

Minutes of a meeting of the Health and Social Care Overview and Scrutiny Committee held on Thursday, 28 September 2023 in Committee Room 1 - City Hall, Bradford

Commenced 4.30 pm
Concluded 7.45 pm

Present – Councillors

LABOUR	CONSERVATIVE	BRADFORD SOUTH INDEPENDENTS
Jamil Humphreys Ahmed Godwin Lintern Mitchell	Coates Nunns	Clarke

NON VOTING CO-OPTED MEMBERS

Susan Crowe	Bradford District Assembly Health and Wellbeing Forum
Trevor Ramsay	i2i patient involvement Network, Bradford District NHS Foundation Care Trust

Observers: Councillor Ferriby, Portfolio Holder Healthy People and Places

Councillor Jamil in the Chair

19. DISCLOSURES OF INTEREST

No disclosures of interest were received.

20. MINUTES

Resolved –

That the minutes of the meetings held on 21 June and 27 July 2023 be signed as correct records.

21. INSPECTION OF REPORTS AND BACKGROUND PAPERS

There were no appeals submitted to review decisions to restrict documents.

22. REFERRALS TO THE OVERVIEW AND SCRUTINY COMMITTEE

There were no referrals received by the Committee.

23. SEXUAL HEALTH SERVICES

Local authorities are responsible for providing integrated sexual health (SH) services to their residents. While some decisions about provision should be based on local need, there are specific legal requirements ensuring the provision of certain services which are set out in the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013.

Previous reports on sexual health services were presented to this committee in February 2020 and September 2021. The last report was about re-procurement of the services, and a new contract is in place since April 2023. The report of the Director of Public Health (**Document “H”**) updated on current commissioning arrangements, performance of sexual health services and key challenges for the next five years.

The Senior Health Protection Manager was in attendance and with the invitation of the Chair gave a detailed summary of the report.

A Q&A session ensued:

- Information was sought on the statement “exploring potential options for increasing funding for 2024-25”?
 - The budget remained unchanged despite inflation leading to a 14% reduction between 2015 and 2021 only. Services were facing increasing living costs pressures that, without increased funding, may reduce service delivery in the medium to long term. Public Health would be exploring potential options for increasing funding to the SH services for 2024/25;
- Information was sought on whether it was possible of further improving the design of the easy read format material for patients?
 - Whilst acknowledging the need for further enhancements, it was important to note that the department had reached its limit due to budget constraints. However, every efforts within means to address such issues had been utilised effectively.
- Was it possible to look into the match finding approach with community organisations?
 - While it may seem to be a good option to explore, this focus may not be the most suitable for long-term sustainability for the reasons that community organisations were typically driven by providing services to meet the needs of the community. However, these organisations often experience fluctuations in demand for their services. As a result, they may not always be able to sustain a consistent level of support over an extended period.

- Were the numbers of women of the ethnic groups utilising the service as expected?
 - This had become slightly infrequent due to the outreach programme being undertaken in all communities as opposed to focusing on specific groups. However, officers were in planning stages of addressing this matter with local ward councillors and how to move forward with linking various services in order to get to minority groups;
- How were schools involved in the area of SH?
 - The Council commissioned a consortium of VCS organisations to support the delivery of this policy in Bradford's schools. This provision was commissioned separately from sexual health services.

During the closing of this discussion, the committee highlighted that SH was an extremely private and sensitive affair for each individual. It was paramount that professionals took into account the wishes of patients not being assessed by professionals who may reside in the same community as their patients.

The committee gave praise to the factual insight of the ongoing work in the area of SH and therefore:

Resolved:-

That officers be thanked for an informative report and that a further update be presented in 24 months.

Action: Director of Public Health

24. UPDATE FOLLOWING PUBLIC INVOLVEMENT EXERCISE FOR OUTPATIENT PHYSIOTHERAPY AND COMMUNITY THERAPY SERVICES BASED AT SHIPLEY HOSPITAL

The report of the Chief Operating Officer of Bradford District and Craven Health and Care Partnership (**Document "I"**) provided a summary of the position with regards to the next steps on Shipley Hospital following a recent public involvement exercise that asked for people's views on proposals to move outpatient physiotherapy and community therapy services out of the site. The paper shared the outcomes from the involvement work carried out and outlines the next steps that concern the future of the Shipley Hospital site, including plans for any further community involvement.

The Associate Director and the Head of Communications and Involvement were in attendance. A joint summary of the report was given to the committee.

