The meeting commenced at 10.00 am in the Civic Centre, Hartlepool

Present:

Councillor: Carl Richardson (In the Chair)

Councillors: Sandra Belcher and Brenda Loynes

Also Present:

In accordance with Council Procedure Rule 5.2 (ii) Councillor Jim Ainslie was in attendance as substitute for Councillor Sylvia Tempest and Councillor Rob Cook was in attendance as substitute for Councillor Stephen Thomas

Julie Parkes, Associate Director, Out of Hospital Care and Jill Foreman, Senior Clinical Professional, North Tees & Hartlepool NHS Foundation Trust
Maureen Lockwood, Evelyn Leck and Ruby Marshall - Healthwatch Representatives
T Wilson, HVDA
Frank Harrison – Years Ahead Forum
Members of the Public – Sue Little, Stella Johnson and Gordon Johnson

Officers: Jill Harrison, Assistant Director, Adult Services
Jeanette Willis, Head of Strategic Commissioning, Adult Services
Neil Harrison, Head of Service, Adult Services
Denise Wimpenny, Principal Democratic Services Officer

73. Apologies for Absence

Apologies for absence were submitted on behalf of Councillors Paul Beck, Sylvia Tempest and Stephen Thomas.

74. Declarations of Interest

None
75. Minutes of the meeting held on 15 February 2016

Received

76. Matters arising from the Minutes

In relation to Minute 69 and the Committee’s request at the last meeting for information in relation to nursing care provision for under 65s, the Assistant Director reported that the CCG had provided the following information:

- The CCG was supporting 119 Hartlepool residents under 65 who required nursing provision, 24 with learning disabilities, 59 with mental health needs, 33 with physical disabilities and 3 adults receiving fully funded continuing health care support
- Of the 39 places where this care was commissioned, 18 were in Hartlepool and 21 were out of the area.
- Some places where care was commissioned were identified as mental health and learning disability provision whilst others specialised in neurological rehabilitation and some people were being cared for in homes that predominantly catered for older people.

With regard to Minute 70, and the decision taken that the authority’s contribution to the CQC consultation process be provided to a future meeting, the Assistant Director circulated a copy of the Council’s response to the CQC consultation. Members were advised that the consultation was open until 14 March and anyone who wished to participate in the consultation could do so either individually or as an organisation.

Decision

That the information given be noted.
77. **Hospital Discharge Update** *(Director of Child and Adult Services)*

**Type of decision**

For information

**Purpose of report**

To update members of the Adult Services Committee in relation to North Tees & Hartlepool NHS Foundation Trust hospital discharge processes.

**Issue(s) for consideration**

The Assistant Director introduced the report which provided background information to Healthwatch Hartlepool’s Hospital Discharge Project and the action plan that had been considered by the Committee in response to the recommendations.

In reviewing the action plan at the last meeting, a number of issues had been raised regarding hospital discharges which Members wished to address to representatives of North Tees & Hartlepool NHS Foundation Trust. These concerns included delays due to waiting for medication and/or transport, delays while waiting for a letter from a consultant and hospital discharges taking place after 7.00 pm.

The Chair welcomed representatives from the North Tees & Hartlepool NHS Foundation Trust. The representatives provided details of the ongoing work of the Trust and the changes that were taking place to support effective discharge which included the following:-

- introducing changes to pathways currently provided;
- changes to patient flow teams and discharge liaison;
- more communication and support around discharge;
- mapping patients through the system in more proactive manner;
- clinical strategy in terms of how people are supported moving out of hospital;
• reviewing nursing support later in the day, nursing plans, rapid response and community matron support;

• working later hours to avoid admissions to hospital;

• statistical information revealed that a high proportion of individuals could be treated effectively at home;

• Percentage of discharges over different periods excluding accident and emergency:

<table>
<thead>
<tr>
<th>Time Period</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Midnight to 8.00 am</td>
<td>0.86%</td>
</tr>
<tr>
<td>8.00 am to 5.00 pm</td>
<td>62.37%</td>
</tr>
<tr>
<td>5.00 pm to 7.00 pm</td>
<td>24.17%</td>
</tr>
<tr>
<td>7.00 pm to 9.00 pm</td>
<td>10.37%</td>
</tr>
<tr>
<td>9.00 pm to midnight</td>
<td>2.23%</td>
</tr>
</tbody>
</table>

• Transport arrangements;

• Transport providers – NEAS/own patient transport;

• Introduced daily huddles which are working well and extended discharge liaison to make sure discharge is successful;

• Reasons for delayed discharges – whilst some delays may be as a result of transport or medication issues upon examining individual cases some delays were as a result of the planning process that takes place in advance of organising transport or medication.

In the lengthy discussion that followed a number of comments/queries/issues were raised which included the following:

(i) A Member requested that the figures regarding discharges be provided by number as opposed to by percentage.

