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SOUTHAMPTON CITY COUNCIL  
HEALTH OVERVIEW AND SCRUTINY PANEL  
MINUTES OF THE MEETING HELD ON 25 SEPTEMBER 2014

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Present: Councillors Stevens (Chair), Claisse, Bogle, Mintoff, Noon, Parnell and White

10. **APPOINTMENT OF VICE-CHAIR**

**RESOLVED** that Councillor White be appointed as Chair for the remainder of the Municipal Year 2014/2015.

11. **DISCLOSURE OF PERSONAL AND PECUNIARY INTERESTS**

The Panel noted that Councillor Bogle was an appointed representative of the Council as a Governor of the University Hospital Southampton NHS foundation Trust and Councillor Noon worked for a care provider.

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

**RESOLVED** that the minutes for the Panel meeting held 24<sup>th</sup> July 2014 be approved and signed as a correct record.

13. **THE IMPACT OF HOMELESSNESS ON THE HEALTH OF SINGLE PEOPLE**

The Panel noted the report of the Assistant Chief Executive seeking approval for the Panel's draft inquiry report "The Impact of Housing and Homelessness on the Health of Single People".

The Chair, on behalf of the Panel, thanked all of the groups and individuals who had given up their time to participate within the inquiry.

**RESOLVED** that the Panel agreed that the draft report and recommendations set out in Appendix 2 be submitted to Cabinet for consideration.

14. **UNIVERSITY HOSPITAL SOUTHAMPTON; EMERGENCY DEPARTMENT REPORT**

The Panel considered the report, of the Chief Executive of University Hospitals Southampton, detailing the Hospital's Emergency Department performance.

Jane Hayward, Chief Operating Officer of University Hospital Southampton and Jon Richards, Chief Executive Officer of the Southampton Clinical Commissioning Group, were in attendance and, with the consent of the Chair addressed the meeting.

The Panel were informed that the Trust was continuing to review its work flows and processes within the Emergency Department of the Hospital. The Panel expressed a disappointment that there continued to be no improvement against the performance targets.

The Panel noted that the Trust continued to struggle with performance targets for the Emergency Department. It was clear that unlike previous years the Trust had failed to hit these targets in August. The Panel were informed that the Trust, as a trauma centre with a helipad, had experienced a high volume of major cases over the summer period,

and that one possible explanation of the lack of performance this year in August was that the fine weather this summer saw more instances of people injuring themselves whilst participating in outdoor activities.

The Panel considered an option to draw together various stakeholders in the region in order to help resolve the performance of the Trust's Emergency Department. However, the Panel noted that work had been undertaken to identify the main areas of concern and that a joint report identifying actions to address these issues was being put towards all stakeholders boards to review on a monthly basis.

**RESOLVED** that in order to continue to scrutinise the performance of the Emergency Department at the Panel's next meeting it would consider the joint monitoring report in order to review any unresolved actions.

15. **ADULT SOCIAL CARE TRANSFORMATION**

The Panel considered the report of the Cabinet Member for Health and Adult Social Care and the Director, People providing an update on the transformation of the People Directorate.

The Panel noted the ongoing transformation of the Council and the People Directorate. It was noted that the reform of Adult Social Care was driven by the need to improve outcomes and manage demand. The Panel were informed that work had been undertaken to improve the initial point of contact for the public to care services. This work had been done in order to divert and sign post individuals, after an initial eligibility assessment, to the most appropriate care pathway. It was noted that this work on what is known as the "Front Door" would hopefully be completed toward the end of the year.

The Panel noted that communication with staff was key to the programme. The Panel further noted that work practices and cultures were having to adapt to a multi-skilled approach and that there had been challenges to overcome and that the change had generally been received in a positive matter.

The Panel discussed the performance measures used and in particular whether the information was available to track patient need. It was noted that efforts were being made to improve the depth of the data available so that this level of individual information could be provided.

**RESOLVED** that the matter would return to Panel at an appropriate meeting following the introduction of the new "Front Door" arrangements for social care assessment.

16. **BETTER CARE SOUTHAMPTON UPDATE**

The Panel considered the report of the Cabinet Member for Health and Adult Social Care providing an update on the Better Care Fund.

The Panel were informed that the Health and Wellbeing Board had now submitted a revised plan, as requested by Central Government, in line with the amended guidance. The Panel noted that the intention for the Better Care Fund was to provide a single pooled budget for health and social care services, in order to promote closer working together in local areas between the NHS and the Council.

It was explained that Southampton's Better Care Plan had set out a number of targets in relation to care and the Panel sought clarification as to the how achievable these target were.

The Panel observed that effective communication was key to the engagement of staff and service users in order to meet the challenges required by the programme. The Panel were informed that there was a detailed communication plan set out that identified the various stages of communication needed to implement the changes required by the programme.

**RESOLVED** that the detailed communication plan be circulated to the Panel.

17. **OFSTED ACTION PLAN**

The Panel considered the report of the Director, People detailing the outcomes and action plan of the inspection into children's safeguarding.

The Panel noted that Ofsted had offered the Council help and support in the development of an action plan to address issues set out in their Inspection report of services for children in need of help and protection, child looked after and care leavers.

The Panel noted the Council had 90 days to prepare the action plan understood that the plan would receive scrutiny at a future meeting. The Panel noted that part of Ofsted criticism was based around politicians not meeting their corporate parenting responsibilities.

The Panel discussed the roles and responsibilities of the Council's Corporate Parenting Committee and noted that whilst not very Member sat on the Committee that there was both a corporate and personal responsibility on all Councillors for children that were classed as looked after or previously looked after.

It was stated that it was safe to assume that every school within the City's wards would have at least one child that was considered looked after. It was further explained that Councillors could not be automatically given the individual details of these children, but they had a collective responsibility for them and all of the other children at the schools within their wards to ensure that the best education possible was provided.

It was noted that the Ofsted inquiry had identified areas of good practice within this service area for example:

- the Multi Agency Safeguarding Hub; and
- the Behaviour Resource Service.

The Ofsted report had however, clearly laid out a number of areas for improvement including care leavers, missing children, and adoption that required immediate action.

**RESOLVED** that the Panel would scrutinise the Action Plan at a future meeting.