

HEALTH OVERVIEW & SCRUTINY PANEL

MINUTES OF THE MEETING of the Health Overview & Scrutiny Panel held in the Executive Meeting Room, The Guildhall on Wednesday 9 September 2009 at 2pm.

Present

Councillors David Horne (Chairman)
Margaret Adair
David Stephen Butler (from agenda item 6 ii) to 7)
Margaret Foster
Jacqui Hancock
Linda Symes (deputising for Robin Sparshatt).

Co-opted Members

Councillors Dorothy Denston
Roger Allen
Vicky Weston

Also in Attendance

Susie Waller, Head of Health Information & Development Service, Portsmouth City Council
Dr Matthew Smith, Consultant in Public Health Medicine, Portsmouth City Primary Care Trust
Dr Paul Edmondson-Jones, Director of Public Health and Wellbeing, Portsmouth City Primary Care Trust and Portsmouth City Council.
Justin Wallace-Cook, Deputy Head of Adult Social Care, Portsmouth City Council.
Timothy Robinson, Head of Public & Patient Involvement, Portsmouth Hospitals Trust
John Divall, Director of Corporate Affairs, South Central Ambulance Service
Neil Cook, Head of Operations, South Central Ambulance Service.
Rob Dalton, Director of Corporate Affairs, Portsmouth City Teaching Primary Care Trust
Claire Pond, Public Involvement and Communications Manager, Portsmouth City Teaching Primary Care Trust
Jane Di Dino, Scrutiny Support Officer, Portsmouth City Council
Anna Martyn, Scrutiny Support Officer, Portsmouth City Council

34

Welcome, Membership and Any Apologies for Absence (AI 1)

Councillors Brian Bayford, Peter Edgar, Andrew Lenaghan and Robin Sparshatt sent their apologies for absence and David Stephen Butler sent his apologies for his late arrival due to a conflicting commitment elsewhere.

35 Declarations of Interest (AI 2)

There were no declarations of interest.

36 Minutes of the Meeting Held on 10 June 2009 (AI 3).

RESOLVED that the minutes of the meeting of the Health Overview & Scrutiny Panel held on 10 June 2009 be confirmed as a correct record.

37 Information Exchange (AI 4).

Susie Waller, Head of Health Improvement & Development Service (HIDS) gave an overview of the Health Information & Development Service.

(TAKE IN REPORT)

The Panel heard that:

The HIDS service was set up as a result of the reorganisation of Portsmouth City Council's 'Moving Towards Excellence' in 2003/4 and restructured in 2005/6.

The HIDS service currently employs between 76-80 staff and has recently recruited 12 new employees to work on the Healthy Town programme.

It works closely with its partners on a very broad range of projects and activities.

In response to questions, the Panel heard that:

The HIDS service fits in with a number of key Council plans including the City of Portsmouth Children and Young People Plan and Local Area Agreements.

A considerable amount of effort is made in order to avoid duplication of work. The service is aware of what other organisations are doing as it partnership working is essential.

Portsmouth City Council produces a Joint Strategic Needs Assessment (JSNA), which identifies areas for priority action. The aim is to use the information that has already been collected more effectively and to obtain the information in a timely manner.

RESOLVED that more detailed information on the Health Improvement & Development Service be brought to a future meeting.

38 Scrutiny Reviews (AI 5).

i) St Mary's Health Campus Scrutiny Review.

The Chair gave the Panel a summary of the review of St Mary's Health Campus Scrutiny. The Panel agreed that it was a very interesting review.

RESOLVED that:

