



**Committee: OVERVIEW AND SCRUTINY COMMITTEE**

**Date: WEDNESDAY, 8<sup>TH</sup> JULY 2015**

**Venue: MORECAMBE TOWN HALL**

**Time: 6.00 P.M.**

Councillors are reminded that as Members of overview and scrutiny they may not be subjected to the Party Whip, which is prohibited under the Lancaster City Council Constitution.

## **A G E N D A**

**1. Apologies for Absence**

**2. Minutes**

Minutes of the Meeting held on Monday, 15<sup>th</sup> June, 2015 (previously circulated).

**3. Items of Urgent Business authorised by the Chairman**

**4. Declarations of Interest**

To receive declarations by Members of interests in respect of items on this Agenda.

Members are reminded that, in accordance with the Localism Act 2011, they are required to declare any disclosable pecuniary interests which have not already been declared in the Council's Register of Interests. (It is a criminal offence not to declare a disclosable pecuniary interest either in the Register or at the meeting).

Whilst not a legal requirement, in accordance with Council Procedure Rule 10 and in the interests of clarity and transparency, Members should declare any disclosable pecuniary interests which they have already declared in the Register, at this point in the meeting.

In accordance with Part B Section 2 of the Code Of Conduct, Members are required to declare the existence and nature of any other interests as defined in paragraphs 8(1) or 9(2) of the Code of Conduct.

**5. Update on the Dementia Friendly Pilot**

Diane Armstrong from the Dementia Forum will provide an update to the Committee.

**The City Council's Older Peoples Champion and relevant Ward Councillors have been invited to attend.**

**6. Royal Lancaster Infirmary - Care Quality Commission's Report - Update**

Representatives from University Hospitals of Morecambe Bay NHS Foundation Trust have been invited to attend the meeting to provide an update.

**All Members of Council have been invited to attend.**

**7. Update on 'Better Care Together' Review of Local Health Services (Pages 1 - 9)**

Representatives from the Lancashire North Clinical Commissioning Group have been invited to attend the meeting.

An Executive Summary, providing background information, is attached and a shorter presentation will be provided on the evening to inform of the current and future health and care services.

**All Members of Council have been invited to attend the meeting to ask questions.**

**8. Consideration of any requests for Councillor Call for Action (in accordance with the process)**

**9. Consideration of any Petitions (in accordance with the process)**

**10. Locality Working**

**11. Work Programme Report (Pages 10 - 13)**

Report of the Chief Officer (Governance).

**ADMINISTRATIVE ARRANGEMENTS**

**(i) Membership**

Councillors Nigel Goodrich (Chairman), June Ashworth (Vice-Chairman), Lucy Atkinson, Alan Biddulph, Brett Cooper, Rob Devey, Caroline Jackson, David Whitaker and Phillippa Williamson

**(ii) Substitute Membership**

Councillors Tracy Brown, Geoff Knight, Christopher Leadbetter, Roger Mace and Terrie Metcalfe

**(iii) Queries regarding this Agenda**

Please contact Jenny Kay, Democratic Services - telephone (01524) 582065 or email [jkay@lancaster.gov.uk](mailto:jkay@lancaster.gov.uk).

**(iv) Changes to Membership, substitutions or apologies**

Please contact Democratic Support, telephone 582170, or alternatively email [democraticsupport@lancaster.gov.uk](mailto:democraticsupport@lancaster.gov.uk).

MARK CULLINAN,  
CHIEF EXECUTIVE,  
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**The better care  
together strategy**  
the future for health  
and care services in  
Morecambe Bay

**February 2015**

# Our Vision for Health and Care Services across Morecambe Bay



By 2025 Morecambe Bay will have a well-deserved reputation as one of the best health and care systems in the world. Promoting wellbeing and preventing ill health will be our prime purpose with mental health, children's, and older people's services receiving equal priority with all other areas of care.

Working here will be an experience that attracts high performing, compassionate staff who are as drawn to our culture of achieving excellence as they are to the beauty and variety of our landscape.

Specialist teams, including hospital consultants will increasingly work in the community, sharing their expertise with GPs and community teams. These health and care professionals will work in a partnership of trust with patients as equal partners to keep people fit and well. When people are ill they will receive high quality care and support to help them to manage their own condition - mainly within their own homes or local community.

If people do need to go into hospital to receive care they will have confidence that they will be treated with dignity and respect. They will expect to recuperate at or near home, freeing up beds for those who really need them. A&E departments will be seen as the last rather than the first port of call.

The funding we receive will fairly reflect the needs of our local populations enabling us to make the best use of every NHS and Social Care pound, meaning that as well as maintaining existing services we can take advantage of new technology and advances in medicine at an early stage to provide even better outcomes for our patients.

