

Minutes of the Meeting of the Health and Social Care Scrutiny Board (5)
held at 2.30 p.m. on 19th June, 2013

Present:

Board Members: Councillor Thomas (Chair)
Councillor Clifford
Councillor Mrs Fletcher
Councillor Hetheron
Councillor J Mutton
Councillor Noonan
Councillor Sehmi

Co-opted Member: Mr D Spurgeon

Cabinet Member: Councillor Gingell

Employees (by Directorate):

Chief Executive's: P Barnett, J Moore (Director), Dr D Todkill

Community Services: E Bates, S Brake, M Enderby, B Walsh (Director)

Customer & Workforce Services: L Knight

Other representatives : Dr A Banerjee
Sarah Bank – Coventry and Warwickshire Partnership
Trust (CWPT)
A Hardy - University Hospital Coventry and
Warwickshire (UHCW)
P Masters - CWPT
P Short – UHCW
T Wrench - CWPT
R Yeabsley – NHS England

Apology: Councillor Ali

1. Declarations of Interest

There were no declarations of Interest

2. Minutes

The minutes of the meeting of the Health, Social Care and Welfare Reform Scrutiny Board (5) held on 1st May, 2013 were signed as a true record. There were no matters arising.

3. Quality Accounts 2012-2013

The Scrutiny Board considered a briefing note of the Scrutiny Co-ordinator which introduced the Board to the 2012-2013 Quality Accounts produced by local provider NHS Trusts. The Quality Accounts for University Hospitals Coventry and Warwickshire (UHCW), Coventry and Warwickshire Partnership Trust (CWPT) and West Midlands Ambulance Service (WMAS) were set out at appendices to the note. Representatives from

UHCW and CWPT attended the meeting for the consideration of this item. Councillor Gingell, Cabinet Member (Health and Adult Services) also attended the meeting for the consideration of this issue.

The Department of Health introduced the requirement for NHS trusts to issue quality accounts in 2009. The purpose was to encourage boards and leaders of healthcare organisations to assess quality across all the healthcare services they provided and to engage in the wider processes of continuous quality improvement. They were asked to consider three aspects of quality – patient experience, safety and clinical effectiveness. The Scrutiny Board had the opportunity to provide a commentary on the local Trusts Quality Accounts. Reference was made to the joint Quality Account Working Groups involving the City Council, Warwickshire County Council and the Local Involvement Networks (LINks) which had produced prepared commentaries on the Accounts. Prior to this meeting, Members had been provided with draft responses from the City Council to the UHCW and CWPT accounts. An individual response was not being made to the Quality Account for WMAS.

Andy Hardy, Chief Executive and Peter Short, Project Manager, introduced the Quality Account for UHCW. Attention was drawn to the three main priorities for the year and to performance of the hospital in these areas:

- Patient Safety - Elimination of avoidable pressure ulcers
- Clinical Effectiveness - Effective discharge from hospital
- Patient and Staff Experience - Using real time patient feedback to effect change.

Reference was made to the implications of the Francis Report and the lessons to be learnt, a review of practice had already commenced.

Members of the Board questioned the representatives on a number of issues and responses were provided, matters raised included:

- i) The encouragement given to whistleblowing
- ii) How to improve effective discharges from hospital including the issue of communication
- iii) The importance and monitoring of 'Making Every Contact Count'
- iv) Use of wipe boards on the Wards and Information Technology
- v) Increasing attendances at A and E including current performance against target and the reasons behind the recent improvement in performance
- vi) The level of detail in the Quality Account.

Tracey Wrench, Director of Nursing, Sarah Bank, Assistant Director of Contracting, Performance and Information and Paul Masters, Assistant Director Governance attended for the Quality Account for CWPT. The quality strategy for the Trust focused on patient safety, effectiveness of care and patient experience. The account described how the Trust had continued to develop over the previous year including reviewing quality performance and delivering quality improvements. The quality priorities for 2013-14 were outlined which had been developed following consultation with patients, staff, members of the public and stakeholders.

