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### Health and Social Care Scrutiny Board (5)

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**Time and Date**

2.00 pm on Wednesday, 6th January, 2016

**Place**

Committee Rooms 2 and 3 - Council House

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**Public Business****1. Apologies and Substitutions****2. Declarations of Interest****3. Minutes**

(a) To agree the minutes of the meeting held on 18th November, 2015 (Pages 3 - 8)

(b) To agree the minutes of the Joint Education and Children's Services Scrutiny Board (2) and Health and Social Care Scrutiny Board (5) meeting held on 25th November, 2015 (Pages 9 - 12)

(c) Matters Arising

**4. Prime Minister's Challenge Fund and Coventry and Rugby GP Alliance Update (Pages 13 - 32)**

Briefing Note and Presentation of the Director of Primary Care and Chief Executive of the Coventry and Rugby GP Alliance

**5. Outstanding Issues Report**

Outstanding issues have been picked up in the Work Programme

**6. Work Programme 2015-16 (Pages 33 - 40)**

Report of the Scrutiny Co-ordinator

**7. Any other items of Public Business**

Any other items of public business which the Chair decides to take as matters of urgency because of the special circumstances involved

**Private Business**

Nil

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Chris West, Executive Director, Resources, Council House Coventry

Monday, 21 December 2015

Notes: 1) The person to contact about the agenda and documents for this meeting is Liz Knight, Governance Services, Council House, Coventry, telephone 7683 3073, alternatively information about this meeting can be obtained from the following web link: <http://moderngov.coventry.gov.uk>

2) Council Members who are not able to attend the meeting should notify Liz Knight as soon as possible and no later than 1.00 p.m. on 6<sup>th</sup> January, 2016 giving their reasons for absence and the name of the Council Member (if any) who will be attending the meeting as their substitute.

3) Scrutiny Board Members who have an interest in any report to this meeting, but who are not Members of this Scrutiny Board, have been invited to notify the Chair by 12 noon on the day before the meeting that they wish to speak on a particular item. The Member must indicate to the Chair their reason for wishing to speak and the issue(s) they wish to raise.

Membership: Councillors M Ali, K Caan (By Invitation), J Clifford (By Invitation), D Galliers, J Innes, T Khan, J O'Boyle, D Skinner, D Spurgeon, K Taylor, S Walsh and D Welsh (Chair)

Please note: a hearing loop is available in the committee rooms

If you require a British Sign Language interpreter for this meeting OR if you would like this information in another format or language please contact us.

**Liz Knight**

**Telephone: (024) 7683 3073**

**e-mail: [liz.knight@coventry.gov.uk](mailto:liz.knight@coventry.gov.uk)**

**Coventry City Council**  
**Minutes of the Meeting of Health and Social Care Scrutiny Board (5) held at 1.30 pm on Wednesday, 18 November 2015**

Present:

Members: Councillor D Welsh (Chair)  
Councillor N Akhtar - substitute for Councillor M Ali  
Councillor J Innes  
Councillor J O'Boyle  
Councillor D Skinner  
Councillor K Taylor  
Councillor S Walsh

Co-Opted Members: David Spurgeon

Other Members: Councillors K Caan and J Clifford

Other Representatives: Joan Beck, Chair, Coventry Adults Safeguarding Board  
Mark Radford, University Hospitals Coventry and Warwickshire  
Donna Reeves, Coventry and Warwickshire Partnership Trust (CWPT)  
Jamie Soden, CWPT  
Glynis Washington, Coventry and Rugby Clinical Commissioning Group

Employees:

S Brake, People Directorate  
V Castree, Resources Directorate  
L Knight, Resources Directorate  
C Parker, People Directorate  
D Watts, People Directorate  
J White, Resources Directorate

Apologies: Councillors M Ali and D Galliers

## **Public Business**

### **37. Declarations of Interest**

There were no declarations of interest.

### **38. Minutes**

The minutes of the meeting held on 3<sup>rd</sup> November, 2015 were signed as a true record. There were no matters arising.

### **39. Serious Case Review - Mrs E**

The Scrutiny Board considered a briefing note of the Executive Director of People attached to which was the Executive Summary report which presented the findings

of a Coventry Safeguarding Adults Board Serious Case Review which followed the death of Mrs E in the spring of 2013. Appended to the summary report were the associated actions plans from both the review and the learning from the case.

Joan Beck, Chair of the Safeguarding Adults Board and David Watts, Chair of the Review Group attended the meeting for the consideration of this item along with Mark Radford, University Hospitals Coventry and Warwickshire Jamie Soden and Donna Reeves, Coventry and Warwickshire Partnership Trust and Glynis Washington, Coventry and Rugby Clinical Commissioning Group. The report was also to be considered by the Cabinet Member for Health and Adult Services at his meeting on 14<sup>th</sup> December, 2015 and Councillor Caan and Councillor Clifford, Deputy Cabinet Member also attended the meeting.

Mrs E was 66 years of age and led a busy and fulfilling life. She lived in a Housing with Care Scheme with her husband so he could receive additional support. Mrs E had received treatment in hospital in relation to a fracture to her spine as a result of a fall and had returned to her own home. She was subsequently admitted to a Coventry Care home for rehabilitation when her GP felt her recovery could be improved with a period of residential rehabilitation. Her health deteriorated while she was in the care home which led to an emergency admission to hospital. She was critically ill on admission to hospital and died 5 days later.

The Chair of the Safeguarding Adults Board expressed her condolences to the family and apologised for the length of time that it had taken to reach this stage in the review process. She read out a very moving and informative statement from the family about their experiences and the impact that this has on them.

The summary report highlighted that a serious case review took place because Mrs E was an adult at risk and neglect may have been a contributory factor. The report set out a chronological summary of events followed by an overview of the actions taken by professionals in respect of some key issues. Key learning was outlined along with the multi-agency recommendations which were organised around the following three key themes: Safeguarding Processes; Assessment and Treatment Issues; and Continuity of Care, including Hospital Discharge Arrangements. The action plans set out recommendations with actions required, gave target dates and appropriate lead officers as well as highlighting expected outcomes.

The Board questioned those present on a number of issues relating to the circumstances of the case and responses were provided, matters raised included:

- Concerns about the length of time taken for this review to be completed and the number of missed opportunities by agencies prior to Mrs E's death.
- Asked for further information about measures already implemented to improve communication and clarification about why information had not been passed between agencies and staff during Mrs E's receipt of care. Clarification that processes have been put in place to ensure a repeat of the communication issues in this case do not happen again was sought.
- The Board explored the role of the family, as the guaranteed constant for a patient and therefore the importance of all agencies listening to their views. They questioned how much notice was taken of information provided by families.