People will live longer and in terms of their health and well-being will have a better quality of life wherever they live, whatever their income. When people reach the end of their lives, wherever possible this will be at home in the comfort of familiar surroundings or in a specialist place of care such as a nursing home or hospice.





The Better Care Together programme is the review of health and care services across Morecambe Bay which will turn this vision into a reality.

Our Strategy outlines a new and ambitious way of delivering better care for the people across the Bay, based upon detailed work carried out in the period October 2012 – June 2014.

At the end of June 2014 we submitted a Strategy to NHS England and Monitor, the regulator of Foundation Trusts. Both of these organisations have a statutory role in providing advice and scrutiny to ensure that any proposals for change put forward by local NHS organisations meet appropriate quality and financial standards. As we are asking them for financial and developmental support to underpin our proposals, their agreement is essential for us to deliver our Strategy.

In July and August last year NHS England and Monitor provided us with feedback about our proposals and identified a number of areas where additional work was required. This document responds to the points raised.

This is not a consultation document. This Strategy has been produced to provide our staff, local communities and regulators with an overview of the work of the programme, to share our recommendations based on the work done to date, and to provide a focus for further discussion about the future of local health and care services. This will shape the direction for the development of detailed business cases and action plans. No decisions have been made at this stage, and the Strategy is likely to continue to evolve following feedback from our stakeholders including NHS England, Monitor and the Clinical Senate. The proposals for maternity may need to be reviewed depending upon the findings of the Morecambe Bay Investigation, being led by Dr. Kirkup and the Cumbria and Lancashire North Maternity review by the Royal College of Obstetricians and Gynaecologists.

If you have any further questions about this document or would like a printed version please feel free to contact us via our website: [www.bettercaretogether.co.uk](http://www.bettercaretogether.co.uk) or call the better care together team on **01524 518 638**.



# 1. Our Executive Summary

When things go wrong in our local hospitals it hits the headlines, and the quality, safety and financial issues experienced by our hospital Trust have been well publicised in recent years. But the less well known story in Morecambe Bay is not about what happens inside hospitals – it's about what isn't happening in the primary, community and social care services that most of us rely on for most of our healthcare needs.

Precious lives are being lost because we aren't doing enough to support people to prevent them from becoming ill in the first place. Then, when people are ill, we don't always give them the advice or tools to manage their own condition and prevent crises from occurring - so all too often they end up in a hospital bed with all the upheaval and distress that this can involve.

Our local communities deserve much more. We owe it to them to be clear about what has gone wrong and why and our proposals for fixing this for the future, so that we can restore public confidence in local health and care services. This is why all the health and social care organisations that deliver services across the Bay have united under the banner of the "Better Care Together" programme to co-design high quality adult, children's and mental health services that will be safe, affordable and fit for the future.

The result is a range of proposals shaped around our unique geography and demographics, and is based on sound clinical evidence, national and international best practice and detailed analysis by independent third parties. This work has been led by hospital doctors, GPs, nurses and social care colleagues who have been passionate about finding out what local people and our

partners think of their health and care services and their aspirations for the future. The findings of this extensive engagement have influenced the solutions that we are proposing.

At the heart of our Strategy is a "population" based approach to promoting wellbeing and providing care in which people and their needs are the focus rather than processes and buildings. Responsibility for health and care will become a true partnership between the people needing to access services and those who provide them. People will be enabled to make lifestyle choices that will keep them healthy for longer and to take control and manage their long term conditions with local clinical teams integrating the support and technology they need around them. This will include more effective use of video links, texting and other telehealth facilities which will reduce the need for patients to travel whether from their own or their nursing care home.

Our local GP practices will become the way for people to gain access to all care including hospital services. GPs will work closely with a wide range of other health and social care colleagues to ensure people's needs are met, and to cut through the red tape that causes unnecessary barriers, delays and expense in the existing system. Hospital consultants will work alongside these new teams in the community to share their expertise, so that more staff are able to help patients cope with the long term conditions that so many of us will encounter in our later years.



Over the next two years our focus will be on making these changes happen which will require radical changes in both community and hospital based services. We have a detailed plan which outlines exactly how we will deliver this through a range of projects aimed at ensuring that we have consistent standards of care without reducing the ability to tailor this to the specific needs of local people. Therefore some projects are Bay wide whereas others focus solely on South Cumbria or North Lancashire.

By ensuring that community based services become the first port of call for most people, our local hospitals will be able to focus on providing excellent care to fewer patients who really need it. The reduced pressure on hospital services will drive up service standards, costs will fall, lengths of unnecessary hospital stays will reduce and waiting times will improve.

