PARTNERSHIPS SCRUTINY COMMITTEE

Minutes of a meeting of the Partnerships Scrutiny Committee held in Council Chamber, Russell House, Rhyl on Thursday, 25 February 2016 at 9.30 am.

PRESENT

Councillors Raymond Bartley (Vice-Chair), Jeanette Chamberlain-Jones (Chair), Meirick Davies, Martyn Holland, Pat Jones, Pete Prendergast and Arwel Roberts.

Lead Member Bobby Feeley attended at the request of the Committee.

ALSO PRESENT

Corporate Director: Communities (NS), Head of Community Support Services (PG), Service Manager: Specialist Services (AP), Scrutiny Coordinator (RE) and Administrative Officer (CIW).

1 APOLOGIES

Apologies for absence were received from Councillors Dewi Owens and Bill Tasker.

2 DECLARATION OF INTERESTS

The following interests were declared in business items to be considered at the meeting.

Agenda Item 5: Development of a Community Hospital in Rhyl – a personal interest was declared by Councillor R.L. Feeley. The reason for the declaration was that the Councillor Feeley was an Independent Board Member on the Betsi Cadwaladr University Board.

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 OF THE LAST MEETING

The Minutes of a meeting of the Partnerships Scrutiny Committee held on Thursday, 14th January, 2016 were submitted.

Matters arising:-

Item No 7. Scrutiny Work Programme – In reply to a question from the Chair, the Scrutiny Coordinator confirmed that there were no meetings rooms available at the offices in Brighton Road, Rhyl for the next meeting of the Committee. Members

were informed the meeting, on the 14th April, 2016, would be held in the Council Chamber, Russell House, Rhyl.

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

5 DEVELOPMENT OF A COMMUNITY HOSPITAL IN RHYL

The Committee received a presentation from representatives of the Betsi Cadwaladr University Health Board on their current and future intentions with respect to the Royal Alexandra Hospital Site, Rhyl.

Betsi Cadwaladr University Health Board's (BCUHB) Executive Director of Strategy and its Area Director of Clinical Services (Central Area) attended the meeting to update Members on the progress to date with the above project. It was explained that the presentation had been brought to the meeting amid concerns that the project did not seem to be coming into fruition. BCUHB advised the Committee that:-

- The Strategic Outline Case (SOC) for a hospital in north Denbighshire had been approved by the Welsh Government (WG) in December 2013 and despite the time lapse the WG's support for the scheme remained;
- the project was now at the Outline Business Case (OBC) stage this stage required extensive engagement with partner organisations, third sector bodies, the public and Health Board staff in order to draw up a service scope and detailed plans for the project;
- as a result of engaging with the above partners the proposed service scope included the following areas: inpatient services, outpatient clinics, diagnostics, therapy services, community dental services, Child and Adolescent Mental Health Services (CAMHS); sexual health services, Single Point of Access (SPoA)/integrated working base and a community hub (café, third sector and meeting rooms):
- having regard to the number of services that would be housed on the site if all the services listed in the service scope were accommodated, individual services had been assessed to determine whether they would suitable to be co-located on the same site e.g. CAMHS with additional children's services, integrated health and social care services etc. In addition potential sites had been assessed to confirm whether they had the required capacity to accommodate a number of co-located community services;
- following two separate assessments the site of the Royal Alexandra Hospital, Rhyl had been identified as the preferred site, despite the design limitations and added cost premium the current hospital building's listed status would place on the Health Board as the developer;
- one of the actions in BCUHB's special measures recovery action plan was that it had to communicate better with its stakeholders, which included residents and local authorities. As part of this, during the summer of 2015, it had undertaken a 'listening exercise' to determine what its priorities should be going forward. These priorities and conforming with the requirements of the Social Services and Well-Being Act 2014, would shape any future service proposals approved by the BCUHB going forward:

- as the result of the above community conversation exercise the following six strategic priorities had been agreed:-
- to shift the focus of health services towards prevention and health improvement, consequently current services would need to be realigned to deliver this aspiration;
- > strengthen primary and community care, with particular emphasis on new models of care outside the traditional hospital care model;
- provide more integrated care by developing stronger partnerships with other sectors e.g. local government, third sector, carers and the community;
- provide hospital based services that deliver the best possible outcomes for people and that are sustainable for the future;
- to ensure that the patient would be the central focus of every aspect of the Board's work; and
- to develop, manage and value the Health Board's workforce and all its other assets and resources in order to support the Board's vision and strategic priorities across the areas:
- BCUHB's vision for a north Denbighshire hospital fitted-in with the above strategic priorities and the Board was committed to delivering the scheme, despite the fact that the scope had extended following consultation and the complexities and cost premium associated with the Royal Alexandra Hospital site;
- The development would be on the Royal Alexandra Hospital site and recent requests for a Minor Injuries Unit (MIU) to be situated on the site were being considered:
- The new hospital would have in-patient beds and a diagnostic area as a minimum:
- The next steps would be for the results of the scoping exercise and the design to be reviewed, this would include individual consideration and analysis being given to the services suggested as potential ones to have on site. Once a decision had been taken on which services would be on the site detailed designs for accommodating those services would be drawn-up prior to the OBC being agreed and submitted to the WG for approval.

