

**NORFOLK HEALTH OVERVIEW AND SCRUTINY COMMITTEE
MINUTES OF THE MEETING HELD AT COUNTY HALL, NORWICH
On 15 January 2015**

Present:

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| Mr C Aldred | Norfolk County Council |
| Mr R Bearman | Norfolk County Council |
| Mr J Bracey | Broadland District Council |
| Mr M Carttiss (Chairman) | Norfolk County Council |
| Mrs J Chamberlin | Norfolk County Council |
| Michael Chenery of Horsburgh | Norfolk County Council |
| Mrs A Claussen-Reynolds | North Norfolk District Council |
| Mr D Harrison | Norfolk County Council |
| Mr R Kybird | Breckland District Council |
| Dr N Legg | South Norfolk District Council |
| Mrs M Somerville | Norfolk County Council |
| Mrs S Weymouth | Great Yarmouth Borough Council |
| Mr A Wright | King's Lynn and West Norfolk Borough Council |

Substitute Member Present:

Ms S Bogelein for Mrs Wollard, Norwich City Council

Also Present:

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| Catherine Underwood | Director of Integrated Commissioning, Norfolk County Council |
| Debbie Olley | Director of Integrated Care (Interim), Norfolk Community Health and Care / Norfolk County Council |
| Laura Clear | Deputy Director Integrated Care and Systems Lead, Norfolk Community Health and Care / Norfolk County Council |
| Dr Anoop Dhesi | Chairman of North Norfolk Clinical Commissioning Group |
| John Everson | Head of Integrated Commissioning, North Norfolk Clinical Commissioning Group |
| Mark Burgis | Head of Clinical Pathway Design, North Norfolk Clinical Commissioning Group |
| James Joyce | Norfolk County Councillor |
| Sue Whitaker | Norfolk County Councillor |
| Chris MacDonald | Healthwatch Norfolk |
| Chris Walton | Head of Democratic Services |
| Maureen Orr | Democratic Support and Scrutiny Team Manager |
| Tim Shaw | Committee Officer |

1 Apologies for Absence

Apologies for absence were received from Mr B Bremner and Mrs C Woollard.

2. Minutes

The minutes of the previous meeting held on 27 November 2014 were confirmed by the Committee and signed by the Chairman.

3. Declarations of Interest

There were no declarations of interest.

4. Urgent Business

There were no items of urgent business.

5. Chairman's Announcements

5.1 Mr Richard Bearman and Mrs Shirley Weymouth

The Chairman welcomed back onto the Committee Mr Richard Bearman. He also congratulated Mrs Shirley Weymouth on becoming Mayor-elect of Great Yarmouth Borough Council.

5.2 Congratulations to Norfolk Community Health and Care NHS Trust on a 'Good' rating by the Care Quality Commission

The Chairman said that the Member Briefing for January 2015 referred to the Care Quality Commission's latest inspection of Norfolk Community Health and Care NHS Trust for which they received a 'Good' rating. The CQC had said that it was quite an achievement for a community healthcare trust to receive a 'Good' rating in its new inspection regime. The Committee joined the Chairman in congratulating NCH&C on this result.

5.3 Members Visit to Norfolk Police Headquarters Control Centre at Wymondham December 9th 2014

5.4 The Chairman said that on 9 December 2014 a group of five Members of the Committee had visited the Police Control Centre at Wymondham to observe the service provided to people who needed support because of mental health issues rather than Police intervention.

5.5 At the request of the Chairman, Margaret Somerville updated the Committee on what the group of Members had learnt from the visit. She said that the group was impressed by the care and compassion shown by Police Officers and the Integrated Mental Health Team. She said that in April 2014, the first integrated Mental Health Team in the country was established in the Police Control Centre at Wymondham. Funding for this initiative had followed a bid to the Home Office Innovation Fund to establish an Integrated Mental Health Team. Norfolk County Council had provided bridge funding, pending the second innovation bid that was

agreed in July 2014 for the next two years.

