

PARTNERSHIPS SCRUTINY COMMITTEE

Minutes of a meeting of the Partnerships Scrutiny Committee held in Council Chamber, County Hall, Ruthin and by Video Conference on Thursday, 9 February 2023 at 10.00 am.

PRESENT

Councillors Joan Butterfield (Chair), Jeanette Chamberlain-Jones, Kelly Clewett, Pauline Edwards, Bobby Feeley, Martyn Hogg, Raj Metri, Peter Scott (Vice-Chair) and Elfed Williams

Lead Member for Health and Social Care, Councillor Elen Heaton was in attendance at the Committee's invitation to present an item from her portfolio.

ALSO PRESENT

Joint Interim Head of Community Support Services (DS); Scrutiny Coordinator (RE); Committee Administrators- Host (SW) Minutes- (NH)

Betsi Cadwaladr University Health Board (BCUHB) Representatives: Alyson Constantine (AC), Integrated Health Community (IHC) Director of Operations (Central Area) for business item 5, and Fleur Evans, Head of Operations and Service Delivery (Centre) Mental Health and Learning Disability Division for Business item 6.

North Wales Police Representative: Detective Sergeant Vicki Keegans (VK) for business item 6.

Observers: Lead Member for Housing and Communities, Councillor Rhys Thomas and Councillors Hugh Irving and Andrea Tomlin.

1 APOLOGIES

Apologies for absence were received from Councillor David Williams and from Nicola Stubbins, Corporate Director: Communities. David Soley, Joint Interim Head of Community Support Services, was deputising for the Corporate Director at the meeting.

2 DECLARATION OF INTERESTS

Councillor Kelly Clewett declared a personal interest in business items 5 and 6 as an employee of Betsi Cadwaladr University Health Board.

3 URGENT MATTERS AS AGREED BY THE CHAIR

No urgent matters had been drawn to the Chair's attention.

4 MINUTES OF THE LAST MEETING

The minutes of the Partnerships Scrutiny Committee meeting held on 15 December 2022 were submitted:

Accuracy:

Page 8 of agenda pack: Councillor Martyn Hogg advised that the heading should read 'Crime Statistics Analysis' and not 'Crime Statics Analysis'.

The Committee:

Resolved: that, subject to the above amendment, the minutes of the meeting held on 15 December 2022 be received and approved as a true and correct record of the proceedings.

Matters arising: Page 8, 'Priority 3 – Local Priorities': in response to an enquiry on whether information had been received in relation to the 'Ask Angela Scheme' the Scrutiny Co-ordinator advised that the information had been circulated as part of the 'Information Brief' document circulated to all committee members earlier in the week. The Council's Public Protection Service had advised that as far as they were aware statistics were not collected in relation to the 'Ask Angela Scheme' by the local authority or anyone else. It was primarily a scheme for individual bars to adopt with no reporting back mechanism as far as Council officers were aware. It was generally promoted by organisations as a good practice initiative.

5 NORTH DENBIGHSHIRE COMMUNITY HOSPITAL PROJECT

The Lead Member for Health and Social Care, Councillor Elen Heaton, introduced the North Denbighshire Community Hospital Project to the Committee. The Project was to develop the Royal Alexandra Hospital (RAH) site in Rhyl.

The Lead Member expressed the importance of the project due to the current pressures facing Ysbyty Glan Clwyd. The Project was a vital development for Denbighshire and was of top priority. Project Leaders were working closely with the Welsh Government along with working in close and continuous partnership with Betsi Cadwaladr University Health Board (BCUHB).

The Integrated Health Community (IHC), Director of Operations thanked the Committee for being invited to the meeting and proceeded to present a presentation which included the following details: -

- The Capital Project was complex in provision and delivery.
- There were opportunities for the site to include additional services such as a Minor Injuries Unit (MIU) through the Business Case process.
- Full Business Case (FBC) was approved for BCUHB in March 2021.
- Welsh Government confirmed in December 2021 that the project was sound and approvable, funding now needed to be identified.
- BCUHB approved an Estates Strategy in January 2023 placing the RAH project within the top 6 with a completed Full Business Case (FBC).