Many out-patient clinics will take place in the community with hospital consultants travelling to patients rather than the other way around. People will only attend these clinics when they really need to, rather than getting caught up in a cycle of unnecessary appointments caused by an outdated system.

Subject to the outcome of the Kirkup investigation it is our intention that modernised emergency care and consultant led maternity units will remain as core essential hospital services in Barrow and Lancaster even though we know that these services cost us far more to deliver than the funding we receive to provide them. However the distances between our hospital sites, and the consequent travelling times for patients and their families, coupled with the fact that Barrow has a number of industries of strategic national importance including nuclear and defence facilities, mean that it would be unsafe to attempt to reduce or remove these services.

Our research has shown that in addition to the pressures caused by inadequacies in primary, community and social care, the other major contributing factor to the failings in our hospitals is the challenge of providing acute services to a relatively small population spread across three geographically diverse sites.

This is why our medium term proposal (2-3 years) is that the majority of inpatient elective surgery is moved onto two sites. The work we have undertaken to date suggests that this should be on at Royal Lancaster Infirmary and Furness General Hospital. This would help to solve historic problems with staffing, drive up surgical standards and improve outcomes and patient experience for people across the Bay.

A key question for many is the future of Westmorland General Hospital. We see this continuing as a local hospital, but also becoming a vibrant hub for a range of community and specialist services to meet the needs of the South Lakeland population. An element of this could be creating a centre of excellence for eye care and surgery building on the macular degeneration service and extensive eye surgery that already takes place. Alternatively the site may become a centre of excellence for day case surgery. Whatever happens most existing services will remain as surgery only accounts for a modest percentage of activity on this site. We will work with local people and our partners over the next 12 months to develop these ideas further. We remain open minded about what the final options could look like as long as they meet the overall objective of providing high quality, safe and affordable services. The reason we are sharing our thinking at this stage is to allow us the opportunity to have the honest conversations needed to achieve this. In the meantime we are fully supportive of the local campaign to bring radiotherapy to the site.

**...By ensuring that out of hospital services become the first port of call for most people, our local hospitals will be able to focus on providing excellent care to fewer patients who really need it...**







Although 525 fewer in hospital jobs will be needed in the future, this will happen through natural wastage and a reduction in agency staff. However our culture will change, and everyone from consultants to health care assistants will need to work more flexibly to deliver care when and where our patients need it. We will provide the support and training needed to achieve this, and for many staff this will provide exciting new development opportunities.

The approach we describe in this Strategy will require some radically different service models. The Five Year Forward View just published by NHS England echoes our proposals for integrated out of hospital care built upon GP practices, supported by specialist teams. It also recognises the challenges of viability faced by small District General Hospitals and suggests one option would be for them to become part of an integrated local care provider along with community and primary care services. We believe that the opportunities presented by the Forward View are crucial to creating the environment to enable us to succeed.

These proposals resolve most but not all of our financial deficit. Nevertheless our consideration of over 130 options and the work we have done so far indicates that our recommendations represent the most clinically safe and financially viable proposal for local people. Our plans do provide a solid platform for us to build upon and we need to act quickly to prevent further deterioration of our position. We will continue to challenge ourselves with ambitious targets for closing the gap further. We will also be working with NHS England to seek support to review the way that funding is allocated to reflect our unique local challenges.

We have been mindful that the NHS and Local Authority partners in North Cumbria and the rest of Lancashire are also undergoing changes and will continue to work with colleagues as our proposals develop to ensure that they complement rather than compete with plans within those localities.

We live and work here. Our families are reliant on the same services as the people we serve. We want to provide the best possible care within the realities of the budgets available to us and recommend the Better Care Together Strategy as a credible and exciting way forward for our local health economy.

**Signed: Better Care Together partners**





**Better Care Together Team**

NHS Moor Lane Mills  
Moor Lane, Lancaster  
LA1 1QD

**OVERVIEW AND SCRUTINY COMMITTEE****Work Programme Report****8<sup>th</sup> July 2015****Report of Chief Officer (Governance)****PURPOSE OF REPORT**

For Members to consider the Committee's Work Programme for the ensuing year and response regarding health scrutiny.

**This report is public.**

**RECOMMENDATIONS**

- (1) That the Committee consider the Work Programme for the ensuing year.
- (2) That the Committee considers its response regarding health scrutiny.
- (3) That the Committee considers inviting the Leader of the Council to a future meeting of the Committee.

**1. Introduction**

Members are requested to consider the Work Programme for the ensuing year.

**2. Updates**Requests for suggestions for Work Programme

At the beginning of each Municipal Year, suggestions are invited from Members and officers on ideas for this year's Work Programme. The views of the public are also sought through a press release.

An updated Work Programme with actions from the last meeting is attached at Appendix A.

