

Commenced – 6.00 pm
Concluded – 8.35 pm

Adults and Public Health Overview and Scrutiny Board

20 January 2014

Present: Councillor Dhindsa (Chair)
Councillors Harwood, Jennings, J Khan, Pegg, Turner, Webb and L Winter

41/13 Apologies for Absence

There were no apologies.

42/13 Late Items

There were no late items.

43/13 Declarations of Interest

There were no declarations of interest.

44/13 Minutes of the meeting held on 11 November 2013

The minutes of the meeting held on 11 November 2013 were agreed as a correct record and signed by the Chair.

45/13 Minutes of the meeting held on 18 November 2013

The minutes of the meeting held on 18 November 2013 were agreed as a correct record and signed by the Chair.

Resolved

46/13 Review of walk-in services – Final report

The Board received a report of the Strategic Director of Resources on Review of Walk-in Services – Final Report. The report was presented by the Commissioning Manager – Urgent Care of the Southern Derbyshire Clinical Commissioning Group (SDCCG).

It was reported that a review of walk-in services in Derby began in May 2013 and that the contracts for the Derby Open Access Centre (DOAC) and the Derby Walk-in Centre (WIC) were due to expire on 31 March 2015.

It was further reported that the SDCCG had recently completed a comprehensive consultation exercise on its review of Derby walk-in services, to which the Board had also submitted its recommendations.

Members supported the final recommendation of the review; that walk-in services be maintained in Derby city centre and Normanton areas.

Members agreed that demographics should be taken into account when the new service model was being designed.

Members felt strongly that both walk-in services should be GP led and that this would help to reduce duplication.

Members noted the 57 per cent of patients who visited the Derby Walk-in Centre and were referred to other services. Members agreed that it was important to try and reduce duplication and that any savings made from doing so, be re-invested in improving walk-in services.

Members expressed concerns around patients not being registered with a GP and agreed that both services should encourage patients to register with a GP if they had not already done so.

Members agreed that the walk-in services should be promoted as widely as possible to reduce the pressures on A&E services.

Resolved:

- 1. to consider and comment on the final report on the review of walk-in services;**
- 2. to support the final recommendation of the review, that walk-in services be maintained in Derby city centre and Normanton areas;**
- 3. to recommend that demographics be taken into account when the service model is being designed;**
- 4. to recommend that both services be GP led to reduce duplication;**
- 5. to recommend that work be undertaken to reduce the 57 per cent of patients who visit the Derby Walk-in Centre and are referred to other services and that any savings made from reducing duplication be re-invested in improving walk-in services;**
- 6. to recommend that both services encourage patients to register with a GP if they have not already done so; and**
- 7. to recommend walk-in services are widely promoted as increase in their use will reduce pressure on A&E services.**

47/13 Briefing on iHELP

The Board received a report of the Strategic Director of Resources on iHELP Public Access Defibrillators. The report was presented by senior officers from East Midlands Ambulance Service (EMAS) and Vivid Out of Home Media Ltd.

It was reported that EMAS had entered into a partnership arrangement with iHELP, a commercial organisation, to increase the number of public access defibrillators (PADs) in the city. It was further reported that iHELP units were approximately 2.3m tall and housed a display screen on both sides which showed advertising material. Members noted that on the side of the unit was a keyboard which gave access to an automatic defibrillator. It was further noted that if/when someone suffered a cardiac arrest, the 999 call taker would be aware if the patient was close to an iHELP unit and would give the caller the access code to open the compartment and get the defibrillator. It was reported that at the same time, instructions on how to use the defibrillator would appear on the iHELP units display screens.

Members agreed that the relevant Cabinet Member(s) should further explore the proposals for establishing iHELP units in the city. Members put forward questions for the Cabinet Member(s) to ask in relation to the viability of the PADs.

Resolved:

- 1. to consider and comment on the proposals for establishing iHELP defibrillators in the city; and**
- 2. to recommend that the relevant Cabinet Member(s) further explores the proposals for establishing iHELP defibrillators in the city as this has the potential for improving health outcomes for Derby residents.**

48/13 Derby's Draft Joint Dementia Strategy 2013-15

The Board received a report of the Strategic Director of Adults, Health and Housing on Derby's Draft Joint Dementia Strategy 2013-2015. The report was presented by the Director of Business Intelligence and Sector Development.

It was reported that Derby City Council and the Southern Derbyshire Clinical Commissioning Group (SDCCG) had recently refreshed the Joint Derby City Dementia Strategy (2013-2015) and that it was currently in draft form pending sign off by the joint Adults Commissioning Board. It was further reported that strategy was developed following wide-scale engagement with people affected by dementia, including families and carers. Members noted that the strategy contained an action plan that mirrored the broad range of outcomes within the National Dementia Strategy (2009). It was reported that since the first National Dementia Strategy was produced in 2009, there had been a strong and reinvigorated national policy emphasis on dementia within the Prime Minister's Challenge on Dementia (2012).

Members raised concerns around dementia patients being put into care homes that were not suitably equipped. It was reported that the Council were talking to all care homes and that it was important to raise the general level of awareness of staff. It was further reported that care homes had to be suitably equipped to be able to access the higher level fee for looking after people with dementia.

