
HEALTH SCRUTINY PANEL

A meeting of the Health Scrutiny Panel was held on 2 June 2004.

PRESENT: Councillor Dryden (Chair), Councillors Biswas, Lancaster, McIntyre and Regan.

OFFICIALS: J Bennington, T Gilling and E Williamson.

PRESENT BY INVITATION: G Tompkins (County Durham and Tees Valley Strategic Health Authority)
Prof. P Kelly, J Malone and Dr H Park (Middlesbrough PCT)
J Chisholm (South Tees Hospitals NHS Trust).

**** APOLOGIES FOR ABSENCE** were submitted on behalf of the Councillors Mrs H Pearson and K Walker.

**** DECLARATIONS OF INTEREST**

No declarations of interest were made at this point of the meeting.

**** MINUTES**

The minutes of the meeting of the Health Scrutiny Panel held on 19 May 2004 were submitted and approved.

WELCOME - INTRODUCTION

The Chair welcomed and thanked the representatives from the various health organisations for their support and contribution to the work of the Scrutiny Panel.

NOTED

HEALTH SCRUTINY PANEL - DRAFT WORK PROGRAMME

The Health Scrutiny Officer submitted a report, which gave the background to the formulation of a draft work programme for the Health Scrutiny Panel, which once agreed, by the Panel would be considered by the Overview and Scrutiny Board at its meeting to be held on 15 June 2004.

It was noted that Guidance on health scrutiny indicated that there should be a detailed programme for year one and an outline plan for a further two years. The draft work programme had been prepared in consultation with: -

- Strategic Health Authority, Middlesbrough PCT, South Tees Hospitals Trust, TNEY Trust (wider public health agenda and consultations on substantial changes to health services)
- Public and Patient Involvement Forums for PCT and Trusts, North East Public Health Observatory, Regional Office of Health Development Agency
- Community Councils.

In developing the work programme reference was made to the following: -

- Panel's response to the Department of Health's consultation about public health called 'Choosing Health'
- Links to the three year targets in the national Priorities and Planning Framework (PPF) for the NHS and the Local Delivery Plan (LDP) that sets out how the targets in the PPF would be tackled locally
- Council's draft Corporate Performance Plan (CPP)

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- Council's draft Community Strategy Delivery Plan (CSDP)
 - Second generation Local Public Service Agreement (PSA2).

A schedule of potential topics for years 1 and 2 was outlined at Appendix A of the report submitted. The report outlined identified topics under the PPF and LDP links as follows: -

Improving Access to Services

- Access to and development of Primary Care (CSDP - Promoting Healthier Communities)
- Recruitment and workforce development (CSDP - Promoting Healthier Communities)
- Access to leisure/exercise referral (CSDP - Promoting Healthier Communities)
- Transportation issues for particular communities (CPP - Securing Better Access to Jobs and Services and Meeting Local Transport Needs More Effectively)
- Community Pharmacies (National Pharmaceutical Association)
- Access to routine operations (Voiceover Panel)

Improving Services and Outcomes

Mental Health

- Tackling the cause of suicide
- Substance misuse and effects on mental health (CSDP - Promoting Healthier Communities)

Life Chances for Children

- Physical activity and access to leisure/health education/obesity (CSDP - Promoting Healthier Communities), (CPP - Transforming Our Environment and Encouraging Healthier Lifestyles)
- Tackling Asthma (National Asthma Campaign)
- Prescription of Ritalin (Executive Director of Education)

Improving the Patient Experience

(PALS Team at STHT)

- Provision of interpretation services
- Bereavement
- Communication
- Information sharing between professionals (Voiceover Panel)

Reducing Health Inequalities

- Dampness in housing (CSDP - Promoting Healthier Communities)

Reducing Drug Misuse

- TNEY Addictive Behaviours Service and the Personal Medical Services pilot (CSDP - Promoting Healthier Communities)

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- Substance misuse and effects on mental health (CSDP - Promoting Healthier Communities).

Since the circulation of the report and with the approval of the Chair an addendum to the report was circulated which detailed additional suggestions which had been received for the Panel to consider in respect of the following: -

Executive Director of Social Services:

- (a) Healthy Living Initiative Strategy
 - Are healthy living initiatives co-ordinated?
 - Can an overarching strategy be developed?
 - How are outcomes measured and evaluated?
- (b) Drugs Harm Minimisation Services
 - Location of Needle Exchanges
 - Prescribing of Methadone and pharmacist supervision
- (c) Increasing Physical Activity with a focus on vulnerable people
- (d) Alcohol Harm Reduction Strategy

Middlesbrough PCT PALS Team:

- (a) Advanced Access Booking System for making an appointment with a health professional within 24 hours and a GP within 48 hours
- (b) Out of Hours healthcare
- (c) Repeat Prescribing whereby GPs make repeat prescriptions for 28 or 56 days only.

South Tees Hospitals Trust:

- (a) Rehabilitation Services
- (b) Palliative Care Strategy.

The main points arising from the ensuing discussion were as follows: -

- (i) it was suggested that a more focussed review be undertaken over a short period of time in respect of :-
 - Emergency Admissions to Hospitals
 - Community Dental Health Services.
- (ii) given the wide ranging work programme it was suggested that it may be necessary to prioritise areas and examine the scope for dividing the Panel into Working Teams in order to carry out some of the investigative work
- (iii) Middlesbrough PCT supported the work programme and suggested two priority areas in respect of:-
 - Substance and alcohol misuse - linked to a number of NHS organisations/services and Local Authority

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- Physical activity and healthier lifestyle for children
- (iv) any comments on the Work Programme arising from an impending Board meeting of Middlesbrough PCT would be forwarded prior to the meeting of Overview and Scrutiny Board on 15 June 2004
- (v) in terms of the suggestion from South Tees Hospitals Trust relating to Rehabilitation Services it was felt that as this linked to the Social Care and Adults Services Scrutiny Panel consideration be given to the establishment of an Ad Hoc Scrutiny Panel comprising Members from both Panels
- (vi) Strategic Health Authority suggested the following for consideration:-
- Council's own work programme and the impact on health
 - Impending revised planning guidance in respect of Chronic Diseases Management (Year 2).

AGREED as follows:

1. That the draft work programme as outlined in the report be approved subject to: -
 - (a) that priority is given to the topic of substance and alcohol misuse the suggested remit for which to be formulated in consultation with the Director of Health Improvement, Middlesbrough PCT,
 - (b) that priority is given to the topic relating to physical activity and healthier lifestyle for children
 - (c) that more intensive reviews over a shorter period of time be incorporated in the Work Programme in respect of:-
 - Emergency Admissions to Hospitals
 - Community Dental Health Services.
2. That the Overview and Scrutiny Board be recommended to establish an Ad Hoc Scrutiny Panel to consider Rehabilitation Services.
3. That the suggestions from the Strategic Health Authority be incorporated in Years 2 and 3 of the Work Programme.

HEALTH SCRUTINY OFFICER

The Chair on behalf of the Scrutiny Panel congratulated Tim Gilling following his recent appointment to the Centre for Public Scrutiny. The Chair expressed his appreciation to Tim for his support and excellent work undertaken as Health Scrutiny Officer and extended best wishes for the future to Tim and his family.

Prof. P Kelly, Director of Health Improvement, Middlesbrough PCT endorsed the sentiments expressed.

NOTED