MINUTES OF THE HEALTH WORKING GROUP HELD ON WEDNESDAY, 4 JANUARY 2012 at 6pm

PRESENT: Cllr S Hirst – Chairman Cllr R Elms Cllr R Newmark Cllr M Robinson Cllr M Ranson Marshal Scott Olwen Heap

Karen Wilson – CE Calderstones Partnership NHS Foundation Trust Phil Mileham – Ribblesdale Practice Manager, Clitheroe

APOLOGIES

Apologies for absence were received from Cllr B Hilton.

MINUTES

These were approved as a correct record.

KAREN WILSON – CHIEF EXECUTIVE – CALDERSTONES PARTNERSHIP NHS FOUNDATION TRUST

Stuart introduced Karen Wilson who gave a brief insight into the workings of Calderstones. She felt that although people were aware of the history of Calderstones they were not sure of the type of facility it now is, in that it is fit for modern provision for people with learning disabilities. It is also the largest employer in RV, employing 1700 staff (1200 of which are in RV) and covers an intake area of 6000 square miles, stretching from Manchester to Lancaster and to the N Yorkshire border. They have a total of 252 beds across the organisation.

Their main services are for people with forensic learning disabilities, (that are in the criminal system), autism and personality disorders and deal mainly with adults (16+). They have an inpatient service that moves into supported living (usually in 3 - 4 years time). There are wards that are covered 24/7 as well as those that are supported in their own homes remotely. Access to employment and education support is also given. Treatments include mental illness, psychological illness and specialist support for women with learning difficulties.

Phil raised concerns about the future funding of people in Calderstones in that they do not all originate in Ribble Valley and may well become a drain on resources under the NHS reforms if they are to be funded by local practices in the RV. Karen reported that forensic cases are covered and that other cases are based on area of residence so although there will be an impact it may not be as bad as feared. The rules are still blurred at the moment. Karen and Phil would keep in touch and meet separately to discuss issues.

Karen circulated a paper outlining the vision and strategy for Calderstones, giving details of the care service and types of service lines available. The paper also highlighted the key dynamics for the future health and social care of people with intellectual disabilities. Calderstones is also involved with a national evaluation of personal health budgets.

Plans for the future include

- Growth in specialist areas
- Expansion geographically
- Research and evidence
- Personalised care and support that supports healthy lifestyles for people with learning disabilities

Marshal asked if there were ways in which RVBC could help raise the profile of Calderstones so that people were not afraid of it, but aware of it's positive aspects. Karen would like positive press about the great achievements and possibly some help with rebranding the name.

Karen welcomed all present to have a look round the facility.

Stuart thanked Karen for attending the meeting and invited her to return again in the future.

UPDATE ON CLITHEROE HOSPITAL

Jackie Hadwen submitted a paper updating the group on the position regarding the redevelopment of Clitheroe Community Hospital (Colne Health Centre and Great Harwood Health Centre). Further progress could not be made until there was a significant degree of assurance about the financial position for NHS East Lancashire in 2012/13. The schemes would then require robust business cases to be developed carrying assurances beyond the 2012/13 financial year. Earliest consideration would not be before February 2012 with the overall programme aiming to clear all approvals including formal engagement and planning by the end of September 2012. The case remains that it is the intention to progress all three schemes at the same time – with no priority order, and that the PCT is committed to trying to ensue that these schemes get the approvals they need and their future determined prior to 31.3.13 when the PCT will be disestablished.

The group felt that Jackie should be invited to attend a future meeting once the financial issues had been addressed.

Phil raised concerns about the current situation at the hospital regarding GP cover. GPs currently admit patients as do the acute hospitals (for recuperation). It used to be that all but 4 beds were for RV residents but now the patients were mainly referred from the hospitals and were not residents of RV. He felt that the function of Clitheroe as a Community hospital was being jeopardised and it was becoming an East Lancs Hospital Trust satellite.

LANCASHIRE DEMENTIA SERVICES

A letter was circulated from Dr Jim Gardner, Medical Director of the PCT Cluster Dementia Executive Lead regarding the planned changes to mental health services and the planned statutory public consultation in early 2012 regarding proposed improvements to dementia services.

Phil felt that there was still an unmet need in RV regarding treatment for dementia and many have to access services outside the RV. Local services should be given ongoing support.

INFORMATION ITEMS

The following documents were circulated for information

- Cabinet report LCC East Lancs Joint Dementia Commissioning Strategy
- Minutes of the Oral Health Liaison Group
- Later Life Newsletter

AOB

Marshal reported that it looked like the new CCG would be based on East Lancashire although Ribblesdale practice was still pushing for control of its own budget.

Bridget had been appointed to sit on the overall LCC Health and Well Being Board. It was important that Borough Councils be represented on this board. It was still unknown as to whether there would also be Borough based Health and Well Being Boards below this level. All agreed it was important to fight for local boards to ensure Ribble Valley had a say in Health & Well Being.

DATE OF NEXT MEETING

The date of the next meeting would be notified.

Meeting finished 7.20 pm