

COUNCIL

(Civic Centre, Port Talbot)

Members Present:

4 October 2018

The Mayor: **Councillor**

The Deputy Mayor: **Councillor S.Jones**

Councillors: A.R.Aubrey, S.Bamsey, D.Cawsey, M.Crowley,
S. ap Dafydd, A.P.H.Davies, N.J.E.Davies,
O.S.Davies, R.Davies, C.Edwards,
S.E.Freeguard, C.Galsworthy, W.F.Griffiths,
J.Hale, S.Harris, N.T.Hunt, S.K.Hunt,
C.J.Jones, J.Jones, L.Jones, R.G.Jones,
S.A.Knoyle, E.V.Latham, A.Llewelyn,
A.R.Lockyer, J.Miller, S.Miller, R.Mizen,
J.D.Morgan, S.Paddison, S.M.Penry,
D.M.Peters, R.Phillips, M.Protheroe,
L.M.Purcell, S.Purse, P.A.Rees, A.J.Richards,
P.D.Richards, R.L.Taylor, A.L.Thomas,
D.Whitelock, C.Williams, A.Wingrave,
R.W.Wood and A.N.Woolcock

Officers in Attendance: A.Evans, H.Jenkins, A.Thomas, C.Griffiths,
C.Furlow, A.Manlipp and J.Woodman-Ralph

1. DECLARATIONS OF INTEREST

Councillor A. Aubrey As she is a Member of the
Community Health Council.

Councillor C.Edwards As she is a Member of the
Community Health Council and
confirmed her dispensation to
speak only.

Councillor S.Freeguard As she is a Member of the
Community Health Council and
confirmed her dispensation to both
speak and vote thereon.

2. **INTRODUCTION BY THE LEADER OF COUNCIL**

The Leader of Council welcomed representatives of the Abertawe Bro Morgannwg University Health Board (ABMU) to the meeting of Council, in particular the Chairman, Andrew Davies and the Chief Executive, Tracy Myhill.

The Leader stated that the Council was keen to improve relationships with the Health Board and increase partnership working. As Chair of the Western Bay Partnership he was keen to improve collaboration, to speed up processes and integrate financial resources.

In particular the lack of consultation and consideration of the concerns raised by the three directors of Social Services across the ABMU area in relation to proposals to cut the number of hospital beds, was raised.

The meeting today was timely in that preparations were being made to prepare for winter pressures and also in light of the recently announced Welsh Government's draft budget position for 2019/20.

The Leader outlined a few examples where improvements were required including the exit of Bridgend from the ABMU, Continuing Health Care and Community Care packages and the process around the allocation of the Transformation Fund. The Leader advised the Health Board representatives that any assumptions that there was capacity in the Community Care Service, provided by the Authority, to take up any additional demand as a result of the cut in the number of hospital beds was ill-founded.

3. **PRESENTATION FROM ABMU**

The ABMU representatives thanked Members for the invitation to meet with them and confirmed that they welcomed more meaningful dialogue.

Council received a presentation on the work of ABMU during which Tracy Myhill advised that not only did the Health Board provide a health service for those suffering from ill health but also to improve the health of the population as a whole, in conjunction with the Authority. The Health Board would work towards providing both sustainability and stability in its provision and would also be updating its out of date Strategy.

The Health Board representatives apologised for the lack of strategic engagement undertaken with the Authority and other partners in relation to the proposed cut in the number of hospital beds. The work at Neath Port Talbot Hospital had resulted in a lot of learning opportunities for the Health Board which had been rolled out to other ABMU hospitals.

The Health Board advised that going forward it would focus on older people together with older people with mental health issues. It was acknowledged that it was detrimental to the wellbeing of older people to keep them in hospital longer than necessary and would very often result in them being transferred to a residential home rather than discharged to their own homes. It was acknowledged that some of the pressures on the Authority's Domiciliary Care was as a result of the administration of medication, in the main.

In relation to budgets the Health Board advised that it had an anticipated overspend of £20m by the end of the year.

In relation to the Transformation Bid the Health Board saw this as an opportunity to work together with the Authority and no service changes were envisaged as a result of the boundary change.

4. **QUESTIONS FROM MEMBERS**

Following the above presentation Members were invited to ask questions as follows:-

- In June the Social Care, Health and Wellbeing Scrutiny Committee had given feedback on the consultation on bed closures, however, it was most disappointing that it had not been acknowledged by the ABMU. Had the Health Board considered the implications on hospital admissions? How would winter pressures be addressed? In addition the Engagement Document entitled 'Your NHS – help us change for the better', had only been received by the Authority the day before this meeting, giving Members little time to read it. The Health Board apologised for not acknowledging receipt of the consultation response and to the late circulation of the document – and confirmed that going forward they would link more closely with the Authority and other partners. In relation to the winter pressures the Health Board had a Winter Plan in place which included £2m which had been set aside to open a number of additional beds.