- In January 2023 the Welsh Government requested that the Health Board confirm that the RAH was a priority and asked it to obtain support in principle from the Regional Partnership Board (RPB). The Health Board were compiling a response.
- Once full approval for funding was given, the project would take 3 months to mobilise and 31 months for the construction phase to complete.

The IHC Director explained that for every development there was a detailed process that needed to be followed within the Health Board. Although this had been a lengthy process, it had given the Health Board the opportunity to ensure that it was accurate, including several additional services of importance to be offered at the RAH site.

The approval process was explained to the Committee as outlined below:-

- Strategic Outline Case
- Outline Business Case
- Full Business Case- Funding could then be agreed.

The IHC Director thanked the Council for their close partnership in aiding to deliver the project and welcomed questions from members.

A discussion between Members led to questions being raised regarding the time that it had taken to get to this stage of the Project, and how long it would take to secure funding from the Welsh Government. Unfortunately, the IHC Director advised that she did not have the information however, she reassured the Committee that there would be a continued line of communication going forward.

Councillor Martyn Hogg expressed some concerns regarding understanding the approval process and the steps involved at each stage. He questioned if there was a flow chart that could be given to illustrate this and to support members' understanding of the process. The IHC Director confirmed that there would be a flow chart that detailed the stages of the approval process as stated above. She continued to explain that there was a circuitous route for each of the stages outlined which afforded for questions to be asked. The current stage of the project was that questions had been asked by the Welsh Government of which needed to be responded to, this would then form part of the finalisation of the Business Case which would lead to funding being agreed. Over the coming weeks the IHC Director was hopeful that they would be in the position where they had responded to the Welsh Government, and this would then facilitate the final decision to be made.

Queries were raised around what the Royal Alexandra Hospital would look like once the construction was completed and what services had been agreed to operate from the site. The Joint Interim Head of Community Support Services stated that a Full Business Case had previously been shared. This indicated the Services that would be provided, including illustrations of the hospital once

completed, however he would ensure that the information was shared again with Members of the Committee.

Members questioned if there was an opportunity for the Welsh Government to be scrutinised over their decision making process, for example how the Council and the Health Board could ensure that the project was continually moving forward to the next stages. The IHC Director clarified that they had been through a process with the Estates Strategy, and it was assumed that this enabled continuous conversations with the Government and the Health Board.

Final comments were made by Members regarding the length of time that it had taken for the project to get to its current stage. Many local community hospitals in Denbighshire were closed many years ago on the promise that this facility would be a replacement.

The Chair thanked the Officers for their update and welcomed a further update at the Partnerships Scrutiny Committee meeting which would be held in September 2023.

At the conclusion of the discussion the Committee:

Resolved: - subject to the above observations and the provision of the additional information –

- (i) to receive the information provided as part of the Royal Alexandra Hospital Development Project Update presentation; and***
- (ii) to request that a further progress report on all aspects of the Project's development be presented to the Committee at its September 2023 meeting.***

At this juncture, as the Committee was ahead of schedule, the Committee agreed with the Chair's proposal to vary the order of business and bring forward the Scrutiny Work Programme item.

6 SCRUTINY WORK PROGRAMME

The Scrutiny Coordinator guided Members through the Scrutiny Forward Work Programme (previously circulated).

It was explained that the Scrutiny Chairs and Vice Chairs had met on the 19th January 2023 and they considered a number of requests for Scrutiny at that meeting. Of the requests considered the Group asked that the Partnerships Scrutiny Committee schedule two items onto its Forward Work Programme for May 2023.

These were: -

- The Re-ballot for the Potential Rhyl Business Improvements District
- The Quality and Condition of Registered Social Landlords Housing Stock in Denbighshire.

In relation to the agenda for the next Partnerships Scrutiny Committee meeting due to be held on 30 March 2023, it was noted that currently there were no items to be discussed at that meeting. It was suggested by the Scrutiny Coordinator that the date of the March meeting was kept in the event that any urgent matters arose. In the event of no urgent business being forthcoming that meeting should be cancelled.

