

COMMUNITIES SCRUTINY COMMITTEE

Minutes of a meeting of the Communities Scrutiny Committee held in Conference Room 1a, County Hall, Ruthin on Thursday, 17 December 2015 at 9.30 am.

PRESENT

Councillors Brian Blakeley, Peter Evans, Huw Hilditch-Roberts (Chair), Martyn Holland, Rhys Hughes (Vice-Chair), Bob Murray, Anton Sampson, Cefyn Williams and Cheryl Williams.

ALSO PRESENT

Corporate Director: Communities (NS), Housing Care and Support Manager (JS), BCUHB Representatives (BJ), (CD) and (MW) and Scrutiny Coordinator (RE) and Administrative Officer (CW).

1 APOLOGIES

Apologies for absence were received from Councillors Bill Cowie and Win Mullen-James.

2 DECLARATION OF INTERESTS

The following interests were identified in business items 5 and 6 to be considered at the meeting.

Personal interests were declared by Councillors H. Hilditch-Roberts, as Advisor to the NHS, and B. Blakeley, as a Member of the Community Health Council.

3 URGENT MATTERS AS AGREED BY THE CHAIR

No items were raised which in the opinion of the Chair, should be considered at the meeting as a matter of urgency pursuant to Section 100B(4) of the Local Government Act, 1972.

4 MINUTES

(a) The Minutes of the meetings of the Communities Scrutiny Committee held on the 5th November, 2015 were submitted:-

Matters arising:-

5. Review of the Home to School Transport Policy – Councillor M.L. Holland explained that he had raised the issue of the Mold Alun School having been promoted an alternative option to Ysgol Brynhyfryd, Ruthin, and the lack of transport provision for pupils residing in Eryrys who attend the Mold Alun School. He explained that the nearest pick up point for transport was currently in Llanarmon yn Iâl.

The Scrutiny Coordinator informed Members that Councillor M.LI. Davies had requested that the name “Cefnmeiriadog” be amended to read “Cefn Meiriadog”.

7. Draft Housing Strategy – Councillor M.L. Holland made reference to point three on page 12 pertaining to “restrictions of the current Hamlets policy”. He explained that two Housing Associations had declined an offer from a land owner, in his Ward, to develop land for housing as there was no demand because of the location and lack of local amenities. Councillor Holland explained that the offer had not been declined as a result of the Hamlet Policy, as inferred in the minutes. The Chair requested that the respective officers be informed accordingly.

RESOLVED – that, subject to the above, the Minutes be received and approved as a correct record.

(b) The Minutes of the meetings of the Communities Scrutiny Committee held on the 16th November, 2015, were submitted:-

RESOLVED – that the Minutes be received and approved as a correct record.

5 PRIMARY CARE PROVISION IN THE PRESTATYN AREA

Betsi Cadwaladr University Health Board (BCUHB) representative gave a presentation outlining the background to the proposed changes in the provision of primary healthcare in Prestatyn. The main areas detailed in the PowerPoint presentation included:-

- Background, including an overview of traditional primary care
- detail of current GP providers
- An overview of the Contemporary Primary Care model:
 - Unscheduled Primary Care Centre
 - Planned Care
 - Home Care Home Support
 - The academy
- Progress to date

The BCUHB representatives advised that:-

- The fact that two General Practitioner (GP) surgeries in the Prestatyn area had given notice of their intention to terminate their contract with the Health Board from the 31st March, 2016 had necessitated the Board to consider the most appropriate solution for the delivery of primary health services to a population of circa 21,000 patients;
- Whilst the GPs at both surgeries were resigning their General Medical Services (GMS) contract, which was the traditional type of contract by which most GP services were delivered across North Wales, the majority of GPs at the surgeries concerned were still interested in delivering GP services if their roles were more manageable;
- Recent national research and studies had stated that the delivery of primary care needed to change to include a range of healthcare professional i.e. nurses, physiotherapists, pharmacists, audiologists, voluntary sector etc.