(ii) In response to a query raised regarding the cost of utilising private ambulances for discharges, the representative advised that whilst this information was not to hand, assurances were provided that the Trust utilised their own transport service where possible. The Trust was currently examining current transport provision to ensure they could respond to the needs of the organisation.

(iii) Various examples of discharges taking place in the early hours of the morning were shared with the
Committee and the impact of such discharges was debated. Views were expressed that there should be a cut off time for discharges to avoid any vulnerability or safety issues.

(iv) In response to concerns that one elderly gentleman had been discharged via taxi in the early hours, the Trust representative advised that where possible arrangements were in place to try to support patients upon discharge by family or friends. However, each case was assessed individually and if it was safe to do so patients may be transported via taxi, the volunteer driver service or by the patient transfer service. The Associate Director for Out of Hospital Care agreed to investigate any individual cases of concern.

(v) A number of concerns were raised regarding the post discharge support arrangements for patients living alone particularly the elderly and vulnerable. The Committee was advised that prior to discharge an assessment was made and patient choice was also considered. If patients expressed a desire to be discharged every effort would be made to accommodate that choice provided it was safe to do so.

(vi) A member of the public raised concerns regarding the cost of utilising taxis for transporting patients, the potential risks as a result as well as the post discharge support arrangements for vulnerable individuals. The representatives reiterated that risk assessments were carried out prior to discharge and grocery packs were also available if the assessment highlighted a need.

(vii) The additional pressures placed on GP’s as a result of the decision to support more people at home and the role of the Rapid Response Team was questioned.

(viii) The representatives responded to further issues raised in relation to the discharge process as well as discharge plans. Clarification was provided on the Care at Home Model which was due to be launched to support individuals with respiratory conditions, the role of the Rapid Response Team and Community Matron Service.

(ix) The importance of assessment of need post discharge was further emphasised and the need to ensure any special needs were accommodated. The representative advised that work was currently ongoing around integrated pathways between hospital and home to
facilitate sharing information and to avoid the need for patients to provide information more than once.

(x) Reference was made to the total number of discharges and the Committee was keen to receive discharge information categorised by age group.

(xi) Concerns were raised regarding the limited support available on wards for patients, particularly those with communication issues. The Committee was advised that there were meal time companions to assist where necessary and there were plans in place to extend visiting hours on the elderly wards to assist with supporting patients in this regard. The Chair queried why the red napkin system, recommended by Healthwatch, had not been implemented. The Assistant Director clarified that feedback from Healthwatch reports would normally be reported through the Health and Wellbeing Board. Disappointment was expressed that feedback in relation to this recommendation had not been communicated to Healthwatch. The representative agreed to explore this and provide feedback to Healthwatch following the meeting. In response to Members’ comments on the importance of sharing information of this type the Associate Director advised that the team were currently working on a paper to summarise all of the initiatives linked to hospital discharge which was currently in a draft format, and would be shared with Healthwatch and this Committee on completion.

**Decision**

(i) That the information given and comments of the Committee be noted.

(ii) That the Trust provide the following additional information following the meeting:

   (a) Details of the figures regarding discharges be provided by number as opposed to by percentage.

   (b) Additional discharge information by age group

   (c) Feedback to Healthwatch in relation to the red flag system.

   (d) Document summarising all initiatives relating to
Following a brief adjournment for a comfort break the meeting reconvened to consider the remaining items of business.

78. The 2015/16 Local Account (Director of Child and Adult Services)

Type of decision

Non-key

Purpose of report

To present to Adult Services Committee for approval the 2015/16 Local Account; a key mechanism for reporting back to citizens on performance in adult social care, and a means of engaging with citizens and consumers of our services around priorities and outcomes.

Issue(s) for consideration

The Assistant Director reported on the background to the establishment of the Local Account which was a key mechanism for councils to report back to citizens and consumers about performance.

The Local Account, attached at Appendix 1, set out the context of Adult Services including the role of Adult Services, aims, challenges, how the budget was spent and key facts about performance. The Local Account presented information in an accessible, simple and consistent format and its style reflected the overriding need to make it meaningful, relevant and accessible to the citizens and users of Adult Services in Hartlepool.

Decision

That the contents of the 2015/16 Local Account be noted and approved for publication.
79. **Supporting People with Hearing Loss** *(Director of Child and Adult Services)*

Type of decision

Non-key

Purpose of report

To seek approval from Adult Services Committee for the updated Supporting People with Hearing Loss Strategy 2016-2019.

Subject to approval, to support the revised strategy being presented to the Health & Wellbeing Board for approval and monitoring of the action plan.

Issue(s) for consideration

The report provided background information in relation to the development of the Supporting People with Hearing Loss Strategy 2016-19.

Various methods of consultation and engagement had been utilised including a presentation in 2015 to the Hartlepool Deaf Centre which provided officers with a forum in which to share progress on the previous strategy and action plan.

