



## Committee and Date

Council  
30<sup>th</sup> March 2023

Item

Public



# Health and Adult Social Care Overview and Scrutiny Committee Annual Report 2021/22

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## 1. Synopsis

Health and Adult Social Care Overview and Scrutiny Committee looked at a range of key topics in 2021/22 which are summarised in this paper.

## 2. Executive Summary

- 2.1 The Shropshire Plan includes 'Healthy Organisation' as a priority outcome and the Strategic Objective that "We will ensure councillors are supported to advocate for their constituents but to also be ambassadors for the council". This report shares the annual statement for 2021/22 for the Health and Adult Social Care Overview and Scrutiny Committee.
- 2.3 The annual statements for each overview and scrutiny committee for 2022/23 will be reported to Council during 2023/24

## 3. Recommendations

- 3.1. Members are asked to consider and comment on the 2021/22 annual statement for Health and Adult Social Care Overview and Scrutiny Committee.

## REPORT

### 4. Risk Assessment and Opportunities Appraisal

- 4.1. Effective Overview and Scrutiny is a feature of the Council's governance arrangements, particularly where the Council is operating executive arrangements. There are a range of factors that could result in risks to Council of not doing O&S effectively.
- Failure to challenge and hold decision makers to account.
  - Failure to link O&S work to the delivery of the council's priorities and risk management – failure to demonstrate added value
  - Failure to carry out thorough and appropriate research to make evidence-based recommendations.
  - Failure to engage partners and providers.
  - Failure to ensure that structures and models of operation are fit for purpose and match ambition and available resources.
  - Failure to ensure that O&S can operate as the voice of communities.
  - Failure to draw on member knowledge and experience to inform policy development.
- 4.2. To mitigate, tolerate or eradicate these risks, enablers for effective scrutiny include:
- Operating in an apolitical manner.
  - Clarity of vision and purpose
  - Overview and Scrutiny support availability, capability and capacity
  - Effective engagement and commitment by Members and officers at all levels, including Cabinet, Opposition Leaders, Scrutiny Chairs and Senior Officers who play a central role in setting the tone and direction
  - Robust Work programming and prioritisation of topics with clear objectives and expected impacts
  - Access to and availability of robust data and intelligence
  - Good relationship with partners and providers
- 4.3. Overview and Scrutiny Committees have remits that cover the breadth of the work of the Council, as well as looking externally including Health Services and provision through Health Overview and Scrutiny requirements.
- 4.4. Topics for Overview and Scrutiny Committee work programmes are identified based on a number of different considerations including an understanding of risks to the Council, employees, people who use services, to service themselves, and to communities. These may be identified through reviewing performance information and comparing with others, changes to national and local policies, budget information, feedback from communities and customers/service users, feedback from partners/providers, and reports from regulators.

- 4.5. During overview and scrutiny work evidence will be gathered that builds on this understanding to inform the development of conclusions and evidence-based recommendations.
- 4.6. The use of external peer challenge such as that offered by the Centre for Governance and Scrutiny provides objective review and feedback about opportunities to develop the effectiveness and impact of overview and scrutiny.

## 5. Financial Implications

- 5.1. There are no direct financial implications associated with the annual statements of the Council's Overview and Scrutiny Committees set out in this report.
- 5.2. Effective overview and scrutiny produces evidence-based recommendations. These can be informed by learning from best practice and an understanding of "what works" at other similar local authorities, as well as developing a robust picture of what the situation locally based on data, intelligence and insights. Where adopted recommendations can help with the efficiency and effectiveness of services that can be delivered differently, as well as informing the development of current and new policies.