Management Team has been requested to suggest items and consider the issues that could be referred to the Committee received from members of the public and also issues submitted by City Councillors. These will be reported to the Committee.

The Committee is asked to consider its Work Programme for the forthcoming year in line with the City Council's Corporate Priorities.

Health Scrutiny

At the last meeting the Committee, whilst considering its Work Programme report, requested:-

Work Programme Item	Decision
Carers visiting older people in their own homes and how the carers were trained, monitored and employed.	Remove from the Work Programme and request Councillor Hartley to raise this issue at the County Council's Health Scrutiny Committee.
Monitoring of Older People's Homes both private and public.	Remove from the Work Programme and request Councillor Hartley to raise this issue at the County Council's Health Scrutiny Committee.

As the City Council's Health Scrutiny representative Councillor Hartley has raised this issue with the County Council. He has been advised that: -

*The topics of carers and old people's homes are still quite extensive in terms of scrutiny. A representative from the Committee has been invited to attend a County Council Steering Group meeting to discuss this in more detail.*

*Before being able to consider an item for the work plan the Steering Group will need to know what particular aspect of those topics are felt in need of scrutinising and why, with any evidence to support the concerns.*

The next available dates to meet with the Steering Group are as follows: -

- 3<sup>rd</sup> August – 3.00pm
- 14<sup>th</sup> September – 2.00pm
- 5<sup>th</sup> October – 2.00pm

All meetings are held in County Hall, Preston.

Members are requested to consider this issue further.

Leader of the Council

An invitation has been submitted to the Leader of the Council, in accordance with the wishes of the Committee, to attend this meeting. Unfortunately, the Leader has been unable to attend and has sent her apologies. The Committee is asked whether it would like to invite the Leader to a meeting later in the year.

<b>SECTION 151 OFFICER'S COMMENTS</b>	
As there are no financial implications arising from this report the S151 officer has no comments to make.	
<b>MONITORING OFFICER'S COMMENTS</b>	
The Deputy Monitoring Officer has been consulted and has no further comments.	
<b>BACKGROUND PAPERS</b>  None.	<b>Contact Officer:</b> Jenny Kay <b>Telephone:</b> 01524 582065 <b>E-mail:</b> jkay@lancaster.gov.uk

**Work Programme & Actions from 15<sup>th</sup> June 2015 meeting**

Work Programme Item	Decision
Update on the Renewable Energy Strategy.	(1) That the previous report be circulated to the Committee. (2) That officers be asked for a briefing note advising of the latest position. (3) That, subject to (1) and (2) above this issue be considered at the 9 <sup>th</sup> September 2015 meeting.
Update report on Health Scrutiny.	That the City Council's representative on the County Council's Health Scrutiny Committee be invited to attend the 8 <sup>th</sup> July 2015 meeting themed on health.
Update on Dementia Friendly Pilot.	That an update report be provided for the 8th July 2015 meeting and that the City Council's Older Peoples Champion and relevant Ward Councillors be invited to attend.
Draft Empty Property Strategy 2015/17.	That a briefing note informing of the latest position be provided to the Committee prior to the next meeting. The Committee to then consider whether this item should remain on the Work Programme.
Carers visiting older people in their own homes and how the carers were trained, monitored and employed.	Remove from the Work Programme and request Councillor Hartley to raise this issue at the County Council's Health Scrutiny Committee.
Monitoring of Older People's Homes both private and public.	Remove from the Work Programme and request Councillor Hartley to raise this issue at the County Council's Health Scrutiny Committee.
Royal Lancaster Infirmary - Care Quality Commission's report.	To be considered at the 8 <sup>th</sup> July 2015 meeting.
Update on 'Better Care Together' Review of Local Health Services.	To be considered at the 8 <sup>th</sup> July 2015 meeting.
Marmot Review.	That a copy of the presentation previously provided be circulated to the Committee. The Committee to then consider this issue further.

Consideration of Draft Older People's Housing Strategy.	Remove from the Work Programme.
Update on the impact of the new Anti-social Behaviour Act 2014 on Ridge Square.	To be considered at the Annual Community Safety meeting on 18 <sup>th</sup> November 2015 with a written report being provided for the meeting.
Annual consideration of Community Safety.	To be arranged for the meeting on 18 <sup>th</sup> November 2015.
Review of Fire Station Capacity.	That previous information on this issue be circulated to the Committee.
Annual consideration of Older People's Issues (inviting Age UK and other relevant agencies).	(1) That a meeting be arranged for summer 2016. (2) That the Cabinet Member with Responsibility and the Champion for Older People be invited to attend the meeting.
Updates on the future of the Castle and on the Beyond the Castle project.	(1) Remove from the Work Programme. (2) That the Committee receive updates as and when provided.