

# **Minutes of a meeting of the Health and Social Care Overview and Scrutiny Committee held on Thursday, 26 October 2017 in Committee Room 1 - City Hall, Bradford**

Commenced 4.30 pm  
Concluded 7.20 pm

## **Present – Councillors**

CONSERVATIVE	LABOUR	LIBERAL DEMOCRAT AND INDEPENDENT
Gibbons Rickard	A Ahmed Akhtar Greenwood I Hussain Shabbir	N Pollard

Observer: Councillor Val Slater (Health and Wellbeing Portfolio Holder)

## **Councillor Greenwood in the Chair**

### **29. DISCLOSURES OF INTEREST**

- (i) Councillor A Ahmed and Councillor Gibbons disclosed, in the interest of transparency, that they were appointed by the Council as Governors of Bradford District Care NHS Foundation Trust, in relation to the report from Airedale NHS Foundation Trust (Minute 34).
- (ii) Councillor Gibbons and Councillor Greenwood disclosed, in the interest of transparency, that they were members of Patient Participation Groups.
- (iii) Susan Crowe disclosed, in the interest of transparency, that she was the Chair of a Patient Participation Group and had received commissions from Public Health and Clinical Commissioning Groups in relation to Minute 34.
- (iv) Sam Samociuk disclosed, in the interest of transparency, that he was the Chair of a Patient Participation Group and a member of The Peoples Board of Bradford Districts Clinical Commissioning Group.
- (v) During consideration of the Health and Wellbeing Complaints Annual Report (Minute 35), Councillor A Ahmed disclosed, in the interest of transparency, that she was employed by the Yorkshire Ambulance Trust.

***ACTION: City Solicitor***

**30. MINUTES**

**Resolved –**

**That the minutes of the meeting held on 7 September 2017 be signed as a correct record.**

**31. INSPECTION OF REPORTS AND BACKGROUND PAPERS**

There were no appeals submitted by the public to review decisions to restrict documents.

**32. REFERRALS TO THE OVERVIEW AND SCRUTINY COMMITTEE**

No referrals had been submitted to the Committee.

**33. DEMENTIA FRIENDLY COMMUNITIES**

Dementia Friendly Communities (DFC) is a programme which facilitates the creation of dementia-friendly communities across the UK. Everyone, from governments and health boards to the local corner shop and hairdresser, shares part of the responsibility for ensuring that people with dementia feel understood, valued and able to contribute to their community.

The Manager and the DMC Coordinator from Bradford Alzheimer's Society attended the meeting and gave a presentation which included the following information:

- A Dementia Friendly Community was:
  - One where people living with dementia are supported to live as independently as they can for as long as they can
  - Where the community understand about dementia and are willing to lend a hand
  - Where businesses, community and statutory organisations have thought about how they make themselves accessible to people with dementia
- Notable successes included:
  - 20 Dementia Friendly Communities
  - The introduction of Dementia Friendly Council Initiatives
  - Three National Dementia Friendly Community Awards and four runner up places
  - 12,748 Dementia Friends and 106 Dementia Champions in Bradford
  - 138 members formed the Dementia Action Alliance (DAA)
  - The Face It Together Group won a Bradford Community Stars Award in 2015



- Examples of best practice include:
  - The involvement of people living with dementia in everything we do
  - Dementia Friendly Idle – regular Wellbeing Cafés
  - Dementia Friendly Keighley – registered charity
  - Queensbury Dementia Action Group – Dementia Friends sessions for volunteers, public, schools and GP Surgeries
  - Community Leads Network meetings to share best practice across the district
  - A thriving DAA
  - Work with transport providers leading to improved service provision
  - Dementia Conference at Bradford College
- The Challenges include:
  - Hard to reach groups
  - Geographic gaps
- How the challenges can be overcome:
  - By raising awareness in schools
  - By having stronger links between Dementia Action Alliance and Dementia Friendly Communities
- Future Objectives agreed by Commissioners:
  - To support all departments of Bradford Council to be seen as working towards being dementia friendly
  - To ensure the maximum number of communities across Bradford are registered as and are working to become dementia friendly.
  - To ensure that there is a best practice model of information sharing between Dementia Friendly Communities, Dementia Action Alliance members and the general public

During the presentation Members were informed that:

- There was a mandatory dementia awareness training module for all new starters in the Council.
- Dementia Friendly awareness talks lasted approximately 45 minutes.
- Training had been carried out with young people from Ilkley Grammar School.
- 30 local businesses in Ilkley had become, or were working towards becoming, Dementia Friendly.
- The University of the Third Age (U3A) Ilkley and District was actively promoting dementia awareness.
- An audit of dementia related activity in Bradford was currently being compiled.

A booklet was tabled entitled 'Ilkley and District Dementia Friendly Directory of Services and Support'.