A Q&A session ensued:

- Transport seemed an ongoing issue. Was there any scope in lobbying with larger practices for taking on additional patients that were located closer to them?
 - This was something that the NHS was not in a position to do so. However, the NHS ensured people were aware of patient transport

services and how they could access these. In addition, the area of patient choice and the opportunity for people to access outpatient physiotherapy in community settings such as GP practices was highlighted;

- Information was sought on the current status of the radiology therapy within the Shipley Hospital?
 - This equipment had been relocated to the Bradford Royal Infirmary and had not yet been returned. However, Shipley location had further services on offer for patients;
- What was the feedback in respect of personal choice of preferred locations?
 - During recent engagement exercises, the service received numerous comments from individuals, especially those who were not currently using our services. Emphasis on having the option to choose a location for their treatment had been expressed so being able to access care in a place that suited their individual needs. As part of the involvement exercise, an information giving exercise would be carried out so that people were informed of the decision and know about how they could access services, including exercising patient choice and making use of patient transport services.
- Furthermore, feedback had also been received to raise awareness about the different services that would be on offer and their respective locations. This feedback aligned with previous engagement exercises, which also highlighted the low level of awareness among certain communities.
 - It was evident that there was a strong demand for increased awareness and accessibility to services. In light of all feedback, the service was actively working on implementing strategies to meet with the expectations of the public;
- Would there be improvements for the disabled and elderly patients at the new locations?
 - Following impact assessments, limitations at Shipley Hospital were highlighted. However, the new job locations were better suited for the most vulnerable.

During the closing of the discussion, the committee stated that in addition to promoting access to patient transport services for those eligible, as well as alternative locations which may reduce or minimise travel or cost of travel officers should take necessary steps in consulting with WY Metro. Keeping the transport service updated on developments of relocation of vital services may assist in addressing the development of much needed new bus routes

Resolved:-

That the report and proposed next steps be noted and that further updates be provided through the Chair in the form of electronic briefings.

Action: Chief Operating Officer, Bradford District and Craven Health and Care Partnership

25. ANNUAL REPORT OF THE PRINCIPAL SOCIAL WORKER AND ADULT

SOCIAL CARE'S PREPARATION FOR THE NEW CQC ASSURANCE PROCESS

The Principal Social Worker (PSW) in Adult Social Care for Bradford District ensures that there is professional practice oversight in place to lead, oversee, support, and develop excellent social work practice and in turn lead the development of excellent social workers and social care practitioners. The PSW leads on quality assuring social work practice. For 2022/23, Rob has produced his first Annual PSW Report in Bradford and this is attached.

The Care Quality Commission (CQC) have been given new powers to carry out an assurance process on local authorities with adult social services responsibilities on how they carry out their duties and responsibilities under the Care Act 2014. The report of the Strategic Director, Adult Social Care & Health (**Document "J"**) also gave an update on how Bradford Council was preparing for this process and what is known about this new methodology

The Principal Social Worker was in attendance and with the invitation of the Chair gave a summary of the report.

A Q&A session ensued:

- Details on people arranging own care was sought?
 - The council was committed to maximising the effectiveness of people's care and treatment. In order to achieve this, individuals were assessed and reviewed for their health, care, wellbeing, and communication needs. Officers had taken measures to ensure that individuals with care and support needs, unpaid carers, and those who funded or arranged their own care, as well as communities, had the best possible wellbeing outcomes. This was achieved through co-produced assessments and care and support plans that were kept up-to-date and regularly reviewed.
 - It was also ensured that support was coordinated across different agencies and services, and that decisions and outcomes were transparent for all stakeholders.
 - The people's right to choice and focus on building on their strengths and assets were being valued. This approach reflected what people wished to achieve and how they wished to live their lives;
- Explanation was sought on people who experienced social work?
 - The council was in collaboration with Equality Together and various user-led organisations to develop a comprehensive co-production strategy. This strategy would encompass a framework of minimum standards that aimed to achieve when working with the individuals that officers support.
 - Additionally, the process of establishing a structure to employ a bank of Experts by Experience for specific paid roles. These individuals would also serve as co-researchers, assisting in the development of practice knowledge for BASC. The primary focus was on interventions aimed at improving outcomes for adults with learning disabilities;

The committee echoed the sentiments of the Chair that, the commitment to

improving lives, fostering ever increasing connections, and advocating for equality. It was an area that required creativity and care for supporting individuals in overcoming obstacles. Through joint partnership working would continue to make positive impact in the lives of the most vulnerable in society.

Resolved:-

- (1) That the work of the Principal Social Worker and the Adult Social Care Team, as set out in the Annual Report, be commended and that next year's Annual Report be presented to the Committee in July 2024; and,**
- (2) That the information on the CQC assurance preparations set out in the report be noted.**

Action: Strategic Director, Adult Social Care and Health

26. HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE WORK PROGRAMME 2023/24

That the report of the Director of Legal and Governance (**Document "K"**) presented the Committee's work programme 2023/24.

No resolution was passed on this item

Chair

Note: These minutes are subject to approval as a correct record at the next meeting of the Health and Social Care Overview and Scrutiny Committee.

THESE MINUTES HAVE BEEN PRODUCED, WHEREVER POSSIBLE, ON RECYCLED PAPER