Public Document Pack



Overview and Scrutiny Committee Minutes

The minutes of the Overview and Scrutiny Committee meeting of Wyre Borough Council held on Monday, 30 July 2018 in committee room 2, Civic Centre, Poulton-le-Fylde.

Overview and Scrutiny Committee members present:

Councillors John Ibison, Ian Amos, Rita Amos, Howard Ballard, Colette Birch, Rob Fail, John Hodgkinson, Patsy Ormrod, Julie Robinson, Ron Shewan and Evelyn Stephenson

Apologies for absence:

Councillors Kerry Jones, Emma Ellison and Matthew Vincent

Other councillors present:

Councillor Brian Stephenson

Officers present:

Peter Foulsham, Scrutiny Officer

Others present:

Dr Tony Naughton, Chief Clinical Officer, Fylde and Wyre Clinical Commissioning Group Mark Britton, Communications Manager, Fylde and Wyre Clinical Commissioning Group

No members of the public or press attended the meeting.

15 Declarations of interest

None.

16 Confirmation of minutes

It was agreed that minutes of the meeting of the committee held on 25 June 2018 be confirmed as a correct record.

17 Lancashire County Council Health Scrutiny Committee 2017-18

Councillor Julie Robinson presented a report to advise the committee about the work of Lancashire County Council's Health Scrutiny Committee during 2017/18.

Councillor Robinson, Wyre Council's co-opted member of the committee, drew councillors' attention to Lancashire County Council's Health Scrutiny Committee's Work Programme 2018/19 which detailed the dates and topics to be scrutinised through the year. She asked that all members of the Overview and Scrutiny Committee be sent details of the Work Programme in case they wished to ask any questions, which they could do through her.

It was agreed that the report be noted.

18 Overview and Scrutiny Work Programme 2018/19

The Service Director Performance and Innovation submitted a report updating the committee about the delivery of the 2018/19 Overview and Scrutiny Work Programme.

Additional information was presented to the committee on a number of other matters:

- (i) The Corporate Management Team had considered proposing some amendments to the policy on Corporate Complaints but, following best practice advice from the Ombudsman's Office no significant changes would be made.
- (ii) The Neighbourhood Services and Community Safety Portfolio Holder, Councillor Roger Berry, provided a written note about the new arrangements for Neighbourhood Policing that were proposed to come into effect in the autumn, as follows:
 - Fleetwood and Garstang Police Stations will be retained. It is planned to use rooms at the Civic as a base to replace the Bungalow which has been vacated.
 - 2. There will be 6 Community Safety Police Officers, 1 based at Garstang, 1 possibly 2 based at Poulton and the rest at Fleetwood. They will be supported by Police Response Teams consisting of 2 Sergeants and 17 PCs based at Fleetwood and 2 PCs based on Garstang. In addition there will be some 15 PCSOs but it has not yet been decided where they will be assigned to. There will be 2 Early Action Officers who will work with various agencies including our Community Safety Team and hopefully they will be based at the Civic Centre.

The Response Teams will mostly work from cars and vans and from my prospective we will have to monitor how this works out for the areas around Preesall and Knott End which are some distance from the bases and the same can be said to some extent for Poulton certainly until the Civic base is reopened.

Members of the committee commented that there was a lack of information provided so it was not possible to come to a firm view about whether the proposals were favourable or not. It would have

been more helpful had more detailed figures and trends been provided. Anecdotal evidence suggested that the figures quoted indicated an increase in the number of officers but it was not known whether this would translate into more officers on the ground.

It was agreed that the matter should be investigated in more depth by the committee once the new arrangements had been in place for twelve months. A report on the implementation of the arrangements and their impact would be requested for autumn 2019.

- (iii) Blackpool Council's Adult Social Care and Health Scrutiny Committee's Work Programme 2018-2019 was circulated to members for their information.
- (iv) The Corporate Management Team had recently agreed to scrap the capital bids process, which would be replaced with the submission of ad hoc business cases. It was acknowledged that capital bids had not routinely been presented to the committee for several years.

