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## KIRKLEES COUNCIL

### HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL

**Wednesday 22nd November 2023**

Present: Councillor Bill Armer (Chair)  
Councillor Beverley Addy  
Councillor Itrat Ali  
Councillor Jo Lawson  
Councillor Alison Munro

Co-optees Kim Taylor

In attendance: Lindsay Rudge, CHFT  
Gemma Puckett, CHFT  
Anne-Marie Henshaw, MYTT  
Talib Yaseen, MYTT

Observers: Councillor Liz Smaje

Apologies: Councillor Habiban Zaman  
Helen Clay (Co-Optee)

**1 Membership of the Panel**

Apologies for absence were received on behalf of Councillor Habiban Zaman and Helen Clay.

**2 Minutes of previous meeting**

That the Minutes of the Meeting held on 27 September 2023 be approved as a correct record.

**3 Declaration of Interests**

Cllr Jo Lawson declared an 'other' interest in agenda item 8 as a holder of a bank contract with Calderdale and Huddersfield NHS Foundation Trust.

**4 Admission of the public**

All items were taken in public session.

**5 Deputations/Petitions**

In accordance with Council Procedure Rule 10, the Panel received a deputation from Lesley Warner regarding Leisure Centres.

(A response was provided by the Chair of Health and Adult Social Care Scrutiny Panel – Cllr Bill Armer).

**6 Public Question Time**

The Panel received the following question under Council Procedure Rule 11;

Question from Nicola Sill

“As a disabled person and wheelchair user, the proposed closure of Colne Valley Leisure Centre will increase crowded changing rooms in Huddersfield. The changing rooms have no lockers and the ones outside are not at a height that I can reach. If Colne Valley Leisure Centre closes, how are wheelchair users able to access the pool independently?”

(A response was provided on behalf of the Panel).

Question from Di Mayo, on behalf of Colne Valley Owls

“How will the planned closure of Colne Valley Leisure Centre fit with the national trend to encourage all people to engage in social and physical activity to combat mental and physical conditions which weigh heavily on the NHS. If the centre closes, what feasible alternatives are you proposing for these activities to continue?”

(A response was provided on behalf of the Panel).

**7 Castle Grange and Claremont House Care Homes Consultation**

In accordance with Council Procedure Rule 37, the Chair gave permission for Donna Mallinson to speak.

The Panel welcomed Richard Parry, Strategic Director for Adults and Health and Michelle Cross, Service Director for Mental Health and Learning Disability to the meeting to provide information regarding the consultation on the proposed closure of Castle Grange and Claremont House Care Homes Consultation.

The Panel was advised that both care homes were owned and run by the Council for people over the age of fifty-five with a Dementia diagnosis and each had 30 long and short stay beds.

It was noted that Castle Grange was temporarily accommodating a Dementia Day care service with 26 beds occupied by long stay service users and four beds for short stay / emergency placements. Claremont House was undertaking some decoration which reduced the provision to 20 for long stay service users and ten for short stay placements.

The Panel was reminded that the Cabinet proposals asked for approval, subject to stakeholder consultation, for the Council to withdraw from the long stay residential care market and to focus direct care delivery in parts of the care market where there were fewer providers and options for people.

The Panel was informed of a number of ways in which stakeholders could get involved with the consultation including (i) a web page (ii) online survey (iii) paper copies of the survey (iv) advocacy sessions (v) face to face meetings and (vi) via a dedicated e-mail address.

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It was explained that the consultation was launched on 11 October 2023 and would end on 3 January 2024 with the results presented to Cabinet in February 2024. At the time of the meeting, in excess of 100 responses had been received.

The Panel was advised that engagement with family members and other stakeholders would continue for the duration of the consultation, with ongoing focussed meetings driven by the consultation needs of the families.

Questions and comments were invited from Members of the Panel and the following issues were raised:

- In relation to the reassessment of a person's needs the Panel was assured that there was no difference in the criteria for care provided in the private sector compared to Council provision, but an assessment would be undertaken to ensure that the person's needs were fully understood.
- Regarding the effect of moving patients with dementia on their long term health and longevity, the Panel noted that an exercise in the sale of the care homes as ongoing concerns had been undertaken in 2018, but that was unsuccessful, but if a decision is made to close the care homes, this would be explored again.
- Further to a question about capacity in local care homes, the Panel was advised that provision was available across the Kirklees area that meets the needs of current residents of the two care homes. Individual plans would be produced to understand the specific needs of a person, including whether at some point in the future, nursing care might be more appropriate.
- The Panel heard that over the years a number of care homes had closed in the area, and a body of good practice existed regarding the movement of people, often with very complex nursing needs, to different care homes.
- In response to whether there would be an impact on hospitals waiting to discharge to a care home as capacity would be reduced, the Panel was advised that a number of services were available such as step-down care, rehabilitation and re-enablement services which would move away from the previous practice of short term to long term care following hospital discharge.
- For individuals with highly complex needs, Kirklees had a number of private care homes that cared for people with complex needs with available capacity.
- Regarding day facilities for individuals with dementia, it was confirmed that there would be no break in provision from any closure of Castle Grange and the opening of the new facility in Mirfield in Summer 2024.
- The Panel heard that Kirklees pay a premium to providers who specialise in the care of people with dementia, with 23 homes currently receiving that payment.
- Regarding the staff at the care homes, a number of vacancies are carried within the Council, and a process of deployment would be undertaken to see what alternative roles would be available for them.
- For individuals who need respite care, the Panel was advised that a facility existed to purchase respite care within the private sector, but that it was the intention that the new facility would provide extended support over seven

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days and into weekends, as often that was when families and carers needed the support.

