

## **Minutes of the Meeting of the Health and Wellbeing Overview and Scrutiny Committee held on 12 March 2018 at 7.00 pm**

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**Present:** Councillors Graham Snell (Chair), Victoria Holloway (Vice-Chair), Gary Collins, Joycelyn Redsell and Gerard Rice

Ian Evans, Thurrock Coalition Representative  
Kim James, Healthwatch Thurrock Representative

**Apologies:** Councillor Jack Duffin

**In attendance:** Roger Harris, Corporate Director of Adults, Housing and Health  
Les Billingham, Assistant Director of Adult Social Care and Community Development  
Frances Leddra, Principal Social Worker and Strategic Lead, Safeguarding and Complex Care  
Tania Sitch, Integrated Care Director for Thurrock, Thurrock Council and North East London Foundation Trust  
Catherine Wilson, Strategic Lead Commissioning and Procurement  
Geraldine Rogers, Nurse, North East London Foundation Trust  
Jenny Shade, Senior Democratic Services Officer

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Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website.

### **40. Minutes**

The Minutes of the Health and Wellbeing Overview and Scrutiny Committee held on the 18 January 2018 were approved as a correct record.

### **41. Urgent Items**

There were no items of urgent business.

### **42. Declarations of Interests**

No interests were declared.

### **43. Healthwatch**

The Chair asked Kim James how the Sustainability and Transformation Plan consultation had progressed locally. Kim James stated that HealthWatch had attended many consultation events, listened to residents' concerns and had distributed over 5000 hard copies of the consultation documentation. The

general concern was that the voice of residents was not being heard with many questions being unanswered.

#### **44. Thurrock First - Health and Social Care Single Point of Access**

Tania Sitch, Integrated Care Director of Thurrock Council and North East London Foundation Trust, updated Members on the Thurrock First Service which had been launched in November 2017. That collaboration had taken place between health and social care partners and provided a single access point for information, professional advice, referral, assessment and had access to services across the health and social care for Thurrock residents. With Thurrock First aiming to reduce duplication and bring together the previous separate initial points of contact.

Councillor Redsell thanked Tania Sitch for the report and asked whether the service would be extended to children's services and whether residents might be reluctant to use the service as calls may trigger safeguarding issues. Tania Sitch stated that future efficiencies of the service would include links to children's services and that the Council would have a duty to respond to all calls.

Councillor Collins thanked Tania Sitch for the report and appreciated the evidence based outcomes and questioned how long before the IT was fully up and running. Tania Sitch stated that IT programmes were being devised to talk to each other and this may take some time. Roger Harris stated that multiple systems were being developed so that data sharing could be accessed but could potentially take time to achieve but this should not be seen as a shortcoming of the service.

The Chair stated that examples of improved outcomes for residents showed that conversations were being undertaken and that residents were able to access the services and assets available in the community so that complex health issues could be addressed.

Councillor Redsell asked how accessible the contact number was. Tania Sitch stated that the number had been publicised at the launch and continued to be advertised in general practitioner surgeries, by the ambulance service, in health hubs and libraries and by HealthWatch. All telephone calls made to the old numbers would automatically be diverted to the new service number.

#### **RESOLVED**

**That the Health and Wellbeing Overview and Scrutiny Committee noted and commented on the progress in the development of Thurrock First.**

#### **45. Living Well in Thurrock: Adult Social Care Transformation Programme Update**

Les Billingham, Assistant Director for Adult Social Care and Community Development, presented the report that reflected on what had been achieved

through the delivery of the Living Well in Thurrock Programme and set out the next steps and future plans.

The Chair thanked Les Billingham for the very comprehensive report.

Councillor G Rice stated that the Adult Social Care Department should be congratulated on the positive feedback received and the work being recognised on the transformation work being undertaken within Thurrock.

Councillor Collins echoed Councillor G Rice comments and stated what a great achievement this was.

Ian Evans asked what the planning timescales would be on the 21<sup>st</sup> Century Care Home on the Whiteacre and Dilkes Wood sites. Les Billingham stated that this development had some complications as the health centre was also in need of repair and proposals to rebuild this as part of the primary care estate development may form part of the planning application. Les Billingham stated that if a decision was made not to rebuild the health centre a business case would be presented to Cabinet in late summer 2018 with the residential home possibly ready by 2020.

