

**CHILDREN AND HEALTH  
OVERVIEW AND SCRUTINY COMMITTEE  
Wednesday 18<sup>th</sup> January 2012**

**PRESENT** – Councillors O’Keefe, Entwistle, Mahmood, Patel, Riley, J. Smith, Solkar, Taylor, Law-Riding, D. Smith, Gee, John Slater, Foster.

**Also Present –**

Councillor M. Bateson	Executive Member Children’s Services
Councillor M. Khan	Executive Member Adult’s Services
Councillor D. Talbot	Executive Member Culture, Leisure and Sport
Mike Zammit	Link Chief Officer
Janie Berry	Senior Supporting Officer
Linda Clegg	Director of Children’s Safeguarding and Protection
Steve Tingle	Head of Service Families, Health and Wellbeing
P. Harrison	Roman Catholic Diocese
F. Kershaw	Blackburn Church of England Diocese
Mohsin Mulla	Scrutiny Officer
Ben Aspinall	Scrutiny Manager
Emma Foster	Director of Transformation, Lancashire Care Foundation Trust
Alistair Rose	Lancashire Care Foundation Trust
Debbie Nixon	Strategic Director Mental Health Services, NHS Lancashire
Dr Ian Leonard	Consultant Psychiatrist and Dementia Project Lead, Lancashire Care Foundation Trust
Lynette Harwood	Head of Commissioning, BwD Teaching Care Trust Plus
Pauline Walsh	Chief Officer, Age UK Blackburn with Darwen

**RESOLUTIONS**

**24 Welcome and Apologies**

The Chair welcomed those present. Apologies from Councillors Julie Slater and Wright were recorded.

**25 Minutes of Meeting held on 23<sup>rd</sup> November 2011**

**RESOLVED –**

- 1) That the minutes of the meeting held on November 23<sup>rd</sup> 2011 were agreed as a correct record.

## **26 Declarations Of Interest in items on this Agenda**

Declarations of Interest received from:

Councillor Taylor – Personal Interest – Agenda Item 4 – Transformational Agenda 'RAG Report' Adult Portfolio

Councillor Taylor – Personal Interest – Agenda Item 5 – Dementia

Councillor Entwistle – Personal Interest – Agenda Item 5 – Dementia

## **27 Work of the Executive - Transformational Agenda**

### Children's Portfolio

The Executive Member for Children's Services provided Members with an update on areas of the Transformational Agenda.

Members were made aware of the full OFSTED Safeguarding and Looked after Children inspection and that this would be an opportunity to evidence the fantastic services provided by staff. Inspectorates would be on site for 2 weeks, week commencing 23<sup>rd</sup> January 2012.

Members from the C&H OSC with officer support would be invited to take part in a focus group with inspectorates.

Members were reminded that pressures on social care continue to rise at the front door and these were being managed and are being offset by some of the transformational savings.

The Director of Safeguarding also updated that the recruitment of foster carers was going well but we are still having to use external agencies.

The Executive member updated that there was likely to be an overspend of £100,000 on Children's budget.

### Culture, Leisure and Sport Portfolio

The Executive Member for Culture, Leisure and Sport informed the Committee that Countryside services have achieved their savings for this year and further savings will need to be made next year. He also advised that the review of the Library service is expected to achieve its savings for this year, with reductions in hours at Roman Road library currently being explored. It was noted that a number of staff are currently at risk and majority of staff with the services are on 90 day consultation.

It was noted, for information, to the group that the visitor centre which is currently located at Blackburn central library is to move to Blackburn market.

Members were updated that the community centres transfer has been delayed due to complexities and in ensuring we give ourselves time in getting it right the first time. Both Mill Hill and Bangor Street which are multi-occupancy buildings adds additional complexities and therefore due to complexities transfers here have been temporarily suspended for further consideration.

The Executive Member informed the committee that the Council would still continue to own and support the structural maintenance of buildings and in order to support the volunteers a small core group of staff within the community assets team will be maintained. The volunteering groups would be able to get their own insurance once transfer has completed and we would be working with the volunteers re insurance and licensing agreements, of which some were in place with just sign off from Legal Services required

Members were informed that the portfolio is maintaining a close eye on income from services e.g. KGH and Leisure centres. King Georges Hall has performed better over the Christmas and New Year period however due to the difficult economic time there was a still pressure here. Blakeys again due to economic times was also under pressure, but has a good core trade and more was being done to increase income for example; hiring out to private party's.