The Scrutiny Coordinator advised that in December 2022, Cabinet had approved a New Capital Process and supported the Terms of Reference for a new Capital Scrutiny Group. This would be similar to the former the Strategic Investment Group (SIG) that had been in existence during the term of the previous Council. A request had been received that one representative from each Scrutiny committee should be appointed to serve on this Group. There would be six meetings a year and the representative would be expected to report back to the Committee after they had attended the meeting. Therefore, it was requested that one representative and one substitute representative be nominated, chosen, and agreed by the Committee.

The Chair welcomed nominations from the Committee.

Councillor Peter Scott was nominated to be the representative for Partnerships Scrutiny Committee with Councillor Joan Butterfield being nominated as his substitute. Both these nominations were seconded and Members voted in favour of the appointments. At the conclusion of the discussion.

The Committee:

Resolved:

- (i) subject to the inclusion of a progress report on the North Denbighshire Community Hospital/Royal Alexandra Hospital Development Project for the September 2023 meeting, to confirm its forward work programme as detailed in Appendix 1 to the report;***
- (ii) if, nearer the date of its next scheduled meeting on 30 March 2023 no business had come forward to warrant the holding of the meeting, it was to be cancelled; and***
- (iii) to appoint Councillor Peter Scott to serve as its representative on the Capital Scrutiny Group (CSG), with Councillor Joan Butterfield to serve as his substitute.***

At this juncture the Committee adjourned for a break and resumed its business at 11.10am.

7 PARTNERSHIP WORKING IN RELATION TO MENTAL HEALTH

The Lead Member introduced the Partnership Working in relation to Mental Health business item to the Committee. It was stated that the Council, BCUHB and North Wales Police (NWP) were all regularly working partnership in this particular area.

The Joint Interim Head of Community Support Services explained to the Committee that the three organisations worked in partnership together and gave a brief outline of the role of the Council within the partnership.

He explained that the three organisations worked together in a variety of situations and primarily they work within the statutory functions in which they had to deliver. This mainly included issues around the Mental Health Act and the Mental Capacity Act. This involved working with people who had mental health difficulties and required intervention, this regularly required all three partners to work together.

The following example was given: -

If a member of the community needed their mental health assessing, Social Workers and Doctors would be involved in the assessment and would visit the resident. If the resident was in a specific area in which they were difficult to reach, the Local Authority would make contact with the Magistrates Court to obtain a warrant in which North Wales Police would be asked to assist. The Police had powers under the Mental Health Act, meaning that they could detain individuals who appeared to have Mental Health difficulties. The Police would liaise with the Local Authority and the Health Board and then the three organisations would work together to ensure that that person received the assessment, support, and care that they needed.

He continued to explain that there were Community Mental Teams, and these were primarily Health Board and Local Authority employees. They worked with people who had been referred to the Mental Health Service and needed ongoing care and support.

The Head of Operations and Service Delivery Central (BCUHB) explained the work of the Health Board in the partnership. There were integrated teams predominately all working together. The Health Board had statutory obligations to deliver under the Mental Health Act, Social Services and Well-being Act. The Health Board had a dedicated Criminal Justice Liaison Service which supported 999 calls by giving support and direction should there be any mental health requirements. Co-located Health Board Teams were also based within the Local Authority.

The Head of Operations continued by stating that there were significant increases in Mental Health Referrals during and since the COVID pandemic. There were continued issues with recruiting and retaining staff which had an impact on the services which could be provided, and the workforce already in place. Discussions to address this were ongoing.

The Health Board was looking at other services available to help people without the need for them to be referred to Statutory Services. Recently the 111 Press 2

service was launched, currently operating 7 days per week 8.30am-11pm. This Service was going to become a 24-hour service in the future and was available to all members of the Community who required support. If any of the calls received to this service were deemed as urgent then an ambulance or the Police would be dispatched. The Health Board utilises co-working and deemed it vital to the successful of the partnership.

