

Overview & Scrutiny Committee

Monday, 2nd March, 2015

6.00 - 8.20 pm

Attendees	
Councillors:	Tim Harman (Chair), Colin Hay (Vice-Chair), Nigel Britter, Chris Mason, Helena McCloskey, Dan Murch, John Payne, Chris Ryder and Max Wilkinson
Also in attendance:	Councillor Jon Walklett, Councillor Steve Jordan, Councillor Chris Coleman and Councillor Flo Clucas and Ken Dale, Richard Gibson, Rachel McKinnon and Bryan Parsons

Minutes

1. APOLOGIES

No apologies had been received.

2. DECLARATIONS OF INTEREST

No interests were declared.

3. MINUTES OF THE LAST MEETING

The minutes of the last meeting had been circulated with the agenda.

Upon a vote it was unanimously

RESOLVED that the minutes of the meeting held on the 12 January be agreed and signed as an accurate record.

4. PUBLIC AND MEMBER QUESTIONS, CALLS FOR ACTIONS AND PETITIONS

None had been received.

5. MATTERS REFERRED TO COMMITTEE

No matters had been referred to the committee.

6. FEEDBACK FROM OTHER SCRUTINY MEETINGS ATTENDED

Councillor Clucas attended as the representative on the Health Community and Care and Economic Growth O&S Committees. She talked through an update (Appendix A) and gave the following responses to member questions;

- The concern about bringing together a number of disciplines had been raised but the HOSC had been reassured that lessons had been learnt in relation to how to manage a core discipline team, with each one committed to working together and understanding the main objectives.
- The case of Greater Manchester gaining control of health and social care and the estimated £6bn NHS budget had arisen between meetings of the HOSC so this particular issue had not been discussed, but she

would be raising it tomorrow and agreed with the suggestion that a watching brief should be maintained.

- The figures presented on alcohol related harm were linked to respiratory disease so there was no detail as to what form this had taken. She would ask the question.
- She did not have details of A&E waiting times other than those referred to in her update but this covered the Christmas period and therefore did not offer an accurate representation. She would ask for these figures.
- Doctors were being recruited from India and assurances had been given that these were well trained Doctors who could speak a good level of English. No applications had been received for the positions of District Nurses.

The Chairman explained that the NHS Trust had been invited to make a presentation on their vision for the future of the hospital in Cheltenham including (but not limited to) the future of the accident and emergency facility. Andrew North had written on behalf of the committee but the Trust had declined the invitation on the grounds that they felt that they were not in a position to do so at this time and that the statutory responsibility for scrutiny of the Trust sat at County level. Whilst he accepted that this could possibly be a politically difficult time, he had asked Andrew North to express his disappointment that they had declined the invitation. Members echoed the Chairman's disappointment and expressed their hope that the Trust reconsider, as they felt that there were legitimate reasons for wanting to speak to them, not least because they were a large scale employer within the town.

Councillor Murch circulated an update on the 5 February meeting of the Police and Crime Panel (Appendix B) and talked through some key points. There were no questions.

7. CABINET BRIEFING

Councillor Jordan, the Leader, referred members to the briefing which had been circulated with the agenda. In addition to his briefing he explained that the Joint Core Strategy presented the opportunity to look at economic development at a JCS wide level. He felt that Cheltenham was already doing good work in this area and reminded members about the seminar which had been arranged for the 16 March, adding that Mike Redman, Director of Environmental and Regulatory Services, would be producing a briefing after the seminar which would outline any priorities and reiterated that this was separate to the local plan.

He provided the following responses to member questions;

- Winning a referendum on two areas (more than 50% of votes cast must be in favour of the BID and the positive vote must represent more than 50% of the rateable value of the votes cast) was required in order to have a Business Improvement District. Any area of the town, with no limit to the boundaries would be defined where a higher rate would be charged in order that a particular improvement could be made. This was entirely dependent on the businesses in the area and whilst Boots were very supportive, other businesses were less so. The Leader was of the opinion that it would take a few years to build up to a referendum.

- It had not been considered sensible to appoint someone (the Business Improvement District Manager) to a permanent position at this time, given that this was an evolving process and therefore an evolving post.
- Whilst the operational side of tourism had transferred to the Trust, the council had maintained responsibility from a strategic standpoint.