The question was posed as to whether the ad hoc bids would routinely be submitted to the Committee, but it was agreed instead that members would individually keep a close eye on the Schedule of Executive Decisions and bring any such matters to the committee for closer examination if necessary.

(v) A recent Audit Committee meeting had considered a report on the Statement of Accounts. There were items in the report which gave rise to questions that the Overview and Scrutiny Committee reasonably might wish to raise. It was agreed to consider the Statement of Accounts in greater detail at the next meeting in September.

It was agreed

- (i) That a report on the implementation of revised Neighbourhood Policing arrangements in Wyre be considered by the committee in October 2019.
- (ii) That an item on the council's Statement of Accounts be considered at the next meeting on Monday 10 September 2018
- (iii) That the report be noted.

19 Update on health and care developments

Dr Tony Naughton, Clinical Chief Officer, Fylde and Wyre Clinical Commissioning Group (CCG), made a presentation to update the committee on local health and care developments. He was accompanied by Mark Britton, Communications Manager, Fylde and Wyre CCG. Dr Naughton's Powerpoint presentation is attached to these minutes.

In response to a question Dr Naughton said that, despite the best efforts, it

was impossible to provide GP appointments in evenings and at weekends in all practices – there simply were not the staff to provide such a service. There were only a limited number of GPs who were willing to do that, although out-of-hours was provided in three locations within the CCG's area, with the possibility of one or two others starting in the near future.

Social isolation remained a challenge, although the CCG's section in the council's Life in Wyre survey did assist in identifying some isolated individuals. The 'Just Good Friends' scheme was working well in Fylde and Dr Naughton was also made aware of the work of the 60+ Community Centre in Queensway, Poulton-le-Fylde, which had proved very successful.

When asked about the mid- to long-term staffing of the NHS, a situation likely to be made more difficult by Brexit, Dr Naughton confirmed that there had never been a national workforce plan. The NHS relied on bringing in many doctors and nurses from across the world, and there was a general trend to lose full time staff to be replaced by part-time staff, which made the situation still more challenging. In addition, 20% of nurses successfully trained in the UK did not go on to take up a post.

A questions was posed about the integration of health and social care in Lancashire. Dr Naughton expressed concern about the scale of the county and said that, in his opinion, dividing it into smaller geographical areas would make it easier to protect health and social care funding in the more rural parts of the county, like Wyre. He anticipated that the demands of Blackpool and parts of the east of the county would be very strong indeed. This was something that the committee should monitor closely.

Dr Naughton informed the committee that there were plans for the Fylde and Wyre CCG and the Blackpool CCG to be jointly managed in the near future. Dr Naughton's post would not be replaced and Dr Amanda Doyle would then take on similar responsibility for both CCGs.

The Chairman, Councillor John Ibison, thanked Dr Naughton and Mr Britton for attending the meeting and for their very informative presentation.

20 MyHomeChoice task group - draft recommendations

Councillor Howard Ballard, Chair of the MyHomeChoice task group presented the task group's report and recommendations.

Concerns were expressed about the very limited scope of the task group's review and the fact that it restricted the impact of scrutiny. Relatively little statistical information had been presented and it would have been more helpful to members of the task group to have received comparative information that showed trends in the demand, supply and availability of social housing.

The task group had identified four recommendations during their meeting, two of which were suitable for submission to the Cabinet for their consideration,

namely,

- (a) That the proposed changes to the arrangements for the allocation and letting of social housing in Wyre via My Home Choice Fylde be supported, and
- (b) That the Overview and Scrutiny Committee receive a report on the implementation of the revised allocation and letting arrangements once they have been in place for twelve months (September 2019)

Eight members of the committee supported the task group's recommendations and three members abstained in a vote.

