

## NOTTINGHAM CITY COUNCIL

### HEALTH SCRUTINY COMMITTEE

**MINUTES of the meeting held at Ground Floor Committee Room - Loxley House, Station Street, Nottingham, NG2 3NG on 18 June 2015 from 13.34 - 14.34**

#### **Membership**

##### Present

Councillor Anne Peach (Vice Chair)  
Councillor Ilyas Aziz  
Councillor Dave Liversidge  
Councillor Jim Armstrong

##### Absent

Councillor Ginny Klein  
Councillor Corall Jenkins  
Councillor Neghat Nawaz Khan  
Councillor Chris Tansley  
Councillor Merlita Bryan

#### **Colleagues, partners and others in attendance:**

Dave Miles - Assistive Technology Manager, Nottingham City Clinical Commissioning Group  
Clare Routledge - Health Scrutiny Project Lead, Nottingham City Council  
Barbara Venes - Patient Involvement  
James Welbourn - Governance Officer, Nottingham City Council

#### **11 APOLOGIES FOR ABSENCE**

Cllr Merlita Bryan  
Cllr Corall Jenkins  
Cllr Neghat Khan  
Cllr Ginny Klein  
Cllr Chris Tansley

Martin Gawith

Cllr Anne Peach (vice chair) chaired this meeting as Cllr Ginny Klein was unable to attend.

#### **12 DECLARATIONS OF INTEREST**

None

#### **13 MINUTES**

The minutes of the Health Scrutiny Committee meeting held on 27 May 2015 were confirmed and signed by the Chair.

## 14 ADA'S STORY

Dave Miles, Assistive Technology Project Manager at Nottingham City Clinical Commissioning Group presented Ada's Story to the Committee, which consisted of two short animated DVDs highlighting the importance of delivering integrated care to citizens and the positive impact this approach has on the citizen and their family and carers, and answered questions from attendees:

- (a) there are 4 key areas within the whole system of integrated care:
  - Coordination of ongoing services – social care and health need to be joined up where possible;
  - Independence pathway – including reablement, self-care, urgent care, and a single front door;
  - Access and navigation - people need to know how to access the right information and services;
  - Assistive technology in the form of telecare and telehealth enabling independent living;
- (b) there is an existing good level of joined up working, with 8 care delivery groups aligned with City Council neighbourhood teams;
- (c) multi-disciplinary teams have been established through GP practices; membership includes GPs, health and social care professionals and a care co-ordinator and meetings are held weekly to discuss the care of high risk patients;
- (d) there are currently 19 care co-ordinators; these are non-clinical professionals but this role will be more public facing in the future;
- (e) both staff, and service user surveys have revealed that people's perceptions of what is happening within the integrated care programme is improving and 86% of service users would recommend the service to others;
- (f) areas of work that have not developed as much as expected include reablement and urgent care not yet being formally integrated, and key messages not always being understood by staff;
- (g) as well as being part of the multidisciplinary teams, GPs sit on the integrated care programme board and are involved in each of the pathway working groups responsible for planning and development of services;
- (h) all of the integrated care programme funding totalling £25 million has been pooled under the better care fund and although efficiencies are expected over time this is not key as integration is not about saving money;
- (i) neighbourhood teams are strengthening their knowledge and expertise so they are not so reliant on specialist services;
- (j) volunteers known as care navigators will be recruited from the community to help those that do not want to engage with services or flag on a care register. Self-care will be promoted;

- (k) CityCare Partnership is developing holistic training to enable staff to have wider skillsets. Staff co-location is also key;
- (l) consideration is underway to develop 7 day services initially regarding community matrons, as well as 7 day working for integrated community equipment services. For example, this could enable a bed to be delivered over the weekend;

**RESOLVED to:**

- (1) thank Dave Miles for the presentation;**
- (2) receive Dave Miles back in October to present a timeline to members outlining integrated care programme delivery;**
- (3) ask that survey comparison statistics with their 2014 equivalent come back in October.**

**15 WORK PROGRAMME 2015/16**

The Committee considered a report of the Head of Democratic Services relating to the work programme for the Health Scrutiny Committee for 2015/16.

- (a) Councillor Liversidge raised the issue of universal credit and how this is impacting on families and the health inequalities this imposes upon them;
- (b) Councillor Aziz volunteered to be a member of the end of life services study group, with further volunteers needed. Clare Routledge agreed to write to absent committee members asking if they would like to participate;

**RESOLVED to:**

- (1) ask Clare Routledge to create a timetable framework with regards to the end of life services study group, and report progress back to the Committee;**
- (2) agree a suitable date for members to visit Nottingham CityCare Partnership clinics within the Victoria Shopping Centre.**