- Person centred care was discussed at length to seek assurance that the individual would be considered when planning care and each organisation was asked to explain what they were doing to ensure they had time to care for the individual.
- Clarification on hospital discharge procedures and whether these had been amended since Mrs E's death.
- In complex cases with multiple agencies involved, who took responsibility to ensure a patient was taken through the correct healthcare pathway for that individual between the hospital and the community. There was concern that there was often not a clear lead professional who was co-ordinating care.
- Questions were asked about how to ensure that all staff treat patients and their families with dignity and respect.

**RESOLVED that:**

**(1) The findings of the Serious Case Review and the recommendations, actions and progress in the action plans be noted.**

**(2) A letter be sent to the family of Mrs E expressing the Board's condolences for their loss and thanking them for their moving and informative statement.**

**(3) The Cabinet Member for Health and Adult Services be requested to reiterate to the Coventry Safeguarding Adults Board the importance of ensuring that all the health organisations take account of the views of families, neighbours and carers relating to an individual's care and that all the concerns raised about communications in this case are also addressed by those agencies involved.**

**(4) A progress report be submitted to a future meeting of the Board in six months.**

**40. System Wide Review - Mrs F**

The Scrutiny Board considered a briefing note of the Executive Director of People attached to which was the Executive Summary report which presented the findings of a Coventry Safeguarding Adults Board System Wide Review which followed the death of Mrs F in the spring of 2013. Appended to the summary report were the associated actions plans from both the review and the learning from the case.

Joan Beck, Chair of the Safeguarding Adults Board and Simon Brake, Chair of the Review Group attended the meeting for the consideration of this item along with Mark Radford, University Hospitals Coventry and Warwickshire Jamie Soden and Donna Reeves, Coventry and Warwickshire Partnership Trust and Glynis Washington, Coventry and Rugby Clinical Commissioning Group. The report was also to be considered by the Cabinet Member for Health and Adult Services at his meeting on 14<sup>th</sup> December, 2015 and Councillor Clifford, Deputy Cabinet Member also attended the meeting.

Mrs F was 80 years old when she died and had been residing in a Coventry Nursing Home. She had chronic vascular disease which she was aware would be life limiting if she declined any surgical intervention. She received hospital

treatment in relation to pressure ulcers. She was discharged from hospital and transferred to a care home where she could receive significant support from health care professionals. Whilst in the care home she developed tissue damage which became infected and was re-admitted to hospital. She died 5 days later as a result of the infection.

The Chair of the Safeguarding Adults Board expressed her condolences to the family, in particular to Mrs F's granddaughter and apologised for the length of time that it had taken to reach this stage in the review process.

The summary report highlighted that a system wide review took place when a vulnerable adult had died or had been seriously injured or impaired, abuse or neglect was known or suspected and broader system issues were believed to have been a significant factor. The report set out the facts of the case, a summary and overall analysis and conclusions. A summary of the recommendations that applied to all agencies were highlighted along with those for the individual agencies. The action plans set out recommendations with actions required, gave target dates and appropriate lead officers as well detailing progress and expected outcomes.

The Board questioned those present on a number of issues relating to the circumstances of the case and responses were provided, matters raised included:

- Clarification about the monitoring process for the quality and standards of care homes in the city
- Concerns about the on-going financial viability of care homes in the current austerity climate and the introduction of the living wage
- Whether there were any concerns about the viability of care homes in the city in light of press reports that national care home providers could withdraw services
- Details about funding by the Council to care homes with financial difficulties
- The use of regulatory tools where there were concerns about care homes and the support provided to those care homes that needed assistance from the Local Authority
- Clarification about the improved reporting and treatment of pressure ulcers by the agencies involved
- Further information on the progress of the action plans.

Particular discussion centred on the implications for Care Homes of the introduction of the living wage which was not funded by the Government.

**RESOLVED that:**

**(1) The findings of the Serious Case Review and the recommendations, actions and progress in the action plans be noted.**

**(2) A report on the current state of care homes in the city be submitted to a future meeting of the Board.**

**(3) The Chair, Councillor Welsh, be requested to write on behalf of the Board to the Secretary of State for Health outlining the concerns raised about the financial pressure on Care Homes and concerns they may be exacerbated by**

**the compulsory introduction of the living wage, which whilst welcomed is unfunded by Government. There is a concern that this unfunded pressure could lead to a potential reduction in quality of care and the health and safety of patients/residents.**

**41. Coventry Safeguarding Adults Board Annual Report 2014/15**

The Scrutiny Board considered a briefing note appended to which was Coventry Safeguarding Adults Board Annual Report for 2014/15. The Board also received a presentation on the Annual Report from Joan Beck, Independent Chair of the Adults Safeguarding Board.

The Safeguarding Board was required to publish an annual report and business plan. The report provided an introduction to safeguarding; detailed the responsibilities of the Board; highlighted the key achievements of the individual sub-groups and reviewed progress against priorities. The report concluded with the Board's business plan. A performance dashboard was set out at an appendix.

The presentation set out the Board's accomplishments; successes and challenges along with the priorities for the future. Accomplishments included the implementation of the Care Act, working more closely with other Boards, completing three multi-agency reviews and developing the performance dashboard. Priorities for the future included using performance information to drive improvement; Care Act compliance; Transforming Care; making safeguarding personal; and working across Boards.

Members expressed support for the excellent report and questioned about the importance placed on dealing with mental health issues.

**RESOLVED that the Annual Report of the Coventry Safeguarding Adults Board for 2014/15 be noted.**

**42. Outstanding Issues Report**

The Scrutiny Board noted that all outstanding issues had been included in the Work Programme for 2015-16.

**43. Work Programme 2015-16**

The Scrutiny Board noted their work programme for the current year.

**44. Any other items of Public Business**

There were no additional items of public business.

(Meeting closed at 4.35 pm)

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**Coventry City Council**  
**Minutes of the Meeting of Joint Education and Children's Services Scrutiny Board**  
**(2) and Health and Social Care Scrutiny Board (5) held at 2.00 pm on Wednesday,**  
**25 November 2015**

Present:

Members: Councillor Welsh (Chair)  
Councillor L Bigham  
Councillor J Innes  
Councillor J Lepoidevin  
Councillor C Miks  
Councillor K Mulhall  
Councillor M Mutton  
Councillor J O'Boyle  
Councillor P Seaman  
Councillor D Skinner  
Councillor K Taylor  
Councillor S Walsh

Co-Opted Members: Mrs S Hanson  
David Spurgeon

Other Members: Councillors Kershaw, Cabinet Member for Education  
Councillor Ruane, Cabinet Member for Children and Young  
People  
Councillor Thomas, Deputy Cabinet Member for Education

Others in attendance: A Cooper-Bastian, Coventry & Warwickshire Partnership  
Trust  
J Francique, Coventry & Warwickshire Partnership Trust  
M Gilkes, Coventry and Rugby CCG  
J Spencer, Coventry and Warwickshire Partnership Trust  
M Wakeley, Coventry and Warwickshire Partnership Trust

Employees (by Directorate):

People A Butler, H Sandu  
Resources V Castree, G Holmes, L Knight

Apologies: Councillor N Akhtar, D Galliers and H Noonan

## **Public Business**

### **1. Appointment of Chair**

Councillor Welsh was appointed as Chair for this meeting.