- 1. A suitable area be found on the St Mary's site for conversion into a green space that can be used by all stakeholders. This space would ideally have tree-shaded seating and be within a reasonable distance of the main buildings that make up the Health Campus.**
- 2. In addition to a main green space, small areas of the site are earmarked for the planting of new trees and flowerbeds, which are maintained and watered regularly.**
- 3. In order to make the new Health Campus more welcoming, the PCT commission:**
 - Local artists to create Portsmouth landmark murals or paintings throughout the site and;**
 - A photo story of the St Mary's site (similar to one displayed in St James' Hospital), which details the history and the many uses of the site through time.**
- 4. Effort be made in order to promote greener ways of travelling to the St Mary's site, both for staff and visitors to the hospital. This should include, but is not limited to:**
 - Increasing the amount of bike storage, providing signposting to such facilities, and ensuring they are secure;**
 - Offering rewards to employees who do not use parking spaces or bring their cars to work;**
 - Promote the benefits of car sharing for those living outside of the City.**
- 5. The PCT provide reassurance to the Panel that the demolition of the outpatients department will ensure there is enough parking for all stakeholders who bring their cars to the new Health Campus.**
- 6. The PCT ensure that 17%, or the relevant equivalent, of the new car parking at the Health Campus, will be designated for disabled car badge holders.**
- 7 Efforts be put in place before the opening of the new Health Campus to ensure that the road system entrance to the hospital, whether Rodney or Milton Road, does not become overly congested during the rush hour.**
- 8. There be adequate signposting to both car parking and departments being accessed, for those who attend the hospital infrequently. This includes signposting leading up to the Health Campus from the Rodney Road.**
- 9. The PCT ensure that the new main reception will have the services that stakeholders expect and find most useful, such as helpful and informative staff, clear signposting and take-away maps.**
- 10. A wheelchair dispenser be placed at the new Health Campus main entrance.**
- 11. There be a children's area / supervised crèche (or similar children-focused facility) where parents can leave their children whilst attending outpatient appointments.**
- 12. That space be found for a Chapel within the St Mary's Health Campus site.**
- 13. Internet-enabled computers be installed in the new Health**

Campus (ideally placed near to the Patient Advice & Liaison Service), which enable stakeholders to access and print off healthcare information, to browse hospital intranet sites and (possibly) to access email whilst waiting for appointments.

14. A mobile library with a book exchange be available to stakeholders.

15. The St Mary's Health Campus pharmacy have opening hours coterminous with outpatient clinic times.

16. The review of St Mary's Health Campus be signed off.

ii) Health Overview & Scrutiny Panel Work Programme 2009/10.

Jane Di Dino, Scrutiny Support Officer reminded the Panel that any review would need to be finished by the end of the municipal year.

RESOLVED that:

- 1. The Panel should help to fulfil its role in improving health and reducing health inequalities by completing focused scrutiny reviews of issues relevant to the health of local residents and that the selection of topics to be put forward for the Health Overview & Scrutiny Panel 2009/10 work programme be deferred to a future meeting.**
- 2. The work programme should remain flexible to enable the Panel to respond to proposals to change or vary NHS provision, and to consider information items by exception.**
- 3. The Panel hold regular 'Information Exchanges' with Health and Social Care partners.**
- 4. The Panel scrutinise the decisions made by the Cabinet Portfolio holder for Health and Social Care.**
- 5. The Panel note that the new Portsmouth LINK can formally refer issues of relevance to the HOSP and ask for responses from elected members**
- 6. The Panel should continue to receive information updates from Health and Social Care partners on matters previously scrutinised.**

39 Update on Items Previously Considered by the Panel (AI 6).

i) Dentistry.

Dr Matthew Smith, Consultant in Public Health Medicine and Louise Bevan, Development Manager, Portsmouth City Primary Care Trust (PCT) gave an update on progress made by the PCT in delivering its Dental Public Health Functions.

(TAKE IN REPORT)

The Panel heard that:

The Adult Dental Health Survey included specific questions about private treatment. 25.56% surveyed have used private treatment in the last five years.

The results of the 2007/08 epidemiological survey of five-year-old children are due out soon and will be reported to the Panel at its next meeting.

Thanks to a better understanding of how people access services, the PCT was able to plan new surgeries.

The PCT made a successful bid for £30,000 in funding from the Strategic Health Authority for social marketing work.

Parental consent will be required for the five-year olds who participate in dental epidemiological surveys.

The decision to fluoridate water supplies in Southampton is undergoing the judicial review process.

A member of the Panel expressed concern that dental treatment seemed to be more protracted now and therefore more expensive. Mr Smith suggested that the Panel contact Claire Petfield, the Portsmouth City Teaching Primary Care Trust's Head of Dentistry, Optometry and Pharmacy or Bill Flett, Dental Advisor for a comment on that issue.

RESOLVED that the update be noted.

ii) Public Health Action Plan

Dr Paul Edmondson-Jones, Director of Public Health and Wellbeing, PCT and City Council explained that the Annual Public Health Report 2008 was the result of partnership working between the PCT and Portsmouth City Council with the Health Improvement & Development Service acting as the bridge between the two organisations.

Liz Morgan, Specialist Services, PCT gave a summary of the report to the Panel. A copy of her presentation is attached to these minutes.

