



City and County of Swansea

Notes of the **Scrutiny Performance Panel – Adult Services**

Committee Room 5 - Guildhall, Swansea

Tuesday, 26 March 2019 at 10.30 am

Present: Councillor P M Black (Chair) Presided

Councillor(s)

P R Hood-Williams
S M Jones

Councillor(s)

C A Holley
J W Jones

Co-opted Member(s)

T Beddow

Co-opted Member(s)

K Guntrip

Other Attendees

Mark Child
Jason Crowl

Andrew Davies
Sian Harrop-Griffiths
Tracy Myhill
David Roberts

Cabinet Member - Care, Health & Ageing Well
Nurse Director, Primary Community Services, Abertawe Bro Morgannwg University Health Board
Chairman, ABMU HB
Executive Director of Strategy, ABMU HB
Chief Executive, ABMU HB
Service Director, Mental Health and Learning Disabilities, ABMU HB

Officer(s)

Liz Jordan
Deborah Reed

Scrutiny Officer
Interim Head of Adult Services

Apologies for Absence

Councillor(s): J A Hale, Y V Jardine, P K Jones and G J Tanner

1 Disclosure of Personal and Prejudicial Interests.

No disclosures of interest were made.

2 Presentation and Question and Answer Session with Chairman and Chief Executive of Local Health Board

The Chairman, Andrew Davies and Chief Executive, Tracy Myhill of Abertawe Bro Morgannwg University Health Board attended together with their colleagues Jason Crowl, Sian Harrop-Griffiths and David Roberts to present to the Panel and answer questions.

Andrew Davies informed the Panel that they were appearing on behalf of ABMU HB but were really representing the wider partnership which includes the 3 local authorities and the third sector. It is a strong and effective partnership and the relationship has improved significantly over the last 5 to 6 years. The average age of patients is 85 and they frequently present with more than one complex issue. The priorities of the HB are to provide the best care and improve the health of the population

Discussion points:

- From 1 April Bridgend will no longer be part of ABMU HB and the HB will be changing its name to Swansea Bay University Health Board. This move should be cost neutral to the HB and should have no detrimental effect on the population.
- HB plans to reduce its deficit in a controlled way. It is trying to change in a strategic way.
- HB feels the major reason for the targeted intervention in 2016 was finance, mainly in terms of provider costs.
- Prevention and wellbeing can only be tackled through joint working. This is very much the HB's focus now. The whole system needs to be moved from treating health to prevention.
- HB's policy is to try and keep people at home for as long as possible
- Disputes happen between the local authority and HB regarding packages of care. Partnership working is key to dealing with this. It is resolved on a case by case basis. There are no timescales in places for resolving disputes between the local authority and health board.
- HB and local authorities are working more towards pooling of budgets for packages of care. Could potentially lead to service level agreements for this in the future.
- HB is working with local authorities to change the models of care.
- HB is using its 10 year strategy to provide a framework for short term plans
- There is not currently an accessible system in place for the HB and Social Services which everyone can access. Hopeful there will be in the next three years.
- Panel requested more information from the HB on mortality, morbidity and wellbeing indicators. The HB agreed to provide this.

Actions:

- HB to provide data on mortality, morbidity and wellbeing indicators.

3 Work Programme Timetable 2018-19

The Panel considered the work programme.

The meeting ended at 12.00 pm