

HEALTH AND ADULT SOCIAL CARE SELECT COMMITTEE

TUESDAY, 7 OCTOBER 2014

7.00 PM

**COUNCIL CHAMBER
CIVIC OFFICES,
CENTRAL MILTON KEYNES**

A G E N D A

www.milton-keynes.gov.uk/scrutiny

Councillor: Bramall (Chair)

Councillors: Clancy, McKenzie, I McCall (Vice-Chair), Morla, Priestly, Shafiq, Webb and P Williams (Vice-Chair)

Co-optee: Mr P Lewis (HealthWatchMK Representative)

For more information about the meeting please contact Elizabeth Richardson on Tel: (01908) 252629 or e-mail: elizabeth.richardson@milton-keynes.gov.uk

What is Overview and Scrutiny?

Each local authority is required by law to establish an overview and scrutiny function to support and scrutinise the Council's executive arrangements.

Each select committee has its own remit as set out in its terms of reference but they each meet to consider issues of local importance.

They have a number of key roles:

1. Providing a critical friend challenge to policy makers and decision makers
2. Enabling the voice and concerns of the public
3. Driving improvement in public services.

The select committees consider issues by receiving information from and questioning officers and external partners to develop an understanding of proposals or practices. They then develop recommendations to provide to officers, Members or external partners that they believe will improve performance, or as a response to public consultations.

As select committees have no executive powers they often present their conclusions in the form of recommendations that can be provided to the Council, elected Members or other external agencies. Members will often request a formal response and progress report on the implementation of recommendations that they have provided to various parties.

Attending Meetings of Select Committees

Meetings of the select committees are held in public and are open for everyone to attend. If you would like to attend then please just turn up but if you can then let us know you are attending in advance of the meeting and whether or not you would like to make a representation to Members on behalf of yourself or others.

If there are specific issues that the meeting must consider in private then they will be asked to consider this at the meeting.

After the meeting the recommendations and Minutes of the meeting, as well as agendas and reports for the majority of the Council's public meetings are available via the Council's website at:

[\(http://cmis.milton-keynes.gov.uk/cmiswebpublic/\)](http://cmis.milton-keynes.gov.uk/cmiswebpublic/).

The Overview and Scrutiny process aims to promote the five themes and priorities set out in the Milton Keynes Council Corporate Plan

The Corporate Plan and framework sets out the vision for Milton Keynes. It captures what type of place Milton Keynes aspires to be for all those who live, work, learn and visit here. The plan sets out ambitious new objectives for Milton Keynes including achieving world class status for its design, new approaches and technologies and as a sporting city.

It has five key themes which help communicate all the work the Council does on behalf of the residents of the borough.

The five themes are:

Cleaner, greener, safer, healthier MK:

Improve health and well-being, reduce health inequalities and work with partners to reduce crime and disorder to improve quality of life in MK.

Visiting MK:

Aim to make Milton Keynes a highly regarded visitor destination with a safe and effective transport system which is easily accessible regionally, nationally and internationally.

Working in MK:

To improve the skills and opportunities of everyone in Milton Keynes and help jobseekers into work, while attracting and retaining businesses to provide new opportunities and to bring people, jobs and industries to MK to improve the strength and resilience of the local economy.

Living in MK:

Ensuring people are satisfied with Milton Keynes as a place to live, and to support them effectively through the provision of high quality and efficient public services.

World Class MK:

Our ambition is to increase the international and national standing of Milton Keynes in several areas including our economic success, thriving communities and a high quality environment.

