

Committee and Date

COUNCIL

21 July 2011



## Councillor Gerald Dakin, Healthy Communities Scrutiny Committee Chairman

#### ANNUAL REPORT OF THE HEALTHY COMMUNITIES SCRUTINY COMMITTEE 2010-2011

#### 1.0 Summary

1.1 This is an overview of the work of Healthy Communities Scrutiny Committee during 2010-11 and its achievements in providing positive outcomes for local people.

#### 2.0 Ways of Working

2.1 A range of ways of working has been employed, some via Task & Finish Groups, site and observation visits, interviews with a selection of partners, visits to other organisations, witness evidence, consultations with members of the public, research with other authorities and a special scrutiny meeting. Topics have been taken forward through both public and Members' questions.

#### 3.0 What have we done?

3.1 Work undertaken and key achievements for both the Healthy Communities Scrutiny Committee and the Joint Health Overview and Scrutiny Committee are set out below.

## 4.0 Healthy Communities Scrutiny Committee

- 4.1 In the planning and provision of health services, the Committee has been updated on key elements of the **Health & Social Care Bill 2011** and devolving power and responsibility for commissioning of NHS services. The Chairman of the GP Consortium Transition Board has reported on setting up arrangements with three key short term priorities:
  - Urgent Care
  - Outpatient neurology
  - Long term conditions, specifically Chronic Obstructive Pulmonary
    Disease

- 4.2 Transition operating arrangements will be overseen and supported by the West Mercia Cluster, formed in March 2011 who retains statutory responsibilities until the formal abolition of Primary Care Trusts in April 2013.
- 4.3 The Committee welcomes the intention to give local authorities a leading role in **Public Health** with transfer of improvement functions from April 2013. Funding arrangements have yet to be announced and the Committee have asked that funding allocation takes account of Shropshire's rurality and sparsity factors.
- 4.4 Following a report from the Community Involvement in Health & Care (CInCH), which was commissioned to look into **Patients' Experience of Discharge from Hospital**, a special meeting of the committee examined the issues and heard from key organisations involved in patient discharge and support. The Committee facilitated discussions and developments between the key organisations and will be reviewing in the autumn the results of a Pilot Scheme on an 'Early Supported Discharge Programme' between Shropshire County PCT and Shrewsbury and Telford Hospital Trust (SaTH).
- 4.5 Arising from a public question, the Committee has instigated developments with commissioners to reach a solution with providers on the provision of **hydrotherapy** for users, independent of acute services, who have chronic conditions.
- 4.6 The Committee has reviewed the **Adult Autism Strategy** and progress plan supporting work to gain understanding and awareness and noting progress has been commensurate with available resources and changes both within the Council and the NHS. The Committee has commended the work of 'Autonomy', a self-sustaining group who produce information through regular newsletters and who have established a female Autistic Spectrum Conditions social group.
- 4.7 The Committee has been satisfied with progress by the Drugs and Alcohol Action Team on the Shropshire Alcohol Strategy supporting the need for more preventative work to reduce service capacity issues in the future. A successful pilot project in Ludlow, working with schools, the licensing trade, youth service and enforcements agencies will shortly be rolled out to Oswestry. To improve the management of alcohol related hospital admissions, Screening programmes have been developed by the Primary Care Trusts, with some GP practices and pharmacies also involved. Challenges are around funding and competing with other services and there is a reliance on other partners to keep alcohol on their agendas.

## 5. Task & Finish Groups

5.1 **Diabetes:** Based upon the report of the Health Inequalities National Support Team in their report for Shropshire in March 2010, the Committee looked at how the NHS Shropshire's Long Term Conditions Strategy could be supported by a Task & Finish Group to improve outcomes for people with Diabetes. The Group recognised the breadth of focus for Diabetes which affects 2.8 million people in the UK, with another 1 million thought to have the condition but not aware of it.

- 5.2 The Group focussed on the prevention of Type 2 Diabetes and contributory factors such as obesity and inactivity, receiving evidence from the Portfolio Holder for Leisure Services, and from Council and Public Health Officers who worked on healthy eating and physical activity. The Group also attended the annual meeting of a local voluntary group and produced a report for Cabinet with 10 recommendations. Contributory factors such as physical activity and unhealthy eating habits need to be a priority taken forward as untreated Diabetes can lead to many different health problems such as heart disease, stroke and kidney disease.
- 5.3 West Midlands Ambulance Service: The Committee extended the Group's remit to examine and draft a response to the Service's bid for Foundation Trust Status. The Group were generally supportive of the bid but were still keen to see improvements in response targets. Having visited control centres at both Brierley Hill and Stafford, and raising a number of questions with the Service and with SaTH about the patient handover process, the Group studied information about the introduction of new systems, including the NHS Pathways triage and a call prioritisation system.
- 5.4 The Group have reviewed the 'Make Ready' preparation system that allows more resources to be spent on frontline services which will see the Trust's estate reconfigured into a smaller number of strategically located main ambulance stations with a large network of community response posts (CRP's). Each CRP will have a high standard of facilities for staff, some will be in the same location as current stations and others will be in new areas that are statistically closest to potential patients, thus improving response times. The Group will be commending the new systems to Members in July in the interests of a better outcome for patients.

