook
- Events organised by Healthwatch – this will include a public meeting and dedicated focus groups
- Healthwatch volunteers to help/encourage people to complete the survey within the practices

The OSC will be formally consulted on the proposed options for the practice at its meeting in January 2018.

- RESOLVED -
- i) That the information be noted
 - ii) That the outcome of the phase two consultation will be provided at the January meeting of the OSC

CHW62 GATESHEAD HEALTHWATCH INTERIM REPORT

The Committee received a report outlining the progress achieved for Healthwatch Gateshead since 1 April 2017 and also outlined the priorities for 2017/18.

At the start of the financial year, Healthwatch Gateshead and Healthwatch Newcastle held a joint annual event and conducted additional engagement activities to involve the community and partners in setting the priorities for 2017/18. Consultation resulted in the key work priority areas for Healthwatch Gateshead in 2017/18 being established as:

- Carers and the support carers receive
- NHS Continuing Healthcare (CHC)
- Mental Health
- Young People
- End of life

The OSC noted that Healthwatch was promoting a film produced by Enabled City who worked with Greenwich CCG and NHS England in relation to continuing care to better explain to patients and families how the NHS decides if someone is eligible for

NHS continuing healthcare and considered this was an excellent idea.

Healthwatch Gateshead agreed to provide the Committee with a further update at the meeting in March 2018.

- RESOLVED -
- i) That the information be noted
 - ii) That a further report be presented at the March meeting of the OSC

CHW63 OSC REVIEW - WORK TO ADDRESS HARMS CAUSED BY TOBACCO - EVIDENCE GATHERING

The Committee received a report and two presentations in the second evidence gathering session on the work being progressed to help people stop smoking, issues in providing this help and emerging models of stop smoking support.

The first presentation highlighted the stop smoking active intervention service and the second presentation discussed tobacco control.

The Committee were also advised:

- Gateshead has higher than average levels of smoking
- Smoking remains the single cause of most preventable illness and death in Gateshead
- There are significant inequalities in the prevalence of smoking between different groups and areas
- Demand for stop smoking services in reducing locally, regionally and nationally
- There are particularly low levels of take up of stop smoking services amongst some groups i.e. people from black, Asian and minority ethnic groups
- There is pressure on Public Health budgets now and in the future
- The Gateshead Health and Wellbeing Board has an ambition to reduce smoking prevalence in Gateshead to 5% or less by 2025 from its current prevalence of 17.9%
- Innovative solutions developed in Gateshead in the past have helped to transform smoking rates in particular communities.

The Committee noted that e-cigarettes have a role in helping individuals quit as part of the stop smoking service and queried whether there was any evidence at this stage of the effects of passive vaping. The Committee was advised that at this point in time there is no evidence of any harmful effects. The Committee was also advised that currently all the evidence suggests that e-cigarettes are 95% safer than traditional cigarettes. The potential risks of e-cigarettes are not yet known but a full scale review at a national level is due to commence shortly.

- RESOLVED -
- i) That the information be noted
 - ii) That any research (once released) on the use of e-cigarettes be made available to Committee
 - iii) That a further update be provided to the OSC in due course

CHW64 QUALITY OF COMMISSIONED SERVICES IN GATESHEAD

The Committee received a report and presentation on the Quality of Commissioned Services in Gateshead which provided an update on the quality of care provided by independent sector care organisations in Gateshead and described how commissioning activity within Commissioning and Quality Assurance helps to oversee, maintain, support and improve quality within the Gateshead Market. The OSC focused on services commissioned through Adult Social Care focusing on Care Homes and Home Care.

The Committee was updated on the duty placed on local authorities resulting from the Care Act 2014, the role of the Quality Assurance Framework, joint working with Clinical Commissioning Groups the Care Quality Commission and Healthwatch Gateshead, risk management, current quality issues in the market, care home performance, homecare performance and the next steps.

The Committee considered that provision at Shadon House was excellent and was keen to understand if learning from this good practice was being shared with other providers. The OSC was informed that there is a provider forum where good practice such as this is highlighted.

The Committee was keen to understand how the Council worked with providers in relation to different standards of provision and was advised of the various steps which were undertaken to improve quality of provision.

- RESOLVED -
- i) That the information be noted.
 - ii) That the OSC support the proposal to purchase the PAMMs system to give better oversight of quality and performance.
 - iii) That the OSC support the proposal to replicate the Serious Provider Concerns process for Children's Services.

CHW65 SHARED CARE CLINICAL AUDIT

Mark Harrison, Independent Consultant, Public Health will provided the OSC with a presentation on the findings of the clinical audit and alcohol shared care service commissioned by Public Health. The 'shared care' arrangement is currently between the main clinical recovery service provider (Change Grow Live – CGL) and primary care (GPs). The primary care service delivers satellite provision that should complement the main service located in the Town Centre. These services are commissioned by Public Health using separate contracts.

- RESOLVED -
- i) That the information be noted
 - ii) That further updates be provided to Committee in due course

CHW66 INTEGRATING HEALTH AND CARE IN GATESHEAD

Julie Ross, Director of Integration Gateshead and Newcastle updated the Committee on the current thinking of health and care system leaders in Gateshead about the opportunities for integrating services with the explicit aim of improving the health and wellbeing outcomes of the population.

The OSC queried what mechanisms were being put in place in relation to oversight of the integration of health and social care.

The OSC was advised that the Health and Wellbeing Board at its meeting on 8 September agreed that Gateshead health and care system leaders come together in a formal group under the auspices of the Board, in order to further develop the proposals for the integration of health and care services in the borough. Further proposals will be brought back to the Board over the coming months for consideration.

The OSC was also keen to understand how the new arrangements were supporting the work of the Council and NHS partners in tackling delayed discharges and the differing budgetary and monitoring systems for both. The OSC was advised that current work has involved looking at how a bridge can be built between the acute and community funding regimes.

The OSC also considered that it would be useful when work is being carried out to deliver high quality co-ordinated care and support individuals maintain their independence and manage their own health that professionals look to use the film promoted by Healthwatch Gateshead in relation to continuing care and it was agreed that the potential for this would be explored.

- RESOLVED -
- i) The OSC supported the information presented and particularly the potential for integrating health and care services as part of an incremental approach to the overall integration of services in the borough.
 - ii) The OSC noted the creation of a time limited health and care system leader group to develop comprehensive and costed proposals, which will report to the Health and Wellbeing Board
 - iii) That regular updates be provided to committee in due course.

CHW67 ANNUAL WORK PROGRAMME

The Committee received a report outlining proposed changes to the Annual Work Programme for the municipal year 2017/18.

- RESOLVED -
- i) That the provisional work programme be noted
 - ii) That further reports will be brought to the Committee to identify any additional policy issues, which the Committee may be asked to consider.

Chair.....