Councillor Redsell stated that consideration should also be given to those residents that wished to stay at home and integrate their help into the community. That different forms of care home developments would be required in Thurrock to ensure that loneliness would be addressed. Les Billingham stated that this was the objective of Positive Futures and that Thurrock should build new residential homes so that they are as good as they can be. Les Billingham stated that Thurrock was an incredible place that had an amazing community spirit with the good will and intent of residents being demonstrated.

Councillor Redsell stated that Thurrock should be building good aspirational homes that residents want to live in.

Councillor G Rice stated that it was exciting news that Thurrock were to build 32,000 new homes and that Thurrock Council should take this forefront opportunity to say that Thurrock's residents need the right type of homes, a variety of designs that had facilities nearby.

Councillor Redsell stated that help should also be given to the private sector housing market to ensure that properties could be freed up as required.

Roger Harris suggested that a Joint Health and Housing Initiative Report be added to the work programme for the next municipal year.

The Chair questioned how long before further wellbeing teams could be introduced. Les Billingham stated that the pilot would run for 12 months which would be sufficient time to evaluate the concept and provide proper evaluation data. Les Billingham stated the roll out of this delivery model would be the way Thurrock would continue to work into the future.

The Chair thanked Officers for the report and that it was good news that it focused on serving the people of Thurrock.

## **RESOLVED**

- 1. That the Health and Wellbeing Overview and Scrutiny Committee noted and commented on the Adult Social Care Transformation Programme, Living Well in Thurrock.**
- 2. That the Joint Health and Housing Initiative Report be added to the 2018/19 work programme.**

### **46. Dementia Strategy - Implementation Progress**

Catherine Wilson, Strategic Lead Commissioning and Procurement, updated Members on the progress made within Thurrock of the implementation of the Southend, Essex and Thurrock Dementia Strategy 2017-2021 and informed Members of future events to ensure that an inclusive approach of the strategy implementation in Thurrock.

Councillor Redsell stated that help should be available for all adults in the community to ensure they are aware of the services and still feel needed in the community. Catherine Wilson stated that the wellbeing teams focused on those residents and offered close support and would react as required. Roger Harris stated that these were not just specialist services but for wider community responses and awareness to ensure that residents did not feel isolated.

Councillor Collins asked if there would be any buddy-up mentoring schemes for supporting carers to support each other so that they do not feel isolated. Catherine Wilson stated that the Cariads service was available and that more work would need to be done as part of the consultation process.

Councillor Collins questioned whether the Living Well in long term care was adequately resourced. Catherine Wilson stated that a lot of work was being undertaken with residential and care homes and training would be on-going.

Councillor G Rice agreed with Councillor Collins that social integration was vital but stated that under-doctoring in Thurrock should be addressed as a priority.

Councillor V Holloway stated that consideration should also be given to the support of couples when one of them may be the carer who may become ill. Catherine Wilson stated that the social care assessment would be undertaken to future proof all circumstances and prioritise what residents want.

The Chair stated that this could be a difficult and complex situation and that education was vital and maybe look at other local authorities on what they have undertaken on their dementia strategy.

Councillor Redsell asked whether the Police had information on dementia patients. Catherine Wilson stated that it was important on how this can be undertaken with the Police and that further work would continue to address this.

Members requested that the Dementia Strategy be added to the 2018/19 work programme to be presented in 12 months' time.

## **RESOLVED**

- 1. That the Health and Wellbeing Overview and Scrutiny Committee commented on the current position regarding the Southend, Essex and Thurrock Dementia Strategy in Thurrock.**
- 2. That the Dementia Strategy be added to the 2018/19 work programme.**

### **47. Supporting People with Personality Disorders and Behaviours that Challenge**

Fran Leddra, Principal Social Worker and Strategic Lead Safeguarding and Complex Care, informed Members on the position to supporting people with Personality Disorders and Behaviours that challenge.

Kim James thanked Officers for the report and that the Committee had listened to HealthWatch's concerns and had reacted quickly and results had been achieved already. Those areas of concern were with those individuals that did not engage with services available but knew the services would be there when required. The objective would be to make residents feel safe and have services in place in times of crisis. Kim James stated that training had also been offered to the voluntary sector.

Councillor Collins questioned whether there was any particular common reason to cause challenging behaviour. Fran Leddra stated that this could be due to a wide variety and spectrum of reasons and issues.