A Bradford district resident addressed the Committee and spoke of his own personal experience of being diagnosed with dementia and the work he had been involved in as a member of the Face It Together group to make Bradford more



dementia friendly. He spoke of the importance for society to have awareness of how dementia changes lives and how vital it was to have organisations like Face It Together to support people with dementia.

The Ward Officer for Shipley and Wharfedale spoke of the work she had previously undertaken to make Baildon a dementia friendly community, which she was now working to replicate in the Wharfedale ward. She reported that the Burley in Wharfedale Dementia Action Group had good links with a GP surgery in the area which referred people to the group. She stated that events were organised to cater for people with dementia and their carers and that feedback from carers had been immensely positive as they had also been able to form friendship groups with people in similar circumstances. She considered that there was potential for the Council to undertake a better joined up approach to work around dementia.

On behalf of the Director of Health and Wellbeing, the Consultant in Public Health stated that the Council's Health and Wellbeing Department were committed to continuing dementia friendly work.

Members made the following comments:

- Bradford Talking Media had produced two easy read booklets on the subject of dementia.
- A request was made for the Ward Officer in attendance to assist the Ward Officer for Windhill and Wrose to undertake engagement with the community on dementia friendly awareness in Wrose.
- A 'dementia friendly walk' and 'measured mile' had been introduced at Harold Park in Low Moor and further work was due to be undertaken to make the park more dementia friendly.
- There was a need to raise awareness that dementia did not just affect elderly people.
- Requested that Members be informed when the audit of dementia related activity in Bradford was available.
- Recommended that an elected Member be appointed as a Dementia Champion for the Council and that all Members receive the Dementia Friends training.

In response to Members' questions, it was reported that businesses needed to register with Dementia Friends to be recognised as a dementia friendly organisation and the audit of dementia related activity was due to be completed by the end of November 2017.

A discussion took place about the provision of education about dementia in schools. Barriers to accessing schools was raised as an issue and Members were urged to assist with helping to access schools, particularly those they were governors of. It was stated that the Chair would pursue a collective approach through the School Governor Service.



**Resolved –**

- (1) That everyone who attended the meeting to contribute to the presentation be thanked for their input.**
- (2) That, when the audit of dementia related activity is finalised it be circulated to the Committee through the Chair.**
- (3) That the Strategic Director, Health and Wellbeing be requested to collate information on staff working on dementia related activity across the Council in order to facilitate a more joined up approach.**
- (4) That it be recommended to Council that it be mandatory for all elected Members to undertake Dementia Friends training.**

***ACTION: Strategic Director, Health and Wellbeing***

**34. AIREDALE NHS FOUNDATION TRUST RESPONSE TO THE CARE QUALITY COMMISSION RE-INSPECTION**

Previous reference: Minute 48 (2016/2017)

The Airedale NHS Foundation Trust submitted **Document “K”** which informed the Committee of the actions the Trust had taken in response to the Care Quality Commission (CQC) Inspection in March 2017 and the plans in place to ensure sustained improvement.

The Assistant Director of Healthcare Governance at Airedale NHS Foundation Trust gave a presentation which provided a recap of the CQC Comprehensive Inspection undertaken in March 2016, the outcome of the re-inspection in March 2017 and informed the Committee of the key points from the Quality Report (Appendix 1 to Document “K”). She tabled the Quality Improvement Plan which had been approved by the Trust’s Board of Directors on 25 October 2017 and was due to be submitted to the CQC. It outlined the actions the Trust were taking following the identified “must dos” within the report along with quality issues to improve patient care and strengthen compliance with CQC regulations.

In response to Members’ questions, it was reported that:

- Improved staff morale had been identified from staff discussions with CQC inspectors and from walkabouts on the hospital wards undertaken by Executive team members on a regular basis.
- Staffing levels and bed capacity were monitored regularly throughout the day.
- Agency staff were employed and the Trust had a ‘staff bank’ which enabled it to provide and manage temporary staffing to ensure safe levels of staffing were maintained.
- Reference in the presentation to ‘improve medicine management’ related to the Pharmacist checking all of a patients existing prescribed medicines to



- ensure there were no adverse affects of any additional ones.
- With regards to simplifying reporting structures, the Terms of References for all of the Trust's Committees were being reviewed to ensure the functionality of each was clear and that staff at grass root levels were aware of the reporting processes.
  - Building in cultural changes within the organisation would take time to embed.
  - A number of actions on the Quality Improvement Plan were due to be completed by 31 October 2017; any outstanding actions to be completed by this date were on track to be delivered on time.

A Member raised concerns about the impact on quality levels due to the increased use of agency staffing. In response, it was stated that the same agency staff were used and placed on the wards they were familiar with to reduce risks. Members recognised that this workforce issues affected the NHS nationally.