# 6.0 Joint Health Overview and Scrutiny Committee (HOSC) With Telford & Wrekin Council (TWC)

- 6.1 Members have worked extensively in a joint role with Telford & Wrekin Council on proposals by SaTH for **Reconfiguring Hospital Services in Shropshire** following a history of debate without resolution on the shape of hospital services in Shropshire, Telford and Wrekin. The Joint Committee recognised the need for vision and challenge on behalf of local communities, in order to bring about excellent hospital services that would serve the future needs of the whole of Shropshire. A rigorous scrutiny of proposals was undertaken and whilst maintaining independence, worked constructively with NHS partners and both local involvement networks to address concerns on behalf of the public. The process was extensively planned and involved:
  - A detailed examination of the proposals and the consultation process, focussing on the risks to services, particularly around travel times
  - The commissioning of attendance by SaTH and the NHS at 4 meetings before and during the consultation process and detailed submissions in

response to extensive questions raised by the Committee and on behalf of the wider public who had contacted the Joint Committee

- Involvement by Chairman and support officers as independent observers of the Assurance process, to strengthen their assurance and challenge
- Visits by Members and support officers to services and departments at both sites most affected by the proposals, including hearing first hand from frontline staff about their hopes and concerns
- Research to support the work of the Joint HOSC with the Independent Reconfiguration Panel and with other authorities who had scrutinised similar service reconfiguration
- Interviews with the Office of Government Commerce
- 6.2 Over a period of six months, the Joint Committee carefully considered a huge amount of information and care pathways to ensure proposals were best for the county as a whole and in March, endorsed the decision made by the NHS Boards to ensure that health services remain with the county. The committee believe that local people will receive a better health service in Shropshire and the views of local people have been important to the Committee. In its determination and commitment to monitor the reconfiguration of services, the Joint Committee met on 16 June, and having satisfied that all assurances provided have or are being put in place, it has given its support to developments in the Outline Business Case and will continue to monitor progress until and beyond the Full Business Case is presented in October.
- 6.3 The Joint Committee welcomed the approach taken by both the Shropshire County PCT and NHS Telford and Wrekin in working together to create a new **Community Health NHS Trust for Shropshire, Telford and Wrekin**. In responding to the consultation last December, and expressing support for the proposals, the Committee commented that the standard of services provided by the 4 community hospitals should be continued, if not surpassed. The new *shadow* Community Health Trust has since received formal approval from the Department of Health and will become legally established on 1 July 2011, specialising in community health services and its priority will be to work with staff, GPs, local community groups, patient groups and other local NHS Trusts to make sure patients receive modern, well co-ordinated community services. The Committee will continue to monitor service provision and have requested that any proposals to change services be brought back for scrutiny.
- 6.4 Also, in December, the Joint Committee broadly welcomed proposals by Shropshire County PCT and NHS Telford & Wrekin working with South Staffordshire and Shropshire Healthcare NHS Foundation Trust, which runs the majority of the hospital and community-based mental health services in Shropshire, Telford and Wrekin. Plans which run over the next 3 to 5 years, to strengthen **Mental Health Care in Shropshire, Telford and Wrekin**, include the replacement of the 157 year old Shelton Hospital with modern purpose-designed facilities on an adjacent site. Plans also include greater focus on promotion, prevention and early intervention, overcoming barriers to social inclusion and starting from the viewpoint of an individual's stated expectations, needs and preferences. Members will be closely monitoring the phased reduction of inpatient service to ensure that there are sufficient and

appropriate community resources support for families and carers, and the Healthy Communities Scrutiny Committee has requested an update on developments at Beech Ward, Whitchurch when it meets next in July.

### 7.0 Other News

- 7.1 The Joint Committee is waiting to hear further about plans to review **Children's Cardiac Services** which is currently out for consultation on the number and location of surgical centres. The review aims to achieve better results with fewer deaths and complications following surgery, with better trained surgeons and clinical teams at the forefront of technology and working practices. Centres currently providing these services for Shropshire are at Liverpool Alder Hey and Birmingham Children's Hospital and both are included in the 4 Options set out in the consultation. Plans include the development of regional and local networks to provide accessible diagnostic and follow up support services.
- 7.2 On behalf of the Committee, the Chairman has commented upon **Quality** Accounts which are annual reports to the public from providers about the quality of the services they provide, setting out where the provider is doing well and where improvements can be made with priorities for the coming year, thus aiming to enhance accountability for the public. Comments have been provided for the Community Health Services and jointly with Telford & Wrekin Council for SaTH and for the Ambulance Service. Shropshire Council's comments will be included in the Accounts when they are published.
- 7.3 **'NICE' Developments:** The National Institute for Clinical Excellence (NICE) are promoting a number of new developments, including quality standards, NICE pathways, NHS Evidence and the Quality, Innovation, Improvement and Prevention Programme. NICE will be visiting the committee to cover topics such as the value and use of evidence and how NICE Guidance can support Scrutiny.

## 8.0 What are our future plans?

- 8.1 Topics within the Committee's future work programme are:-
  - Alzheimers
  - Complementary Therapies as approved treatment for lower back pain
  - Cancer Support Services
  - Outpatient appointment process
  - Drug use and in particular
  - Domestic Violence
  - Hospital falls prevention
  - Reablement
- 8.2 The Joint Committee will be reviewing:
  - The reconfiguration of hospital services as it moves through Outline to Full Business case

- The modernisation of mental health in Shropshire in its phased reduction of inpatient service to ensure there are sufficient and appropriate community resources support for families and carers
- The effect of plans to review national paediatric cardiac services
- The findings of an audit in the implementation of Improving Outcomes for Gynaecological Cancer
- Development of the Community Trust

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Reports to Healthy Communities Scrutiny Committee and the Joint Health Overview & Scrutiny Committee 2010-11

#### Human Rights Act Appraisal

The recommendations contained in this report are compatible with the provisions of the Human Rights act 1998

#### **Environmental Appraisal**

There are no environmental issues relating to this report.

**Risk Management Appraisal** 

There are no risks associated with this report.

#### **Community / Consultations Appraisal**

Consultation is a component of Scrutiny work to collect information to support the development of conclusions and recommendations.

### **Cabinet Member**

All

#### Local Member

All

#### Appendices

None