
SOUTHAMPTON CITY COUNCIL
HEALTH OVERVIEW AND SCRUTINY PANEL
MINUTES OF THE MEETING HELD ON 23 MAY 2013

Present: Councillors Claisse, Jeffery (Chair), Cunio, Spicer, Chaloner and McEwing

Apologies: Councillors Lewzey and Parnell

1. **APOLOGIES AND CHANGES IN MEMBERSHIP (IF ANY)**

The Panel noted apologies from Councillor Parnell and Councillor Lewzey and that Councillor McEwing was in attendance as a nominated substitute for Councillor Lewzey in accordance with Procedure Rule 4.3.

2. **ELECTION OF VICE-CHAIR**

RESOLVED that Councillor Chaloner be elected Vice-Chair for the 2013-14 municipal year.

3. **STATEMENT FROM THE CHAIR**

The Chair welcomed the new Panel Members and Councillor Shields as the new Cabinet Member for Health and Adult Services.

4. **MINUTES OF THE PREVIOUS MEETING (INCLUDING MATTERS ARISING)**

RESOLVED that the minutes of the meeting held on 21st March 2013 be approved and the following comments from Southampton Defend the NHS in relation to Page 33, Item 45 – The National Health Service (Procurement, Patient Choice and Competition) (No 2) Regulations 2013 be noted:-

- bullet point 3, third line should read “the three Southampton MP’s”; and
- to investigate whether it had been agreed that the previous Chair would write to the three Southampton MP’s expressing the Council’s concern with the revised regulations.

5. **SOUTHAMPTON, HAMPSHIRE, ISLE OF WIGHT AND PORTSMOUTH HEALTH OVERVIEW AND SCRUTINY COMMITTEES: ARRANGEMENTS FOR ASSESSING SUBSTANTIAL CHANGE IN NHS PROVISION**

The Panel considered the report of the Head of Service, Communities, Change and Partnerships, seeking agreement of the revised Health Overview and Scrutiny Panel (HOSP) to the existing framework for assessing substantial change in NHS provision across Southampton, Hampshire, Isle of Wight and Portsmouth (SHIP) region. (Copy of the report circulated with the agenda and appended to the signed minutes).

The following comments were noted:-

- The purpose of the report was to agree the arrangements for assessing significant developments or substantial variations in NHS services across the Southampton, Hampshire, Isle of Wight and Portsmouth (SHIP) areas.
- This was the third refresh of the framework, originally developed with advice from the Independent Reconfiguration Panel which placed greater emphasis on the importance of constructive working relationships and clarified party roles which would improve communication, provide better coordination of engagement and consultation with service users and the public and improve confidence in the planning of service change.
- Appendix 1 – Framework for Assessing Change – Questionnaire - in relation to any changes and/or reductions in service it was critical that the financial implications be taken into account.
- In relation to any substantial changes, it was important that regard was given to the involvement of “hard to reach groups” and the need for any impact assessment for ethnic minority groups/vulnerable groups. It was noted that this would be dependant on the issues raised.

RESOLVED that the Panel accepted the Arrangements for Assessing Substantial Change in NHS provision as previously agreed by Health Overview and Scrutiny Panels and providers across the SHIP region, subject to minor typographical amendments.

6. **SOUTHAMPTON CITY COUNCIL SOCIAL CARE : ANNUAL PLANS AND PRIORITIES 2013/14**

The Panel received and noted the report of the Director of People detailing the key developments since the formation of the People Directorate, describing the emerging direction of travel for the services being transformed through this initiative and setting out the approach to initial cost savings. (Copy of the report circulated with the agenda and appended to the signed minutes).

The following was noted:-

- Seven workstreams of activity had been developed which made it clear that the areas offering the greatest scope for improving or maintaining service levels were improving the way services were commissioned, which made how we interfaced with customers at the “front door” more effective, particularly in relation to the use of IT.
- Services that reduced the demand for chronic and ongoing dependence on intensive social care support would be key savings prizes.
- The principle of the “Once and Done” culture was that customers were responded to immediately and received the service/information on a “once and done” basis and did not have to go to different teams/ departments for different issues.
- The transformation work would redesign Adult Social Care by placing a greater emphasis on prevention and demand management.
- Children’s Safeguarding still had issues in relation to the quality and consistency of practice, hampered by the difficulty in recruiting and retaining experienced, highly performing staff and at present approximately 30% of social workers were contract staff. It was important that early intervention was required to prevent vulnerable people requiring this level of service. Down sizing safeguarding would

not only involve a restructure, but more significantly a cultural change in relation to the shared purpose of preventative work and early intervention to improve families' capacity to meet all their needs.

- Children's Safeguarding challenges since the last Ofsted inspection were practise issues, chronology and work detail in terms of interventions – too many changes for a child in terms of social workers impacted on the child and also history was lost.
- There were no permanent exclusions at any Southampton Primary Schools and exclusion information in relation to Secondary Schools would be supplied to the Panel.
- The development of an Integrated Commissioning Unit with the Clinical Commissioning Group (CCG) would create capacity to manage and monitor provider performance, leaving Adult Social Care to focus on individual cases.
- The Council had already made a decision not to review housing tenancies, however the Council had housing stock and the focus could be changed to use the stock more creatively.

7. **SOUTHAMPTON CLINICAL COMMISSIONING GROUP (CCG) ; ANNUAL PLAN AND PRIORITIES 2013/14**

The Panel received and noted the report of the Chair and Chief Officer Southampton City Clinical Commissioning Group detailing the 2012-2017 draft strategy and the 2013/14 priorities of the Clinical Commissioning Group (CCG). (Copy of report circulated with the agenda and appended to the signed minutes).

