

Contact Officer: Richard Dunne

## **KIRKLEES COUNCIL**

### **HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL**

**Tuesday 4th December 2018**

Present: Councillor Elizabeth Smaje (Chair)  
Councillor Nell Griffiths  
Councillor Alison Munro  
Councillor Habiban Zaman

Co-optees David Rigby  
Peter Bradshaw  
Lynne Keady

Apologies: Councillor Fazila Loonat

**1 Minutes of previous meeting**

That the Minutes of the meeting held on 6 November 2018 be approved.

**2 Interests**

Co-optee Lynne Keady declared an interest in items 4 (Integration of Health and Adult Social Care) and 5 (Mental Health Rehabilitation and Recovery Services Transformation Project) on the grounds of being a volunteer with Healthwatch Kirklees and as a carer representative and service user for South West Yorkshire Partnership NHS Foundation Trust.

**3 Admission of the public**

That all items be taken in public session.

**4 Integration of Health and Adult Social Care**

The Panel welcomed Helen Severns Service Director Integrated Commissioning, Phil Longworth Senior Manager Integrated Support, Steve Brennan Senior Responsible Officer Working Together and Catherine Wormstone Greater Huddersfield to the meeting.

Ms Severns informed the Panel that the report outlined details of the West Yorkshire and Harrogate Health and Care Partnership, the West Yorkshire and Harrogate Joint Committee of Clinical Commissioning Groups and the Kirklees Health and Wellbeing Plan

Ms Severns stated that the Kirklees Health and Wellbeing Board had recently agreed an Integrated Commissioning Strategy and outlined the key elements of the Strategy.

Ms Severns informed the Panel of the work that was being done to create Primary Care Networks (PCNs) in 9 local communities across Kirklees and outlined key

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areas of priority which included intermediate care and reablement, care homes and end of life care.

Ms Severns stated that the report provided details of the Integrated Commissioning Board, the Health and Care Executive Group and the Integrated Provider Board.

A question and answer session followed that covered a number of issues that included:

- A detailed explanation of the Primary Care Networks (PCNs) that included their status and how they would link to other health and care organisations.
- An overview of the work that was being carried out in the pilot PCN in the Holme Valley.
- The role of Community Plus.
- An explanation of what was meant by community resilience.
- The approach that would be taken to engaging with local communities.
- The challenges of being able to work and engage effectively with local communities.
- A panel comment that there was little evidence of the work being done by Community Plus in getting to know communities and engaging with local ward members.
- An explanation of the structures of Community Plus and how it would link to the PCNs.
- A concern regarding the sustainability of the Community Plus model.
- The plan to link the work being developed through the integration agenda to the work of the Democracy Commission.
- Details of the piloting of local area coordination with the Better Care Fund (BCF) money.
- An overview of the timescales for the introduction of the local area coordinators.
- The work being done to encourage GPs to engage with their local community to help identify the needs of the local population.
- The benefits to local GPs of working within a PCN.
- How the non-recurrent funding from the West Yorkshire and Harrogate Health and Care Partnership was being used to help GP practices come together and develop working and business relationships.
- The concept of resilience and the approach to dealing with people who required support in looking after their health.
- The work being done to move forward with the Care Closer to Home programme.
- An overview of the current and predicated funding of the Better Care Fund that included the lack of clarity regarding future funding.
- The challenges in recruiting people with the right skills to support the new ways of working.
- An overview of the work that was being done on local area coordination, carers support, the Equipment Service and the single approach to contracted services for mental health in the third sector.
- Details of outcomes funded through the Better Care Fund that included: the red bag scheme; and an on-line system for identifying care home vacancies.
- The challenges of the changing age profile of the local population which was creating additional demand on health and social care services.

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- The difficulty in assessing the reductions in demand on services by tackling loneliness and isolation.
- A comment from the Panel that physical health needs and emotional wellbeing needs run parallel with each other.
- A request from the Panel to see practical examples of how emotional wellbeing was being achieved and sustained in communities.
- An explanation of the work that was being done on understanding the health and social care system's physical assets across Kirklees and identifying how the assets could be used to meet the aspirations of a place.
- An explanation of national models which had worked well in delivering a wide range of community services to service a broader range of wellbeing and social needs.
- A comment from the Panel on the complexity of the structures, governance and processes.
- An explanation of how the governance structures linked to the Kirklees Health and wellbeing plan and the connections to the Economic Strategy.
- The importance of facilitating a bottom up approach to deliver the new ways of working.
- The role of the integrated workforce planning group.