- Concern was expressed that the number of beds had been reduced before the analysis of the consultation had been made public. What implications would the number of reduced beds have on the Ambulance Service? The Chief Executive of the Health Board advised that they worked closely with the Ambulance Service and that the beds that had been closed were not in the acute areas and as such would not have any adverse effect on the ambulance service. ABMU advised that last year the average length of stay in hospital had reduced.
- Members asked ABMU for details of its plan for the Transformation Fund monies and were advised that they would be building on the asset based approach in partnership with the Director of Social Services, Health and Housing. In addition it would focus on the preventative agenda, encouraging people to look after their own health. In relation to primary care the Health Board was looking at adopting the cluster approach and to providing care closer to people's homes.
- Members asked how ABMU decided on whether funding would be provided in certain cases and were advised that there was an evidence based process which determined whether ABMU would pay for treatment in some cases. At this point the Leader of Council asked that Members pass details of any individual cases onto him and he would in turn refer them onto ABMU.
- Members raised concerns around the recruitment of G.P.'s and were advised that the recruitment and retention of G.P.'s was an issue. In order to address some of the issues ABMU liaised with the University to ensure there were enough students going through the system. An event would be held to promote Wales and especially Neath Port Talbot.
- Members asked for ABMU's view on the provision of social prescribing by the voluntary sector and how this was being promoted? The ABMU representative confirmed that they were committed to the scheme and that both CVS and NRW were engaged on the scheme, which could benefit from the Transformation Fund.
- In relation to Delayed Transfer of Care, what was ABMU doing to map the needs of carers in line with legislation? ABMU gave assurances that with the changes as a result of the

reconfiguration of the Health Board, greater emphasis would be given to providing better support to carers.

- Members were pleased to note that the Health Board valued the support of the Authority and asked whether ABMU would agree to participate in joint scrutiny? The Chairman of the Health Board stated that he would be happy to accept an invitation.
- Some Members were disappointed at the content of a recent press article in which the Chairman of Health Board had stated that the name Abertawe Bro Morgannwg University Health Board was not helpful in attracting potential employees to the area. The Chairman of ABMU advised Council that it was the fact that the name no longer described the area covered by the Health Board.
- The Health Board was asked whether, following the recent clustering of the Cymmer and Cwmavon surgeries, there were any plans to close either practise. The Health Board advised that this was not the plan but that the problems in recruiting new G.P.'s to the area had resulted in the clustering of the 2 practises.
- Members asked what was the pathway for adults who had been diagnosed with such things as ADHD and were advised that the Health Board was looking at rolling out a single point of access in line with guidelines.
- The Health Board was asked how it would ensure that funding was available for Council staff to be fully trained and competent to meet the needs of the significant number within the Authority's younger persons' complex day services that require high levels of health support. The Health Board advised that it was looking at building safer communities and would meet with the Member outside of the meeting to discuss further.
- Members asked what had happened to ABMU's Strategy 'Changing for the Better' and were advised this was the Clinical Strategy and only a part of the Organisational Strategy. Extensive engagement had been carried out which would result in the Strategy being updated.

- In relation to primary care, could the Health Board give an assurance that there was equity of provision across the County Borough? The Health Board advised that it could not give this assurance but that it had established a Sustainability Panel which received applications from G.P. practises where there were issues around recruitment. Other working practices were also considered for example telephone triage.
- Concern was expressed that nurses were not being given the opportunity to expand their skills set by moving across different specialities.
- From the report it was noted that fewer patients were receiving hospital care and that was due to an increase in the Primary Care. Members asked whether the financial investment into Primary Care was sufficient and were advised that the Health Board would be looking at how the money was being spent to ensure it was the most cost effective method of service delivery.
- Members were pleased that the Health Board had given an undertaking to participate in the scrutiny process and asked that it support any additional sums received via the Barnett Formula being allocated to Social Care. In response the Health Board confirmed that it would participate in the scrutiny process and also support the allocation of additional funds to both the Local Authority and to Health. The Health Board would also make available additional funds to alleviate some of the Authority's winter pressures.
- Members asked whether there were policies in place to assist G.P.'s with any physical or stress related issues as a result of overwork and were advised that the majority of G.P.'s were independent and not employees of the ABMU. Occupational Health was however available and the Health Board's Sustainability Team would offer support and guidance where needed.

The Leader of Council then summed up, thanking the ABMU's representatives for attending the meeting and to agreeing to meet further with scrutiny. He stressed that better communication between the Authority and the Health Board was essential to achieve a seamless transfer of care for the public between the two public bodies.

CHAIRPERSON

