



**Nottinghamshire
County Council**

JOINT CITY AND COUNTY

HEALTH SCRUTINY COMMITTEE

MINUTES

of meeting held on **10 JULY 2007** at the
Council House from 10.00 am to 12.50 pm

Nottingham City Councillors

- ✓ Councillor Liversidge (Chair)
Councillor Akhtar
- ✓ Councillor Dewinton
- ✓ Councillor Heppell
Councillor Johnson
- ✓ Councillor Mellen
Councillor Newton
Councillor Spencer

Nottinghamshire County Councillors

- ✓ Councillor Bullivant
- ✓ Councillor Cutts
Councillor Dobson
- ✓ Councillor Lally
Councillor Lodziak
Councillor Tsimbiridis
- ✓ Councillor Winterton (Vice-Chair)
- ✓ Councillor Wombwell

- ✓ indicates present at meeting

Also in Attendance

- | | | | | |
|---------------|---|---|---|---------------------------------------|
| Mrs B Cast | - | Head of Overview & Scrutiny |) | Nottingham |
| Mrs N Barnard | - | Overview and Scrutiny Team Leader |) | City |
| Ms A Kaufhold | - | Committee Administrator |) | Council |
| Ms K Pocock | - | Overview and Scrutiny Review Co-ordinator |) | |
| Ms S Kirkwood | - | representing Interim Chief Executive | - | Nottingham City Primary Care Trust |

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|--------------|--|----------------------------------|
| Mr M Garrard | - Scrutiny Officer | - Nottinghamshire County Council |
| Mr M Cooke | - Chief Executive |) Nottinghamshire |
| Mr J Walker | - Associate Director, Planning & Partnership |) Healthcare Trust |
| Ms T Smart | - PA – Associate Director |) |

Observers:-

| | | |
|-------------|---|------------------------------------|
| Ms L Baines | - Forum Support Officer |) Commission for Patient |
| Ms R Verdon | - Forum Support Officer |) and Public Involvement in Health |
| Ms B Venes | - Nottinghamshire Healthcare Trust Patient and Public Involvement Forum | |

11 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors Bullivant, Johnson and Spencer.

12 DECLARATIONS OF INTERESTS

Councillor Liversidge declared a personal interest in agenda item 4(b), Nottinghamshire Healthcare Trust (minute 15), which did not preclude him from speaking or voting on this item.

Prior to consideration of agenda item 4(b), Nottinghamshire Healthcare Trust (minute 15), Councillor Tsimbiridis declared a personal interest which did not preclude him from speaking or voting on this item.

13 MINUTES

RESOLVED that, subject to recording the apologies for absence forwarded by Councillors Newton and Tsimbiridis, the minutes of the last meeting held on 12 June 2007, copies of which had been circulated, be confirmed and signed by the Chair.

14 NOTTINGHAMSHIRE HEALTHCARE TRUST

(a) Report of Head of Overview and Scrutiny

RESOLVED that the report of Head of Overview and Scrutiny, copies of which had been circulated, be noted.

(b) Nottinghamshire Healthcare Trust - presentation

Consideration was given to a presentation by Mike Cooke, Chief Executive, and Jim Walker, Associate Director, Planning and Partnership Development, Nottinghamshire Healthcare Trust.

Mr Cooke began the presentation by setting the scene and highlighting the objectives of the organisation which included:-

- 130 sites in Nottinghamshire, Leicestershire and Rotherham comprising 1283 in-patient beds, employing approximately 6,000 staff with a budget of £278 million for 2007/08;
- Nottinghamshire Healthcare Trust was committed to delivering high quality services to the communities it served and putting users at the centre by providing services locally and sensitively, while, building on existing integrated service provision and strengthening partnerships with local authorities and voluntary sector providers;
- valuing staff and having a zero tolerance approach to violence and aggression;
- the strategy for the next five years included:-
 - local and national policy;
 - working on the NHS modernisation agenda;
 - working with commissioners and partners in social care;
 - utilising annual Directorate plans;
 - provision of responsive, tailored services working with commissioners and partners in social care through consultation with services users, carers, families, friends and staff;
- there were eight strategic priorities, seven of which reflected the domains of 'Standards for Better Health' comprising:-
 - safety, which was key for mental health and learning disability services;
 - clinical and cost effectiveness;
 - transparent governance and decision making processes;
 - care environments and amenities;
 - patient focus and evaluating the patient experience, including access to services, separation of local and forensic services and to developing a needs based approach;
- the eighth priority reflected the work towards developing a responsive member led organisation that would benefit from the financial freedom of Foundation Trust status which would provide more autonomy to face out and work in the community.
- the fact was that one in four people would suffer serious mental health issues in their lives, with currently one out of ten young people suffering from a diagnosable mental health problem. In addition one out of twenty-two people had a diagnosable learning disability which rose to one out of ten when autism was included.