General Terms of Reference for Overview and Scrutiny Committees / Panels

- (a) To review or scrutinise any decision made, or other action taken, in connection with the discharge of any of the Executive Functions within the remit of the Select Committee.
- (b) To make reports or recommendations to the Council or to the Cabinet with respect to the discharge of any of the Executive Functions within the remit of the Select Committee.
- (c) To review or scrutinise any decision made, or other action taken, in connection with the discharge of any of the Non-executive Functions within the remit of the Select Committee.
- (d) To make reports or recommendations to the Council or any Committee of the Council with respect to the discharge of any of the Non-executive Functions within the remit of the Select Committee.
- (e) To make reports or recommendations to the Council, to the Cabinet or to a regulatory committee on matters within the remit of the Select Committee which affect the Council's area or the inhabitants of the Council's area.
- (f) To consider any representations made in connection with the work of the Select Committee by a Member of the Council on behalf of her/his constituents.
- (g) To appoint advisers from outside the Council to advise the Select Committee.

Health and Adult Social Care Select Committee Terms of Reference

1. To assist in the provision of improved health and adult social care services to the residents of Milton Keynes by supporting the development of evidence based policies and strategies by the Council, health service providers and their partners.
2. To scrutinise the provision of services, the achievement of targets and the provision of resources to this end.
3. In particular, to carry out the Council's statutory scrutiny functions as the designated Health Scrutiny Committee.
4. To appoint a planning group to oversee the implementation of the Committee's work programme, as agreed by the Overview and Scrutiny Management Committee.

AGENDA

1. Welcome and Introductions

The Chair to welcome Members, officers, witnesses and the public to the meeting and introduce Members, officers and witnesses who are present.

2. Apologies

3. Disclosures of Interest

Members to declare any disclosable pecuniary interests, or personal interests (including other pecuniary interests), they may have in the business to be transacted, and officers to disclose any interests they may have in any contract to be considered.

4. Minutes

To approve, and the Chair to sign as a correct record, the Minutes of the meeting of the Health and Adult Social Care Select Committee held on 15 July 2014 (Item 4) (**Pages 9 to 12**)

5. Provision of Mental Health Services by the Community and Voluntary Sector

To receive and comment upon a presentation concerning the provision of mental health services by the Community and Voluntary Sector in Milton Keynes.

Research shows that 1 in 4 people will experience mental health difficulties over their lifetime, with 1 in 6 at any one time – in Milton Keynes, this equates to 60,000 people within the city. Whilst many will manage these difficulties with the support of GP's, a significant number will benefit from a more in depth and structured approach.

Mental Health Services in Milton Keynes are provided by a range of agencies, including those in the Community and Voluntary Sector. Mind BLMK, Rethink, Stonham, Pohwer and the Richmond Fellowship have been invited to attend the Select Committee as witnesses to explain the services they offer, the range and scale of their activities in Milton Keynes and to answer Members' questions on their activities.

Background notes about these three organisations are included as Item 5 (**Pages 13 to 14**).

6. Report of the 2014 Quality Accounts Panel

To receive and note the Report of the Quality Accounts Panel on the 2013/14 Quality Accounts submitted by:

- (a) Brook East of England;
- (b) Milton Keynes Hospital NHS Foundation Trust;
- (c) Milton Keynes Community Health Services;
- (d) South Central Ambulance NHS Foundation Trust; and

The Panel met on 8 May 2014. The meeting was attended by Councillors Long and Zealley (Councillor Brunning sent her apologies), together with Mr P Lewis the HealthWatch MK representative, officers from the Adult Social Care and Health Partnerships Service Group and representatives from the organisations which had submitted Quality Accounts for scrutiny.

The above organisations have been advised of the Panel's comments.

A copy of the report is attached at Item 6 (**Pages 15 to 22**).

7. Care Act 2014

To receive a presentation from Victoria Collins (Assistant Director [Older People and Physical Disability Services]) who is leading for the Council on implementation of the Act.

8. Date of Future Meetings and draft Work Programme

To note the draft Work Programme identified so far by the Health and Adult Social Care Select Committee Planning Group (Chair and Vice-Chairs) at its meeting on 28 July. The draft Work Programme is subject to agreement by the Overview and Scrutiny Management Committee.