### **2. Declarations of Interests**

There were no disclosable pecuniary interests.

### 3. **Transforming Child and Adolescent Mental Health Services (CAMHS)**

The Joint Board considered a report of the Coventry and Rugby Clinical Commissioning Group (CCG) which provided information on improvements made within the Specialist Child and Adolescent Mental Health Service (CAMHS) in the last 12 months.

The Joint Board noted that a number of services comprising the CAMHS system were commissioned across Coventry and Warwickshire by five commissioning organisations in line with a nationally adopted tiered model. Universal and targeted services (tiers 1 and 2) were commissioned by the two local authorities, whilst specialist services (tier 3) were funded by the three local CCGs across Coventry and Warwickshire, with Coventry and Rugby CCG holding contract lead responsibility. Inpatient services (tier 4) were funded and provided by NHS England. The total level of investment made across Coventry and Warwickshire was £8.2m.

There were a number of challenges recognised nationally surrounding CAMHS, including increasing demand, timeliness of support and barriers to access. NHS England and the Department of Health had published the Future in Mind Report in 2015 in response to these challenges, which reinforced the need for system wide change to improve resilience and provide right services at the right time, tailored to meet the needs of young people.

Locally, commissioners and stakeholders across Coventry and Warwickshire had identified a range of challenges and risks facing the local Specialist CAMHS service including increased demand, an increase in the number of self-harm presentations at A&E and delays in patient pathways. Prior to the publication and recommendations of the Future in Mind report, a CAMHS redesign was established to co-produce and redesign the comprehensive CAMHS system across Coventry and Warwickshire.

The Briefing Note indicated that within Coventry, there had been significant improvements in waiting times, support to young people presenting at hospital (acute liaison) and support to Looked After Children during the last 12 months.

In relation to waiting times, it was noted that in February 2014 over 100 young people were reportedly waiting for follow up appointments within Specialist CAMHS, with over 67 waiting over 19 weeks. Following an investment of £268k as one off funding by Coventry and Rugby CCG, additional posts were appointed to assist with the reduction of waiting times. By September 2015, only 1 person waited over 12 weeks for a follow up appointment. All urgent cases were seen within 5 working days and 100% of routine cases were seen within 18 weeks for an initial assessment. 21 young people were assessed as requiring a priority assessment and were seen outside of the normal 4 week wait and offered treatment immediately.

Additional one off investment was also made by Coventry and Rugby CCG of £99k to support the increase in referrals for the Autistic Spectrum Disorder (ASD) assessment. The increase in referrals occurred after Coventry and Warwickshire

Partnership Trust (CWPT) implemented a new ASD Pathway to ensure compliance with the National Institute of Clinical Excellence (NICE) Guidance.

The Coventry and Rugby CCG committed additional resources in October 2014 of £220k to enable Specialist CAMHS to provide an Acute Liaison function across Coventry and Warwickshire. The purpose of the service was to provide timely assessment and support to young people presenting at hospital and ultimately support work towards reducing in-patient admission. The service implemented in May 2015, provided an extended shift system and an out of hour telephone consultation service across University Hospital Coventry and Warwickshire, Warwick Hospital and George Elliot Hospital. In addition, the service had developed and implemented an adapted version of a suicidal intent scale for A&E departments to complete to inform decision making and assess the level of risk and intervention required for the young person.

With regard to Looked After Children, a new dedicated Mental Health Practitioner co-located and embedded with the Looked After Children's Social Care Team had been created and would be in post by 1<sup>st</sup> December. The dedicated resource would assist in the early identification of mental health needs amongst young people through assessment and intervention and provide support to reduce placement disruption and breakdown.

To support system wide transformation within the CAMHS services, NHS England had distributed £75m funding across all CCG's to improve children and young people's mental health and emotional wellbeing. Guidance published in August 2015 by NHS England, placed responsibility for all CCG's to produce a five year strategy detailing how services will be transformed in line with the Future in Minds report recommendations. Across Coventry and Warwickshire, the three CCG's have been allocated £1.7m recurrent funding as of November 2015.

The Coventry and Warwickshire Plan was developed in partnership by the three local CCG's and two Local Authorities. The plan had been approved by the Chair of the Health and Wellbeing Board, NHS England Specialist Commissioning Team and Executive Lead Officers in each CCG across Coventry and Warwickshire, and endorsed by the Coventry Children's Joint Commissioning Board. The Plan was submitted to NHS England on 16<sup>th</sup> October 2015 and assured on 5<sup>th</sup> November 2015.

The Briefing note identified the following seven key strategic priorities identified across Coventry and Warwickshire

- Strengthening mental health support to children and young people in schools.
- Further reducing waiting times for access to CAMHS service.
- Reducing the number of young people awaiting an assessment for ASD
- Providing crisis support to young people presenting with self-harm.
- Dedicated mental health support for the most vulnerable, including those Looked After, Adopted or in Supported Accommodation.
- Enhancing access to information and communication through technology.
- Implementation of a newly developed community based Eating Disorder Service.

The CAMHS Redesign Project Board was being led and chaired by Warwickshire in partnership with Coventry commissioners and continued to oversee the CAMHS Redesign Project and commissioning arrangements across Coventry and Warwickshire.

Whilst noting the improvements made, particularly with the use of non-recurrent funding, the Members remained concerned regarding a number of areas and questioned officers in relation to:

- Waiting lists and the time in between assessment and treatment.
- Transition between children's and adults services.
- Education and Healthcare Plans.
- Support to Schools.
- Services for the Autistic Spectrum Disorder.
- The role of parents and support on offer.

In relation to the support to Schools, Councillor Kershaw, in his capacity as Cabinet Member for Education, offered to speak with the Director of Education to ensure that CAMHS is added to the agenda for School Heads.

Following consideration of the Briefing Note and the responses received to questions, the Member indicated their dissatisfaction with the level of information provided and requested that a further report be submitted to a meeting of the Joint Boards in January 2016, to include:

1. A summary of where CAMHS were, where they are now and where they are planning to be.
2. Waiting times between different interventions, ie. initial assessment, first treatment, discharge etc.
3. The Autistic Spectrum Pathway, including waiting times.
4. Plans to improve the transition between children's and adult services, including options to create a 0-25 year old service.
5. Re-referral rates.
6. Education and Healthcare Plans and links with schools and education
7. Support to schools at Tier 1 interventions, including the training on offer.
8. The detailed Implementation Plan and Outcome Framework as submitted to and accepted by NHS England.

**RESOLVED that a further report be submitted to a Joint Board meeting in January 2016, to include the information detailed in 1 to 8 above.**

#### 4. Any Other Business

There were no other items of business.

