

HEALTH SCRUTINY PANEL

A meeting of the Health Scrutiny Panel was held on 16 March 2007.

PRESENT: Councillor Dryden (Chair); Councillors Biswas, Ferrier, Lancaster, Mawston and Rooney.

OFFICIALS: J Bennington, P Duffy, P Dyson and J Ord.

**** PRESENT BY INVITATION:**

Jonathan Maloney, Head of Healthcare Governance, Middlesbrough Primary Care Trust.

**** 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 8 February 2007 were submitted and approved.

MIDDLESBROUGH PRIMARY CARE TRUST – HEALTHCARE COMMISSION DECLARATION

The Scrutiny Support Officer submitted an introductory report on the evidence to be sought from Middlesbrough Primary Care Trust regarding its Healthcare Commission Declaration.

Under a new checking regime of the Healthcare Commission, health scrutiny had the opportunity to comment on Trust performance and for such comments to be inserted into the Trust's declaration of performance against the core standards as unedited contributions.

The Chair welcomed Jonathan Maloney, Head of Healthcare Governance, Middlesbrough PCT who gave a presentation on the Standards of Better Health (S4BH) focussing on issues addressed from last year and areas for improvement.

Specific reference was made to a number of improvements which had been made including a robust IT system, 'MIDAS' which had been established which provided a single electronic evidence repository and assisted with action planning and identification of gaps in control. Steps were being taken to continuously refine the system.

Details were provided of the measures of corporate engagement and measures in place for shared responsibility to objectively review the evidence.

Steps had been taken to raise the level of awareness and ongoing engagement including training with all staff across the organisation.

The PCT had been one of the 10% selected at random by the Healthcare Commission who had expressed no adverse comments, which had been regarded as a positive stance.

The position declared in May 2006 had shown that 41/44 standards had been fully met; 2/44 standards had been classified as Insufficient Assurance in respect of mandatory training and emergency planning; and 1/44 standards had been regarded as 'not met' in terms of Information Governance. Statistical information provided demonstrated that the 'problem areas' were not dissimilar to other PCT's.

Reference was made to the changes, which had been made to the process, which included the replacement of Prompts with 'Key Lines of Enquiry' (KLOE) for which there were 518, used by the Commission's Inspectors.

It was confirmed that the same approach had been adopted as last year in terms of the compilation of evidence but changes had had to be made in respect of the checking process.

The process had been approved by their Internal Audit, which had taken into consideration the following: -

- consider what impact, if any, there had been on compliance with the Core Standards as a result of serious incidents, adverse external reports and PCT re-organisation;
- provide assurances regarding what action had been taken to address the gaps identified in the previous year's compliance;
- benchmarking against the common 'problem areas' in other PCT's in the area.

Specific reference was made to the action which had been taken to address the gaps previously identified in respect of the following: -

Records Management & Information Governance:

- new structure in place to manage information governance issues which included the establishment of an Information Governance Group, underpinned by Records Management Group involving all clinical areas and IT Security Group focussing on electronic storage of records;
- self assessment against the IG Toolkit which had changed in October 2006;
- IG expert from James Cook University Hospital engaged one day per week focussing on developing policies and documentation; staff training/awareness; and mandatory /induction training sessions;
- a plan was shown which demonstrated the governance arrangements which included an Audit Committee with an independent scrutiny role;

Emergency Planning:

- as part of the agreed action plan a number of measures had been put in place including on-call rotas, dedicated major incident room, training event for Senior Managers, development of Business Continuity Plans, strengthened links and arrangements with Tees Emergency Planning Officer, Director of Emergency Care in Durham, PCT Emergency Planning Board;
- activity of the Emergency Planning Board was monitored by Healthcare Governance Committee;
- all actions identified in the original action plan had now been completed;
- details were given of successful 'exercises' known as 'Operations Merlin and Green Goblin';

Mandatory H & S Training:

- portfolio of H & S training delivered to staff included induction, manual handling, risk assessments, and violence and aggression (Police partnership);
- mandatory training had been reclassified internally as to what was statutory and what was essential to do the job;
- non-attendees were flagged up in management reports to ensure everyone received the necessary training.

In terms of the future, reference was made to guidance, which had been issued in December relating to progress against the developmental standards. PCTs were currently limited to Public

Health for the current year but only half of the standard. Although results would be published they would not be included in the performance ratings for 2006/07.