16 December 2014

- Update on Progress of Milton Keynes and Bedfordshire Healthcare Review
- Provision of Sexual Health Services In Milton Keynes
- Care Bill 2014 – Implications for The Council

17 March 2015

- Update on Progress of Milton Keynes and Bedfordshire Healthcare Review
- Annual Report of the Cabinet Member for Health, Wellbeing and Community Services
- To Be Confirmed

Health and Safety

Please take a few moments to familiarise yourself with the nearest available fire exit, indicated by the fire evacuation signs. In the event of an alarm sounding during the meeting you must evacuate the building immediately and follow all instructions provided by the fire evacuation officer who will identify him/herself should the alarm sound. You will be assisted to the nearest designated assembly point until it is safe to return to the building.

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Agenda

Agendas and reports for the majority of the Council's public meetings can be accessed via the Internet at: <http://cmis.milton-keynes.gov.uk/cmiswebpublic/> Wi Fi access is available in the Council's meeting rooms.

Recording of Meetings

The proceedings at this meeting may be recorded for the purpose of preparing the minutes of the meeting.

In accordance with the Openness of Local Government Bodies Regulations 2014, you can film, photograph, record or use social media at any Council meetings that are open to the public.

If you are reporting the proceedings, please respect other members of the public at the meeting who do not want to be filmed. You should also not conduct the reporting so that it disrupts the good order and conduct of the meeting. While you do not need permission, you can contact the Council's staff in advance of the meeting to discuss facilities for reporting the proceedings and a contact is included on the front of the agenda, or you can liaise with staff at the meeting.

Comments, Complaints and Compliments

Milton Keynes Council welcomes comments, complaints and compliments from members of the public in order to make its services as efficient and effective as possible. We would appreciate any suggestions regarding the usefulness of the paperwork for this meeting, or the conduct of the meeting you have attended.

Please use the slip overleaf by detaching it and passing it to the Overview and Scrutiny Officer. Alternatively the slip can be returned by post to Democratic Services, Milton Keynes Council, Civic Offices, 1 Saxon Gate East, Milton Keynes, MK9 3EJ, or you can e-mail your comments to scrutiny@milton-keynes.gov.uk

If you require a response please leave contact details, ideally including an e-mail address.

A formal complaints / compliments form is available online at <http://www.milton-keynes.gov.uk/complaints/> or is obtainable at the meeting from the Overview and Scrutiny Officer.



**MILTON KEYNES
COUNCIL**

Minutes of the meeting of the HEALTH AND ADULT SOCIAL CARE SELECT COMMITTEE held on TUESDAY 15 JULY 2014

Present: Councillors Alexander, Bramall, Clancy, I McCall, McKenzie, Morla, Priestley, Webb, P Williams and P Lewis (Healthwatch MK Representative)

Officers: L Bull (Corporate Director Community Wellbeing), M Hancock (Assistant Director [Joint Commissioning]), V Collins (Interim Assistant Director [Social Care]) and E Richardson (Overview and Scrutiny Officer)

Witnesses: P Dinkin (Enforcement Director, MONITOR), M Webb (Interim Chief Officer and Chief Financial Officer, MKCCG), D Derby (Director of Transformation and Delivery, MKCCG) Dr T Kufeji (Board GP, MKCCG), W Rabin (Communication and Engagement Lead, MKCCG) – **HASC04**

Also Present: Councillor Eastman, Councillor Long, and 8 members of the public.

HASC03 MINUTES

RESOLVED -

That the Minutes of the Select Committee meetings held on 25 March 2014 and 11 June 2014 be approved and signed by the Chair as a correct record.

HASC04 REVIEW OF HEALTHCARE PROVISION IN MILTON KEYNES AND BEDFORDSHIRE

The Committee received a wide ranging and comprehensive presentation from the team representing the Milton Keynes Clinical Commissioning Group (CCG) starting with a recap to the Committee of why the Review was being carried out. The CCGs of Milton Keynes and Bedford had initiated the Review as they were concerned that forecast shortfalls in the healthcare budget would affect the provision of both primary and acute healthcare services in Milton Keynes and Bedfordshire.

The CCG hoped to publish its report in August, which would set out the options for the future provision of healthcare in the area which had been developed over the past few months. These proposals would be put out for public consultation in due course.