The Chairman welcomed the formation of the Tourism Forum and was pleased to note that their input would be reflected in the strategy.

8. PROJECT INITIATION DOCUMENT (PID)

Ken Dale, the Business Development Manager, introduced the Project Initiation Document for the Cemetery and Crematorium, which was an important issue for the Council. As background to the issue, he explained that the previous project relating to the cemetery and crematorium had been reviewed by a scrutiny task group, who had made a number of recommendations which were noted by Cabinet. Subsequently, a Cabinet Member Working Group was established to look at the longer term issues and its membership included a number of members who had been involved in the scrutiny task group. To date the working group had been involved in reviewing the brief and the process for appointing the consultant, had received regular updates on operational issues and advised on how any consultation should be approached. There were two strands to the project. The immediate focus had been on stabilising the current operational situation. Some positive work had been done and whilst there were still some associated risks, progress had been good. The second strand was the feasibility study. The selection of a consultant had been concluded and a consultant had been appointed, details of which would soon be shared with members.

The Chairman felt that there were two conclusions that would need to be reached by the committee as a result of any discussions; what scrutiny needed to be undertaken on this project, if any, and how did members want to deal with PIDs in the future.

The Business Development Manager provided the following responses to member questions;

- Consideration was given to whether an options appraisal of the service delivery model was required but priority, at this time, was given to stabilising the facilities and agreeing the approach to their future development. The REST project was running concurrently and the cemetery and crematorium fell within this review.
- The Operational Programmes Board (OPB) was in fact the Senior Leadership Team (SLT) rather than it being another term for the Project Board, which included the Cabinet Member. Any verbal updates provided to Executive Board were merely a supplement to the written reports which were produced for the OPB (SLT) every 4 weeks and which were also considered by the Project Board.
- The Project Board had a defined role for providing assurance, currently filled by Bryan Parsons, the Corporate Governance, Risk and Compliance Officer. OPB (SLT) and the Cabinet Member Working Group were also able to support the assurance process by asking critical questions.

- There was an overall time and budgetary constraint, which was set out in the Project Brief and a report would be tabled with the Project Board should any increase be required at any time. This approach had been adopted rather than having any tolerances of 10% or otherwise.
- The initial procurement process had taken longer than anticipated, though a consultant would soon be appointed. Once the appointment was made, the timeline would be revisited and revised as necessary, but there was still an expectation that the feasibility study would be concluded no later than summer.

Some members queried why the wider issue of a service delivery model was being considered in isolation by the REST Project rather than in conjunction with this project.

One member felt that those that conducted services at the Cemetery and Crematorium should be included as stakeholders and that the PID should clearly set out who was involved in each of the groups referenced in the PID (OPB, Exec Board, etc).

Councillors McCloskey and Ryder, both of whom had been members of the original scrutiny task group, spoke in support of the Cabinet Member working group of which they were now members. Both reassured members that the working group was maintaining a close watching brief over the project and thanked the Cabinet Member for the open and transparent way in which he was sharing information with the group. They also thanked staff at the cemetery and crematorium for their hard work in delivering some of the recommendations made by the task group.

The Committee was satisfied that the Cabinet Member working group was working well and therefore did not see any requirement for additional scrutiny of this project. They also concluded that consideration would be given to PIDs in the future as a means of assessing how it wished to scrutinise a particular project. The Business Development Manager explained that there were approximately 40 projects in progress at any one time and suggested that it would be sensible for the Committee to focus on high value, high risk projects. He would send details of the criteria used to define a major project to the Lead Members for scrutiny.

The Chairman thanked the Business Development Manager for his attendance.

There were no recommendations.

9. DEVELOPMENT OF THE CORPORATE STRATEGY 2015-16

Richard Gibson, the Strategy and Engagement Manager, introduced the draft Corporate Strategy 2015-16 action plan. He referred members to item 4 of the discussion paper which posed a set of questions for the committee and advised those members that had not been involved in the process before, that this was their opportunity to provide input before it went to Council on 30th March for approval. This was an important document which set out a priority list of actions for 2015-16 and a performance framework of milestones and measures. The current strategy formed part of a five year plan which has now come to an end and this was seen as an opportunity to start afresh and reduce the number of outcomes from nine to four. The document includes background information,

which sets out what the council wants to achieve and why, as well as who was responsible for delivery and measuring range of direct service measures and outcome measures.

