

Agenda item 27

BRIGHTON & HOVE CITY COUNCIL

HEALTH OVERVIEW & SCRUTINY COMMITTEE

4.00PM 27 JULY 2011

COUNCIL CHAMBER, HOVE TOWN HALL

MINUTES

Present: Councillors Rufus (Chair); Bennett, Turton, Marsh, C Theobald (Deputy Chair), Phillips and Wealls

Co-opted Members: Hazelgrove (Older People's Council) (Non-Voting Co-Optee)

PART ONE

16. PROCEDURAL BUSINESS

16A Declarations of Substitutes

16.1 Cllr Andrew Wealls attended the meeting as substitute for Cllr Dawn Barnett

16B Declarations of Interest

16.2 Cllr Turton declared that he chairs the hospital liaison group in relation to any work programme items concerning Brighton & Sussex University Hospitals Trust.

16C Declarations of Party Whip

16.3 There were none.

16D Exclusion of Press and Public

16.4 In accordance with section 100A(4) of the Local Government Act 1972, it was considered whether the press and public should be excluded from the meeting during the consideration of any items contained in the agenda, having regard to the nature of the business to be transacted and the nature of the proceedings and the likelihood as to whether, if members of the press and public were present, there would be disclosure to them of confidential or exempt information as defined in section 100I (1) of the said Act.

16.5 RESOLVED – That the Press and Public be not excluded from the meeting.

17. MINUTES OF THE PREVIOUS MEETING

- 17.1 The Chair told members that he planned to have further conversations with the Director of Public Health regarding HOSC involvement in the public health agenda, particularly in terms of issues relating to the misuse of alcohol.
- 17.2 **RESOLVED – That the minutes of the meeting held on 15 June 2011 be approved and signed by the Chair.**

18. CHAIR'S COMMUNICATIONS

- 18.1 The Chair welcomed Denise D'Souza, Director of Adult Social Care and Lead Commissioner, People. Ms D'Souza addressed the committee on the issue of the failure of Southern Cross care homes.
- 18.2 Members were informed that:
- There are two Southern Cross care homes in the city (Bon Accord and Downs Christian), and another in West Sussex to which the city council regularly refers (Birchgrove).
 - The council is still referring to two of these three homes. We are currently not placing people in the Bon Accord home while some quality issues are addressed, but do plan to place again in the future. Ceasing to place people in these homes would undermine their future viability.
 - Currently it is the council's view that all three homes are commercially viable, but there are contingency plans in place (working in partnership with NHS Brighton & Hove) to deal with any eventuality.
 - The council is currently seeking to identify and negotiate with the landlords of these care homes. One landlord is definitely a care provider, so should be able to take over management of the home.
- 18.3 In answer to a question from Mr Brown about pressure being placed on Sussex Partnership NHS Foundation Trust by this crisis, members were told that there was potentially an issue with availability of 'EMI' beds for people with mental health/capacity issues (particularly given the recent closure of the 'Swallows' home in the city), but there was confidence that this could be managed.
- 18.4 In response to a question from Cllr Theobald on how the council assessed the commercial viability of care providers, the committee was told that this was a tricky issue, as independent providers were not necessarily obliged to provide financial details of the operations. However, the council works closely with providers to share information

on an informal basis and has a generally good relationship with the sector in the city. Many providers in Brighton & Hove are relatively small scale businesses, and might be thought inherently less stable than larger concerns, although the failure of Southern Cross demonstrated both that large providers could fail and that the impact of their failure could be much greater than that of smaller organisations. There is an ongoing debate at a national level on how much financial information the independent sector should provide to social care commissioners.

- 18.5 In answer to a question from Cllr Theobald about care home residents having to be returned home to be cared for, the committee was told that this would not happen unless it reflected the express wishes of residents and their families. However, it might be that the council has to look at placing some people outside city boundaries, and talks are already underway with local providers to gauge their willingness to broaden their client range (e.g. to encourage more providers to offer Mental Health placements where it would be appropriate to do so).
- 18.6 In response to a question from Mr Brown as to whether the council would look kindly on local providers engaging in equity release schemes in the same way that Southern Cross had, the committee was told that this would depend entirely on the business models of individual providers: for some providers this might be a sensible mood; for others less so.
- 18.7 The Chair thanked Ms D'Souza for her contribution and invited her to return to provide an update in the Autumn.

19. PUBLIC QUESTIONS

- 19.1 There were none.

20. NOTICES OF MOTION REFERRED FROM COUNCIL

- 20.1 There were none.

21. WRITTEN QUESTIONS FROM COUNCILLORS

- 21.1 There were none.

22. HOSC WORK PROGRAMME 2011-12

- 22.1 Members considered a report detailing a number of potential work programme items and agreed a set of work programme priorities for the next 12 months and beyond.

- 22.2 It was agreed that these would include:

Workshop sessions on the NHS Brighton & Hove Annual Operating Plan 2012-13; End of Life Care; Quality across local healthcare providers

- Ongoing issues including the 3T development of the Royal Sussex County Hospital; local NHS trust applications for Foundation Trust status; development of Sussex Community Trust; mental health commissioning and bed use; and breast screening

- Reports on progress of the Health & Social Care Bill, including measures to be implemented by the city council (such as Health and Wellbeing Boards)
- Maternity services in the city, continuity of care for people coming out of prison, air quality, and short term services
- Issues relating to the misuse of alcohol

22.3 The Chair agreed to write to the Chair of the Overview & Scrutiny Commission (OSC) and to the relevant cabinet members to ensure that any HOSC work on alcohol issues complemented the ongoing Intelligent Commissioning Pilot initiative.

22.4 The Chair pointed out to members that no HOSC work programme could be definitive: there were bound to be in-year referrals of topical issues from NHS partners, the LINK etc.

22.5 RESOLVED – That a work programme be drawn up reflecting the opinions expressed by members and presented for information at subsequent HOSC meetings.

23. BRIGHTON & HOVE LINK: RECENT REPORTS

23.1 This item was introduced by Claire Stevens, LINK Host manager, and Mick Lister, LINK Steering Group member who informed members about recent LINK reports focusing on car parking at the Royal Sussex County Hospital (RSCH) and health services for the local Polish community.

23.2 Members and the LINK representatives agreed that Brighton & Sussex University Hospitals Trust (BSUHT) and city partners would need to look very carefully at parking options, particularly in the context of additional pressures during the proposed 3T development of the RSCH site. These should include the possibility of a park and ride scheme for visitors and/or for hospital staff, the offer on concessionary bus fares etc.

23.3 In answer to a members' question regarding the apparent fecundity of Polish women living in Brighton & Hove in comparison to women living in Poland, members were told that the LINK had approached an academic expert to explain this survey finding and had been told that there might be a number of explanations including relatively high UK pay rates, job security, benefit levels and free at point of use healthcare which would explain the difference.

23.4 The Chair thanked Mr Lister and Ms Stevens for their contributions.

24. IMPLEMENTATION OF THE HEALTH & SOCIAL CARE BILL

24.1 Members received a verbal update on progress towards the implementation of elements of the Health and Social Care Bill currently progressing through the legislature.

24.2 Members agreed to receive further updates as this work progressed.

25. ITEMS TO GO FORWARD TO CABINET OR THE RELEVANT CABINET MEMBER MEETING

25.1 There were none.

26. ITEMS TO GO FORWARD TO COUNCIL

26.1 There were none.

The meeting concluded at Time Not Specified

Signed

Chair

Dated this

day of