#### Adult's Portfolio

The Executive Member informed the Committee that the TUPE contracts remains a red and updated that the first organisation would be signing very shortly and negotiations are still ongoing with the other organisations.

The Executive Member updated the Committee that "ambers" will continue to be monitored.

The Head of Service Families, Health and Wellbeing informed the Committee that the additional savings were being made within the overall Adult Social Care budget via the Supporting People and Community Commissioning budget.

The Executive Member was positive that the Adult Social Care portfolio would achieve a balanced budget for 2011/12 as its over-achieving in other parts of the budget.

## **RESOLVED –**

- 1) That the Transformational Agenda updates for the Culture, Leisure & Sport, Children's and Adult Portfolios be noted.
- 2) That the BSF budget to be shown alongside the overall Children Services portfolio budget.
- 3) That the Committee does not to add any additional pressures/ demand on Children Services staff over the next couple of weeks due to the full OFSTED safeguarding inspection.
- 4) Executive Member for Children Services updated the Committee:
  - Darwen Vale High School to open 1<sup>st</sup> June
  - Witton Park High School to open 20<sup>th</sup> August
  - Blackburn Central High School to open 6<sup>th</sup> August
- 5) That the CLS Executive Member updates the Committee at the next meeting regarding safeguards to transfer of community centres to volunteers.
- 6) That at the next meeting the overall budget for each of the portfolios to be supplied in addition to the Transformational Budget RAG reports and for Executive Members to report on overall portfolio budget position.

## 28 **Dementia Presentation**

### **Introduction**

The Strategic Director for Mental Health Services (NHS Lancashire) and Dr Ian Leonard (Consultant Psychiatrist NHS Lancashire) led a presentation on Specialist Dementia Care in Lancashire. They advised the Committee that there were a series of key areas they wished to cover in the presentation: Namely;

- The context of the consultation
- The vision
- The case for Change
- The current range of services across Lancashire
- Future Plans
- Consultation
- Timescales
- And finally an opportunity Questions?

The Committee were reminded that the current consultation was not going to be a continuation of the original consultations that were done on Mental

Health Reconfiguration several years ago and the reduction in beds across a series of sites. There was an explanation that although dementia was part of those proposals it was not at the forefront. It was also emphasised that the current dementia consultation was not a continuation of the Meeting Patient Needs consultation that some Members of the Committee had previously been involved in.

### **Which consultation?**

Members were also advised that in simple terms NHS Lancashire were doing some retest work, consulting this time specifically on changes that have been a result of a totally different story about dementia: After 2006, there had been the Dementia UK report, National Dementia Strategy, Call to Action on anti psychotic drugs, a number of Patient Association and Alzheimer's Society reports. All these pointing to a fundamental change to the system, which have been happening in response to all these documents.

Members were advised that this has fundamentally altered the presumptions the 2006 consultation had around dementia care and why specifically it now requires re-thinking as an issue, and that the changes to services since 2006 in response to the expected change of direction have created a much greater focus on community provision and resulted in a real reduction of use of specialist mental health beds for dementia. It was explained that although there were significant challenges with an ageing population. Dementia is now a national and local priority and significant successes have been achieved in developing community services, reducing the need for patients to actually go into hospital.

The Vision was explained as "Helping people with dementia and their carers to live well with dementia, no matter what the stage of their condition". The outcomes of which would be; helping more people, earlier and better outcomes, closer to home, "working together" on needs led services (not determined by age). "Working together" was further explained as needing to work as a whole system across agencies and sectors, this includes the carers, as we know that in isolation outcomes are affected.

The following statistics were presented in explaining the Case for Change:

1. 18,000 people in Lancashire with Dementia.
2. These are expected to rise to 25,600 by 2025.
3. Supporting people with dementia at or close to home provides better outcomes.
4. Alzheimer's Society Survey - 83% Carers stated that it was very important for people with dementia to stay at home.
5. Mental health resources for dementia care have been focused on in patient services for a small number of patients.

As a result of this 4 key areas have been targeted:

1. Good quality early diagnosis, intervention and ongoing support.
2. Living well with dementia in care homes and the community.
3. Reduced use of antipsychotic medication.
4. Improved quality of care in general hospitals.