- Due to the number of patients in the Prestatyn area the Health Board was of the view that the optimum solution for the delivery of services to the area's population would be the development of a Contemporary Primary Care Facility, which would include:-

- An unscheduled primary care centre (where patients could have same day appointment with the relevant health practitioner)
- A Planned Care Centre (where patients could have regular care for chronic conditions provided by the same practitioner)
- A Home and Care Home Support (dedicated specialist healthcare provision for vulnerable/frail patients either in their own homes or in residential/nursing homes); and
- An Academy (where existing professionals could continue to develop and share skills, where patients could be taught to manage their own health and well-being or their own conditions, and where regular patient feedback could be sought and analysed in order to improve services)

- With a view to moving the project forward and have the basic requirements in place for the proposed new service to become operational on the 1st April, 2016 a project board and team had been established. The team was based at the Royal Alexandra Hospital site at Rhyl and was currently dealing with the TUPE of existing staff to the new service, recruitment of new staff and communicating about the changes to residents and stakeholders; and

- They had also within the past few days registered an interest in securing the former council office building and site at Tŷ Nant, Prestatyn as a base for the new Contemporary Primary Care facility.

Some Members commented that, whilst they had been somewhat skeptical about the contemporary health care model initially, now that they had more detail about how it would work it was finding more favour with them. They enquired whether there was a concise summary available to residents on what was proposed, as this would reassure them on the developments.

Responding to Members' questions BCUHB officials advised that:-

- With a view to having effective communication channels with all stakeholders the Health Board had engaged external communication support, in addition they were also looking at establishing an interactive website for this purpose;

- The Council's own communications team was also assisting BCUHB with the information sharing on this project;

- The volume of calls to the dedicated public helpline on changes to primary healthcare in Prestatyn had decreased lately, but was expected to rise again nearer to the change date in April, 2016;

- Despite initial concerns, having received assurances from the Health Board that there would be primary care available to residents, present patients at both GP practices had not transferred their registration to other GP surgeries;

- They agreed with Elected Members that GPs' workload needed to be reviewed, however the lead on this would need to come from the Welsh Government (WG);

- There were 4 GP clusters which operated within Conwy and Denbighshire. These 'clusters' could raise any concerns they had with the Health Board, and if the Board did not have the powers to resolve those issues it could raise them with the WG. As BCUHB was in 'special measures' it did have the 'ear' of the WG on matters of significant concern;
- The proposed contemporary health care model proposed for Prestatyn would not be suitable or viable for all areas across the region, the population size in the Prestatyn area meant that the proposed model should work well. This type of model was likely to appeal to newly qualified GPs who, having trained for a number of years, would have educational fees to pay therefore they were unlikely to want to buy into a private practice. However, this model was unlikely to be viable for smaller, or single GP practices, therefore in future there was likely to be a mix of GMS and contemporary health care model practices across North Wales;
- If the Tŷ Nant site could be acquired it would give BCUHB the opportunity to bring the entire contemporary health care model into being in its entirety, albeit on a phased basis, with the unscheduled primary care phase being given priority. It would replace the current Pendyffryn Medical Group and Seabank Surgeries and the Clinic, however the two branch surgeries at Meliden and Ffynnongroyw would remain open;
- If the Health Board could not secure the Tŷ Nant site the proposed model would proceed but would not be fully operational for some length of time as the Board would need to secure an alternative site, or apply for planning permission to extend the current Pendyffryn Medical Group site and clinic;
- Health Board officials were due to meet officers from the Council the following week to discuss their interest in the Tŷ Nant site, and they confirmed that they were looking at securing the building and the car park for the project;
- Apart from being unable to secure a suitable location for the contemporary health care centre other risks to the project coming into fruition included the recruitment of a full team (recruitment of the core team was not a problem). There was also a need to work with patients to reassure them that the new model of primary care would actually meet their specific needs better than the current model;
- staffing calculations and the proposed centre's capacity to deal with the influx of the tourist population during the summer months had already been factored into the model being put forward. Similarly local development plan (LDP) proposals would also be included as part of the forward planning for the centre;
- they had recently received notice that a GP practice in Rhuddlan would be terminating its contract with the Health Board from 31 March 2016. This affected circa 2,000 patients and negotiations were currently underway to seek the most appropriate solution for the provision of primary healthcare to those patients. More information would be available at the beginning of 2016 on how the Board proposed to secure services for these patients;
- as the contemporary primary care model became embedded other services, such as counsellors and debt management services, or any other service or organisation that support the health and well-being agenda, could be located at the same site; and
- undertook to continue the dialogue with the Prestatyn Member Area Groups (MAG) on this issue and to liaise with all MAGs on a regular basis with respect to developments in their area, as they found MAGs to be valuable forums to discuss and disseminate information.