During the presentation the Committee also noted that:

- 30 potential options for the local provision of acute healthcare services had been identified, but these had now been whittled down to 14;
- Care of the elderly was seen as a priority for the provision of Primary Care services, along with improved access to GP services;
- Although the CCG was trying to protect the best interests of the residents of Milton Keynes, the healthcare needs of the wider area also had to be taken into account;
- Although both CCGs were looking at individual solutions, there may need to be a collaborative approach to delivering some services and a balance needed to be struck between what was clinically desirable and financially possible;
- Once options are clear and presented to the public, there will be a full, 3 month consultation period;
- If there was a change to the facilities provided by the hospital there was a possibility more care would have to be delivered through primary health services;
- The CCG acknowledged that GPs were not an efficient way to deliver healthcare as they had to deal with the complete range of complaints. One option would be to group complaints together under a single GP ie one doctor would deal with all the diabetes appointments, whilst another, perhaps, dealt with coughs, colds and 'flu';
- Money was available from the Better Care Fund to prime some of these changes and the CCG planned to continue with the innovative work being done to improve the delivery of healthcare in Milton Keynes;
- Although the vast majority of healthcare delivered in the UK was Primary in nature, most funding went to hospitals which were expensive to run;
- There was a low level of GP access, but a higher than average level of non-acute ailments being presented at Milton Keynes Hospital. The two factors were linked and a balance needed to be restored;
- The options identified in the presentation had been reached using a scoring mechanism. More detailed risk assessments, including timing, travel etc, as well as Quality Impact Assessments, needed to be done, which the CCG agreed to share with the Committee once they had been completed;

- The majority of planned care would still be available locally, but specialist emergency care might be delivered by centres of excellence, such as the current policy of stroke victims being initially treated at the Luton and Dunstable Hospital;
- The possibility of establishing polyclinics, hub and spoke services, or networked clinics were also being considered as possible options;
- No option would be totally affordable but the CCG needed to close the gap as much as possible. Care closer to home and in the local community could be cheaper to provide than hospital care. Frequent and common care should be delivered locally;
- The CCG acknowledged that for its size, Milton Keynes was 'under-doctored' and that there was a need for more GPs in the area. However, a shortage of GPs was a national, not just local, issue and there was a need to work differently in order to provide proper standards of care;
- Milton Keynes was behind the curve in the allocation of healthcare funds. The formulae used were not able to keep up with the demographic growth in the area. The funding currently being received was at least 8% below what was needed.
- The 2 Ambulance Trusts which covered Milton Keynes and Bedfordshire had been fully involved in the work done on the review so far and their associated costs had been factored into the financial planning;
- The CCG would also welcome ideas from the public and anything suggested would be given serious consideration by the Review Team.

The Committee agreed that the Review could represent a massive shift in the way in which future healthcare was delivered in Milton Keynes, that such changes could be emotive and that difficult decisions may have to be made.

RESOLVED –

That the Team from the Milton Keynes Clinical Commissioning Group be thanked for their presentation and attendance at the meeting and that they be asked to provide a short, regular update on the progress of the Review to future meetings of the Committee.

HASC05 MILTON KEYNES ADULT SOCIAL CARE SERVICE PEER CHALLENGE

The Committee received a presentation from the Interim Assistant Director (Adult Social Care) on the recent Adult Social Care Peer Challenge and noted the findings of the Peer Challenge Team.

During the presentation the Committee learnt that:

- Although there were already established minority communities, there was also a variety of emerging, diverse communities in Milton Keynes and that the Council needed to make sure that access to Adult Social Care services was as equitable as possible, whilst avoiding a one size fits all approach;
- There were approximately 28,000 carers in Milton Keynes and the Council would continue to review the services they required and how these were delivered;
- The Council was also in the process of establishing the necessary mechanisms for dealing with the changes which would occur when the new Care Act came into force in April 2015;
- The Council was modelling what might be expected in the way of demand from carers in future and the support they would need;
- A range of criteria and data relating to carers was monitored in order to identify any safeguarding issues. The Council was committed to providing as much support as possible for carers so that problems did not arise;
- Despite the positive report, the Adult Social Care Team were not complacent and recognised the need for continuous improvement in the work it did to identify, support and assist carers;
- The new act established national eligibility criteria across the country to which all local authorities would have to work in order to provide a universal and targeted service to all carers.

