

Adult Social Care, Health and Wellbeing Sub-Committee

7 July 2016

Present: Councillor P Brooks (Chair)
Councillors G Bell, L Bell, J Cassidy, K Clark, M Huscroft, W
Lott, A Percy, M Reynolds, L Spillard

ASCHW10/07/16 Apologies

Apologies for absence were received from K Lee.

ASCHW11/07/16 Substitute Members

There were no substitute members.

ASCHW12/07/16 Declarations of Interest and Dispensations

There were no declarations of interest.

ASCHW13/07/16 Minutes

The minutes of the meeting held on 2 June 2016 were confirmed.

ASCHW14/07/16 Northumbria Healthcare Foundation Trust

Representatives of Northumbria Healthcare Foundation Trust attended the meeting to provide feedback from the recent Care Quality Commission Inspection. It was noted that all sites had been rated outstanding, including all areas of children's services which was a unique achievement. The presentation set out the five 'must do' actions resulting from the inspection; four of these relate to maternity services and one to medical care. The presentation also outlined a number of 'should do' actions identified.

It was highlighted that the north east was in a good position in having two Healthcare Trusts rated as outstanding and a number of GP practices. It was highlighted that the Trust would be working with other trusts in the area to share best practice.

Members asked whether the remit for the Northumbria Specialist Emergency Care Hospital (NSECH) had changed in relation to emergency care and, if so, whether this needs to be publicised so that the public are clear about where to go for emergency care. In relation to this a Member highlighted her experience of attending North Tyneside General Hospital's 24 hour walk-in service in relation to a non-emergency incident and being told to go to NSECH. In addition, she highlighted a 7-8 hour waiting time at NSECH.

The Sub-committee was informed that both North Tyneside and Wansbeck hospitals offer an urgent care service, with a doctor available from 9.00 am until 10:00 pm and nurse practitioner after hours care. It was highlighted that patients may be asked to go to NSECH if the hospital is unable to treat their condition, if their condition is more serious, or there is uncertainty over diagnosis. This is more likely if the patient attends out of hours. It was explained that there have been occasions when demand at NSECH has been very high, and patients who are unwell but not an emergency may have experienced extended waits at these times. It was noted that there has been a spill-over from primary care in some instances which has impacted on the service, and the trust have been trying to manage this on a daily basis. It was stated that there is a need to work through how local people use the service.

Members raised an issue about maternity services and transport difficulties in relation to instances where pregnant women are turned away from the maternity ward if they aren't at the right stage of labour. Where they don't have their own transport they may have to rely on taxi services, particularly if this is during the night. The trust acknowledged that it can be difficult for women to judge when to attend hospital in these circumstances but the policy is the same as Wansbeck and many other hospitals. However, a telephone service is provided to provide help and advise women on when to attend hospital.

The Chair congratulated the Trust on the inspection outcome.

It was **agreed** to note the content of the presentation.

ASCHW15/07/16 Accountable Care Organisation

The Sub-committee considered the report which provided an update on the work of North Tyneside CCG to develop the concept of commissioning through an Accountable Care Organisations (ACO) appropriate to North Tyneside. It was noted that this report had been considered by the Health and Wellbeing Board on 16 June 2016.

The Sub-committee was informed that the overall aim of the project is to develop seamless care across the system through joint working, with social and primary care important aspects. It was highlighted that the CCG was working with the Kings Fund to develop meaningful outcomes to be included in the contract in order to chart the difference made to people's health.

It was noted that the objective was to implement the ACO by April 2017 and that further updates would be provided to the sub-committee and the Health and Well-being Board.

It was highlighted that any additional questions from Members following the meeting could be emailed to the CCG for response.

It was **agreed** that the report be noted.

ASCHW16/07/16 NHS England Commissioning for Carers Principles Self Assessment

The Sub-committee received a presentation from the CCG setting out the high level findings following the completion of a Carers Self-assessment Framework. Completion of the framework was one of a series of actions identified in the North Tyneside Commitment to Carers document 2015.

It was noted that the self-assessment framework is based on NHS England's Commission for Carers 10 principles which set out those areas that are most likely to achieve the best outcomes and to help commissioners to consider current commissioning practices with regards to carers and how they could be improved. Each principle includes a simple checklist to identify what already exists or to highlight areas that require further support. The outcome of the assessment will act as a carers' baseline which can then be repeated annually to record the progress made.

Having undergone the self-assessment 3 areas have been scored green, 16 were scored amber, and 9 were scored red. The assessment is indicative at this stage and the next step is to share the self-assessment with partners to seek their views and it is expected this will result in movement in ranking.

The CCG intend to use the final version of the self-assessment tool to develop an improvement plan with specific actions and timescales.

The Sub-committee noted some examples of good practice, including plans to provide laminated guidance notes to GP practices from September which would provide relevant contact number to patients and their carers.

The Sub-committee highlighted principal 9 - Invest in carers to sustain and save. An issue was raised about the financial requirement for respite care which makes it more difficult for people to access it and may be contributing to the current under-spend in this area. It was suggested that consideration be given to a more flexible approach to the policy in relation to access to respite care, given the financial savings that carers contribute to the Council and health services.

The Sub-committee highlighted the need to consider young carers. It was highlighted that the recent scrutiny review in relation to carers highlighted a gap in provision for young carers and that consideration needs to be given to a pro-active approach to identify and support young carers.

It was **agreed** that the CCG be asked to provide a further report in the autumn once the consultation with carers on the self-assessment has taken place.

ASCHW16/07/16 Loneliness and Isolation in North Tyneside

The Sub-committee considered a report and presentation which set out some of the approaches that Adult Social Care has developed to reduce the number of people who feel lonely or isolated.

The Sub-committee noted some of the key messages from research into this issue which highlighted the negative impact of social isolation and loneliness on people's health and well-being and that older people are particularly vulnerable.

The Sub-committee noted the research undertaken by the policy team which used risk factors to map the borough and identify areas that are likely to have these known characteristics and therefore identify the areas where support should be targeted. In addition, the North Tyneside Joint Strategic Needs Assessment highlights the estimate that just over 14,000 people aged over 65 are currently living alone in the borough.

The Sub-committee noted current developments within Adult Social Care to help combat loneliness, including the Care and Connect initiative which helps people to access existing activities and groups across the borough and assists in the setting up of new groups; and the 'make it special' Christmas campaign.

The Sub-committee was informed that Adult Social Care is also looking at particularly areas based on the research set out above to map against the activities available in these areas and identify barriers to people accessing these activities. It was noted that officers were open to suggestions about other methods of accessing people who are in need of help.

The Sub-committee noted that many of the activities are aimed at the older population, and highlighted that isolation and loneliness can also be an issue for younger people. It was also highlighted that different approaches may be needed, particularly in relation to older men who may have different types of social networks.

The Sub-committee thanked officers for the presentation and stressed the importance of this issue.

It was **agreed** that a further progress report should be received at a future meeting.