(Meeting closed at 3.45 pm)



Coventry City Council

## Briefing note

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To: **Scrutiny Board 5**

Date: 6<sup>th</sup> January 2016

Subject: **Prime Minister's Challenge Fund & Coventry & Rugby GP Alliance Update**

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### 1 Purpose of the Note

- 1.1 To brief and update Scrutiny Board 5 on the progress and achievements of the Prime Minister's Challenge Fund and commissioned services across the city, and also the organisational development of the Coventry & Rugby GP Alliance

### 2 Recommendations

- 2.1 For Scrutiny Board 5 to consider and note the report, and to ask for a further update in 6 months.

### 3 Information/Background

- 3.1 The Prime Minister's Challenge Fund (now renamed the Prime Minister's GP Access Fund) was a £4.5m grant made to Coventry & Rugby GP alliance in April 2015 to implement three new models of service (GP in ED, Extended Hours GP services, and an Acute/Community Frailty Pathway), along with supporting technology, federation development & overall programme evaluation. The first of the clinical schemes commenced in May 2015 with the GP in ED, the frailty pathway in July 2015, and the Extended Hours scheme in October 2015, and the shared records system is being implemented and will be complete by the end of the 2015/2016 financial year.
- 3.2 The GP alliance's organisational structures and governance arrangements are now progressing (financial, HR, pension etc.) as well as CQC registration being complete, and the appropriate and necessary directors and officers are now appointed, and discussion with the DH & NHS England regarding NHS Body status is progressing at a senior level, as well as several new services commissioned, including Admiral Nurses, CPEN and flu jabs.
- 3.3 Finally, the 2016/17 commissioning round will incorporate the relevant schemes, combined with existing community pathway, in conjunction with the relevant commissioners, including NHS England, the PM GP Access Fund, and Coventry & Rugby CCG, as well as provider partners within the local health and social care economy.

**Simon Brake** - Director of Primary Care &  
Chief Executive of the Coventry & Rugby GP Alliance  
[simon.brake@coventry.gov.uk](mailto:simon.brake@coventry.gov.uk)

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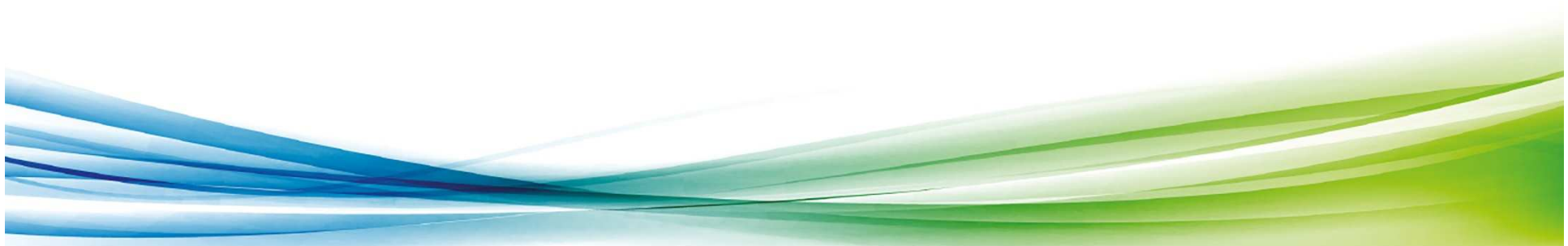


COVENTRY  
& RUGBY  
GP ALLIANCE

# PMCF Update

## Best Care, Anywhere

Scrutiny Board 5  
January 6<sup>th</sup> 2016



# PMCF - Best Care, Anywhere



COVENTRY  
& RUGBY  
GP ALLIANCE

- **Number of patients covered:**  
374,335
- **Number of practices participating:**  
64
- **Names of CCGs covered:**  
NHS Coventry and Rugby CCG
- **Evaluation and IT**
- **National Programme (PMCF) now called the Prime Minister's GP Access Fund...**

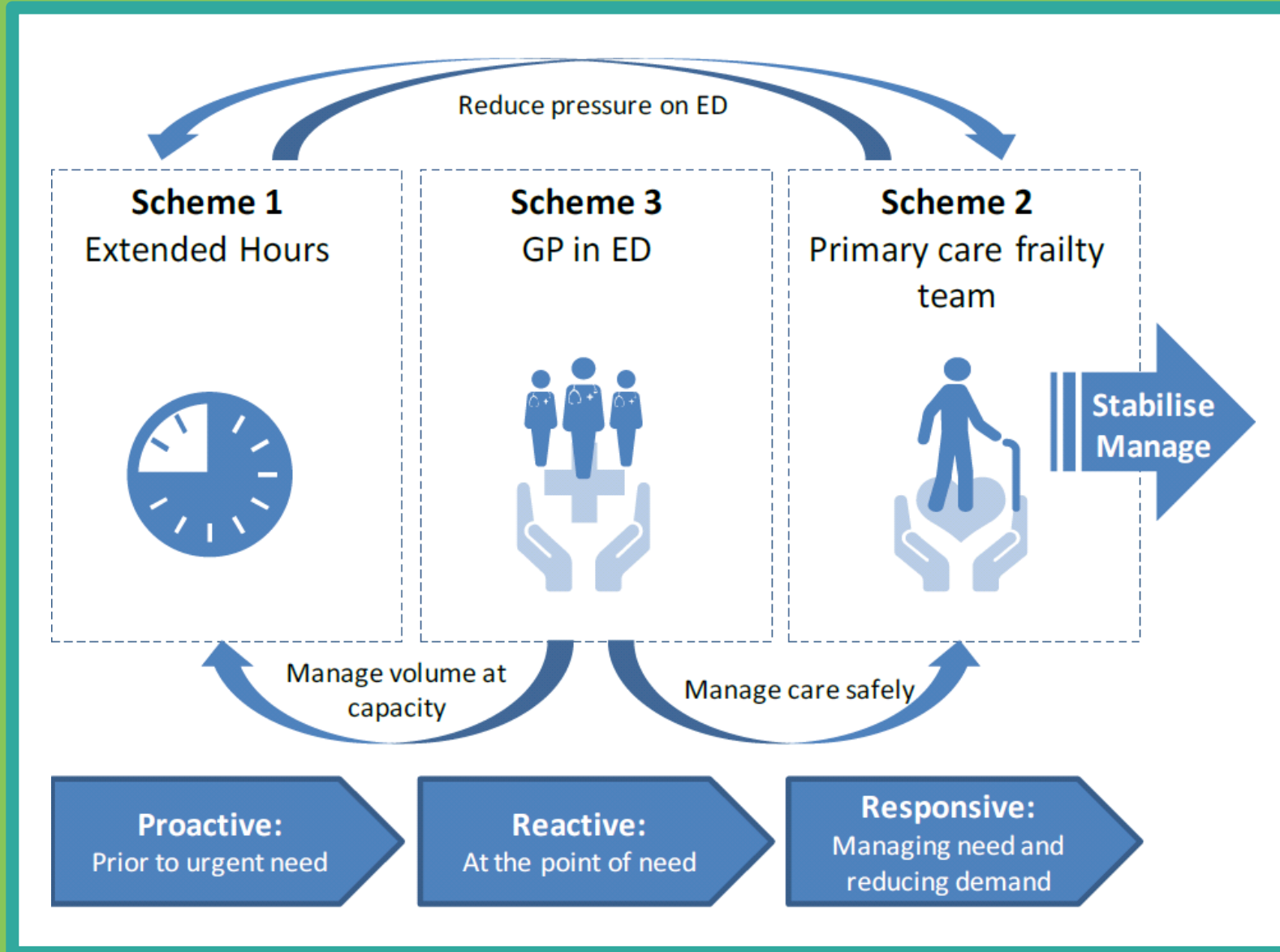


# PMCF - Best Care, Anywhere

*“For Coventry and Rugby to be leading the country in new ways of working between hospitals and general practices and community services is truly inspirational.”*