RESOLVED –

That the Interim Assistant Director (Adult Social Care) be thanked for her presentation and that the findings from the Peer Challenge be noted.

HASC06

DRAFT WORK PROGRAMME 2014/15

The Committee received and noted the proposed Work Programme for 2014/15.

RESOLVED –

That the draft Work Programme, as outlined in the agenda, be approved and that further consideration and development of the Committee's Work Programme for 2014/15 be delegated to the Committee's Planning Group, which consisted of the Chair and Vice-Chairs.

THE CHAIR CLOSED THE MEETING AT 9.15 PM

MIND BLMK

Mind BLMK is jointly commissioned by Milton Keynes Council and Milton Keynes Clinical Commissioning Group to deliver a preventative mental health and wellbeing service. Mind BLMK provides affordable counselling for Milton Keynes residents, offering short term one-to one counselling and medium-term wellbeing interventions. They also work more widely within local communities to promote positive mental health and wellbeing.

In addition to commissioned services, Mind BLMK also uses funding from a range of sources to provide additional support. This includes

- one-to-one mentoring through the Advice Network Partnership
- arts and horticulture schemes for people with longer term needs
- Employment Support through both the Neighbourhood Employment Programme (NEP) and directly with Work Programme Providers
- provision of a range of training and workshops aimed at all within the community to promote positive mental health and wellbeing.

RETHINK Mental Illness

Rethink is a national charity which helps many people affected by mental illness by challenging attitudes and changing lives. It directly supports approximately 60,000 people across the country every year to deal with their crises, to live independently and change attitudes and policies to mental health.

In Milton Keynes Rethink is commissioned to provide a Community Support Service which provides a range of structured groups and activities including social groups, therapeutic groups and one-to-one support, linking with other organisations and encouraging full involvement within the community.

The focus of all groups is social inclusion, recovery and self-management and all people who use Rethink services are encouraged to complete an Individual Recovery Plan which looks at each individual's positive attributes, needs and aspirations and focuses on self-management and social inclusion.

Richmond Fellowship Supported Housing

The Richmond Fellowship provides supported housing in Milton Keynes for adults who need support with daily living and social skills as the result of long-term mental health problems.

The service helps individuals to develop a support plans tailored to their needs. A key worker is allocated to each individual who works with them throughout their placement on the short and long-term objectives highlighted in this plan. Regular reviews take place to map each person's progress and agree a weekly service structure that fits with individual needs and links in with other support networks.

Richmond Fellowship also provides short-term supported accommodation through the 'Stopgap' scheme. This provides three places of supported accommodation in a confidential local location for up to four weeks as an alternative to hospital. The support is tailored to the individual's requirements at the point of access and monitored throughout their stay.

Richmond Fellowship Employment Support Service

The Richmond Fellowship Employment Service based in Bletchley is a specialist service working within mental health and employment. The service works with people who live in the Milton Keynes area and who have experience of, and are recovering from, mental health problems

The service focuses on two key areas:

- Regain – helping people to return to paid employment, voluntary work, training and education through one-to-one interventions and group sessions
- Retain - offering early intervention support to people experiencing difficulties at work due to mental health problems and helps them retain their current employment or seek alternative employment.

Stonham – Home Group

Stonham supports people with mental health problems across two properties in Milton Keynes to develop independent living skills.

Stonham's support service helps individuals identify what they need and want to maximise their potential and inclusion in their local communities. They deliver person-centred, flexible support which aims to increase service users' choice and control over their lives.