### **Service improvements**

It was explained that although there are now a range of Lancashire Community Service Improvements in place, NHS Lancashire now need to implement this consistently in all areas. The Service improvements were described as follows:

- Dementia is Everybody's Business.
- Memory assessment services and post diagnostic support (There are six across Lancashire).
- Intermediate Support Teams.
- Care Home and Hospital Liaison Services.
- Community mental health teams.
- Tailored support for carers.
- Dementia Advisors and dementia cafes.

Expanding on the service improvements the following examples of good practice were mentioned:

- **Integrated resource centres:** These are integrated services offering open access to a range of social care, health and voluntary sector supports
- **Intermediate Support Teams:** This was explained to Members as home treatment offering rapid response and support. It was explained that there is some improvement to be made in that some services are available 7 days, yet NHS Lancashire are working towards all of them operating on that model. Currently 2 out of the 5 operate from 8am until 8pm and work closely with adult crisis teams and home treatment that are 24/7, however this needs to be applied consistently across all of Lancashire.

A series of future improvements were mentioned, namely:

- Access to specialist dementia assessment beds provided at the Harbour by spring 2014 (30 beds)
- Advanced Care beds provided at the Harbour (36 beds) by spring 2014 and Pennine Lancashire (36 beds) by Oct 2013
- Extend intermediate support teams to a seven day service
- Strengthen nursing home and hospital liaison.\*

\*A tangible example of this in Pennine Lancashire was described as the Nursing and Home Liaison team who have reduced antipsychotic prescriptions by 60%.

In respect of the Commissioning Review of community services some examples of good practice were quoted such as respite beds and services

for diverse communities and the integration of community teams. It was helpful at this point for the Committee to be advised on some specific terms: those being;

- *Dementia specialist* - highly specialist, for symptoms from a person's dementia, small numbers, about assessing and stabilising people who have quite unusual and specific high level needs as part of their dementia.
- *Advanced care* – a very small number of people where there is clearly a problem in relation to their mental health, the reason for their admission, but there are complexities around their further level of frailty, NHS Lancashire would usually consider these older adults but will now have a broader remit for these beds - people with complexity of dementia / depression may well be admitted to these local resources (Pennine Lancashire).

At this point an overview of the **interim operational timeline** was given:

- On-going until March 2017.
- There will be a number of closures and new units opening.
- Some will travel further where admission required (bespoke travel arrangements will be required)
- Improvements to community mean fewer people admitted.

### **Consultation Timeline**

- 12 - 16 week consultation
- Commencement – spring / early summer 2012
- Specifically seek views:
  - Improvements to community services
  - Implementation
  - Access and support for those admitted and their families and their carers
- Independent analysis of views will be undertaken by University of Central Lancashire.
- Draft outcomes report to be presented to each of the respective Overview and Scrutiny Committees for Blackpool, Lancashire County Council and Blackburn with Darwen, along with other stakeholders.

### **Summary**

- Local commissioners to build upon improving community services
- Dedicated, fit for purpose and highly specialised hospital based care
- The number of people who need to use this service would be very small – up to 30 at any one time
- Improved bespoke tailored Local Care and Support
- Consultation to seek views - at this point in the final summation it was explained that NHS Lancashire want to seek views on the

consultation and nor pre-empt what users and their carers will require.

**RESOLVED –**

- 1) That NHS Lancashire and Lancashire Care Foundation Trust be thanked for their presentation.
- 2) That a Dementia task and Finish Group be convened prior to the next C&H OSC meeting.
- 3) That Pauline Walsh (Age UK BwD) and Patricia Rolph (BwD CT+) to be invited to the Dementia Task and Finish group meeting.
- 4) That Lynette Harwood (BwD CT+) supplies information on the Nursing Home Liaison Team and their impact on reducing in patient admissions to the Task and Finish Group.
- 5) That Debbie Nixon (BwD CT+) provides a detailed response to Councillor Davies' questions and to supply the answers to the Task and Finish Group.

29 **Work Programme update and future direction**

The Committee discussed the work plan for the rest of the municipal year for each of the three Task and Finish Groups.

**RESOLVED –**

- 1) That all three Task and Finish Group Chairs agree work plan against original work programme.
- 2) That all three Task & Finish Groups present their final report and recommendations to the next Committee meeting.

Signed.....

Chair of the meeting at which the Minutes were signed

Date.....