5.6 Mrs Somerville went on to say that the group was informed that 15-25% of police time was engaged with people with mental health issues. This was both time consuming and inappropriate when what was really needed was a mental health intervention. There was a lack of understanding about how to access appropriate mental health services and they were often unavailable in crisis situations. There was difficulty in making referrals and inconsistent partnership working or data sharing with timely support, and the rural nature of Norfolk added to this difficulty. Mrs Somerville added that to have a dedicated team within the Police Control Centre who not only understood the mental health conditions, but also knew how to evaluate, refer or reassure those with mental health needs with their professional expertise, had proved invaluable. In one month before Christmas, calls included 106 people experiencing a psychotic episode, 27 potential suicide or self-harm, 89 with personality disorders and in 110 cases, there were concerns for safety. Several were repeat callers, with 77 previously known and 194 currently active. Repeat callers traditionally took at least 10-15 minutes but now these calls went directly to the mental health team and did not tie up the 999 service. Many of the callers were previously unknown to the service suggesting that they had problems as yet undiagnosed. In the month before Christmas the new arrangements had saved on the deployment of Police Officers on 22 occasions. Normally two Police Officers would have been deployed on a 999 response. Fifteen Section 136 calls were averted. A Section 136 effectively kept Police Officers away from frontline work but by averting the need for a S136, the team had reduced the pressure on the Mental Health Trust while at the same time giving those with mental health needs immediate support and a better quality of care. Those with serious mental health issues were not detained in padded police cells but were taken to Hellesdon, or a place of safety, to await assessment and a suitable bed wherever that might be.

5.7 The Chairman thanked Mrs Somerville for her detailed comments and said that a further opportunity for Committee Members to visit the Police Control Centre would be arranged for the end of January / February 2015. Those who would like to take part were asked to contact Maureen Orr.

6 Integration of Health and Social Care Services, Central and West Norfolk

6.1 The Committee received a suggested approach from the Democratic Support and Scrutiny Team Manager on progress with integration of health and social care services in central and west Norfolk in 2014-15 and plans for the future.

6.2 The Committee received evidence from Catherine Underwood, Director of Integrated Commissioning, Debbie Olley, Interim Director of Integrated Care and Laura Clear, Deputy Director Integrated Care and Systems Lead Norfolk County Council / Norfolk Community Health and Care who updated the Committee on integrated commissioning and operational plans across central and west Norfolk in 2015-16. The Committee also received a presentation from Dr Anoop Dhesi, Chairman of North Norfolk CCG, about the effectiveness of integrated services developed in North Norfolk in 2014-15.

6.3 In the course of discussion the following key points were made:

- The witnesses said that for the foreseeable future integration would continue to be a key theme for both health and social care services. Norfolk County Council and Norfolk Community Health and Care NHS Trust

(NCH&C) had entered into a formal agreement to create a single management arrangement for social care and community nursing and therapies across Norfolk, except for the Great Yarmouth and Waveney CCG area which would be looked at separately by the Great Yarmouth and Waveney Joint Health Scrutiny Committee in due course.

- Very strong progress had been made in ensuring that people had a joined up experience of health and social care but there were significant decisions still to be made, not least because of the requirements of the new Better Care Fund (BCF) for the pooling of health and social care resources.
- The establishment of the BCF for 2015 onwards would provide a national push towards much greater integration than had been achieved by the pilot schemes of the past.
- It was pointed out that there were now in effect five integration plans for Norfolk based on the five CCG areas, however, there was much in common between these plans.
- The Committee received a detailed presentation from Dr Anoop Dhesi, Chairman of North Norfolk CCG, about the effectiveness of integrated services developed in North Norfolk in 2014-15. This could be found on the Committee papers website.
- The revenue funding for 2015/16 for each of the CCGs was set out in the report from the Director of Integrated Commissioning and Interim Director of Integrated Services at paragraph 5.2.
- The biggest challenge for Social Care Services was the constant need to provide effective services to increasing numbers of older people and people with complex needs in the context of very significant pressure on County Council funding.
- Health and Social Care Services had appointed to a new senior management structure for integrated services across its organisations at no additional management cost.
- The witnesses said that health and social care commissioners and providers were concentrating on the integration of services for adults, however, the needs of young people and the needs of carers of young people, to access services in a way that would be of benefit to them in planning for the services that were needed in adulthood was very important.
- As well as integration with social care, new methods of integrated working between different parts of the NHS (e.g. primary and community care; community care and acute care; acute care and primary care) were being tried across the county.
- Mental Health Services were seen as an important aspect of an integrated health and social care services. A partnership board had been established to provide leadership and to provide joint work on mental health issues.