**Dr Steve Allen, Chief Clinical Officer,  
NHS Coventry & Rugby CCG**

# PMCF - Best Care, Anywhere

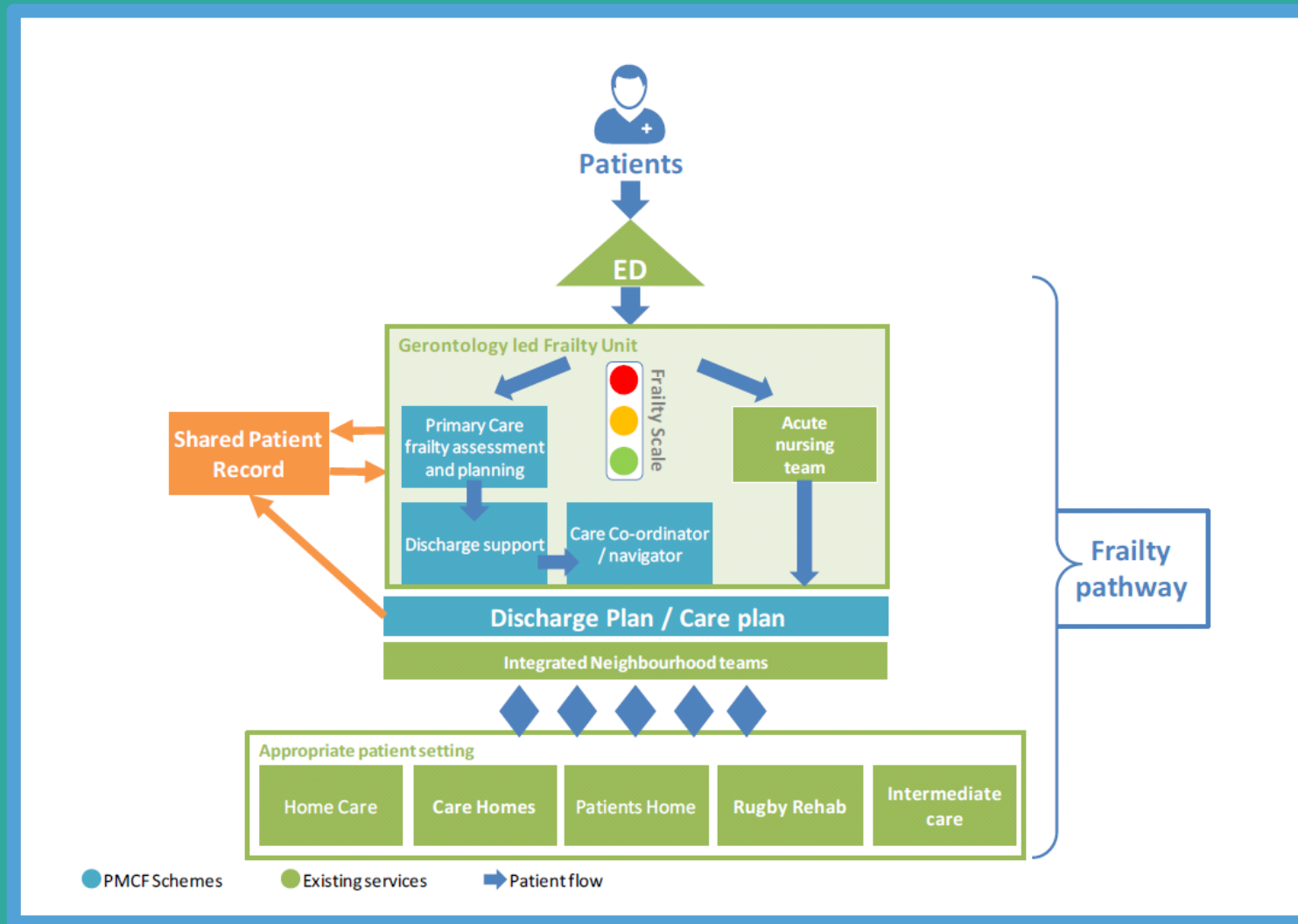


# PMCF - Best Care, Anywhere

*“The Prime Ministers Challenge Fund award gave us the resources to deliver even better care for patients even quicker than we had been hoping before.”*

**Dr Steve Allen, Chief Clinical Officer,  
NHS Coventry & Rugby CCG**

# Scheme 1 – Frailty Context



# Scheme 1 – Frailty

## Context

*“Patients are able to return home earlier with proper support which helps them to recover in the security of their own homes under the care of their GP that they know and trust.”*

**Alison Gingell, Lay Chair, Coventry and Rugby GP Alliance**

# Scheme 1 – Frailty

## Challenges, progress & where next

### Challenges

- UHCW - acute care strategy
- Recruitment/ HR and DBS checks
- Contract variations
- IT - 'live' frailty care plan