### **RESOLVED –**

- (1) That the Panel would wish to see that the work being developed on the integration of health and adult social care includes a greater emphasis on health inequalities.
- (2) That the Panel receive an update on the work being done through the Care Closer to Home programme and examples of the impact that the programme has made.
- (3) That the Panel receive an update on the Better Care Fund following the publication of the Green Paper on the future funding of social care.
- (4) That the Panel receive practical examples of how the complexities of the structural and organisational arrangements that support the integration agenda have provided positive outcomes for people.
- (5) That the Panel receive more evidence on the outcomes being delivered by Community Plus.
- (6) A panel request that work being developed by Community Plus includes the input of local ward members.
- (7) That the Panel receive an update on the development of GP Federations and details of their work.

## **5 Mental Health Rehabilitation and Recovery Services Transformation Project** The Panel welcomed Vicky Dutchburn from Greater Huddersfield & North Kirklees CCGs and Dawn Pearson from NHS Calderdale and Greater Huddersfield CCG to the meeting.

Ms Dutchburn informed the Panel of the background to the work that was being done in a programme of service transformation across Kirklees in relation to the provision of mental health and rehabilitation services.

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Ms Dutchburn outlined the engagement work that had been carried out and stated that their intention was to discuss the key findings from the work and to see if the Panel had identified any gaps in the engagement.

Ms Dutchburn informed the Panel of some recent direction from NHS England that changed the guidance on mental health and rehabilitation services which had resulted in a regional review focused on the numbers of patients who were receiving long-term out of area packages of care.

Ms Dutchburn explained that the work that had been done locally had meant that they were on the front foot with the engagement work and the expectation from NHSE was that all regions across the country would need to undertake engagement to establish what their rehabilitation service would need to look like.

A question and answer session followed that covered a number of issues that included:

- Details of the work done by Touchstone advocacy service in Kirklees to engage with service users and the involvement of providers in engaging with out of area service users.
- An explanation of the approach to engagement using commissioned artwork.
- The aim of the service to support people to be located in the least restrictive environment.
- The plan to redesign services within the existing financial envelope and to put forward a business case should any gaps in service be identified.
- A concern that budget cuts to other service areas could have an adverse impact on the rehabilitation service.
- The approach being taken to look at a wider range of services across the health and social care economy to ensure that there was adequate support for the rehabilitation service.
- An overview of the role of the voluntary sector and the mental health forum.
- An explanation of how the mental health forum/partnership helped to inform and develop the provision of mental health services.
- The progress that had been made in developing an integrated approach with the voluntary sector in mental health services.
- A focus on providing service users with security and continuity by developing longer term contracts.
- An overview of the dual diagnosis service and the specialist service that provided support to the residential outreach services.
- The work that was being done on a regional basis to look at the provision available for dual diagnosis.
- Clarification that the engagement report was still in draft and that there had been 28 responses for out of area placements.
- Confirmation that a key objective of the works was to bring more out of area placements back into Kirklees.
- The plan to review what was classed as out of area.
- An explanation of which services users received services from a care co-ordinator and a specialist team.
- The work being done on developing telephone help lines to signpost people to the right service.

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- An acknowledgement from the Panel that it was pleased that the mental trust had recognised that the support services previously in place for people with a personality disorder and dual diagnosis hadn't been working.
- An overview of the next steps of the process.

### **RESOLVED –**

- (1) That the Panel agree that it is satisfied with the engagement process that has so far been undertaken.
- (2) That the Panel receive details on how the key messages that have emerged from the engagement has informed the proposed model for rehabilitation and recovery services.
- (3) That the Panel is provided with an opportunity to review the new proposed model and to take a view on whether any elements of the model constitute a significant change to service.

### **6 Work Programme 2018/19**

That progress of the work programme for 2018/19 and the forward agenda plan be noted.

### **7 Date of Next Meeting**

**RESOLVED –** That the date of the next meeting be confirmed as 15 January 2019.