At the conclusion of the discussion Members welcomed the proposals being put forward for Primary Healthcare in Prestatyn, with a view to breaking down barriers between different healthcare practitioners for the benefit of the individual patient. They were also pleased that the communication with all stakeholders was improving, but had concerns that specific WG rules seemed to place constraints on certain healthcare practitioners who were willing to work on either side of the English/Welsh border and they felt that this should be raised with the WG. They also fully supported the Health Board's bid to secure the former Tŷ Nant building and car park for the purpose of developing and operating a contemporary primary health care facility for the Prestatyn area, and they asked that their views were drawn to the attention of relevant officers associated with those discussions. It was:-

RESOLVED – *that the Communities Scrutiny Committee agrees that:-*

(a) subject to the above observations, to receive and support the Health Board's proposals for the future provision of primary healthcare services in the Prestatyn area from April 2016; and

(b) the relevant Lead Members and Officers of Denbighshire County Council be made aware of the Committee's views ahead of their meeting with Betsi Cadwaladr University Health Board officials to discuss their expression of interest in the former Tŷ Nant office and car park site.

6 GP OUT OF HOURS SERVICE

A report was distributed by BCUHB officials at the meeting on the GP Out of Hours (OOH) Service in the Board's Central area, which covered the local authority areas of Conwy County Borough Council and Denbighshire County Council. They advised that:-

- The GP Out of Hours Service had been identified under the Board's Special Measures as an area which required improvement;
- For the Central Area the main OOH Service was operated out of the Ysbyty Glan Clwyd Site. Since the opening of the new Accident and Emergency (A&E) Department at Ysbyty Glan Clwyd the OOH Services had been located next to the new A&E and consequently the same triage facility was used for both services. This helped to ease pressure on A&E as those patients who did not require emergency intervention could be diverted to the OOH Service. Welsh Ambulance Service Trust (WAST) paramedics were using a similar approach on the ambulances arriving at Ysbyty Glan Clwyd and therefore some patients who had arrived by ambulance were also being directed to the OOH Service;
- The OOH Service in the Central Area also undertook home visits when required. The Central Area OOH Service recorded the third highest number of home visits in North Wales, after Gwynedd and Anglesey, this was due to the rural nature of the area. In addition the Service did see some OOH patients at Ruthin Hospital, as it used that facility as an outpost for the service;
- The OOH Service based at Ysbyty Glan Clwyd was the most successful service in North Wales. It had recruited 10 more GPs recently and had 100%

coverage as a service. It was only slightly short of achieving maximum cover for bank holidays etc. Its achievement against national standards was virtually 100%;