The Strategy and Engagement Manager and the Leader of the Council gave the following responses to member questions;

- There are no specific actions identified for improving air quality. He would consider whether there was anything that could be captured but not everything could be included and it was more than likely that this was covered in the Local Transport Plan.
- The sections on measuring performance will be updated before Council. It was likely that most of this information was already in the system. The council would not be doing a piece of work in an area where a positive difference could not be achieved.
- The context section of 'Cheltenham's environmental quality and heritage is protected, maintained and enhanced' would be amended to include a reference to the areas designated as Sites of Special Scientific Interest.
- This corporate strategy only covers a period of 12 months, given the current position in relation to 2020 vision and the upcoming general election, etc, but the vision statement was longer term.
- The corporate strategy does not include everything that the council is doing. It focuses on the key projects and activities where we are intensifying our activity to deliver the outcomes.
- CBC has committed itself to place-making, as it has a democratic responsibility to try and influence those that that can help deliver better outcomes for residents of Cheltenham.
- The corporate strategy, JCS, Local Plan and Tourism Plan needed to mesh together and present a coherent message for Cheltenham.
- The reference to reducing the demand for social prescribing related to patients presenting at GP surgeries with non-medical needs (housing, financial, legal issues, etc) and being referred onto the relevant providers. A group of providers had been bought together and this approach will be evaluated as part of a county-wide evaluation of different models.

A member felt that the vision statement should describe what sort of place we wanted Cheltenham to be rather than how we wanted to act. He felt that this was a missed opportunity to promote the town to those looking to live, work, study or travel to the Town.

The Strategy and Engagement Manager asked that members contact him directly with any further queries or comments.

The Chairman thanked the Strategy and Engagement Manager and Leader for their attendance.

There were no recommendations.

10. INFORMATION SECURITY POLICY

Councillor Walklett, the Cabinet Member Corporate Services, explained that it was a requirement of the council's connection to the Public Services Network, that there be an Information Security Policy in place. Since the formation of the shared service with Forest of Dean District Council work had been ongoing to

develop a Joint Information Security Policy and this had recently been adopted by the FoDDC. The policy would be tabled for adoption at Cabinet on the 17 March and this was an opportunity for O&S to make comments as necessary. The risk of not adopting the policy was that this would represent a failure to comply with the Data Protection legislation, which would in turn, put the PSN at risk.

The Cabinet Member Corporate Services, along with Bryan Parsons, the Corporate Governance, Risk and Compliance Officer and Rachel McKinnon, the Business Relationships Manager, gave the following responses to member questions;

- The impact of the risks outlined in the risk register of the report, were assessed against the scorecard, which took account of a number of factors and whilst this was subjective, he reassured members that 3 was an appropriate score. A detailed risk assessment was undertaken as part of the PSN process, which resulted in 200 plus pages and a large amount of mitigation had resulted in a lower score. He was happy to meet with members, as he had when this was originally discussed with the ICT Working Group some two years ago to explain the rationale.
- ICT were not involved with physical security of the CBC buildings beyond the issue and management of the swipe access control cards. Staff were regularly reminded that they should prevent tailgating and challenge anyone not displaying their ID/access card.
- Staff that were not based here and/or worked for other organisations (Ubico, Trust, etc) but who were here on a regular basis (1-2 times a week at least) would be issued with an access card. Those that accessed the building less than this would be issued with a visitor access card or escorted around the building by a member of staff.
- The Police had raised their risk level to severe and there were ongoing security discussions about what could be done to help protect them. At the moment 22 police officers had been issued with access cards and these were cancelled and reissued as necessary.
- The ICT Shared Services is the lead organisation responsible for the production of and compliance with the policy which applies to all ICT users on the network. Any employee non-compliance would be reported to the Joint Security Working Group and HR or the Standards Committee if this resulted in a breach by Members'.
- Each partner organisation was responsible for ensuring compliance with the policy and in particular the appendix that related to their own local arrangements, PSN access would be withdrawn if they were not compliant. The use of ICT partners had actually reduced the risk to this council because additional skills and resources were available.

