



<u>Committee and Date</u>
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**Councillor Gerald Dakin, Healthy Communities Scrutiny Committee Chairman**

## **ANNUAL REPORT OF THE HEALTHY COMMUNITIES SCRUTINY COMMITTEE 2011-2012**

### **1.0 Summary**

- 1.1 This is an overview of the work of Healthy Communities Scrutiny Committee during 2011-12, the plans for the forthcoming year, and its achievements in providing positive outcomes for local people.

### **2.0 What have we done?**

- 2.1 Since the last Annual Report, the Committee has met nine times, including two meetings held jointly with the Safe and Confident Communities Scrutiny. In addition, one Task and Finish Group has concluded its work.
- 2.2 Work undertaken and key achievements for both the Healthy Communities Scrutiny Committee, and the Joint Health Overview and Scrutiny Committee are set out below.

### **3.0 Healthy Communities Scrutiny Committee**

- 3.1 The Committee has been evaluating key elements of the Health and Social Care Act 2012, and considering the impact of the devolving powers and responsibility for commissioning of NHS services, the transfer of Public Health services to the Local Authority in 2013, and holding health providers to account where public concerns have been raised.
- 3.2 The Committee received a presentation from Autism West Midlands highlighting the statutory implications of new government guidance, followed by a review of services for adults with autism in Shropshire to establish the impact of the statutory guidance on the Council's policy, and how services were being affected. Following on from the review, development and implementation of suitable Autism training has been made available to all Members through the Member Development Scheme, to help address gaps in service identified through the work of the Committee.

- 3.3 In 2010-11 the Committee examined the outcomes of the LINK report, 'Patients' Experience of Discharge from Hospital', and as a result the Committee revisited several areas of work during 2011-12, including early supported discharge for stroke patients; START supported discharge programme; falls prevention; and a review of Shrewsbury and Telford Hospital NHS Trust outpatient appointment process, and received assurances that partnership working between health partners were becoming coherent and focused, and as a result quality of care was improving, whilst cost efficiencies were being achieved. The Committee continue to monitor service provision, and will revisit 'Early Discharge from Hospital' later in the year, to ascertain the effectiveness of implemented changes to service provision.
- 3.4 West Midlands Ambulance service has undergone major changes over the past 12 months, including the implementation of the 'Make Ready' system. Proposals will see an increase in the Trust's frontline presence, and development of a single reference point for care pathways through the 'Directory of Services' ensuring patients are directed to the most appropriate care provision, which will reduce demand on acute services, and as a result reduce unnecessary treatment costs.
- 3.5 Work has been carried out, through the Healthy Communities Scrutiny Committee, and the Joint Health and Overview Scrutiny Committee, to consider a review of the trauma care system for the West Midlands. Following a detailed assessment of proposals, the preferred option received Strategic Health Authority approval, and has seen the implementation of a Trauma Care Network, which includes Royal Shrewsbury Hospital being designated as a Trauma Care Unit.
- 3.6 Mental Health Provision in Shropshire has undergone a period of transformation in order to modernise the system, following national evidence indicating that a needs led provision should be implemented to ensure an improved quality of service to a greater range of patients. The phased changes had seen the building of a new purpose built facility, the recruitment of an additional 88 community nursing positions, and redeployment and training for existing nursing teams, following the closure of Community Hospital's mental health wards. The changes will enable patients to receive more appropriate treatment out in the community, instead of being institutionalised unnecessarily.
- 3.7 Further to a review of urgent care provision across the health economy, Shropshire County PCT/Clinical Commissioning Group, in consultation with health and social care providers, have identified a need for a whole system commitment to early and sustainable improvement across urgent care, and to enable timely, clinically appropriate and cost effective urgent care to be delivered, a pan Shropshire approach has been adopted, and an Urgent Care Strategy has been drawn up in order to achieve transformational, large scale and cultural change. The Committee has considered the development of the strategy, and supported the methodology behind the work. The Committee will continue their involvement over the next 12 months, and feed into the process reviewing proposals prior to implementation of the strategy.