Members of the Board questioned the representatives on a number of issues and responses were provided, matters raised included:

- i) A lack of information on outcomes and examples

- ii) The development of the quality goals
- iii) The support given to patients with dementia or mental health issues (including people in prison) and the help given to their families
- iv) The potential for funding to provide Admiral nurses who work with family carers and people with dementia in the community and other settings
- v) How the decision to defer the foundation status application by six months reflects on the Quality Account.

RESOLVED that:

(i) Authority to finalise the responses to the Quality Accounts from University Hospital Coventry and Warwickshire and Coventry and Warwickshire Partnership Trust be delegated to the Chair, Councillor Thomas, in consultation with the officers and these be submitted as a commentary to the Trusts for inclusion in the final published documents.

(ii) The Quality Account for West Midlands Ambulance Service be noted.

4. Communicable Disease Control and Outbreak Management

The Scrutiny Board considered two briefing notes of the Director of Public Health which provided an overview of health resilience and health protection in Coventry and informed of the background and current arrangements for the Measles, Mumps and Rubella (MMR) immunisation catch-up campaign in the city. Richard Yeabsley, NHS England and Dr Ash Banerjee and Dr D Todkill attended the meeting for the consideration of this issue. Councillor Gingell, Cabinet Member (Health and Adult Services) also attended for the consideration of this item.

Health protection and health resilience were about protecting the public from avoidable threats to their health including diseases that could be prevented through vaccination or screening programmes; man-made threats such as acts of terrorism; major incidents such as train or plane crashes; or environmental threats such as extreme weather conditions or environmental pollution. Responsibility lay with a number of different national, regional and local organisations including different parts of the NHS and local councils. To ensure that all the parts of the system that had a responsibility worked well together, Coventry had established a Health Protection Committee, a non-statutory Committee which reported to the Health and Well-being Boards for both Coventry and Warwickshire.

In April 2013, a national catch-up programme to increase MMR vaccination uptake in children and teenagers was announced in response to a substantial national rise in the number of measles cases. The aim of the programme was for GP practices to identify and write to the parents of children aged 10 to 16 who were inadequately immunised and offer them the MMR vaccine. There was also a local communication strategy to raise awareness.

The Board were informed that Coventry had a relatively high MMR uptake compared to the rest of the region. 97.1% of two year olds were immunised compared to only 93.1% for the region as a whole and 96.4% of five year olds compared to 88.3% for the region. However, modelling suggested that there were around 5000 children aged 10 to 16 inadequately immunised and at risk. A local Measles plan had been developed. The Local Authority role included raising awareness of the campaign in schools and in some

vulnerable groups.

Members of the Board questioned the representatives on a number of issues and responses were provided, matters raised included:

- i) The steps the Council had in place for getting messages out about severe weather conditions and how to react, in particular to ensure that vulnerable residents were protected
- ii) The additional measures being introduced to raise awareness of the MMR immunisation catch up programme
- iii) How were children of migrant families arriving in the city and children from travelling families picked up by the programme
- iv) The potential for issues to arise when students arrive at Warwick University next year who have not been vaccinated and the partnership working with the university to alleviate problems
- v) The potential to use the school nursing service for running campaigns/vaccinating in schools
- vi) Any follow up actions if families do not respond to letters from their GP offering vaccinations
- vii) Dealing with all the different communities in the city.

RESOLVED that:

(i) The Cabinet Member (Health and Adult Services) be requested to monitor the arrangements for mutual aid contacts.

(ii) Officers be requested to encourage the partnership working with Warwick University Health Centre and the GP Practices associated with the university.

(iii) The results of the current Needs Assessment Survey and any subsequent recommendations concerning the needs of and contact with the different communities in the city in relation to health protection to be reported to the Cabinet Member (Health and Adult Services).

5. Any other business

There were no additional items of business.

(Meeting closed: 4.40 p.m.)