#### MINUTES OF A MEETING OF THE HEALTH AND SOCIAL CARE SCRUTINY PANEL HELD AT THE TOWN HALL, NELSON ON 16<sup>TH</sup> AUGUST, 2016

### PRESENT-

Councillor K. Hartley - Panel Leader (In the Chair)

#### **Panel Members - Councillors**

M. Adams W. Blackburn K. Turner

S. Wicks

### Also in attendance:

Paula Harrison James Downie Dr Damian Riley

Chris Thomas Audrey Westwell Helen Hedges Yvonne Hope Chris Craddock Lynne Rowland Youngaddaction Lancashire Acorn Recovery Projects/Calico Executive Medical Director, East Lancashire Hospitals Trust (ELHT) Senior Orthopaedic Consultant, ELHT Pendle Seniors Group Critical Friends East Lancashire Critical Friends East Lancashire 2BR Radio Station Committee Administrator (Pendle Borough Council)

(Apologies for absence were received from Councillor N. McEvoy.)

#### \* \* \* \*

10.

### MINUTES

### AGREED

That the minutes of the meeting of the Panel held on 28<sup>th</sup> June, 2016 be approved as a correct record.

## 11. APPOINTMENT OF DEPUTY PANEL LEADER

### AGREED

That Councillor W. Blackburn be appointed as Deputy Panel Leader for the municipal year 2016/17.

## 12.SCRUTINY REVIEWS

### Drug and alcohol rehabilitation provision in East Lancashire

## (a) Addaction

Paula Harrison, the Service Manager of Youngaddaction Lancashire gave a presentation on the young persons substance misuse service provided through the national charity Addaction.

#### Health and Social Care Scrutiny Panel (16.08.2016)

She explained that Addaction had retained the Lancashire young persons substance misuse service contract for the next seven years, with expansion into the east of the county. As part of the retendering exercise it had been agreed to increase the age range of the service from 21 to 25 years.

It was reported that the new model, which had been in effect since 1<sup>st</sup> April, 2016, was made up of three strands. The first was around early intervention and prevention work involving one-to-one support and group work. The second also involved one-to-one support and group work, but included therapeutic and medical provision provided by the charity's own doctor. The final strand was around participation and community engagement. This included training and awareness sessions which could be arranged for large or small groups as appropriate.

Information was also provided on the changing landscape, with particular reference being made to the increase in cannabis use from 10 years ago; problems with Performance Enhancing Drugs and Steroids (PEDS); Novel Psychoactive Substances (NPS) (formerly known as 'legal highs') and nitrous oxide use. With regard to nitrous oxide use, Members were particularly interested to hear of the outreach work being carried out in South Ribble as a result of funding from the Police and Crime Commissioner.

Following the presentation, Paula answered various questions including those related to substance use in young children; the work carried out in primary schools; involvement with the local college; and the help provided by those who had been through recovery.

The Panel Leader thanked Paula for her attendance and invited her to attend a future meeting of the Panel to provide a further update.

### (b) Acorn Recovery Projects

Acorn Recovery Projects (Acorn) was part of the Calico Group and was a charity that provided a range of recovery services for those breaking free from drug, alcohol and other addictions. The Treatment Manager, James Downie, attended the meeting and gave a presentation on the services provided. He explained that the service had previously worked in partnership with Inspire Integrated Substance Misuse Service, but as from April, 2016 a new stand-alone model had been in operation. Although no longer in partnership, liaison with other organisations was still a key factor in the work that was carried out.

James provided information on Acorn's recovery programmes, which ranged from helping those in active addiction, to skills training for those in recovery. The programmes included tier three community programmes and tier four residential rehabilitation.

Tier three included a structured day care Reduction and Motivation Programme (RAMP) which had been delivered in prisons in two hourly sessions, two days per week, over a 12 week period. Tier four included a Dependency, Emotional, Attachment Programme (DEAP) which also ran over 12 weeks and was provided on a full time basis in a rehabilitation facility.

Members welcomed the opening of a new residential rehabilitation facility in Burnley where the DEAP could be delivered. The Panel had been invited to the launch of this residential addiction treatment centre, which had taken place the previous day. Those who attended took the opportunity to view the facilities and speak to Acorn staff, 80% of which had been through recovery themselves.

#### Health and Social Care Scrutiny Panel (16.08.2016)

The Panel was also told of the provision of supported housing, available for up to two years. This was second stage housing and was a model of recovery taking place in the service users own community with placement counsellors on call.

Following the presentation, James answered questions from members of the Panel.

The Panel Leader thanked him for his attendance and invited him to attend a future meeting of the Panel to provide a further update.

#### 13.

14.

#### FRACTURE CLINIC

Dr Damien Riley, the Executive Medical Director of East Lancashire Hospitals Trust and Mr Chris Thomas, a Senior Orthopaedic Consultant attended the meeting to update the Panel on the relocation of the Fracture Clinic from Burnley General Hospital to the Royal Blackburn Hospital.