The Head of Operations stated that it was crucial that the partnership work between the Local Authority, Health Board and North Wales Police continued.

The Chair thanked The Head of Operations for her presentation.

Detective Sergeant, Vicki Keegans, explained the role of North Wales Police within the Working Partnership and her role within the Protecting Vulnerable Persons Unit.

The Detective Sergeant reiterated that the partnership worked well across all three organisations.

There was a close working relationship between Police Personnel, the Mental Health Lead within the Health Board, and other agencies to ensure there was compliance with legislation and National Guidance.

The Detective Sergeant expressed that Mental Health was very important and that it should be of a concern for everyone within the community.

It was explained that the Police responded to persons in crisis to ensure that no harm was caused to the individual or the people around them. Calls were received in the control room and it was determined if positive, urgent reactions were needed to ensure the safety of everyone involved.

The calls that came into the Control Room amongst others were:

- Suicidal ideation
- Self-harming with weapons
- Public concerns of persons putting themselves in danger.

Acting on calls that were received, ambulances would be dispatched, and further communication would be made with health partners and the Co-located Criminal Justice Health Nurses.

The Criminal Justice Health Nurses had been involved in delivering training to Police Officers on the front line and office staff regarding mental Health. The Nurses also offered support and safeguarding advice at crisis point. In many cases there was the need to support the person involved to hospital safely to be assessed and treated.

The Detective Sergeant continued to explain that the Police had the authority to detain vulnerable members of the Community under Section 136 (Mental Health). This was acted upon with careful consideration to enable them to be taken to a place of safety.

All Police Officers would submit a referral regarding the person at risk which would then be shared with other agencies, for example Social Services and the Community Mental Health Team to aid in care and support being given. The referral would then be subject to further review to decide upon a suitable response to support the individual which may involve a multi-agency strategy discussion under the All Wales Procedures Legislation. All persons detained under the Mental Health Act were reviewed by the Mental Health Act Office and statistics and data were shared with the Welsh Government and North Wales Police to improve service delivery.

The Detective Sergeant stated that Officers had regular access to training, this included Dementia training. 86% of North Wales Police Officers had received in house Mental Health training. In the coming months Officers would be attending a Young Person Mental Health Course hosted by the Child and Adolescent Mental Health Service (CAMHS).

The Chair thanked representatives from all three organisations for their detailed explanations regarding their valuable work undertaken.

Members discussed the following in further detail: -

- Councillor Martyn Hogg queried whether any improvements could be made to the referral process and whether the integration of services worked well. Officers stated currently there was a tender out looking at changing the referral system to a system called Pronto. This would take the reliance off emailing, instead an automated report would be sent to agencies to ensure that no important information was lost. There was a Single Point of Access (SPoA) Service in place which was a multi- agency team trained in reviewing Mental Health referrals, to establish the most suitable service and support for the individual involved.
- Questions were raised as to where individuals who had been detained were held and whether these places were deemed as sufficient for a person with Mental Health Issues. Responding Officers clarified that an individual detained under a Section 136 would be detained in one of the Section 136 Units at the hospital as a place of safety.
- It was queried as to how sensitively Dementia was dealt with within the Community and the importance of families receiving support. Officers stated that the Health Board was currently working on a Dementia Strategy which included a pathway for accessing support for carers and families. Once a diagnosis of Dementia was given, depending on the level of need, patients would be seen by Community Services and a support plan would be determined for outside agencies to get involved such as MIND.

The Chair thanked officers for the information they provided to the Committee and welcomed future progress updates.

At the conclusion of the discussion the Committee:

Resolved: *to receive the information provided on the working practices of the Council's Social Care Service, Betsi Cadwaladr University Health Board and North Wales Police in relation to mental health matters, including their partnership working arrangements aimed at ensuring the safety of individuals in crisis and the provision of appropriate support to those who required it.*

8 FEEDBACK FROM COMMITTEE REPRESENTATIVES

None.

Meeting concluded at 11.50am