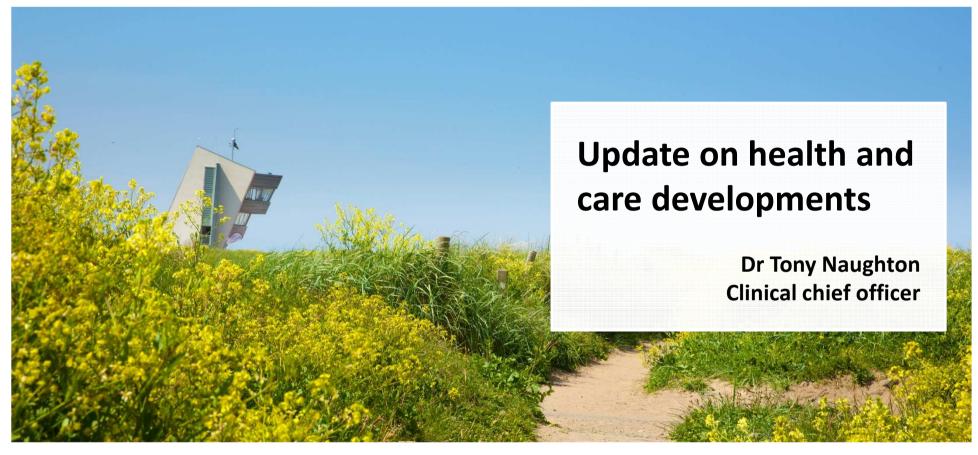
It was agreed

- (i) That the Overview and Scrutiny Committee endorses the draft recommendations of the MyHomeChoice task group, and
- (ii) That the recommendations of the MyHomeChoice task group be submitted to the Cabinet

The meeting started at 6.00 pm and finished at 7.44 pm.

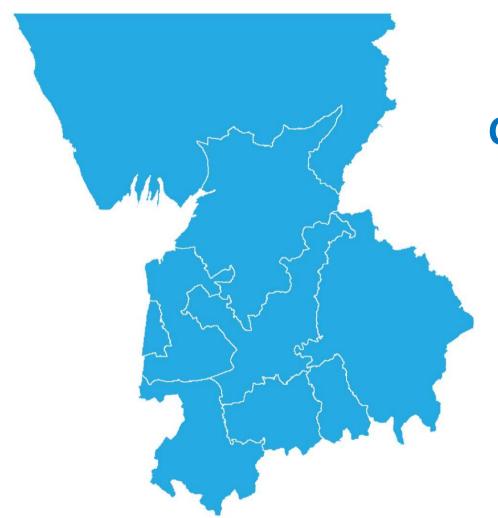
Date of Publication: 1 August 2018







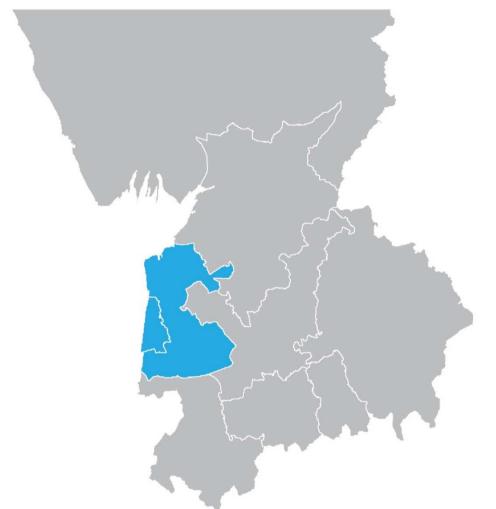




Lancashire and South Cumbria Integrated Care System (ICS)

'Healthier Lancashire and South Cumbria'

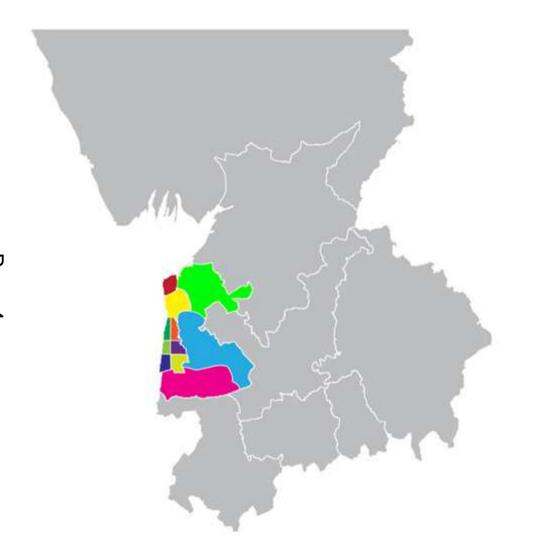
The system is a partnership of NHS and other organisations working to deliver our five-year Sustainability and Transformation Plan.