### Progress

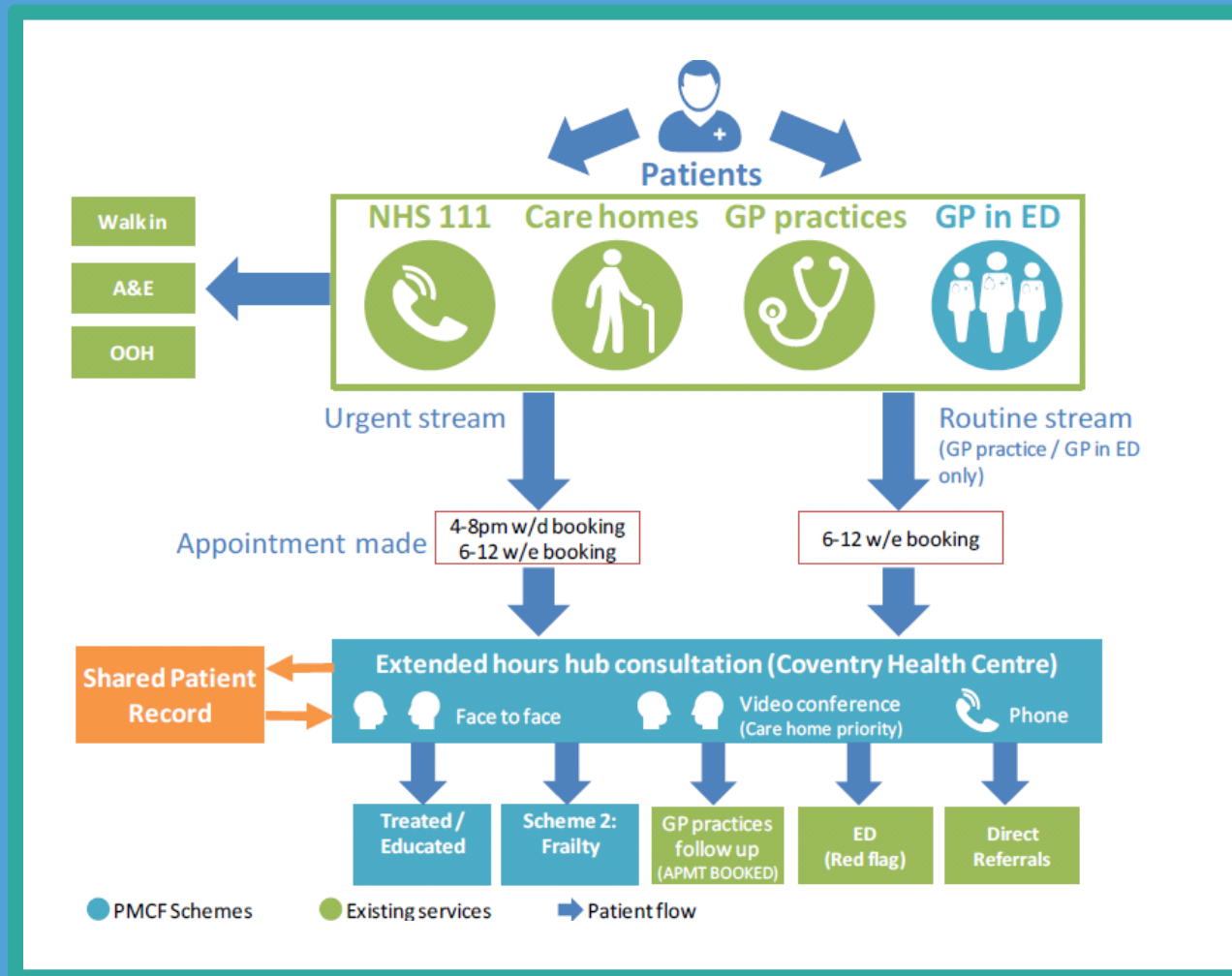
- Gone live & team working on gerontology ward

### Where next?

- Specific beds and base for team in the right environment in the hospital
- Recruitment into community to ensure adequate personnel to support rapid discharge
- Develop with black pear - live care plan

# Scheme 2 – Extended Hours

## Context



# Scheme 2 – Extended Hours

## Context

*“It is nice to get the option to come in the evening and not have to fight with your employee for time off in the day to visit the GP. Good parking, premises, receptionist and the GP was lovely!”*

**Coventry patient**



# Scheme 2 – Extended Hours

## Challenges, progress & where next

### Challenges

- CQC
- IT

### Progress

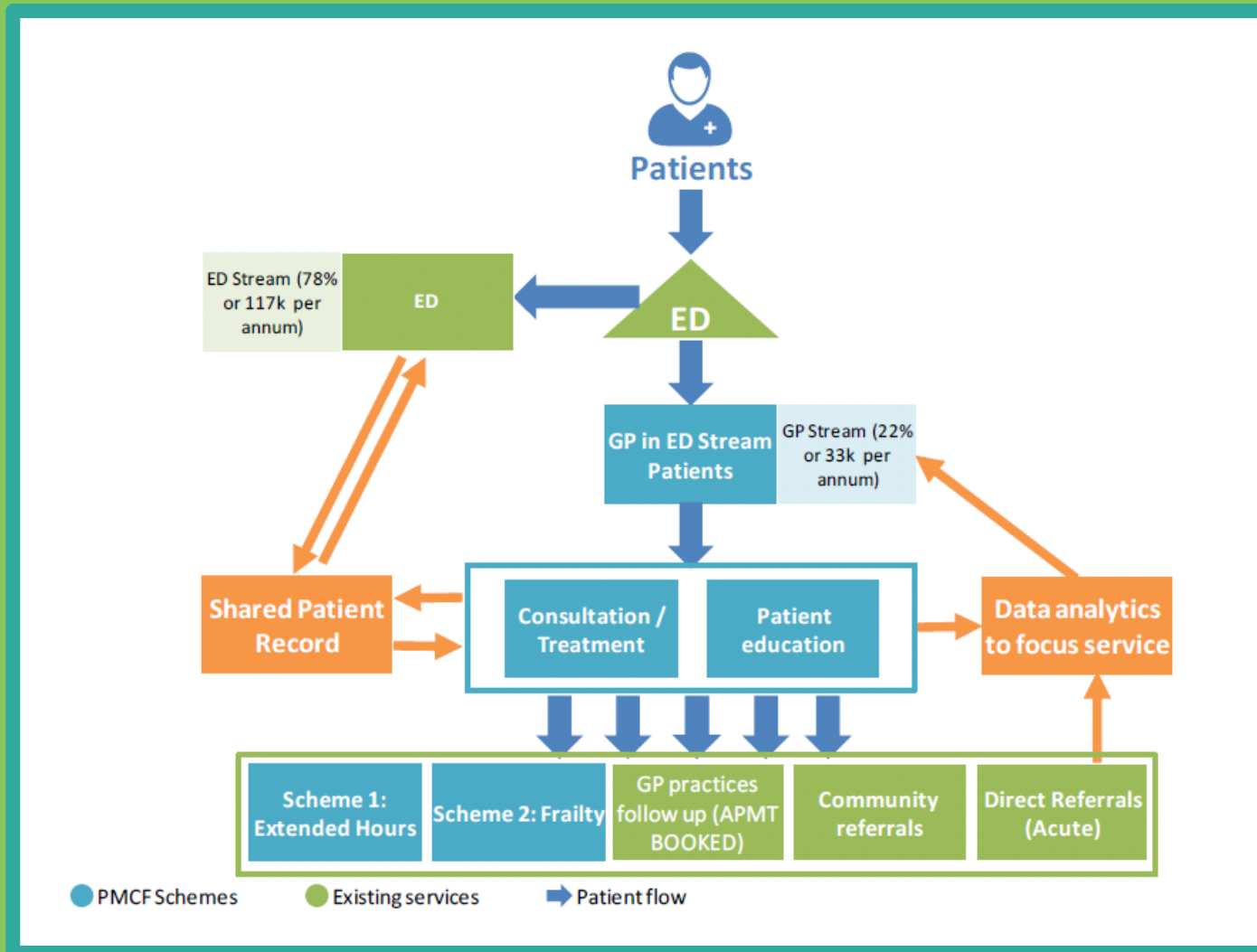
- CQC
- IT
- Gone live
- 7 day service
- Recruitment
- Evaluation

