

Minutes of the Health Scrutiny Board

17 June 2010

-: Present :-

Councillors Carter (C), Excell, Faulkner (A), Kerslake, Morey, Scouler, and Thomas (J)

Please note these are draft minutes and subject to the approval of a future meeting of the Health Scrutiny Board

110. Election of Chairman

Councillor Kerslake was elected Chairman of the Health Scrutiny Board for the 2010/2011 Municipal Year.

Councillor Kerslake in the Chair

111. Apologies.

An apology for absence was received from Councillor Manning.

112. Appointment of Vice-Chairman

Councillor C. Carter was elected Vice-Chairman of the Health Scrutiny Board for the 2010/2011 Municipal Year.

113. Minutes

The Minutes of the meeting of the Health Scrutiny Board held on 8 April 2010 were confirmed as a correct record and signed by the Chairman.

114. Minute Silence

The meeting held a minute silence in memory of the late Councillor Stuart John.

115. Commissioning Short Breaks for Children and Young People with Physical and Learning Disabilities – draft service specification

The Board considered Report 153/2010 which provided information on proposals for commissioning short breaks for children and young people with physical and learning disabilities and sought a decision from the Health Scrutiny Board as to whether the changes proposed constituted a substantial variation to the provision of services or a substantial development of services.

The Acting Director of Commissioning, Torbay NHS Care Trust, outlined involvement events since September 2009 leading to the draft re-specification of short breaks for children and young people with complex needs arising from a disability. The Board was advised that further user involvement and development of the service specification would be undertaken prior to any tender process.

The Board was advised that the service specification proposed would provide overnight residential short breaks, overnight in-reach care in family homes, day care, and in-reach day care including a sitting service. The Board was informed that one result of the proposed service change would be to move from a medical model of care to a more holistic model.

In response to questions, the Board was informed that a protocol to support users' transition to adulthood had been developed.

With reference to costs for respite care at the John Parkes Unit, the Board was informed that the tariff for respite at the Unit was approximately £800 for an episode or spell lasting from one to nineteen days. In response to questions, members were advised that the indicative costs for Robins Respite and Life Skills Centre within Report 153/2010 were per night, rather than per episode.

In response to questions concerning safeguarding, members received assurances concerning the governance arrangements for direct payments and personal budgets for short breaks/respite care.

In reply to members questions the Board was informed that the draft service specification related to a new service and was not intended to be interpreted as relating to the John Parkes Unit. The Board was advised that a tendering process would test the market provision for the new specified service and identify a range of providers. Members questioned the outcome for service users if bids were not received for the new service and were informed that if another provider could not be found the existing services would continue.

In response to questioning, members were advised of the difficulties in providing a breakdown of medical costs and respite costs for short breaks for children with complex needs arising from a disability. Members were informed that the costs of services for children with a disability, contained within Report 153/2010, were indicative.

Members questioned whether any aspect of the proposal had been contested by clinicians and were advised that submissions had not been received from clinicians.

With reference to Report 153/2010, members questioned the potential impact of the proposed service change on GP out-of-hours services. In reply the Board was advised that the impact had not been quantified but would likely be minimal.

Members questioned the financial case for the proposal, including the sustainability of the proposal, the consistency with strategic plans, the business case, the risks and benefits of the options, the impact on the existing budget, and the financial impact on local authority services. In response members were informed that such questions were not able to be answered at this point in the development of the service specification.

Members questioned the criteria to be used for the selection of bidders for the service proposed. In reply the Board was informed that Torbay NHS Care Trust had a procurement team to address the procurement process.

Members indicated that the lack of information provided concerning the proposed change caused difficulty in determining whether the proposals constituted a substantial variation to the provision of services or a substantial development of service. The

Acting Director of Commissioning, Torbay NHS Care Trust, suggested the Board might be better placed to determine the substantial variation or development issue if the tender document was available. The Acting Director of Commissioning, Torbay NHS Care Trust, indicated her uncertainty that the proposals constituted a substantial variation or development and indicated this was the reason for bringing it to the Health Scrutiny Board for advice.

Members questioned the contingency plan for instances such as staff absence. In reply the Board was informed that the John Parkes Unit was able to call on staff from acute wards at Torbay Hospital.

Members suggested the value of the current provider submitting comments on the proposed changes.

Members questioned the proposed frequency and method of monitoring the service specified and requested details. In response the Board was advised that such detail would be included within NHS contracts and the members' attention was drawn to Quality and Performance Indicators within the draft service specification.

Members questioned the specified aim for the new service to respond to urgent referrals within forty-eight hours. In reply the Board was advised that urgent referrals were distinct from emergency respite care which was arranged by the child or young person's Lead Professional sooner than forty-eight hours.

Members discussed both the value of an equalities impact assessment and the merit of a more detailed evidence base for the proposals.

Members questioned the extent to which travel and travel times were a consideration for the choice of service provider. In reply the Board was informed that the services would be required to be accessible to Torbay users.

Members noted that remodelling to the national Vetting and Barring Scheme would necessitate a change to the service specification.

Members agreed that the Board had insufficient information to reach a sound conclusion concerning whether the changes proposed to short breaks for children and young people with physical and learning disabilities constituted a substantial variation or development to services for Torbay.

In response to members' requests for further information, the Acting Director of Commissioning, Torbay NHS Care Trust, indicated that the tender documentation for short breaks for children with complex needs arising from disability could be provided to the next Health Scrutiny Board meeting.

Resolved: that the tender documentation for short breaks for children with complex needs arising from disability in Torbay be prepared and submitted to the Health Scrutiny Board meeting on 15 July 2010.

The Board considered Report 154/2010 which provided a draft health overview and scrutiny work programme for 2010/11. Members were requested to review and comment on the draft programme, including visits to local NHS bodies.

The meeting was advised that the Council's Personalisation of Care Review Panel had met earlier that week and recommended that the implementation of personalisation be investigated through formal Health Scrutiny Board meetings, with co-optees to the Panel invited to contribute to such meetings. Members discussed the recommendation from the Personalisation of Care Review Panel.

Members were advised of two recent requests from Torbay NHS Care Trust for changes to the draft work programme: a report to the July 2010 Board meeting on the Clennon Valley Healthy Living Centre and an additional meeting of the Board in August 2010 to consider proposals for Older People's Day Services and determine the issue of substantial variation or development. Members discussed the difficulties of an additional meeting and the requirement for substitute Board members.

Members discussed the visits to local NHS organisations undertaken by Board members in 2009 and the value of undertaking similar visits during 2010.

With reference to the work programme detailed within Appendix One to Report 154/2010, members agreed the addition of a report on the Clennon Valley Healthy Living Centre to the July 2010 Board meeting and that an additional Board meeting be arranged as necessary to consider proposals for Older People's Day Services and determine the issue of substantial variation or development. Members agreed the need and value of addressing the personalisation programme through the formal Health Scrutiny Board.

Members requested a briefing from Torbay NHS Care Trust for all Councillors on the personalisation programme. The Acting Director of Commissioning, Torbay NHS Care Trust, indicated such a briefing could be provided.

Resolved: (i) that subject to the additions agreed above the work programme set out in Appendix One to Report 154/2010 be approved;

(ii) that implementation of the personalisation programme within Torbay be investigated by the Health Scrutiny Board;

(iii) that a briefing on Personalisation be arranged for all Councillors, if practicable to be held immediately preceding a meeting of full Council; and

(iv) that visits to local NHS organisations be arranged for Health Scrutiny Board members for 2010.

Chairman