- The only area in which it failed to achieve was the indicator relating to undertaking a home visit to those requiring one within 60 minutes – the rurality of area made this target a difficult one to achieve;
- The OOH Service had also invested in Advanced Nurse Practitioners, these members of staff could attend people at home to administer palliative care;
- Nurse practitioners' hours had also increased;
- All shifts in the Central Area were covered by practice GPs who were paid a sessional rate. Two shifts were operated: 6pm to 11pm, the time of highest demand – 2 or sometimes 3 doctors were available during this period. The second shift operated overnight from 11pm onwards – 1 doctor and 2 nurse practitioners were available on this shift.
- Problems in the East Area in recruiting sufficient number of GPs to cover all shifts, was not due to a lack of interest but due to WG rules which do not permit GPs practising in England to also work in Wales. This anomaly was now being rectified and this should in due course ease pressures in the East Area;
- The BCU Health Board was pleased with the OOH Service's achievements to date, but was not complacent as it was aware that there were challenges ahead and a need to be more innovative to meet demand

Responding to members' questions BCUHB officials confirmed:-

- There had been some problems with the phone lines to the GPs OOH service, however these had been resolved and a new telephone system with additional telephone lines had been installed. This new system recorded the number of patients in the 'call queue' which enabled the Service to call on more staff to answer calls and triage the queries;
- That a total of 29 GPs had committed to provide services to the GP OOH Service for the Conwy and Denbighshire area. No GP was obliged to provide cover, those who did so did it on a voluntary basis and provided varied amounts of cover dependent upon their personal commitments;
- As the new A&E Department in Ysbyty Glan Clwyd and the Conwy and Denbighshire OOH Service were co-located it facilitated a close working environment and enabled patients to be directed to the most appropriate service to meet their individual needs. Welsh Ambulance Service Trust (WAST) staff operating the Paramedic Pathways model were also able to direct patients to either A&E or GP OOH service, whichever was the most appropriate, when they arrived at Ysbyty Glan Clwyd. The co-location of both services therefore eased pressure on the A&E Department;
- Patients from the Dee Valley were usually directed to the A&E and GP OOH service at Ysbyty Maelor. However, the WG ruling relating to GPs practising in England not being able to provide OOH services in Wales had caused problems in recruiting sufficient numbers of GPs to provide the OOH services in the East Area. Whilst this ruling had recently been relaxed, and would help the situation in due course, in the interim some patients had been directed to the OOH in the Central Area and others to the service based in Dolgellau, which covered south Gwynedd.

At the conclusion of the discussion members commented that having GP surgeries open on a Saturday morning, as was being proposed in England, would help ease pressure on A&E departments and the GPs OOH service. They acknowledged the challenges faced in the East Area due to WG rules and were pleased to understand that these rules were now going to be relaxed to permit GPs based in England to work on the OOH service in Wales.

At the conclusion of the discussion the Committee:-

RESOLVED – *to receive the report and, whilst acknowledging the challenges in certain areas, to congratulate the Health Board on the improvements made to date, particularly the effective working practices with the Accident and Emergency Department at Ysbyty Glan Clwyd and encouraged the Board to secure continued improvement in this area.*

7 SUPPORTED INDEPENDENT LIVING

A joint report by the Service Manager: North Locality Supporting People Team Manager and the Housing Care and Support Manager, which outlined the progress of Supported Independent Living Service (SIL) in meeting the housing related support need of older people across the County, had been circulated with the papers for the meeting.

Members had previously agreed that reports on SIL would continue to be brought before future meetings of the Committee, to monitor the progress of SIL in meeting the housing related support needs of older people across the County.

The Housing Care and Support Manager introduced the report and advised Members that recent months had been a time of rapid change within Housing Services as the Service had been subject to a restructure. Despite this the Action Plan which had emanated from the Supporting People (SP) review was being implemented without any major concerns or delays. Whilst the WG was yet to announce the final amount of SP grant funding that would be allocated to Denbighshire, it was becoming clearer that the anticipated 10% to 30% budget cut would not materialise, the Council was likely to see the grant funding reduced by circa 5%. Consequently, because the 2016-17 SP budget total would be lower than this year's figure of £547,932 cuts to services would still need to be made. Nevertheless, they could be phased in gradually with a view to having as little detrimental impact as possible.