They provided information on the reasons for the trial transfer and confirmed that, following an analysis of the trial, the Fracture Clinic would remain at Royal Blackburn Hospital.

They stated that this was not the beginning of a drift of services from Burnley to Blackburn as some feared and went on to explain the current proposals for Burnley General Hospital. This included an expansion to elective activity and improvements to chemotherapy and endoscopy care. An application for funding for a new eye service had also been made.

### PENDLE AGEING WELL ACTION PLANS

The Principal Policy Officer submitted the Council's recently developed 'Pendle Older People' Action Plan.

It was explained that progress of the original 2012-15 plan had been overseen by the Pendle Seniors Group (PSG), who had agreed to retain overall lead for the Plan. However, although the plan was now driven by the PSG it was important that the Council's actions were monitored and managed effectively.

It was proposed that -

- Progress on the Council's actions be reported annually to the Health and Social Care Scrutiny Panel.
- Quarterly updates on the Council's actions be reported to PSG as part of their overall performance management role.

### AGREED

- (1) That Pendle's Older Peoples Plan and the Council's role in the delivery of this plan be approved.
- (2) That progress on the Council's actions be reported six monthly to the Health and Social Care Scrutiny Panel.
- (3) That the quarterly update reports to Pendle Seniors Group be circulated to members of the Health and Social Care Scrutiny Panel for information.

## 15. LOCAL STRATEGIC PARTNERSHIP THEMATIC GROUPS REPORT

The health and social care elements of the Local Strategic Partnership thematic groups annual report was submitted for information, following consideration by Scrutiny Management Team.

A discussion was held with regard to the Lancashire and South Cumbria Change Programme. It was noted that there had been no further communication from Healthier Lancashire relating to the upcoming Sounding Boards, to which the Panel had appointed Councillor Wayne Blackburn as its representative.

Reference was also made to Pendle's Health and Wellbeing Group. It was stated that a forthcoming meeting had been cancelled and it was rumoured that the Group had been disbanded.

### AGREED

- (1) That the Neighbourhood Services Manager be asked to invite the Health and Social Care Scrutiny Panel to comment on future Local Strategic Partnership thematic groups reports prior to submission to Scrutiny Management Team.
- (2) That further information be sought from Healthier Lancashire on the current status of the Lancashire and South Cumbria Change Programme and in particular, the proposed dates for the Sounding Boards.
- (3) That the Council's Executive Member for Health and Wellbeing continue to be invited to meetings of this Panel and, through his liaison with Lancashire County Council be asked to provide regular updates on changes to health and social care provision in Pendle.

### 16. CARE/NURSING HOMES

### (a) End of Life Nursing Care

Further to a request from Scrutiny Management Team, the Panel was asked to consider gathering information on the provision of end of life nursing care, following concerns raised by a member of the public.

The Panel Leader reported that a national report on this issue had been released today and suggested that this be looked at before making a decision as to whether to include this topic in the Panel's work programme.

## AGREED

That consideration of this item be deferred to the next meeting of this Panel. In the meantime, Panel members be asked to view the national report on this issue in preparation for the next meeting.

### (b) Councillor Contact Details

Members were asked to comment on the current format of a poster of councillor contact details, designed in response to a previous scrutiny review for display in care homes and nursing homes, prior to it being updated for circulation.

# AGREED

That the current format be agreed, subject to inclusion of ward details.

### 17.

# CLINICAL COMMISSIONING GROUP UPDATE

The minutes of the April meeting of the Pendle Locality Commissioning Steering Group were submitted for information.

Further information was also provided on the Prescription for Wellbeing Grants (Social Prescribing), as requested at the last meeting of the Panel.

# AGREED

That Dr Berry, the Pendle Locality Clinical Lead, be invited to the next meeting of the Panel to provide an update on the work of the Clinical Commissioning Group.

## 18.

## AIREDALE HEALTH EVENT

The Panel Leader provided a brief report on the Panel's attendance at the Airedale Health Event held in June at Barnoldswick Civic Hall. The event began with a public Airedale NHS Trust Board meeting and was followed by the opportunity for people to visit numerous stalls from health supporting organisations, of which the Health and Social Care Scrutiny Panel was one. It was estimated that there had been approximately 100 visitors during the day.

Following this, the Panel also took the opportunity to host a stall at Pendle Care Fair, which had been held earlier today at Colne Municipal Hall. Unfortunately attendance at the event had been poor and it was felt that this had been due to lack of publicity for the event. However, Members agreed that attendance at such events provided a valuable opportunity to promote the work of the Panel and they welcomed future invitations.

The Panel was also asked to consider an offer from the North West Ambulance Service to deliver a free course on emergency life support (ELS).

# AGREED

That this Panel supports the delivery of emergency life support training to all elected members.

# 19.

## WORK PLAN

The Panel's work plan 2016/17 was submitted for information.

# AGREED

That further discussions on the provision of end of life nursing care be added to the Team's Work Plan for October, 2016.

CHAIRMAN \_\_\_\_\_