### RESOLVED –

- 1) That officers of the Council be thanked for the presentation and their attendance at the meeting.
- 2) That further information be provided to the Panel around the financial implications of the closure of the care homes.
- 3) That the presentation be noted.

## 8 Maternity Services

In accordance with Council Procedure Rule 37, the Chair permitted Councillor Colin Hutchinson, Calderdale Council, to speak.

The Panel welcomed representatives from Mid-Yorkshire Teaching NHS Trust (MYTT) and Calderdale and Huddersfield NHS Foundation Trust (CHFT) who provided updates on the birthing units at Huddersfield Royal Infirmary and Dewsbury District Hospital.

The presentation provided to the Panel gave an update on (i) maternity services workforce (ii) work being done to reintroduce birthing centres in Kirklees (iii) the timeline for reopening services and proposed model for Kirklees and (iv) next steps in the approach to communicating and publicising.

The Panel was advised that the vacancy rate in CHFT had reduced but remained at 19% with a further round of recruitment planned for November 2023 for Graduates due to qualify in March 2024. MYTT's vacancy rate remained minimal with a number of internationally educated midwives and graduate midwives being recruited.

The Panel noted that for Calderdale Birth Centre a responsive model had launched in May 2023, which was a model that followed the women and did not 'staff the building'. For the Huddersfield Birth Centre, there had been no unattended births on the site since the suspension of the service in October 2020.

The Panel was informed that service user feedback indicated disappointment at the suspension of the service at HRI and Dewsbury District Hospital (DDH).

In relation to the reopening of the Huddersfield Birth Centre, the Panel heard that staffing deficits were forecast into the New Year with recruitment campaigns not securing enough experienced midwives for the free-standing birth centre. A re-evaluation would take place in Q1 2024/24 once new graduates were in post to assess if the staffing position had changed to enable a responsive model utilising community Midwifery.

Regarding DDH Bronte Birth Centre, a new full time experienced Birth Centre Manager had been recruited, and assuming newly qualified midwives completed supernumerary periods as expected, the plan was to reopen before 1 April 2024.

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Questions and comments were invited from Members of the Panel and the following issues were raised:

- In relation to the reopening of DDH, women from South Kirklees would be able to birth there, as all women were given a choice of where they would like to birth.
- Regarding a question about the availability of ante-natal or parentcraft classes at CRH, representatives from the hospitals would need to investigate the capacity and how availability could be increased in line with the workforce difficulties.
- The Panel was advised that the re-evaluation of the reopening of the birthing unit at HRI, consideration would also be given to the skill mix of midwives to ensure they had the appropriate experience to work in that setting.
- Should the recruitment of midwives for HRI be successful, the Panel heard the proposal would be to reopen the birthing unit in late summer or early autumn 2024.
- Nationally, regionally, and locally the Panel heard that there was a significant difficulty in the recruitment and retention of midwives, but flexible and reduced hours working arrangements were being introduced and robust processes had been created to manage midwife retention.
- In relation to the relocation of the birthing unit at CRH, the Panel was advised that CHFT was enhancing maternity services with an additional theatre for obstetric care and would be moved alongside the labour ward.
- The Panel noted that CHFT was working with Yorkshire Ambulance Service as any reopening of the birthing unit at HRI was contingent on the ability to do a safe transfer from to CRH.
- Regarding how robust the responsive model would be, a formal workforce assessment was being undertaken in early 2024 with Birthrate Plus which could potentially adjust the workforce model.
- The Panel suggested that further scrutiny take place on the proposed re-opening of the birthing units in light of the Ockenden Report, Saving Babies Lives and in consideration of at-risk women.

### RESOLVED –

- 1) That the representatives from CHFT and MYTT be thanked for their presentation and attendance at the meeting.
- 2) That the Panel believe the model proposed by CHFT and MYTT to the midwife led birthing units would be a substantial change to provision.
- 3) That further in-depth scrutiny take place to consider the protracted closure of the midwife led birthing units, the timeline for reopening and the proposed model in relation to any future sustainability.
- 4) That the issue around workforce recruitment and retention be scrutinised pursuant to resolution (3).
- 5) That officers of the Council be instructed to liaise with Calderdale Council and Wakefield Council on the impact that the continued closures and proposed models would have on provision at Pinderfields Hospital and CRH.

## 9

### Work Programme 2023/24

A discussion took place on the 2023/24 work programme and forward agenda plan.