PowHer

PowHer is commissioned through Milton Keynes Council to provide an advocacy service to all client groups including people with mental health problems. In addition to providing the Independent Mental Health Advocate (IMHA) and Independent Mental Capacity Advocate (IMCA) services for Milton Keynes the service aims to:

- Provide support for service users to be fully involved in decisions about their care or support
- Support users to make complaints or comment on the services they receive
- Assist service users to obtain their rights and entitlements both generally and in a period of change or crisis
- Support users to make fully informed decisions on how to obtain services to meet their needs

HEALTH AND ADULT SOCIAL CARE SELECT COMMITTEE

QUALITY ACCOUNTS PANEL REPORT

8 MAY 2014

The Quality Accounts Panel was established by the Council's Health and Adult Social Care Select Committee, which has statutory responsibility for scrutiny of local health services.

What is a Quality Account?

A Quality Account is an annual report to the public from providers of NHS healthcare services about the quality of services they provide. This publication mirrors providers' publication of their financial accounts.

All providers of NHS healthcare services in England, whether they are NHS bodies, private or third sector organisations must publish an annual Quality Account.

What is the purpose of a Quality Account?

The primary purpose of a Quality Account is to encourage boards and leaders of healthcare organisations to assess quality across all of the healthcare services they offer, and encourage them to engage in the wider processes of continuous quality improvement. Providers are asked to consider three aspects of quality – patient experience, safety and clinical effectiveness. The visible product of this process – the Quality Account – is a document aimed at a local, public readership. This both reinforces transparency and helps persuade stakeholders that the organisation is committed to quality and improvement. Quality accounts therefore go above and beyond regulatory requirements, which focus on essential standards.

If designed well, the Account should assure commissioners, patients and the public that the healthcare provider is regularly scrutinising each and every one of their services, concentrating on those that need the most attention.

Quality Accounts aim to enhance accountability to the public and engage the leaders of an organisation in their quality improvement agenda.

2014 Panel

Membership of the 2014 Panel was:

Councillor Long (Chair)
Councillor Brunning
Councillor Zealley
Mr Peter Lewis – Healthwatch MK representative

The Panel met on 8 May 2014 to receive and comment upon the Quality Accounts from the following organisations:

1. Brook East of England
2. South Central Ambulance NHS Foundation Trust
3. Milton Keynes Community Health Service
4. Milton Keynes Hospital NHS Foundation Trust

The Panel's comments on each of the Quality Accounts submitted by the above organisations follow below.

Copies of the Quality Accounts Scrutinised by the Panel on 8 May are available on the Council's website at:

<http://cmis-internal/CmisWebPublic/Meeting.aspx?meetingID=10723>

Brook Services

624 South Fifth Street, Central Milton Keynes, MK9 2FX

Brook is the leading UK provider of contraception and sexual health services to young people under 25. The first Brook Centre was established in 1964 to provide contraception and advice to young, unmarried people. Brook provides free and confidential sexual health information, contraception, pregnancy testing, advice and counselling, screening and treatment for sexually transmitted infections and outreach and education work from locations in the UK and Jersey.

Panel Report

The Panel considered the Quality Account submitted by Brook to be a comprehensive and understandable document. They thought that the use of comparative data throughout the Account was positive and informative.

The Panel commented specifically on the table listing Patient Safety Incidents on page 31 as they were concerned to note the rise in incidents in Milton Keynes. The Panel noted that Brook was of the opinion that where a rise in the number of incidents was indicated, this was due to an increase in more consistent reporting, rather than a real rise in incidents. However, the Panel did not entirely accept the assertion that the indicated rise in the number of incidents was simply due to more effective reporting. The Panel understood that better reporting could explain away the year on year increase, but were concerned by the fact that the numbers themselves were higher than in comparative/reference areas.

An explanation of what constituted a Patient Safety Incident would have been helpful.

It was noted that Brook had now been commissioned by the Council's Public Health Department to provide Sexual Health Services in the area and the Panel suggested that a short (4 sides of A4) appendix specifically relating to the work being done and progress made in Milton Keynes would have been helpful. As Brook is a national organisation with regional offices across the country, a short local resume may well be of help to other local authorities reviewing the Quality Account.