One member felt that there was a risk that the implementation of onerous security measures could result in people finding ways of working around them and as such, any security measures should not be too arduous.

The chairman thanked the Cabinet Member and Officers for their attendance.

Upon a vote it was unanimously

RESOLVED that the Information Security Policy be recommended to Cabinet for approval and adoption by all CBC ICT users.

11. UPDATES FROM SCRUTINY TASK GROUPS

The Democracy Officer provided an update on the progress of each of the task groups.

The Cheltenham Spa Railway STG were scheduled to meet with representatives of National Rail and First Great Western early in March, with the aim of getting feedback on the Western Route Study submission which was made by the Council. The group then planned to look at transport links to and from the station before starting to draft their final report. They would be involving the relevant Cabinet Member and envisaged being in a position to table the report with O&S in June or July.

The Cycling and Walking task group continued to meet on a monthly basis to work through their work programme and currently anticipated that their final report would be tabled at the June meeting of the committee. Councillor Wilkinson, as Chairman of the task group, advised members that good progress was being made, with the group having met with a number of people including Chris Riley from Gloucestershire Highways Agency.

The recommendations of the Public Art Governance task group, which were agreed at the last meeting of the committee, were noted by Cabinet on the 10 February. A further report would be taken back to Cabinet on the 17 March and a review by the Overview and Scrutiny Committee had been scheduled on the committee work plan for February 2016.

The recommendations of the Members' ICT policy task group were noted by Cabinet at their February meeting. A further Cabinet report was as yet to be scheduled on the forward plan and a review had been scheduled on O&S committee work plan for February 2016.

12. REVIEW OF SCRUTINY WORKPLAN

The Democracy Officer referred members to the work plan which had been circulated with the agenda.

She explained that dates of meetings beyond June 2015 would be agreed at Council in March and would then be added to the work plan. Upcoming items had been added to the 'items for future meetings' section and the work plan would be populated in due course.

Members were advised that should an all-member seminar be arranged regarding shared services, as was currently being discussed, then the 2020 presentation from the Chief Executive would likely be cancelled.

13. DATE OF NEXT MEETING

The next meeting was scheduled for the 7 April 2015.

14. BRIEFING NOTES (FOR INFORMATION ONLY)

The information contained within the briefing note was for information only and not for discussion but members were reminded that they should contact the relevant Officer directly with any comments or queries.

Tim Harman
Chairman

Health Care Scrutiny Committee January 13th 2015

The pre meeting started at 0930. The Chair announced that Points West would be filming the meeting.

The following items were discussed:

Minutes and relevance to the meeting particularly A&E and Serious Incident status;

Consensus meeting and a Statement by all the Chairs following a meeting prompted by the December extraordinary meeting of the scrutiny committee;

Performance;

Re-ablement.

Formal Scrutiny Meeting

Minutes agreed for each earlier meeting.

The CCG Chair gave a brief report. The Health Chairs had been asked to come together and discuss the situation in relation to the press statements and Incident status. They had met and draft a statement, which was within their report. The meeting had taken place on 31st December and had lasted two and a half hours. There had been an open and frank exchange of views. All Chairs had attended, together with Cllr Dorcas Binns, Gloucestershire County Council and SWAST representative. All representatives were able to have their say.

The meeting had not been easy, but there was a recognition that they faced a huge challenge in taking responsibility for the patient care system in Gloucestershire. There would be a full report on their meeting and actions to follow from it, at the March committee.

They recognised that there needed to be engagement and consideration across all organisations of the issues and, if things are not happening there has to be an escalation to the next level.

The pace of change meant that they had to be up to speed in relation to communications and not engage with media without all organisations being aware.

The Strategic Forum is being reinvigorated and SWAST will be joining. All organisations have committed to work together.

The Trust Chair was confident that they could work together and agreed with what Helen had said. She was confident also that there would be no repeat of the December issue.