Responding to the presentation Committee members:

- raised concerns on the slow pace of progress with this project, particularly in view of the fact that the WG had given assurances that money had been set-aside for the project;
- voiced concerns that the Health Board seemed to be attempting to accommodate too many different types of services on what was a fairly small site at the Royal Alexandra Hospital:
- stressed that a MIU was a requirement for an area with such a population density as north Denbighshire, a population which increased significantly during the tourist season:
- emphasised that in-patient beds were also a necessity in the area in order to ease the pressure on Ysbyty Glan Clwyd and community hospitals in the area;
- suggested the possibility of some clinics and minor surgical operations being undertaken at the Clarence Medical Practice, as it had a purpose built theatre and clinical rooms which did not seem to be fully utilised;

- stressed the need for a community hospital with an associated hub to be located on the Royal Alexandra Hospital site in Rhyl, they did however question the need for an array of mental health services to be established there;
- felt that the Health Board, in sticking with the Royal Alexandra site, may well have forgone the potential to realise a significant capital receipt, which could have been reinvested in a brand new hospital if the former hospital had been sold;

Responding to members' questions BCUHB representatives advised that:-

- they had twice, first in 2012 and then in 2015, looked at potential sites for developing a community hospital for north Denbighshire. Despite, its constraints and limitations, the only suitable site which had presented itself was that of the present Royal Alexandra Hospital. Regardless of the listed building's constraints it would not impede the area from having a modern, fit for purpose hospital to meet residents' needs, as the designers would work around any obstructions created by the 'old' building;
- if services were being re-located to the new site, staff would move with the service:
- there were some elements of mental health services being delivered from the Royal Alexandra Hospital at present e.g. community mental health services. Local need for a service would be a factor when deciding on which services would be located at the site;
- modern technology would also be considered when determining which services would need to be based in the north Denbighshire hospital site;
- there was a strong case being put forward on the benefits of having a MIU at the new north Denbighshire community hospital site, and perhaps even a centre to deal with minor illnesses, as this could help ease the pressure on the district general hospital and allow it to focus on unscheduled care;
- a real debate was needed on the benefits of having CAMHS and other related children and family services co-located at the new hospital. Initial discussions were currently underway on this with the local authority;
- whatever the cost of the final design for the new hospital it would need to be realistic. In response to a suggestion from the Committee, officials undertook to enquire on whether Cadw would provide funding for renovation work etc. due to the building's listed status;
- communication with residents and stakeholders in the past had not been satisfactory, however this was now improving;
- Welsh Language requirements were considered as an integral part of the Health Board's present and future service planning;
- Parking facilities would be factored into the project at the detailed design stage;
- General population growth and local development plan (LDP) requirements and their pressures on the primary care sector were routinely the subject of discussions between the Health Board and the local Planning Authority;
- It would not be practical to re-open some of the closed wards at the Royal Alexandra Hospital in the interim period as risks identified in relation to Fire Safety legislation were still present;
- It was too early at present to determine when the OBC would be ready for submission to WG, as the scale and scope of the final project was yet to be

agreed. However once the OBC was submitted to the WG they should approve it within 2 to 3 months. Work would then begin in earnest to deliver the project.

Prior to concluding the discussion BCUHB officials reiterated that bringing back inpatient provision to the north Denbighshire area was a longstanding commitment that the Health Board intended to deliver. With a view to delivering a sustainable long-term project the Health Board was looking at combining its delivery with the provision of other community focussed services. BCUHB officials undertook to brief members on the progress of the project.

The Chair thanked them for the presentation and for answering Members' questions and it was:-

RESOLVED – that the Partnerships Scrutiny Committee:-

- (a) receives the information presented to the Committee, subject to the above observations,
- (b) agrees and to invite representatives from Betsi Cadwaladr University Health Board to the Committee's meeting on the 7th July, 2016 to update Members on progress with the North Denbighshire Hospital project.

The Chair requested that a summary of the main points above be circulated to all County Councillors for information.

6 PROTECTION OF VULNERABLE ADULTS

A copy of a report by the POVA Co-ordinator (PC) had been circulated with the papers for the meeting.