- 3.8 For the first time health providers across Shropshire have been required to seek comments from Healthy Communities Scrutiny Committee prior to the publication of their annual Quality Accounts. Due to the tight deadlines involved in the work, the Committee appointed 5 Member Panels to review, and comment, on performance of a health provider, and consider the appropriateness of priorities over the next 12 months. The Committee's comments have been considered, and acted on by each Trust Board, and a final statement has been published with each Quality Account.

#### **4. Task & Finish Groups**

- 4.1 The Task and Finish Group on Gammahydroxybutrate (GHB)/Synthetic Drugs Misuse reported to Cabinet in July 2012. The focus of the Task and Finish Group was to identify what services were available for identification, and treatment of drug misuse. The Group was particularly focused on none opium based substances, and looking at pathways to support young adults housing and employment needs. Members made 7 recommendations to Cabinet, which were well received, and will help shape the future strategic direction of operational provision. The Committee will continue to monitor the implementation process, and review this important area of work in 6 months time.

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

- 5.1 Members have worked extensively in a joint role with Telford and Wrekin Council on proposals by Shrewsbury and Telford Hospital NHS Trust to reconfigure hospital services in Shropshire, and saw the Trust's Full Business Case receiving final approval in May 2012. 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 Shropshire.
- 5.2 Rigorous scrutiny of the proposals was undertaken, whilst maintaining the Committee's independence, worked constructively with NHS partners, to address concerns on behalf of the public.
- 5.3 The Committee undertook a detailed examination of proposal, and focused on the risks to services, and over a 12 month period carefully considered a huge amount of information and care pathways to ensure proposals were clinically safe, and the best option to the county as a whole. The Committee believe that the proposals will provide a more joined up health provision for local people, and consider that the work undertaken by the Trust has helped secure the future of the two acute hospitals.
- 5.4 Following approval of the Trust's proposals by the Strategic Health Authority, the Committee continue to monitor the implementation of health services, and the reconfiguration process.

## **6.0 What we are currently doing?**

- 6.1 The Committee are currently monitoring changes to health services, following the introduction of the Health and Social Care Act 2012, and developing the scrutiny role, and relationships with the emerging Health and Wellbeing Board, and the newly created Healthwatch.
- 6.2 Following the Health and Social Care Act, the Department of Health has issued an 8 week consultation on the regulations for Health Scrutiny. The consultation recognises that health scrutiny has been an effective means in recent years of improving both the quality of services, as well as the experience of people who use them, and it is recognised that strengthening health scrutiny is one of the mechanisms proposed to increase accountability and enhance public voice in health, and that the new NHS bodies are made subject to effective scrutiny and held to account. Members have considered the consultation document, and agreed a response to the proposals for Local Authority Scrutiny.
- 6.3 Nationally the NHS will be introducing a new '111' service to make it easier for patients to access local NHS healthcare services. The new 111 number would provide advice and information to the public when they need medical assistance urgently, but the situation is not life-threatening. It is expected that nationally Health Scrutiny Committees will be invited to respond to a statutory consultation on the proposed changes to service provision, and the process is being closely monitored through the Regional Health Scrutiny Chairman and Officers Group.

## **7.0 What are our future plans?**

- 7.1 A new scrutiny process is to be drawn up, as a result of the development of new strategic commissioning bodies for key public services in Shropshire, and a more diverse local market place of providers for all sectors.
- 7.2 The Work Programme is kept under review, and managed by the Scrutiny Chairs' Group, with future issues for scrutiny including:
- Review of the Health and Wellbeing Strategy
  - Monitoring the transition of Public Health
  - Review the development of the Clinical Commissioning Group
  - Future provision of Alzheimers/Dementia
  - Unscheduled Care Strategy
  - Early Patient Discharge
  - Quality Accounts
  - Statutory consultations
  - Make Ready System
  - 111 Consultation

7.3 The Joint Committee will be reviewing:

- The next phase in the future configuration development work, and any changes to the implementation process
- Travel and Transport Plan
- Workforce Development Plans
- Transformation Change Programme
- Monitoring of finances, communication and engagement strategy, service changes failing to meet planned timescales, and changes to commissioning
- Developing hospital at home services
- Stroke Services Review
- Provision of Angioplasty procedures

**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 2011-12

**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**

Councillor Ann Hartley

**Local Member**

All

**Appendices**

None