

<b>Meeting:</b>	<b>Adults and wellbeing scrutiny committee</b>
<b>Meeting date:</b>	<b>Thursday 25 January 2018</b>
<b>Title of report:</b>	<b>Hillside Centre</b>
<b>Report by:</b>	<b>Director for adults and wellbeing</b>

## **Classification**

Open

## **Decision type**

This is not an executive decision

## **Wards affected**

Red Hill ward.

The service at the facility is provided county-wide.

## **Purpose and summary**

To consider further information on the proposed closure of the Hillside Centre facility. This issue was considered by the committee on 16 November 2017 and it was resolved to provide an update early in 2018.

To enable the committee to fulfil its function to review and scrutinise the planning, provision and operation of health services (not reserved to the children and young people scrutiny committee) affecting Herefordshire, and to make reports and recommendations on these matters.

## **Recommendation(s)**

**That:**

- (a) the update on the Hillside Centre be considered;**
- (b) the committee determine any recommendations it wishes to make to Wye Valley NHS Trust or to the commissioners in relation to delivery of care in relation to any proposed changes to service provision;**

- (c) the committee determine any recommendations it wishes to make to Wye Valley NHS Trust or to Herefordshire Clinical Commissioning Group, as appropriate, in relation to the approach to engagement and consultation with stakeholders; and
- (d) any areas for further scrutiny be identified for inclusion in the committee's work programme.

## Alternative options

- 1. None. It is open to the committee to review the report and determine whether it wishes to make any recommendations.

## Key considerations

- 2. This matter was discussed at meeting of the Adults and wellbeing scrutiny committee on 16 November 2017. Members expressed considerable concern at the proposed withdrawal of beds at the facility at the Hillside Centre by February 2018. The principal concerns included the timing, the evidence base, and the impact on communities and workforce. In addition, concern was raised regarding the extent and nature of public engagement or consultation which was considered to be limited and unreliable. Officers explained the basis for the proposals and the mitigation, and how the proposals supported the NHS 5 year forward view in enabling care to be better met at home as far as clinically appropriate. The full minute of the meeting (item 24 Living well at home – transforming community services) can be found on the council's website via the following link:  
<http://councillors.herefordshire.gov.uk/ieListDocuments.aspx?CId=955&MId=6271&Ver=4>
- 3. In considering the approach taken by the NHS is proposing these service changes, Members of the committee will wish to bear in mind the need for the NHS bodies to demonstrate how they have adhered to the requirements of the NHS Constitution in their planning and public engagement.
- 4. Although the Hillside facility is owned by the council, it is provided to the NHS on a secure long-term lease. The service delivered from the facility is entirely commissioned and funded by the NHS.
- 5. Council officers have been working closely with NHS colleagues to ensure that is clarity regarding any impact on adult social care services following closure of the Hillside service and to ensure that the new community healthcare services intended to replace the Hillside service is aligned with the council's social care services such that the experience of service users is integrated.
- 6. The council is considering a range of options for the future use of the Hillside facility in accordance with the council's corporate property strategy, and will bring forward proposals once these have been fully assessed through a robust business case.

## Community impact

- 7. The committee's considerations should have regard to what matters to residents of Herefordshire.

## Equality duty

8. Under section 149 of the Equality Act 2010, the ‘general duty’ on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to -

- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
  - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
  - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
9. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying ‘due regard’ in our decision making in the design of policies and in the delivery of services. Our providers will be made aware of their contractual requirements in regards to equality legislation.

## Resource implications

10. There are no direct resource implications arising from this report. The cost of any resulting committee work will be subject to assessment and expected to be met within existing resources

## Legal implications

11. There are no direct legal implications arising from this report.

## Risk management

12. There is a reputational risk to the council if the scrutiny function does not operate effectively.

Risk / opportunity	Mitigation
Performance management could be focused on process measures that are not reflective of the wellbeing and experience impact of the service for Herefordshire residents.	The committee seeks to focus its attention on matters of direct relevance to Herefordshire residents and ensure performance measures reflect these.

## Consultees

13. The responsibility to consult on the matter under consideration lies with the health bodies concerned. The issue was first brought to the attention of the Adults and Wellbeing scrutiny committee in November 2017. As well as the scrutiny powers conferred on the

committee, Herefordshire Council is a statutory consultee of the health bodies in relation to their service delivery plans.

## **Appendices**

Appendix 1 Presentation from Wye Valley NHS Trust

## **Background papers**

None identified.