The Head of Community Support Services (HCSS) introduced the report and advised that the report was presented to Members, at their request, as a follow-up to the annual report for 2014/15 which the Committee had considered in November, 2015, as Members wanted assurances around the management of risk to individuals who had been identified at risk of abuse. He advised that:-

- across Denbighshire there were circa 1,300 care home beds;
- 73 referrals of alleged abuse had been brought to a conclusion in 2014/15; 56 of these referrals alleged that the abuse had been committed within either a care or residential home or in the individual's own home, of which 42 were alleged to have taken place within a residential or nursing home;
- details of how the risk was managed for the individuals concerned were listed in the report;
- criminal prosecutions in these types of cases were rare, there had only been one during 2014/15 in some cases the individual concerned or their family did not wish to press charges once the risk had been removed;
- whilst the local authority dealt with Protection of Vulnerable Adults (POVA) referrals, not all allegations received concerned care staff. A case study included in the report highlighted how one referral investigated was actually against a member of staff from the Health Service, other allegations were against family members or friends:

Responding to members' questions the Head of Community Support Services and the Service Manager: Specialist Services confirmed that:-

- the Health Service was responsible for providing pressure mattresses, and it was increasing the number of mattresses it ordered;
- care home owners were, on the whole, co-operative with POVA referral inquiries and generally complied with any associated recommendations, because if their home was noted as under 'escalating concerns' it damaged their business;
- at any one time there was usually a couple of care home in the county under 'escalating concerns'. The Council would not refer potential new residents to those homes whilst they were under 'escalating concerns';
- allegations of a sexual nature were quite difficult to investigate, they could also range from very minor allegations to very serious ones;
- all allegations should be reported to the Council, even if the individual did not want to proceed with the investigation, as this would help the Council identify areas of concern or patterns of behaviour before they escalated;
- if alleged abuse took place within a family setting, whilst Social Services would always inform the Police it would be up to the individual, if he/she had the mental capacity, or family members otherwise to agree whether to proceed with a criminal investigation and/or press charges. In such cases the Social Services Department would always make arrangements to keep the vulnerable person safe from harm's way;
- recruitment of suitably qualified nurses was proving to be a particular problem for health services, including nursing home owners, at present;
- the publication of the report following the national review of domiciliary care was imminent. This report was likely to highlight the problems encountered with 15 minute care calls.

Having regard to the fact that the county and the country had an ageing demographic profile, members felt that more work was required to highlight to residents the importance of preparing for their future needs i.e. drawing up Power of Attorney documents (POA), will writing etc.

Members thanked the officers for a very informative report and requested that the level of detail contained within the report be included as an appendix to future POVA Annual Reports. It was then:-

RESOLVED – that subject to the above observations the Partnerships Scrutiny Committee:-

- (a) receive the report and acknowledge the important nature of a corporate approach to the Protection of Vulnerable Adults (POVA) and the responsibility of the Council to view this as a key priority area and to place it alongside the commitment and significance given by Denbighshire to Child Protection; and (b) agree that future annual reports on Adult Protection in Denbighshire include case studies and the detailed data analysis as included in the current report, as an
- case studies and the detailed data analysis, as included in the current report, as an appendix to the report.

7 SCRUTINY WORK PROGRAMME

A copy of a report by the Scrutiny Coordinator (SC), which requested the Committee to review and agree its Forward Work Programme and provided an update on relevant issues, had been circulated with the papers for the meeting.

A copy of the 'Member's proposal form' template had been included at Appendix 2, Cabinet's 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:-

14th April, 2016:-

The Committee was reminded that it had been agreed that an invitation to attend the meeting had been extended to Councillors S.A. Davies and T.R. Hughes to join Committee Members on a visit to the following locations in Rhyl after the meeting:-

- Rhyl Harbour, Pont y Ddraig and Harbour Cafe.
- Gerddi Heulwen.
- Development of the Promenade.
- Clwyd Alyn Housing Association Development.
- Site for new Premiere Inn.
- Scarborough Development.

In response to questions from Members, it was confirmed that an official site visit and tour of the new Rhyl High School complex had been arranged for all County Councillors on a separate date.

26th May, 2016:-

It was explained by the Scrutiny Coordinator that the Scrutiny Chairs and Vice Chairs Group would be meeting on the 3rd March, 2016, when they would be considering a number of requests received from Members for possible items for various meetings. Members were invited to complete and submit Member proposal forms, in respect of items they wished to be considered at future meetings.

The Scrutiny Coordinator requested that Members complete and submit the Self Evaluation Questionnaire Forms which had recently circulated. The importance of completing the forms was emphasised as the Council would, later in the year, be subject to a corporate assessment.

Following further discussion, it was:-

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

8 FEEDBACK FROM COMMITTEE REPRESENTATIVES

No reports were received from Committee representatives.

Meeting ended at 11.55 a.m.