Fylde Coast Integrated Care Partnership (ICP)

'Healthier Fylde Coast'

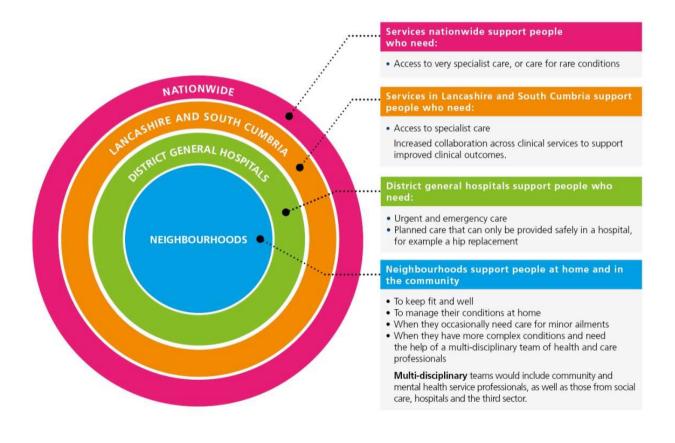
NHS and local authorities formally working together to improve the health and care of the whole Fylde Coast population.



Neighbourhoods

Geographical areas across which GP practices and other health and care services work together to ensure joined-up care tailored to the needs of their local populations (typically between 30,000 – 50,000 people).

What people will see



Clinically-led transformation

- Clinical Senate established to drive our vision forward.
- Brings together a range of professionals to share best practice
 - GPs
 - Consultants
 - Nurses
 - Therapists
 - Public health practitioners.
- Provide leadership, guidance and input.



Healthier Fylde Coast

- 'Healthier Fylde Coast' brings together NHS and council organisations to improve health and care.
- Challenges facing health and care are well documented.
- Making better use of our joint resources is crucial, including staff, services and money.
- We are working together 'to improve the health and care of the Fylde Coast population'.



Healthier Fylde Coast

- Partners so far include:
 - NHS Blackpool CCG
 - NHS Fylde and Wyre CCG
 - Blackpool Teaching Hospitals NHS Foundation Trust
 - Blackpool Council
 - Lancashire County Council
- This builds on and formalises our way of working which has already vastly improved patient outcomes.



How we will work in the future

- A common vision and a single set of goals across all organisations.
- We will do things once to reduce duplication.
- Agreed priorities and joint decision making.
- Four key areas of transformation: Urgent care, mental health, cancer services, and general practice.
- Multi-disciplinary clinical and non-clinical teams will work to common goals.



Healthier Fylde Coast

- Joined-up multi-disciplinary teams are key to helping solve some of the problems we face.
- By working more closely together we will:
 - Improve services, making sure they are sustainable for the future
 - Improve patient experience
 - Support better health and wellbeing
 - Improve the working lives of our staff
- Many exciting development opportunities ahead for our staff.



Supporting the ageing population

- Neighbourhood care teams
- Frailty pathway
- Care homes
- Health coaching roles
- Empowering people and communities

What this means for patients and staff?

For patients and their families:

- More support in community settings to maintain health and independence
- The way care is provided will be easier to understand
- Patients will be supported to manage their own health
- Professionals will share relevant, secure information between services



• For health and care professionals:

- New and flexible roles, development opportunities and increased job satisfaction
- Shared records and increased data sharing
- Improved communication between primary and secondary care
- New technology and improved communication between services to make working lives easier and more efficient



Empowering people and communities #FitterFyldeCoast

- WIN neighbourhood
 - Developed a model of social prescribing.
- Fleetwood
 - healthy eating project for Year 5 children
 - Young Chef of the Year project launched for the second year
- WREN
 - Early development
- Will form part of ICP workstreams moving forward



Most people performing jumping jacks simultaneously (achieved 21 July 2018)



Future of the health and wellbeing partnership

 Restructure the partnership to bring in neighbourhoods



Other developments



CCG assurance rating



Changes to management team

Any questions



This page is intentionally left blank