With regard to the development of the strategy, a draft strategy and action plan had been developed and shared with Hartlepool Deaf Centre and Healthwatch Hartlepool for comments. The strategy and associated action plan, attached as appendices to the report, would be used to set the benchmark for improvement over the next four years. It was envisaged that the Hartlepool Deaf Centre would provide the forum to support delivery of the strategy and monitor progress against the action plan.

A discussion ensued following presentation of the report during which Members shared personal experiences of the difficulties managing hearing loss. The impact of hearing loss was discussed including isolation issues, and the benefits of teaching sign language in schools was highlighted. It was also suggested that information of this type should be included in Hartbeat.
Decision

(i) That the updated Supporting People with Hearing Loss Strategy 2016-2019 be approved.

(ii) The Committee supported the presentation of the revised Strategy to the Health and Wellbeing Board for approval and monitoring of the action plan.

80. Engagement with Older People (Director of Child and Adult Services)

Type of decision

For information

Purpose of report

To update the Committee on the outcome of an engagement event with older people and action taken as a result, as well as plans for further engagement.

Issue(s) for consideration

The Head of Strategic Commissioning provided background information to the commitment given by the Council to facilitate up to four engagement events per year with older people and to feedback information from these events to the Adult Services Committee for consideration.

The first of these events was held in October 2015. The event was well attended and feedback from those in attendance was positive. The event held on 23 October posed a number of questions to the older people in attendance in relation to social isolation, GP and Community Health Services, accommodation and dementia. The purpose of the questions was to identify a broad range of issues that might affect older people and also to be able to identify themes for discussion at future events.

Details of feedback from the questions together with responses provided by Adult Services was provided, as set out in the report.

It was noted that the next engagement event would be held on 14 March at 2.00 pm and would cover transport, community safety, Hartlepool Now and Ipad related issues.
Members welcomed the events and were pleased to note the approach to public engagement and the Council’s early commitment to the Dementia Friendly Initiative. Compliments and thanks were conveyed on behalf of the Committee to the Adult Social Care Teams for their hard work in progressing initiatives of this type.

The benefits of luncheon clubs were discussed including the various clubs that were available in the town. It was suggested that this information be circulated under separate cover following the meeting. The need to effectively publicise the next consultation event was also emphasised and the representatives in attendance from Healthwatch and the 50 Plus Forum agreed to take this forward.

**Decision**

(i) That feedback from the initial engagement event and the responses provided by Adult Services be noted.

(ii) That the plans for a second event, which Members were invited to attend, be noted.

(iii) That Members encourage older people from their wards to attend future events and contribute to discussions.

(iv) Clarification on luncheon clubs be provided under separate cover following the meeting.

81. **Independent Living Fund Update** *(Director of Child and Adult Services)*

**Type of decision**

For information

**Purpose of report**

To provide the Committee with an update regarding the transfer of funding and responsibilities relating to the Independent Living Fund (ILF) from July 2015.

**Issue(s) for consideration**

The Assistant Director reported on the background to the
transfer of funding and responsibilities relating to the Independent Living Fund (ILF) from July 2015. Details of how the Council had managed the new responsibilities was provided as set out in the report. The approach agreed in Hartlepool resulted in no impact on existing ILF users in 2015/16, through maintaining the status quo in terms of both expenditure and contributions.

With regard to the financial considerations, it was reported that the Council received a Section 31 non-ring fenced grant and was calculated by the DCLG based on the number of ILF users at 30 June 2015. 43 people in Hartlepool were in receipt of ILF at the point of transfer, receiving annual funding of £670,000. The amount transferred by the DCLG in 2015/16 (pro rata for 9 months) was £507,000

Decision

(i) The Committee noted the anticipated ILF funding allocations for the period 2016/17 to 2019/2020 which were not yet confirmed.

(ii) The Committee noted that, if the anticipated allocation was confirmed, ILF contributions would remain unchanged.

(iii) The Committee noted the response to the DCLG consultation and agreed to provide any additional comments.

(iv) That further reports on this issue be received should there be significant changes to the funding allocation for future years that resulted in budget pressures.

82. Annual Complaints Report 1 April 2014 – 31 March 2015 (Director of Child and Adult Services)

Type of decision

For information

Purpose of report

To present the Annual Complaints Report of the Child and Adult Services Department for the period 1 April 2014 to 31 March 2015.
Issue(s) for consideration

The Assistant Director presented the annual report, attached at Appendix 1 which summarised the complaints and compliments received within 2014/15 and provided information to demonstrate the learning that had arisen from complaints and the actions implemented as a result.

In 2014/15, 56 compliments had been received in relation to Adult Services and examples of these were included in Appendix 1 and 17 complaints had been received in 2014/15 which was a slight increase on the previous year when 15 complaints had been received.

Decision

That the contents of the Annual Complaints Report for 2014/15 be noted and that the report be published online.

The meeting concluded at 12:30 pm

P J DEVLIN

CHIEF SOLICITOR

PUBLICATION DATE: 14 MARCH 2016