The following was noted:-

- With effect from 1 April 2013, the CCG was now a legally constituted organisation.
- In the first year of operation the CCG would focus on gaining control and the delivery of the three strategic priorities of "Mental Health and Wellbeing", "A Healthy Start in Life" and "Growing Older and Living with Long Term Conditions" which matched those of the Health and Wellbeing Strategy.
- Key objectives were to :-
 - take responsibility for the quality and cost of care
 - deliver the annual plan including financial and performance standards
 - drive service and system change
 - provide local leadership for integration; and
 - establish the CCG as an effective organisation.
- The motion proposed at Annual Council on 15th May 2013 that services available through the NHS should be delivered by NHS providers in preference to private providers was supported, provided that the quality of patient safety was not compromised. However, the new regulations were open to interpretation and it was important that there was freedom to procure outside services, which would be open to scrutiny and challenge, when required;
- A Joint and Integrated Commissioning Board would be established to ensure effective collaboration and good governance across the agreed areas of council and health commissioning. The Board would be a sub-board of the Health and Wellbeing Board (HWBB), accountable to the Council's Cabinet and the CCG Governing Body.

- A further report would be tabled at a future meeting, providing information on the outcome of the consultation on the draft strategy.

8. **SOUTHERN HEALTH NHS FOUNDATION TRUST (SHFT) : DRAFT QUALITY ACCOUNT 2012/13**

The Panel received the report of the Clinical Quality Manager, Southern Health NHS Foundation Trust (SHFT) detailing the Southern Health NHS Foundation Trust's draft 2012/13 Quality Account . (Copy of the report circulated with the agenda and appended to the signed minutes).

The following was noted:-

- A quality account was an annual report to the public about the quality of services delivered by NHS service providers and was now a legal requirement.
- Southern Health was one of the largest providers of mental health, community, learning disability and social care services in the country, covering a large geographical area.
- Priorities to be delivered by April 2014 were improvements to patient safety, clinical outcomes and patient experience.
- The format of the Quality Account report would be modified and amended to make it more "user-friendly" in future.

RESOLVED:-

- i. that the draft Quality Account for 2012/13 be noted; and
- ii. that officers would provide the panel with information on any "hot spots" in the Southampton area.

9. **SOLENT NHS TRUST : DRAFT QUALITY ACCOUNT 2012/13**

The Panel received the report of the Interim Chief Executive detailing the Solent NHS Trust Draft Quality Account for 2012/2013. (Copy of the report circulated with the agenda and appended to the signed minutes).

The following was noted:-

- Solent NHS Trust was in the final stages of being licensed as a Foundation Trust and once the Trust Development Authority had given final assurances on preparations they would be referred to Monitor for assessment and licensed as a Foundation Trust in autumn 2013.
- The 8 priorities identified for 2011/12 were on target and had been continuously monitored through each of the Clinical Divisions within the Trust.
- The Trust was currently the second most research active community/ care trust in England.
- The New Forest Parenting Programme which was an intervention programme for coping with attention deficit hyperactivity disorder in children would be continued.
- Teenage conception rates had been reduced by 6% in Southampton in 2012/13 which was one of the key targets for the Trust's Sexual Health Services.

- 98% of the targets set under the Commissioning for Quality and Innovation Framework (CQUIN) during 2012/13 were achieved. These were additional initiatives set up which were based around areas where commissioners wished to see specific progress.
- The Trust was in the process of creating a Single Point of Access (SPA) for services and over time this would be the primary method of contact.

RESOLVED that the Draft Quality Account for 2012/13 be noted.

10. **UNIVERSITY HOSPITAL SOUTHAMPTON NHS FOUNDATION TRUST (UHS):
QUALITY ACCOUNT 2012/13**

The Panel received the report of the University Hospital Trust, Director of Nursing detailing the draft University Hospital Trust quality account for 2012/13. (Copy of report circulated with the agenda and appended to the signed minutes).

- The Panel noted the following 2013/14 Patient Improvement Framework (PIF) priorities:-
 - To improve the reporting of patient safety incidents and the mechanisms from learning from them.
 - To improve the Trust's performance in the measures that were included in the national safety thermometer which was part of the strategy for harm free care.
 - To improve the care of UHS patients with diabetes.
 - Prevention of premature deaths by effective management of deteriorating adults and improving cancer waits.
 - Improving the diagnosis rate for long term conditions for people with dementia.
 - Reducing episodes of ill health or injury by efficient emergency pathways, reducing readmissions and comparing benchmark information.
 - Improving positive patient experiences by patients, friends and family test and continuity of care.
 - Providing a safe environment with harm free care, improving diabetes care and reducing inappropriate admissions to full term babies to neonatal care unit.
- The Care Quality Commission undertook a responsive review of compliance at the Southampton General Hospital site in October 2012 and reported that patients and relatives were positive about staff and care they had received and in December 2012 the Princess Anne Hospital was inspected where mothers and partners were also positive about the care they had received.
- Due to the complexity and types of patients involved, a high level of data was required which resulted in a heavy administrative load for staff and various methods and strategies were being investigated to reduce this.
- The bed complement had been expanded to improve flexibility for patients and the discharge process had been improved which also freed up beds for emergencies.

RESOLVED that the draft quality account for 2012/13 incorporating the proposed top priorities be noted.