6.4 It was **agreed** that the Committee might wish to invite commissioners and providers to report back in 12 months on progress with health and social care integration.

7 NHS Workforce Planning for Norfolk

7.1 The Committee received a report from the Democratic Support and Scrutiny Team Manager that asked Members to make the appointments to a task and finish group to scrutinise NHS workforce planning for Norfolk and to agree on the terms of reference for that group.

7.2 The Committee **agreed** the terms of reference for the task and finish group to scrutinise NHS workforce planning for Norfolk that were set out in the report.

7.3 The Committee **agreed** to appoint the following Members to serve on that group:-

Michael Chenery of Horsbrugh
Alexandra Kemp
Robert Kybird
Nigel Legg
Margaret Somerville

7.4 It was also **agreed** that Alex Stewart of Healthwatch Norfolk should be invited to join the group on a co-opted, non-voting basis and that Chris MacDonald could substitute for him at the early meetings.

8 Forward work programme and appointment of substitute link members with local NHS Trusts and Clinical Commissioning Groups

8.1 The Committee considered the appointment of **substitute** link members with local NHS Trusts, where vacancies existed.

8.2 The Committee **agreed** to nominate the following Members as **substitute** link Members with NHS bodies:-

North Norfolk CCG – Michael Chenery of Horsbrugh
Great Yarmouth and Waveney CCG – Jenny Chamberlin
West Norfolk CCG – Tony Wright
James Paget University Hospital NHS Foundation Trust – Margaret Somerville

8.3 Maureen Orr was asked to email Members of the Committee for nominations to fill the vacancies that remained for substitute link members:-

Norwich CCG
Norfolk and Suffolk NHS Foundation Trust

8.4 The Chairman said that Emma Corlett, the County Council's Member Champion for Mental Health, had written to him to ask that the Committee consider looking at the situation regarding out of area placement of mental health patients and the overall effects of the radical redesign of services brought about by NSFT's 2012-16 Service Strategy.

8.5 The Committee **agreed** the current forward work programme that was set out in the officer report subject to the following changes:-

For the 16 April 2015 agenda – add an item concerning the Norfolk and Suffolk NHS Foundation Trust to cover:-

- (a) An update on out of area placement of mental health patients
- (b) The effect of changes to mental health services on support for homeless people
- (c) The effect of the changes to mental health services on policing
- (d) Disparity in the services available to mental health patients in different localities
- (e) The numbers of adults in mental health residential care establishments in Norfolk compared to other parts of England.
- (f) The levels of caseloads for NSFT staff
- (g) Performance monitoring of the overall effects of the changes to mental

health services

For the 16 April 2015 agenda- add an item about 'Service given to patients with mental health issues in A&E following attempted suicide or self-harm episodes'.

- 8.6** The Committee also **agreed** that Dr Ian Mack, Chairman of Norfolk Stroke Network, should be asked to provide a report for the Member Briefing in April 2015 on the action taken to address the Care Quality Commission's (CQC) comments about access to the stroke care pathway for incomers to Norfolk. (It was noted that CQC's comments were made in its report about the latest inspection of Norfolk Community Health and Care NHS Trust, published in December 2015).

Chairman

The meeting concluded at 11.40 am



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