Mr Cooke confirmed that the following work was progressing:-

- development and re-provisioning of Highbury Private Finance Initiative;
- city community and adult mental health service reconfiguration;
- development of the learning disability integrated team and transition to a local authority lead agency role;
- development and remodelling of the Older Persons Integrated Team.

Other areas under review and development included:-

- learning disability and enabling people back into the community and development of medium secure facilities;
- the psychiatric intensive care unit;
- the extension of prison in-reach services;
- the child and adolescent mental health service provision;
- the development of plans for all services to provide better integrated and seamless care across all groups and from appropriate facilities.

During the ensuing discussion the following additional information was provided in response to members' questions:-

- on the question of whether mental health issues were being appropriately diagnosed and if Practice Based Commissioners (PBC) were accessing appropriate services had been raised as an issue at a joint meeting with the Chief Executives of local Primary Care Trusts and the Healthcare Trust Mr Cooke said that evidence had shown that approximately 25% of General Practitioner consultations included a mental health issue component. Further work was needed to develop the relationship with PBC and review how to deal with drug and alcohol addiction. It was essential that areas of unmet need were addressed and that more interventionist work would be needed if practices were identified as not dealing with or diagnosing mental health issues;
- an awareness raising campaign was being launched in the media culminating in World Mental Health Day. The Annual General Meeting of Nottinghamshire Healthcare Trust on 25 September 2007 would also be used as a platform to promote discussion and reduce the stigma of mental ill health. Further support specifically to address the needs of young people to deal with the stigma of mental health was also being developed;
- consultation was planned for the proposed development of a medium secure unit at Highbury to accommodate people with a range of issues such as learning disability and mental health. This may also accommodate people moving down from high level secure units on a pathway to being integrated back into the community. The main objective was to ensure people could be accommodated closer to home;
- the facilities at Highbury had been transformed to high quality, state of the art accommodation with new single room patient wards having just been completed;
- a review was taking place with local authority services to signpost mental health services and develop a single access point for a range of services and direct access to specialists in mental health services. One point of access was through Adult Services which would direct individuals if they were assessed as needing support;
- there was evidence to support the view that cannabis use or alcohol abuse which could lead to serious addiction, was masking mental health issues and that the links between such usages and mental health should be investigated fully;
- responding to members' concerns relating to the high level of young people with diagnosable mental health problems the following options were proposed:-

- to reduce the stigma and engage more young people to talk openly about the issues as currently one in four was affected;
- to address work life balance issues and provide good role model for young people;
- to engage young people in debate at school;
- to identify the early signs before the age of 16, such as anti social behaviour, as it had been proven that children's life chances and opportunities were significantly improved when there is early intervention.

In conclusion, Mr Cooke restated the organisation's objective and commitment to ensure local services were strengthened and integrated services developed with partners. The impact of an ageing population necessitated that resources and services were appropriately managed and delivered.

RESOLVED

- (1) that the appreciation of this Panel for the presentation and information provided by Mr Cooke and Mr Walker be recorded;**
- (2) that information relating to the planned Highbury provision of services for older people, be presented to this Panel in October;**
- (3) that the development of other services at Highbury hospital be brought to this Committee as part of the Consultation process;**
- (4) that the Chief Executive of Nottinghamshire Healthcare Trust be asked to confirm in writing any forthcoming key strategic proposals which would necessitate consideration by this Panel, to provide further information on the use of Aricept in treating early onset dementia and forward a copy of the twelve Directorate Plans for information.**

15 WORK PROGRAMME

Consideration was given to a report of the Head of Overview and Scrutiny relating to the work programme 2007/08, copies of which had been circulated. In light of the previous discussions with the Chief Executive of Nottinghamshire Healthcare Trust, members agreed the following additions to the work programme:-

- October 2007 question development session for discussions with Nottinghamshire Healthcare Trust;
- November 2007 – discussions with Nottinghamshire Healthcare Trust and partners in adult services;
- December 2007 – update on the NHS Treatment Centre at Queen's Medical Centre;
- February/March 2008 – consideration of a short topic based review.

RESOLVED

- (1) that subject to the inclusion of the additional items discussed, the Work Programme for the Municipal Year 2007/08, be agreed;**

- (2) that officers write to the Nottinghamshire Healthcare Trust Patient and Public Involvement Forum to invite them to inform the Committee of any issues they had identified as part of their work which could benefit from further scrutiny by this Committee.**