The Panel welcomed the report as clear, well written and demonstrating an appropriate use of comparative data in a way which was meaningful to the general reader. There were no areas which gave the Panel real cause for concern and further comment was superfluous.

South Central Ambulance NHS Foundation Trust (SCAS)

7 & 8 Talisman Business Centre, Talisman Road, Bicester, Oxon, OX26 6HR

South Central Ambulance Service NHS Foundation Trust is part of the National Health Service (NHS) and provides emergency and non-emergency ambulance services in Berkshire, Buckinghamshire, Hampshire and Oxfordshire. It was established on the 1 July 2006 following the merger of four ambulance trusts in the above counties covering an area of approximately 3,554 square miles with a residential population of over four million. On 1 March 2012, it became a foundation trust. Its emergency operations centres handle around 500,000 emergency and urgent calls each year.

Panel Report

The Panel felt that the Quality Account presented by SCAS was a big improvement on previous years. However, even as a draft report, the Panel considered that too much information was missing and there was no explanation of the gaps or who was responsible for completing them.

SCAS covers a large area and the Panel felt that the use of average data across the region was not particularly helpful. It was difficult to identify any particular issues in local areas and the use of average data could be used to hide a poor performance in a particular locality.

The information in the Quality Account dealt with the organisation as a whole and once again the Panel commented on the lack of a local focus and felt that this must be an issue for all the local authorities in the SCAS region which had been asked to comment on the Quality Account. The Panel would like to see a short (4 sides of A4) appendix specifically relating to the work being done and progress made for each of the local authority areas in the SCAS region.

However, the Panel was not aware of any significant problems with the ambulance service provided by SCAS in Milton Keynes. Representatives of the Milton Keynes Hospital NHS Foundation Trust who were attending the meeting were able to give the Panel first-hand feedback on SCAS. They considered that they had a good relationship with SCAS and that at present there were no issues with either the emergency or non-emergency ambulance service in Milton Keynes. SCAS crews now alerted the hospital with an estimated time of arrival, which hospital staff were finding particularly helpful.

The representatives of the Milton Keynes Community Health Service commented that the SCAS response to 999 calls, and where appropriate linking to community health services, was very good and they had no complaints either.

The Panel was pleased to note the year on year improvements to the SCAS Quality Account and complimented SCAS on making the Account increasingly more accessible to the general reader.

Central Northwest London NHS Foundation Trust (CNWL): Milton Keynes Community Health Service

Trust Headquarters, Stephenson House, 75 Hampstead Road, London, NW1 2PL

Central and North West London NHS Foundation Trust is one of the largest trusts in the UK, caring for people with a wide range of physical and mental health needs. It provides a wide range of services to treat people with a variety of health needs including common physical health problems, long-term conditions, mental health, learning disabilities, eating disorders, addictions and sexual health. The majority of these services are provided in the community, treating people in their homes or from clinics close to home.

CNWL have been responsible for the provision of community and mental healthcare services in Milton Keynes since April 2013.

Panel Report

Overall the Panel felt that that the Quality Account submitted by CNWL, despite its length, was comprehensive and easy to follow. They were pleased to note that once the Quality Account process was complete, a more succinct, summary version, highlighting the headline points, was produced which was more accessible for the lay reader.

In some areas the Panel would have liked to have seen more specific information relating to Milton Keynes, but acknowledged that this was the first year of operation in Milton Keynes for CNWL and that the priorities addressed in the account had been set before the merger with Milton Keynes Community Health Service.

The Panel was particularly concerned about the data presented in the table *A borough breakdown: Our mental health and allied specialties performance against national priorities and historical quality priorities* (pages 51 – 53). In many of the categories the Milton Keynes column was marked 'n/a'. The Panel felt that this, in the light of current issues relating to mental health services in Milton Keynes, in particular the Campbell Centre, could give a very negative impression of Milton Keynes. The Panel noted that the monitoring data used in the table had not been relevant to the Milton Keynes Community Health Service prior to the merger and therefore had not been collected locally. It was agreed that this point would be made clear in the final version of the Quality Account to enable a more complete understanding of why the data was being presented in this way.