Councillor Redsell questioned how Members should deal with those residents who request confidentiality on issues such as hoarding. Fran Leddra stated that adult safeguarding could come into place where self-neglect or harm was evident.

Councillor G Rice questioned whether the Outreach Team had sufficient support from both social workers and psychiatrics. Fran Leddra stated that the Outreach Team were fully staffed and were succeeding with the pressure and demands of the services.

The Chair questioned what interventions would be in place for those residents that had not engaged. Fran Leddra stated that a "safety net" would be put in place with all multi agencies being aware of all issues and that professional

help would be available when those residents required it the most. Residents may also indicate that help was required by gravitating to one area out of pattern.

Kim James stated that agencies were aware of those residents in crisis and liaised and coordinated with them until they were ready to engage.

Councillor V Holloway questioned whether the training had been extended to the Police. Fran Leddra stated that training had been extended to all key parties that were actively engaging.

The Chair thanked HealthWatch for raising this issue and that it proved that the Health and Wellbeing Overview and Scrutiny Committee addressed and responded to issues as they arose.

## **RESOLVED**

**That the Health and Wellbeing Overview and Scrutiny Committee commented on the current position regarding services for people who have a personality disorder.**

### **48. Joint STP / Orsett Hospital Consultation - Verbal Update**

Roger Harris stated that following the decision made by the Health and Wellbeing Overview and Scrutiny Committee to join the Joint Committee with Essex and Southend he and Members had attended informal and formal meetings. That Councillor Snell had been made Vice-Chair of the Joint Committee and that the Consultation had been extended to the 23 March 2018. Roger Harris stated that the response would be a joint response but reserve the right to submit responses once further information was available. There had been particular concerns on unanswered questions on transport, the service plan, finances, Orsett hospital and the integrated medical centres. It was envisaged that following the end of the consultation period, the Joint Committee will continue to meet, consider and address issues.

Councillor Snell stated that the result of the consultation so far were not surprising. With no clinical evidence as to why the consultation was being undertaken. Councillor Snell stated that there were so many unanswered questions and residents were not exactly sure what was being proposed. That no definitive answers had been given on when Orsett hospital would close and where services would be situated.

Councillor Redsell stated that having attended public consultations it was evident that residents did not have the right information and understanding and would like to see some positivity come out of these consultation events.

Roger Harris stated that this was down to the element of trust with the consultation process and that residents were not convinced on the proposed plans and how these services would be delivered.

Councillor G Rice stated that it was down to distrust and had concerns that the integrated medical centres might not be able to pick up all the services such as dialysis. Kim James stated that HealthWatch had spoken to users and carers at dialysis units and as patients were transported by ambulance there was no real concern as to where the treatments would be undertaken, just that importance of these treatments being received.

The Chair stated that Members should be sceptical on what services would remain in Thurrock and that different responses were being given depending on who you spoke to.

Councillor Collins stated that he would like to see a business model and see something in writing that no services would be moved out of Thurrock.

The Chair stated that the consultation was being clinically driven but had not seen any evidence of this as yet.

Kim James stated that HealthWatch had invited representatives from the Sustainability and Transformation Plan to meet residents so that real time issues and views could be discussed and picked up.

Kim James stated that dates had been cancelled for the Sustainability and Transformation Plan Programme Board and had been informed that HealthWatch should join the Chairs Group. Kim James had concerns that the Sustainability and Transformation Plan was losing the capacity to have real independent voices heard. Councillor Snell agreed to raise this issue at the formal Joint Health and Wellbeing Overview and Scrutiny Committee this week.

#### **49. Work Programme**

The Chair stated that this was the last Health and Wellbeing Overview and Scrutiny Committee for this municipal year and that the work programme was now complete.

The Chair asked Members if there were any items to be added or discussed for the work programme for the next municipal year.

Members agreed that the Dementia Strategy be added to the next municipal year work programme to be presented in 12 months' time.

Members agreed that a Joint Health and Housing Initiative Report be added to the next municipal year work programme.

#### **RESOLVED**

- 1. That the item Dementia Strategy be added to the 2018/19 work programme.**

2. **That the item Joint Health and Housing Initiative Report be added to the 2018/19 work programme.**

The Chair thanked Members and Officers for their contribution and their continued support to the Health and Wellbeing Overview and Scrutiny Committee.

**The meeting finished at 9.00 pm**

Approved as a true and correct record

**CHAIR**

**DATE**

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