The Strategic Forum would work harder and there would be developed a shared risk assessment.

SWAST

The service is pleased to be joining the Forum. It feels there needs to be an understanding of the perceptions of the real situation that the NHS is in and a good example had been a discussion about staff recruitment and staff moving from one organisation to another. A lack of appropriate training was coming through however. Problems in relation to working together need to be shared. GCCG is supporting the training and transfer of Emergency personnel. SWAST felt there was a need to ensure that they were all working together as a Health/ Social Care community.

Issues:

Attracting staff is a problem at national and local level;

There will be a report to the next meeting with updates.

I asked whether middle management and senior management had bought into the strategic ideas and working together. Each organisation responded as follows:

Chair GCCG, said they would look at this in the Strategic Forum and report back in March.

SWAST agreed and mentioned the 10am daily call. The call brings all organisations into the loop and helped partners to understand pressures.

I asked whether that led to 10.05 action. They agreed action needs to follow. The call.

SWAST indicated that there were constructive challenges in the calls; challenges happened throughout the day. Organisations were working hard to make things happen.

A question was asked about trends and whether they were being followed in relation to statistical analysis that could be carried out and inform actions.

The CCG Chair indicated that demand figures were increasing and they needed to be managed as best they can.

The meeting then considered a presentation on re-ablement. There was a pathway and for each of the three areas and a time set aside for completion.

Figures were:

Assessment of service to decide how a patient might benefit from re-ablement - 4 days maximum;

Physical Rehabilitation - up to 6 weeks;

Social Rehabilitation - from 2-6 weeks.

One issue that was highlighted was a case study that had been done on a lady who had been discharged from hospital. Upon returning home, it became obvious that she could not manage. Her family was extremely upset. Following an in-home assessment, she was re admitted to hospital that night.

There was a discussion about re-admissions. The figures presented were:

Re admissions per month 30

Numbers still at home 91 days after service 71%

Deaths had to be taken into account!

It was noted that re-admissions can be for other problems, for example chest infections.

Mental health issues, which can be difficult in terms of re-ablement, were raised. The committee was advised that the service is available to anyone on demand.

Staffing

Recruiting District Nurses was a difficulty and vacancies are often more than would be risked. Other nursing skills are brought in to complement the service.

Occupational Therapy referrals are taking time - 28 weeks at county level.

Direct payments

Some clients of the service want cash managed for them. In one area, there is only one choice of provider and this is seeing looked at as it may stop people from using the service.

A question was asked as to what help was available to encourage people to take on DPs themselves.

Agencies are expensive for the hourly rate.

They will look at this.

Turning Point Drug Rehab

Figures are not as good as expected. There are concerns about the organisation. The targets are set locally, rather than nationally. TP is on notice of re tender as the contract is up in 18 months.

Performance

Incident status. The anticipation is that the service will be back to normal this week (Jan 14 onwards).

Concerns that were discussed included breast cancer, where a specialist has now been recruited; , cancelled operations as a result of the surge in attendance, Harmony 111 and whether ambulance callouts have increased through people calling the service; , staffing at registrar level and lower.

We were told that there is to be a recruitment exercise in India for doctors. Emergency medicine is not attractive as a career. Nationally there is a shortage of some 700 middle range doctors. There appears to be a reluctance to move to the Cotswolds.

The discussion then went to the Christmas period and the current situation.

Christmas

On a 4 day bank holiday 330 admissions would have been expected.

Actual number. 390

Problem is in getting patients out of hospital. Currently 90 patients are awaiting discharge who are medically fit. Resilience of the service depends on the number appearing in surges at specific times.

They will cancel elective surgery but would prefer not to.

Christmas statistics:

Ambulance service saw a 37% increase on 27th December compared with last year.

Out of hours service 650 presentations.

Expected at out of hours 400

Single point of access expected 120

Actual 170

All beds were in use. None mothballed.

Harmony 111 expected call level 11000

Actual call level 16000

GP numbers also increased

Admissions up by 3 times normal rate

Questions then followed about the kinds of patients presenting. These were: complex needs of the elderly, chest infections had increased and flu was hitting 50 year olds in large numbers. Major ailments were dealt with in hospital. Minor ailments were dealt with elsewhere. There is an increase in respiratory conditions.