### Where next?

- Add in Skype/telephone appointments especially looking at Nursing Home.
- Coordinate OOH services across the city into a seamless single service

# Scheme 3 – GP in ED

## Context



# Scheme 3 – GP in ED

## Context

*“The Prime Minister's Challenge Fund has enabled the Emergency Department at the Acute Hospital and the GP Alliance to now have strong collaborative relationship working together to deliver an effective Primary Care presence within the Urgent Care setting at the Hospital.”*

**Dr Jim Davidson,  
Associate Medical Director**

# Scheme 3 – GP in ED

## Challenges, progress & where next

### Challenges

- IT
- Culture change

### Progress

- Culture
- 7 day service

### Where next?

- Evolves to complex discharge planning
- Link with frailty scheme
- IT go-live

# Achievements & Learning Points

*“The award of the of the Prime Ministers Challenge Fund to Coventry and Rugby GP Alliance has been a timely boost to the provision of Primary Care services to the people of Coventry and Rugby. Coventry has a large problem with health inequalities and social deprivation. The projects undertaken by the Alliance are addressing some of these problems by increasing access to General Practice out of hours, making sure that there is a robust General Practice influence in A&E and improving care of the ageing population through the development of a Frailty Unit. Coventry LMC is fully supportive of these developments and is involved with the oversight of the rollout.”*

**Dr Jamie Macpherson , LMC Secretary**

# Achievements...

- 3 clinical schemes up and running
- CQC registration
- New activities and development secured
  - CPEN, Admiral Nurses, Care Home Flu Jabs
- Significant Alliance Organisational Development
- CCG support

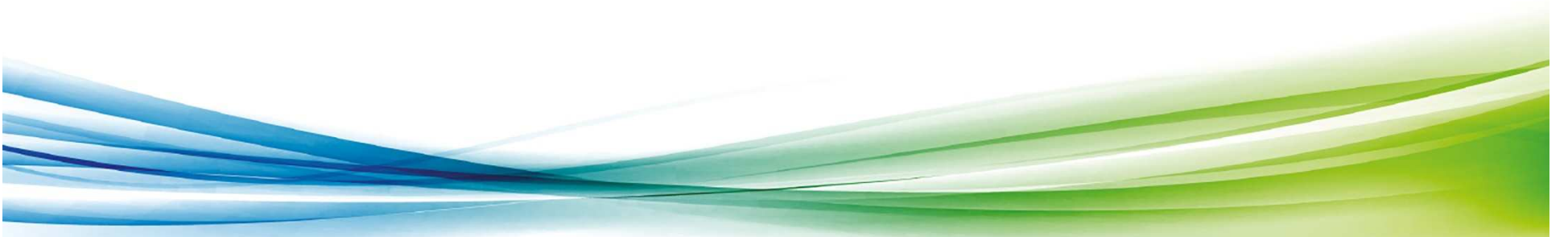
# Development Points...

- System not prepared for Federations
- ICT, Information Sharing and HSCIC
- National and local Evaluation
- Funding flows
- Central Support



COVENTRY  
& RUGBY  
GP ALLIANCE

## Questions & Discussion





Health and Social Care Scrutiny Board (5) Work Programme 2015/16

1 July 2015
Addressing Health Inequalities across Coventry
9 September 2015
Serious Case Reviews
7 October 2015
Emergency Dentistry Winter pressures including delayed discharge Adult Social Care Annual Report (Local Account) 14/15 *Nominations for Members to sit on Quality Account Groups to be taken*
Tuesday 3 November 2015
Improving Accommodation for Older People Director of Public Health Annual Report Deprivation of Liberty Implications
1.30pm 18 November 2015
Serious Case Reviews Adult Safeguarding Annual Report
25 November 2015 – Joint meeting with SB2
Child and Adolescent Mental Health Services
6 January 2015
Progress on developing the Primary Care agenda and update on the Prime Ministers Challenge Fund
3 February 2015
Child and Adolescent Mental Health Services Independent Living Fund Care Act – Impacts following implementation Health and Wellbeing Strategy Update including update on reducing health inequalities with a focus on the environment (Joint Strategic Needs Assessment)
2 March 2015
Review of Winter Pressure Performance Serious Incident Review – Miss G - Update on Implementation of Action Plan
Date to be Determined
Clinical Management of Large Scale Chronic Diseases – Progress reports on pilots Section 117 Policy Better Care Programme and Health Integration Adult Social Care Complaints and Representations Annual Report 2013-14 Coventry and Warwickshire Partnership Trust – progress following CQC Inspection Community Mental Health Services/ Mental Health Pathways Patient Transport PALS Service at UHCW Adults' Homes Performance Review A&E 4 Hour Wait Performance Review Social Care Finance Deprivation of Liberty Safeguards Serious Case Review – Mrs E – Update on Implementation of Action Plan System Wide Review- Mrs F - Update on Implementation of Action Plan Care Homes – State of Care Homes in the City

Date	Title	Detail	Cabinet Member/ Lead Officer	Source	Outcomes
1 July 2015	Addressing Health inequalities across Coventry	To identify the work taking place, and impact of that work, to address the health inequalities across Coventry, as highlighted by the 'Coventry's Life Expectancy along the number 10 bus route' diagram in the Director of Public Health's Annual Report 2014.	Jane Moore		Update to be added to the work programme.
9 September 2015	Serious Case Reviews	To consider the outcome of serious case review	Joan Beck (Independent Chair)		
7 October 2015	Emergency Dentistry	For the Board to review the provision of out of hours emergency dentistry across the City including how other NHS services can assist with dental issues out of hours.	David Williams (NHS England)		
7 October 2015	Winter pressures including delayed discharge	To include review of effectiveness of 2014/15 winter arrangements and preparations for 2015/16. To include CCG, provider organisations and social care. To include A&E targets and performance. The Chair will meet with UHCW to decide whether this needs a full review by the Board To look at the challenges around delayed discharge across health and social care. The Chair will meet with UHCW and Social Care to decide whether this needs a full review by the Board.	UHCW/ Cllr Caan/ David Watts		
7 October 2015	Adult Social Care Annual Report (Local Account) 14/15 – Report to be circulated	This is the annual report of the Council related to services provided to Adult Social Care clients. The report summarises performance,	Pete Fahy/ David Watts/ Gemma Tate		