(TAKE IN REPORT)

The Panel was asked to note that:

There is a gap in life expectancy not only between Portsmouth and the rest of England but also between different areas of the city.

There are 45 recommendations in the report.

The report looks at the risk factors and potential for improvement in all the major contributors to reduced life expectancy.

In response to questions, Dr Edmondson-Jones explained that::

Change 4 Life and other health living messages have been advertised at bus shelters but not on buses as far as he was aware.

It is easier for the council and PCT to encourage smaller traders to change their promotion of alcohol than supermarkets as the latter's marketing campaigns are decided by a central head office.

The Panel was asked to note that happy hours, promotional offers and

advertising of alcohol at sporting events would soon be debated nationally.

The HIDS Service works closely with schools to raise awareness of the risks associated with alcohol and smoking.

A reduction in advertising of cigarettes accompanied by a change in national culture is necessary in order to prevent people from taking up smoking.

18-20 year olds tend to be aware of the potential risks but feel that these are remote, perhaps 10-15 years in the future. However, people in their late twenties tend to have a different attitude.

Next month a bill will be discussed in Parliament regarding prohibiting shops from displaying cigarettes.

Portsmouth Hospital Trust has a clear policy, which prohibits smoking in its grounds. However, a persistent minority of people refuse to comply. It is particularly difficult to enforce this with patients and visitors and it can be potentially dangerous. The law only prohibits smoking inside public buildings. In order to change this behaviour, everyone must play a role by expressing their displeasure at smoking on hospital grounds.

The Trust cannot legally stop patients who are on drips from leaving the hospital to smoke, unless they are detained under the Mental Health Act.

Dr Edmondson-Jones agreed to check that the hospitals' headed paper states that they are non-smoking sites.

RESOLVED that the Public Health Action Plan be noted.

iii) Joint Commissioning / Section 75 Update.

Justin Wallace-Cook, Assistant Head of Adult Social Care, Portsmouth City Council presented an update on the joint commissioning arrangements between Portsmouth City Council and Portsmouth city Teaching Primary Care Trust on behalf of Rob Watt, Head of Adult Social Care.

(TAKE IN REPORT)

The Panel heard that:

The Integrated Commissioning Board met on 8 September and the job descriptions for the Head of Integrated Commissioning Service and generic Integrated Commissioner Manager were agreed.

The legal team is looking at the section 75 agreement.

The launch of the Integrated Commissioning Service is scheduled for late Autumn 2009. Any delays to this launch will be explained to the Health Overview & Scrutiny Panel.

RESOLVED that:

1. **The report be noted.**
2. **If the launch of the Integrated Commissioning Service is delayed then the reasons be reported to the Health Overview & Scrutiny Panel at the earliest opportunity.**
3. **If the launch of the Integrated Commissioning Service is on time, then an update on its first year of work be given at the end of 2010.**

40 Possible Substantial Changes to Services, Quarterly Letters and Annual Reports (AI 7).

i) Portsmouth Hospitals Trust

Timothy Robinson, Head of Patient & Public Involvement, Portsmouth Hospitals Trust gave an update on Queen Alexandra Hospital, the closure of Royal Hospital Haslar, the Trust's financial position, swine flu update, infection prevention and smoking on trust property.

(TAKE IN PAPER)

Mr Robinson explained that the provision of smoking shelters outside hospital entrances had been discussed, but there are no plans for these to be provided.

In response to questions, the Panel heard that:

A member of the Panel noted that the name of the Smoking Committee was perhaps misleading.

Councillor Allen raised the issue of Gosport residents using the Accident & Emergency Department at Queen Alexandra Hospital rather than the minor injuries treatment centre.

Mr Robinson agreed that more could be done to raise the profile of the minor injuries treatment unit at the War Memorial Hospital in Gosport. In the past, the Royal Hospital Haslar had the same issue.

Councillor Adair noted that the Council's Flagship magazine, which is delivered to 80,000 households, had recently published a very good article signposting people to the appropriate health service.

RESOLVED that the update be noted.

ii) Adult Social Care

Justin Wallace-Cook, Assistant Head of Adult Social Care, Portsmouth City Council gave a presentation to the Panel on "Putting People First", Integrated Commissioning, Care Quality Commission, Joint Accommodation Strategy and Safeguarding.

(TAKE IN REPORT)

The Panel heard that:

Following the government's Putting People First strategy, an increased number of people now have self-directed care support package.

The Care Quality Commission replaced a number of regulatory bodies for Health and Social Care in April 2009.