The Panel welcomed *Measure 3: To improve on the 2012 CNWL-MK score based on the CQC national community mental health patient survey for responsiveness to patient needs in 2013* (page 18). This demonstrated a positive approach to improving the provision of mental health services in Milton Keynes. The Panel was encouraged by the prominence given in this section to the progress being made by Service User and Carer Improvement Group. It was a good use of resources and achievements were starting to have a positive effect, although there was still work to be done in this area.

It was acknowledged that as this was the first year of Milton Keynes Community Health Service being part of the wider CNWL organisation and that CNWL-MK would have started from a lower base than the rest of the Trust, a significant difference would be seen in next year's Account.

The Panel appreciated the attendance of Ruth Weetman from the Milton Keynes Community Health Service and John Vaughan, Director of Strategic Planning and Community Services at CNWL, at the meeting and thanked them for their open and frank input and clarification of the queries raised by the panel.

Milton Keynes Hospital NHS Foundation Trust (MKHFT)

Milton Keynes Hospital NHS Foundation Trust, Oak House, Standing Way, Eaglestone, Milton Keynes, MK6 5LD

Milton Keynes Hospital is a medium sized district general hospital, serving Milton Keynes and surrounding areas. The hospital has approximately 400 in-patient beds, and provides a broad range of general medical and surgical services. Its busy Accident and Emergency Department manages all medical, surgical and child health emergency admissions.

In addition to providing general acute services, Milton Keynes Hospital increasingly provides more specialist services, including cancer care, cardiology and oral surgery. It also has responsibility for treating premature babies born locally.

The Hospital has been an NHS Foundation Trust since October 2007.

Panel Report

The Panel considered this to be a big improvement on last year's Quality Account, although they felt it still needed to be more accessible to the general reader.

The Panel was of the opinion that there were too many tables in the Account and would have liked to have seen more narrative, indicating the direction of travel following on from previous years. They would also have liked to have seen consistency of data so that year on year improvements could be monitored.

The Panel were advised that the tables were prerequisite to the approach to Quality Accounts proscribed by Monitor. However the Panel were of the opinion that the directions issued by Monitor were guidance only and not statute, and did not need to be followed to the letter if that made for a more comprehensible and readable Quality Account. The Panel also commented that it was not always clear what the units were which were being cited in tables and that this needed to be explained.

However, there were fewer graphs this year; those that had been included were much more understandable and the Panel commended the Trust for this approach.

The Account stated that the number one cause of death in hospital was sepsis, but there was no explanation as to what either the quantitative or percentage figure was compared to other causes of death in hospital and this needed to be clarified.

The Panel noted that although the number of serious incidents had risen, this may well be due to an increase in reporting which was being encouraged as part of the Hospital's commitment to be open and transparent. However the Panel did not entirely accept the assertions of the Trust's representatives that there was no cause for concern and that it was simply all due to more effective reporting. The Panel accepted that better reporting could explain some of the

year on year increase, but were concerned that the rise in serious incidents continued to show a significant upwards trend.

There was no explanation as to what a 'serious incident' was, which the Panel thought was unhelpful.

The MKFT was represented at the meeting by Wedgwood Sweptson, Head of Development and Planning and Kate Falkner, Lead Nurse for Quality and Improvement. They undertook to review the graphs and tables in the Quality Account and how they were displayed to see if presentation could be improved or even if some of them could be dropped completely and the information presented in another format. The Panel was concerned that too many indicators could be confusing and may not actually tell the reader anything significant.

The Panel concluded that this year's Quality Account was an improvement on the 2013 edition, although there were issues with data connections, clear explanations and a lack of comparative data showing the direction of travel from last year.

The Panel thanked Mr Sweptson and Ms Falkner for their attendance and the positive approach they were taking to address the Panel's concern.