Hubs

Gloucestershire has 19 Hubs, designed to enable older people to access fitness training such as yoga and social events and companionship to combat isolation. Of the 19, and in spite of the higher population, Cheltenham has only one such facility, Tewkesbury two, Gloucester 6, FOD 2, Stroud 2, Cotswolds 5, Lydney 1.

In Cheltenham there seems to be some reluctance by RSLs such as CBH to house them.

Respiratory Care is a Priority

Latest figures as follows:

Asthma 40,000 cases

460 unplanned admissions with 1526 bed days in hospital

COPD 10,000

1K unplanned admissions 7400 bed days

Focus of attention:

Asthma because of research paper just published which looks at treatment, care, use of inhalers and so on.

Deprivation absolutely plays a causal part in some cases.

County COPD

COPD at all ages higher than average England number

Gloucester, Tewkesbury and Cheltenham all significant pockets

Forest of Dean is highest then CNM

Asthma register across all GP practices 6.6% nat average is 6%, so this is significantly higher

Cheltenham and Gloucester top the list

People presenting later with deprived areas not accessing services: respiratory, hip, lung disease and cancer

Cheltenham smoking rate at England average, but high for county

Young women growth area for smoking

Respiratory annual cost £50m in the county

Looking at reducing spend by bulk buying and giving each practice its budget

Generic rather than commercial brands will be used, all of which are NICE approved – tried and tested

Heavy pollution is also a factor. Cheltenham could do something here

Cheltenham major issues:

Alcohol related harm

Smoking

Premature mortality COPD

Premature mortality Stroke

Gloucestershire has seen 36,000 smokers stop smoking since 2001

2300 this year so far

There is work going on in schools – 7 have been visited to date of meeting

The Police and Crime Panel meeting on 05 February 2015 centred around two things: an update on the Safer Cyber initiative and the agreeing of the Gloucestershire Police Precept.

Safer Cyber

A presentation was given on Safer Cyber, the sixth priority in the Police and Crime Plan. It was a progress update as well as giving some information around the governance of this work. Glos Police have been involved in a number of EU funded initiatives to help secure the Cyber safety of both the residents and businesses in Gloucestershire. This included Cyber Impact Events and training of officers in the prevention of Cyber Crime.

A Digital Investigation Governance Board has been established to develop a plan covering the 6Ps Framework. The 6Ps being: Protect, Pursue, Prepare, Prevent, Pre-event positioning, Post event.

There was also an update regarding a project between the Constabulary, the University of Gloucestershire, and South Gloucestershire and Stroud College to create a Green Cyber Security Training Centre and Conference Centre. This is to help bridge a skills gap in the County as it was assessed that there was a 66% gap between the current Cyber Security Skills and where the business need was. It was stressed that this would be a good opportunity for local young people as Cyber Security is a well paid and in-demand skill set that could lead to a good career.

There was also an initiative by the Constabulary called the Gloucestershire Safer Cyber Forum for local businesses to share alerts and warnings that could help other members be prepared for future cyber threats.

Police Precept

The Commissioner stated last year, when arguing for a 1.9% increase, that he had committed to not raising the precept this year. So he produced a budget on that basis. He did use the caveat of saying unless something came up that he did not know about. He outlined the Government's future position on police funding and set out what will happen if the budget remains the same. There will be a reduction in Police Officers and Officer recruitment will be on hold from 1 April 2015. The reduction in numbers will mainly be due to retirement. The Commissioner stated that he was confident that the Constabulary will rise to the challenge within these difficult financial circumstances.

The Commissioner asked the Chief Constable to contribute to the debate, and she stated while the budget was sound a further increase of 1.9% would reduce the deficit and allow some priorities to retain their current level of funding.

There was a good debate around whether or not to ask the Commissioner to revise his budget in light of a higher precept or to accept the budget and for the Constabulary to find ways, other than raising taxes, to ensure the work is done.

There was a motion to veto the budget in light of raising the precept, but that did not pass. So the no increase in precept was accepted and the Panel requested that the Commissioner consider alternative ways of reducing the savings.

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