In response to questions the Panel heard that:

The deprivation of liberty safeguards ensure people's liberty is not restricted inappropriately and that safeguards are in place whenever liberty is called into question. The aim of the safeguards is to ensure that consideration has been given to what choices can still be made for the individual including how to facilitate their participation in the community. These often apply to people living in residential care homes.

RESOLVED that the report be noted and that a further update be given at the start of 2010.

iii) South Central Ambulance Service

John Divall, Director of Corporate Affairs, South Central Ambulance Service (SCAS) and Neil Cook, Head of Operations gave a presentation to the Panel on the SCAS Stakeholder Performance Briefing, which includes items on performance overview, update on challenges and future developments

(TAKE IN PAPER)

The Panel heard that:

The SCAS is performing well in response time to category A calls, but need to work on its response to category B calls.

Staff engagement and satisfaction is improving.

The response of a recent customer survey shows high levels of patient satisfaction

The SCAS represents 2% of the health economy budget but could influence 20%

In response to questions, the Panel heard that:

A considerable amount of work is underway to improve turnaround times, which is the amount of time it takes the ambulance staff to hand over the care of the patient to the hospital staff. Increased demand, changes at Queen Alexandra Hospital and the turnover processes have contributed to the delays.

Two pilot schemes have been carried out to pinpoint the exact handover time.

Additionally, work has been carried out to ensure that alternative services are available to the patient, when the accident and emergency department is not the appropriate place to treat them. The ambulance service has been working with GPs so that they can provide at home follow-on treatment.

There has been an increase in demand for ambulances nationally, but higher levels in Portsmouth and Hampshire.

Winchester and Basingstoke ambulance services experience lower turnaround times but demand is lower there and they have smaller hospitals. It is an internationally recognised problem.

The Panel requested that the last two slides of the presentation be reprinted one per page and sent to the Panel.

RESOLVED that the report be noted.

iv) Portsmouth Primary Care Trust

Rob Dalton, Director of Corporate Affairs, Portsmouth Primary Care Trust, gave an update on Portsmouth Integrated Community Services Programme, Primary Percutaneous Coronary Intervention, Commissioning of Wheelchairs, GP Led Health Centre and St Mary's Community Campus

(TAKE IN PAPER).

The Panel heard that:

There is a need to balance hospital admissions with support in the community.

Mr Dalton believes that this is an opportunity to extend services to other groups of people especially stroke patients working with local patient groups to get a balanced approach

There is a range of viable providers as well as the PCT.

The procurement process will continue in the Autumn.

The Strategic Health Authority has yet to respond to the Health Care Commission rating for Urgent & Emergency Care.

RESOLVED that the updates be noted and Urgent & Emergency Care be included as an agenda item for the next meeting.

41 Date of Next Portsmouth Hospitals Trust Working Lunch Meeting (AI 8).

The Chair reminded the Panel that the Portsmouth Hospitals Trust would be hosting a working lunch meeting on Tuesday 29th September from 12.00 – 1.30 pm at Queen Alexandra Hospital.

The Panel discussed possible items to be included at the working lunch.

RESOLVED that the following items be added to the agenda:

- Hospital patients' food.
- Wheelchair provision.
- Smoking at the entrance of hospitals.
- The bus service to Queen Alexandra Hospital.

42 Care of the Elderly at Queen Alexandra Hospital (AI 9).

Councillor Gwen Blackett had asked for this item to be on this meeting's agenda, but as she did not attend, it was deferred.

RESOLVED that Councillor Blackett be contacted for details of this item.

The Chair informed the Panel that 13 GP medical practices in and around Portsmouth have written to the Health Overview & Scrutiny Panel to express their concern about the marketing and promotion of the recently opened Guildhall Walk Healthcare Centre. The practices are concerned that the promotion of the centre has been extended beyond its original remit of targeting vulnerable groups in Portsmouth and patients not already registered with a practice. They are particularly concerned that the school report flyers and advertisements in the Portsmouth News persisted despite not being approved by the PCT.

The Chair had written to the Chief Executives of Care UK and the PCT to inform them of the concerns raised and to request examples of the original agreements relating to funding for advertising and promotion of the Healthcare Centre by 1 November.

RESOLVED that the responses from the PCT be considered at the next meeting.

43 Date of Next Meeting (AI 10).

18 November 2009 at 2pm in the Executive Meeting Room, 3rd floor, The Guildhall.

The meeting closed at 4:30pm