## 6. Climate Change Appraisal

- 6.1. All reports to Overview and Scrutiny committees, as with all council committees, include appraisals of the impact of the report content on climate change.
- 6.2. Overview and Scrutiny Committee work programmes directly link to the Shropshire Plan priorities, including Healthy Environment which is built around climate change and carbon reduction, and the natural and historic environment.
- 6.3. Climate change and carbon reduction related issues are directly identified in the remit and therefore focus of the Place Overview Committee i.e.
  - delivery of the agreed lower carbon footprint and emissions targets, including air quality, by the Council and its partners;
  - actions to protect, enhance and value Shropshire's our natural resources and respect the historic environment;
  - arrangements to safeguard and promote a clean and green environment;
  - the delivery of work to reduce landfill and waste;
  - management and development of the physical and digital infrastructure

## 7. Background

- 7.1. Overview and Scrutiny Committees report to Council annually as part of the organisation's governance arrangements. This includes the work that they have completed in the previous 12 months and the impact they have had through their evidence-based recommendations.
- 7.2. This report sets out the annual statements for 2021/22 for Health and Adult Social Care Overview and Scrutiny Committee.

## 8. Annual Scrutiny Statements

### 8.1 Health and Adult Social Care Overview and Scrutiny Committee

- **Delivering Public Health Outcomes**

The committee continued to monitor closely the change in strategy in how public health funding is spent. The council had moved to tackle the wider determinants of health, in particular housing, allowing it to focus on providing more comprehensive services for its most vulnerable residents. The committee challenged the council's approach and scrutinised its performance monitoring and project spend. The committee recognised that this constituted a long-term strategy whose benefits would become apparent many years later and agreed to focus future scrutiny onto the projects and services directly.

- **Joint Strategic Needs Assessment**

The committee was critical of the failure of the council, through the Health and Wellbeing Board, to commission and complete the local authority's Joint Strategic Needs Assessment (JSNA), a key statutory document on which partnership health planning should be based. The committee continued to monitor progress as the council completed its Special Educational Needs JSNA and developed its proposals for place-based assessments to mirror the council's place-based planning.

- **Adult Mental Health Services**

The committee received a programme of briefing on the range of support services for mental health across adult services. These included housing for adults with significant and enduring mental health problems, and adults with learning difficulties with individual capacities for independent living. The committee heard how mental health teams were working more closely with drug and alcohol teams to provide holistic care and agreed to focus a future work programme item on this vital component of service support.

- **111 Services**

Shropshire Clinical Commissioning Group (CCG) provided the committee with the results of their review of the triage of 111 non-emergency services. A programme to offer GP appointments directly had not achieved its intended level of uptake. Members sought assurance that the CCG considered the demographic profile and associated age-related changes in demand when assessing service capacity. The committee learned that a review of high-intensity service users had provided an opportunity to identify and provide more appropriate care to these users, reducing the burden on the service in turn. Member referred this matter to the Joint Health Overview and Scrutiny

Committee, asking that it also scrutinise ambulance response times.

- **Independent Living**

Members took part in two online briefings on how the council promoted independent living through assistive technology and new housing developments that catered for the needs of adults with additional support needs. The committee supported the focus on promoting independent living and using technology to achieve that.

- **Health in All policies**

Following its decision to focus on the delivery of projects and services to realise the public health outcomes framework, the committee placed its focus on emerging Health in All Policies approach, embedding the council's public health duty into all of its policy and priorities. Public Health were working closely with the development of Local Transport Plan 4, the first major council policy to embed this approach. The committee endorsed this approach to setting policy.

- **Winter Plan**

The committee scrutinised the learning at the end of the operation of the council's winter plan, seeking to identify areas of focus as the local authority prepared for the coming year's winter pressures. The committee received reassurance around effective and close working with the voluntary and community sector. And heard that the additional winter bed capacity worked very well in increasing transfers of care from hospitals.

Members felt that the public perception of the discharging process was that it was slow, and it would be appropriate for this to be scrutinised. Members were advised that the team would be looking at the journey to discharge, which was complex, and that there was a lot of work taking place surrounding this which could be presented in the future to give the committee and communities more assurance.

- **Joint commissioning**

The committee looked at the emerging integrated approach to commissioning with health partners. Members raised concern that partnerships cannot be successfully formed when data is not being shared. Members were advised that joint dashboards had been set up and data sharing protocols were being developed. This would enable scrutiny of progress and impact and the holding of decision makers to account. It was noted that local decisions would be considered by a local board before being implemented and that the council had a strong voice when it came to decision making.

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

Health and Adult Social Care Overview and Scrutiny Committee agendas, papers and minutes for May 2021 to March 2022.

**Local Member:**

All

**Appendices**

None