Responding to members' questions the Housing Care and Support Manager advised that:-

- The SIL Service was funded entirely from the SP grant. The SIL service, unlike its predecessor the Sheltered Housing Warden Service, served the entire county, both rural and urban areas alike. It supported people living in their own homes as well as those who resided in council owned properties, to live independently in their own homes for as long as it was safe and possible for them to remain there;
- The Service also provided a signposting service to help residents find clubs or organisations of interest to them, as it held a comprehensive directory of

organisations/clubs operating in the area. It could even support them, if required, to access and settle down in new groups or clubs;

- Whilst the service no longer provided the on-site warden service in the sheltered accommodation complexes, it did offer a listening and advisory service for all people who required it in all parts of the county;
- The Service employed, at present, in total 22 full time equivalent (FTE) members of staff to deliver the service; and
- The SIL Service could be accessed via the Single Point of Access (SPoA) Service, as well as via other Council services.

Prior to concluding the discussion Members thanked the Housing Care and Support Manager for briefing them on the Service's development to date; and it was:-

RESOLVED – that:-

- (a) *subject to the above observations, to receive the report and the progress to date in establishing the Supporting Independent Living (SIL) Service; and*
- (b) *a further report be presented to the Committee in six months' time outlining the progress with the introduction of the Supporting Independent Living Service, and that the report include details of the Supporting People funding for the County for 2016/17 and the benefits of taking an integrated streamlined approach to managing SIL, Reablement and the Health and Social Care Support Worker Service (HSCSW).*

8 SCRUTINY WORK PROGRAMME

A copy of a report by the Scrutiny Coordinator, which requested the Committee to review and agree its forward work programme and which provided an update on relevant issues, had been circulated with the papers for the meeting.

A copy of the 'Member's proposal form' had been included in Appendix 2. The Cabinet Forward Work Programme had been included as Appendix 3, and a table summarising recent Committee resolutions and advising on progress with their implementation, had been attached at Appendix 4.

The Committee considered its draft Forward Work Programme for future meetings, Appendix 1, and the following amendments and additions were agreed:-

4th February, 2016:- The Committee agreed that Lead Member, Councillor H.H. Evans (Leader) be invited to attend the meeting.

The Scrutiny Coordinator confirmed that the Scrutiny Chairs and Vice-Chairs Group had met on the 3rd December, 2015 and no matters had been referred to Communities Scrutiny Committee for consideration.

RESOLVED – that, *subject to the above amendments and agreements, the Work Programme as set out in Appendix 1 to the report be approved.*

9 FEEDBACK FROM COMMITTEE REPRESENTATIVES

The Chair and Councillor T.R. Hughes had attended the Cutting Our Cloth Task and Finish Group.

It was explained that cuts in respect of Streetscene had been debated. Members had understood the reasons for the cuts, and the view had been expressed that there was always room for improvement. However, the Group had concluded that the effect of the implementation of the cuts had not been any worse than originally anticipated. Members were informed that following an in-depth discussion regarding the treating of weeds growing on streets, the process adopted for addressing the problem would be reviewed. Councillor Hughes explained that he had suggested that this area of work be undertaken at a local level by the respective Town Councils.

The Chair had attended the Communications, Marketing and Leisure Service Challenge meeting held on the 16th December, 2015, and explained that the following issues had been considered:-

- Figures pertaining to Leisure provision within the Authority had been positive with evidence of growth across the County.
- Discussion on the work undertaken by the Youth Service.
- Issues pertaining to communications had been acknowledged. However, it had been felt that the introduction of a new structure would address the problems.
- The Events Strategy had been debated and consideration afforded as to how Denbighshire County Council promotes itself at events, particular reference being made to the profiling of local events such as village shows, and the light touch procedure to be adopted by Denbighshire. In reply to Members concerns regarding the importance of publicising events held in the County, the Corporate Director: Communities referred to the e-mail circulated to Members which detailed the restructuring process to be adopted.

Following further discussion, it was:-

RESOLVED – *that the reports be received and noted.*

Meeting ended at 12.10 p.m.