A discussion took place about internal monitoring within the Trust and it was stressed that there was a greater sense of ownership throughout the whole organisation, e.g. more stringent consideration of complaints received, monitoring their trends and tracking their escalation.

A Member praised the Assistant Director of Healthcare Governance for a clear and thorough report and acknowledged that the Trust had progressed well with the improvements it had made so far; he stressed the importance of this continuing.

The Assistant Director of Healthcare Governance informed Members that the Trust received regular visits from CQC Relationship Managers and that unannounced inspections and mystery shopper visits were also taking place.

**Resolved –**

- (1) That the report (Document “K”) be received and noted.**
- (2) That the Committee expresses its concern about the high level of agency nurses being employed and the continued pressure on staffing.**
- (3) That the Committee commends the progress made between the two Care Quality Commission inspection reports and requests a further update, through the Chair, on the Trust Board's Quality Improvement Plan before the end of 2017.**

***ACTION: Airedale NHS Foundation Trust***



## 35. HEALTH & WELLBEING COMPLAINTS ANNUAL REPORT

The Strategic Director of Health and Wellbeing submitted **Document “L”** which reported on the complaints, enquiries and compliments received by the Complaints Unit in the period 1<sup>st</sup> April 2016 to 30<sup>th</sup> March 2017 related to Adult Social Care and Public Health.

The Complaints Manager gave an overview of the report, highlighting that:

- 190 complaints and 101 compliments were received by the department during 2016/ 2017. 43% were received by phone, 42% online and 9% by letter.
- In addition, the complaints team resolved 75 pre-complaints and dealt with 47 general enquiries related to the department.
- 50% of the complaints related to service provision, 39% related to staff and 64 % were partially or fully upheld.
- There was a lower performance in relation to acknowledging and responding to complaints within timescales compared to the previous financial year.
- In terms of escalation, nine complainants had asked for a review of their complaint and 12 complainants had approached the Local Government Ombudsman (compared to 10 in the previous year). 12 investigations were completed, of which eight were upheld.
- A total of £4,519 was spent on complaints, including external investigations and financial remedies.
- 55% of the compliments received related to staff attitude or professionalism.

She reported an error in paragraph 3.6.1 of the report which should have stated that ‘a total of £1,000 was paid to three complainants as financial remedy’ – not £600 paid to two complainants.

The Chair requested that future reports on this matter be entitled ‘compliments and complaints’.

A Member commended officers for the learning points outlined in the report.

In response to Members’ questions it was reported that:

- When pre-complaints were not resolved, they were treated as complaints.
- In instances where the subject of a complaint covered both organisations (Adults Social Care and Health), discussions took place between the two to establish who would lead on the complaint.
- There was a reliance on services to inform service users how to submit a complaint. 11% of complaints were received via staff.

In response to a Member’s question, the Health and Wellbeing Portfolio Holder stated that she would seek clarification to confirm that the learning point to ‘clarify what the Council’s policy is in relation to Independent Living Fund to ensure consistency’, as stated in paragraph 5.1 of the report, had been actioned. She also clarified that an additional 40 Social Workers had been recruited following a review of previous budget decisions for the department.





A discussion took place about the reporting timescales for complaints and compliments and it was agreed that the following year's report would be circulated to Members to decide whether a report was required to be submitted to the Committee on any issues it identified. The Chair requested that officers flag up any significant rises in complaints relating to a service area with her in the mean time.

**Resolved –**

**(1) That the report (Document “L”) be noted.**

**(2) That the 2017/18 annual report be circulated to Members as soon as it is available.**

***ACTION: Strategic Director, Health and Wellbeing***

**36. HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE WORK PROGRAMME 2017/18**

The Overview and Scrutiny lead presented the Committee's Work Programme 2017/18 (**Document “M”**).

She reported that a report on dementia, focusing on the pre-diagnosis pathway, would be submitted to the Committee on 1 March 2018.

A non-voting co-opted Member addressed the Committee to raise concerns from representatives of the Strategic Disability Partnership relating to a re-structure currently taking place within the Council and its adverse impact on partnerships. In response to the concerns raised, the Overview and Scrutiny lead reported that a report on Council consultation with vulnerable groups was due to be considered on 1 March 2018 and that she would undertake discussions with officers to expedite the submission of the report for the Committee's consideration. It was also agreed that the Chair would consult with the Chair of the Corporate Overview and Scrutiny Committee to ascertain scrutiny of this matter.

Members were informed that a report proposing the introduction of a total ban on the use of advertising boards across the District was due to be considered by the Executive on 7 November 2017.

**Resolved –**

**That the information in Appendix A and B of Document “M” be noted.**

***ACTION: Overview and Scrutiny Lead***

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