Members discussed issues around awareness of dementia and agreed that all organisations that supported the elderly should have an understanding about dementia and the process of GP referral.

Resolved:

- 1. to review the draft joint Derby City Dementia Strategy and action plan and approve the contents;**
- 2. to approve the roll-out of the Dementia Friends information sessions to local citizens, professionals and elected members to further local understanding about dementia, in line with national policy directives and the local action plan as above; and**
- 3. to recommend that all organisations that support the elderly have an understanding about dementia and the process of referral.**

49/13 Commissioning Structure and VFM Adult Social Care

The Board received a report of the Strategic Director of Adults, Health and Housing on Commissioning Structure and VFM Adult Social Care. The report was presented by the Director of Business Intelligence and Sector Development.

It was reported that Social Care Commissioning was a key enabler for providing appropriate services to meet identified care and support needs in localities. It was further reported that commissioning involved the identification of needs, design, implementation and monitoring of services in a cycle as illustrated by the strategic commissioning cycle at Appendix 2. Members noted that the Adults, Health and Housing Directorate operated a relatively small but very efficient adults commissioning function and that notable savings had been achieved through tendering procurement and market management exercises. It was reported that the unit costs of commissioned services for Derby were low relative to comparators and that work with health colleagues on integration of care services was at a planning stage in readiness for the 2015/16 Better Care Fund.

Members agreed that the thanks of the Board should be passed onto the commissioning team for their work

Resolved:

- 1. to note the importance, cost effectiveness and efficiency of the commissioning function within the Adults, Health and Housing Directorate;**
- 2. to note the existence of work streams to support future integration of care and commissioning with health partners; and**
- 3. to recommend that the thanks of the Board be passed onto the commissioning team for their work.**

50/13 Update on Substance Misuse Treatment

The Board received a report of the Strategic Director of Resources on Update on Substance Misuse Treatment. The report was presented by the Assistant Director of Public Health – Substance Misuse, along with a presentation. The presentation covered:

- Numbers of people involved in substance misuse

- How people get into the system and average length of stay
- The current structure of drug and alcohol treatment systems in Derby
- Costs – and any returns on investment
- The new alcohol treatment system (plans for 14/15 and 15/16)
- Substance misuse performance

Members agreed that the Assistant Director of Public Health – Substance Misuse should be invited to a future meeting of the Board to provide further information on substance misuse. Members agreed that any questions be forwarded to the Scrutiny and Civic Services Manager in advance of that meeting.

Resolved:

- 1. to consider and comment on the services for dealing with substance misuse;**
- 2. to recommend that the Assistant Director of Public Health – Substance Misuse attends a future meeting of the Adults and Public Health Board to provide information on the demographics of substance misuse; and**
- 3. to recommend that Members forward any questions in relation to drug and alcohol misuse to the Scrutiny and Civic Services Manager, in advance of the above meeting.**

51/13 Joint Strategic Health Needs Assessment

The Board received a report of the Director of Public Health on Joint Strategic Needs Assessment. It was reported that the development of an updated and electronic Joint Strategic Needs Assessment (JSNA) was well under way. It was further reported that web pages had been created and significant content and links added to create a JSNA information portal for Derby.

Members noted that the Health and Wellbeing Board had a duty to produce a JSNA in accordance with the Health and Social Care Act 2012, Local Government and Public Involvement in Health Act 2007 and published guidance.

Members agreed that a report on the Health and Wellbeing Strategy be brought to a future meeting of the Board and that it should incorporate further information on the JSNA information portal.

Resolved:

- 1. to note the progress and development of the JSNA to-date; and**
- 2. to recommend that a report on the Health and Wellbeing Strategy be brought to a future meeting of the Adults and Public Health Board.**

52/13 Review of the Enablement Service

The Board received a report of the Strategic Director of Adults, Health and Housing on Review of Enablement Support. The report was presented by the Director of Business Intelligence and Sector Development.

It was reported that Enablement (alternatively known as recovery, rehabilitation or re-enablement) was defined as, 'support to help people with physical or mental health problems or disabilities manage their situation by learning or re-learning the skills necessary for daily living'.

It was further reported that almost all customers, saving those in the last stages of terminal care, could benefit significantly from an Enablement approach and that it was best to see Enablement as a philosophy rather than a service.

Members noted that the service consistently supported between 50 per cent and 60 per cent of customers who were referred with critical or substantial needs to no longer require home-based care after typically six to eight weeks of support.

Members discussed the cost of continuing needs services and agreed that they should be commissioned by the Council where possible.

Resolved:

- 1. to note the development of Enablement support in Derby;**
- 2. to agree reporting frequency updating on improvements in the outcomes experienced by Derby's older and disabled people as a result of extended and better-targeted enablement support; and**
- 3. to recommend that the Council commissions continuing needs services where possible.**

53/13 Council Cabinet Forward Plan

An extract of the Council Cabinet Forward Plan, including items relating to the Board's terms of reference was considered. Members wanted an opportunity to consider and comment upon the following item:

- Item – 41/13 – Tackling Social Isolation and Loneliness Faced by Older People

Resolved to recommend that Forward Plan Item 41/13 be brought to the next meeting of the Adults and Public Health Board for consideration and comment.

MINUTES END