Date	Title	Detail	Cabinet Member/ Lead Officer	Source	Outcomes
		provides commentaries from key partners and representatives of users and sets strategic service objectives for the future. The report will be circulated with the agenda and Members given the opportunity to ask questions briefly on it at the end of the meeting.			
7 October 2015	*Nominations for Members to sit on Quality Account Groups to be taken*	Looking for nominations by Members to sit on Quality Account task and Finish with WCC and Coventry and Warwickshire Health Watch colleagues. There are two groups; UHCW CWPT There is also a task and finish group due to run to look at West Midlands Ambulance Service, jointly with Warwickshire.	Ruth Light – Coventry Healthwatch		
Tuesday 3 November 2015	Improving Accommodation for Older People	The Council are looking at changing the housing options for Older People to bring the accommodation offered up to a higher standard. SB5 will have an opportunity to feed their views into the consultation at this meeting.	Pete Fahy		
Tuesday 3 November 2015	Director of Public Health's Annual Report – Children and Young People	The DPH has a statutory opportunity to issue Annual Reports which provide a commentary of local public health profiles and priorities.	Dr Jane Moore		
Tuesday 3 November 2015	Deprivation of Liberty Implications	To inform the Board of the current position with regards to Deprivation of Liberty assessments.	David Watts		To be considered again by the Board at an appropriate point.
18 November	Serious Case Review	To consider the SCR for Mrs F.	Joan Beck		

Date	Title	Detail	Cabinet Member/ Lead Officer	Source	Outcomes
2015			(Independent Chair)/ Cat Parker		
18 November 2015	Adult Safeguarding Annual Report	The Board are responsible for co-ordinating arrangements to safeguard vulnerable adults in the City. The Annual Report sets out progress over the 2014/15 municipal year and provides members with some data to monitor activity. Representatives of the Safeguarding Board to be invited.	Joan Beck (Independent Chair)/ Cat Parker		
25 November 2015	CAMHS – Joint with SB2	To look at the improvement plan for the service which is being implemented as well as the forthcoming service redesign.	Matt Gilks (CCG)/ Harpal Sohal/ Alan Butler		
6 January 2016	Progress on developing the Primary Care agenda and update on the Prime Ministers Challenge Fund	Review of what good primary care looks like and whether different models of provision produce better outcomes. Invite 2 or 3 GP practices and patient panel representatives and Healthwatch in relation to patient engagement. Needs to include information on the recruitment and retention of GPs, access and out of hours provision. (Needs to link with any Health and Well-being Board work)	Simon Brake		
3 February 2016	Health and Wellbeing Strategy Update including update on reducing health inequalities with a focus on the environment (JNSA)	To review the Health and Wellbeing Strategy (which is based on the data collected through the JNSA). Report to include a progress report on the work being done to reduce health inequalities, with particular reference to the environmental aspect, as	Dr Jane Moore	SB5 01/07/15	

Date	Title	Detail	Cabinet Member/ Lead Officer	Source	Outcomes
		discussed by the Board in July.			
3 February 2016	Care Act – Impacts following implementation	To look at the Care Act and understand the possible implications for the Council and Residents.	Pete Fahy	Date requested by PF	
3 February 2016	Independent Living Fund	The Independent Living Fund is ending and a grant being transferred to the Local Authority for 12 months aid the transition. After the 12 months, it is possible that those supported by ILA will need social care services to fill the void left by the fund ending. In 2014, this fund was accessed by 127 people in Coventry. Date requested by Pete Fahy August 2015.	Pete Fahy		
2 March 2016	Review of Winter Pressure Performance				
2 March 2016	Serious Incident Review – Miss G - Update on Implementation of Action Plan	The Board have requested that the action plan is reviewed to ensure progress have been made on the implementation of the recommendations.	Joan Beck/ Cat Parker	SB5 9/9/15	
TBC	Clinical Management of Large Scale Chronic Diseases – Progress reports on pilots	Future progress reports on the pilot projects are brought for consideration by the Scrutiny Board as and when appropriate.	Dr Jane Moore	SB5 11/02/15	
TBC	Section 117 Policy	To be taken in 2015/16 – Check	Lavern Newell	Forward Plan	
TBC	Better Care Programme and Health Integration	Regular updates to look at progress		Referred from health and wellbeing board April 15	

Date	Title	Detail	Cabinet Member/ Lead Officer	Source	Outcomes
TBC	Serious Case Reviews	To consider any serious case reviews at an appropriate time.	Joan Beck/ Isabel Merrifield		
TBC	Adult Social Care Complaints and Representations Annual Report 2013-14	To review levels of complaints, the way they are managed and how they are used to learn lessons and deliver improvements.	John Teahan		
TBC	Coventry and Warwickshire Partnership Trust – progress following CQC Inspection	To review progress against the action plan put in place following the Care Quality Commission’s review of the Trust, particularly in relation to the enforcement notice and issues relating to Quinton Ward.	CWPT	SB5 30/04/14	
TBC	Community Mental Health Services/ Mental Health Pathways	To provide information to the Board on the services provided through the shared budget of the Better Care Fund in relation to community mental health services and integrated team working.	Josie Spencer	SB5 10/9/14	
TBC	Patient Transport	To look at the patient transport service, with specific reference to renal dialysis, and how well the new contract is serving Coventry residents visiting UHCW. The new contracted started in April so review Oct/ Nov time to enable it to bed in.		SB5 19/11/14	
TBC	PALS Service at UHCW	To look at the PALS Service at UHCW following feedback from the Quality Accounts meeting		Quality Accounts March 2015	
TBC	A&E 4 Hour Wait Performance Review	To review performance against the A&E waiting targets which are nationally set. Where issues have arised, to understand the remedial action which is being put into place.		Informal Meeting June 2015	

Date	Title	Detail	Cabinet Member/ Lead Officer	Source	Outcomes
TBC	Adults' Homes Performance Review	To review performance of Adults' Homes that Coventry adults are placed in and procedures for what happens if a home is judged inadequate by Ofsted.	Pete Fahy		
TBC	Social Care Finance	With the pressures on finance increasing, the Board will look at the pressures and what actions are being under taken to address these.	Pete Fahy	SCRUCO	
TBC	Deprivation of Liberty Safeguards	The Board considered DofLs on 03.11.15 and have asked that this is brought back an appropriate time given the financial challenges this poses to the Authority.	Pete Fahy	SB5	
TBC	Serious Case Review – Mrs E – Update on Implementation of Action Plan	This case was scrutinised by SB5 on 18.11.15. The Board asked for and update in 6 months' time on progress- June 16.	Joan Beck/ Cat Parker	SB5 18.11.15	
TBC	System Wide Review- Mrs F - Update on Implementation of Action Plan	This case was scrutinised by SB5 on 18.11.15. The Board asked for and update in 6 months' time on progress – June 16.	Joan Beck/ Cat Parker	SB5 18.11.15	
TBC	Care Homes – State of Care Homes in the City	The Board would have asked for information on Care Homes in the City to include quality and financing issues.	Pete Fahy	SB5 18.11.15	

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