The key features of the current process were summarised as follows: -

- a) robust systems maintained in order to achieve compliance;
- b) recognition of the challenges presented by a changing environment such as the PCT reconfigurations and changing measures such as KLOEs and Toolkits;
- c) further joint working across South Tees where possible to achieve consistency and efficiency;
- d) recognition that the identified performance assured stakeholders that a safe, high quality service was being provided to the patient population;
- e) confirmation given that the Panel's comments would be included in the Board declaration.

Whilst the Panel acknowledged the measures in place to ensure compliance and review the evidence it was suggested that it may be more worthwhile if Members could have a more active involvement in the verification process.

In order to avoid duplication of work or to support any potential reviews by the Health Scrutiny Panel a suggestion was made for consideration to be given to the programme of work by the internal Audit Committee.

AGREED as follows: -

1. That Jonathan Maloney be thanked for the presentation and participation in the subsequent deliberations.
2. That references be included in the Middlesbrough Primary Care Trust Healthcare Commission based on the following:-
 - a) that the Middlesbrough Health Scrutiny Panel is encouraged by the improvements achieved since the previous year's statement;
 - b) that the Health Scrutiny Panel would welcome the opportunity to have a more meaningful involvement in the annual verification process.

STRATEGIC PLAN 2007/2008 – PROMOTING HEALTHIER COMMUNITIES AND EFFECTIVE SOCIAL CARE FOR ADULTS THEME

The views of the Panel were sought on the proposed content of the 'Promoting Healthier Communities and Effective Social Care for Adults' sub-section of the Strategic Plan 2007/08 as outlined in a report of the Executive Director for Social Care. It was intended that the Overview and Scrutiny Board would consider the full Strategic Plan at its meeting scheduled for 1 May 2007.

Specific reference was made to Part 1; Key achievements during 2006/07 and Part 2 proposed actions and targets for 2007/08.

It was noted that the Council's performance in relation to adult care services had scored a three star rating (performing well) following the assessment by the Commission for Social Care Inspection.

Following clarification on a number of areas the main observations of the Panel were as follows:

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Key Achievements 2006/07:

- a) under the paragraph relating to the increasing the number of residents able to remain in their own homes it was noted that the percentage of people who received the delivery of equipment and aids to daily living within 7 working days had increased from 76.4% in 2005/06 to 84% in 2006/07;
- b) it was also noted that in terms of improving access to social care services Middlesbrough Council had been the first Council in the UK to implement a fully integrated electronic pilot of the single-assessment programme with relevant agencies;

Planned Actions in 2007/2008:

- c) the Panel noted that under paragraph 1, bullet point 4 it should read 'increase the number of people choosing a Direct Payment to purchase their care provision by 180 per 100,000 population (from 220)' and target '400 per 100,000';
- d) one of the main thrusts of the planned actions focussed on maximising the independence of older people which would involve more integrated working with local NHS organisations and the independent sector;
- e) the Panel noted the ongoing work and need for further information to be included in the Plan in respect of:
 - paragraph 1, the first bullet point, information on the number of actions in terms of increasing service user input into Planning and Commissioning activities;
 - local strategy to reduce levels of suicide;
 - local service level agreements and quantifying the increased number of carers to be achieved in accessing services;
 - the realignment of the plan and action to be taken following last year's plan under the heading of 'ensure that, when people fall ill, they get good-quality care and are made better faster';
 - identifying the number of additional premises to the Smoke Less Middlesbrough Initiative;
- f) in noting the inclusion of BV targets Members questioned as to whether reference should be made to links with other national health targets;
- g) given that a review was being undertaken in terms of the adaptations process and the significance of major adaptations such as the installation of stairlifts the Panel suggested that an appropriate reference should be included within the planned actions;
- h) it was noted that the development of a plan for integrating Older People's Social Care Services with those provided by the local PCT had been given a completion date of June 2007;
- i) it was confirmed that clarification would be given in respect of the target date for creating a single point of access for Mental Health Services;
- j) in commenting on the lack of information under the heading 'Jointly commission health and social care services with voluntary and independent sector providers' Members referred to a recent scrutiny investigation which had included a recommendation to pursue measures which would stimulate the local market.

In response to Members' concerns raised in relation to transport arrangements following discharge from hospitals the Panel asked if the potential for joint working to improve such arrangements could be included within the Plan.

Members emphasised the importance of including the Council's strategic aims in respect of the specific health and social care issues of children and young persons within the Strategic Plan.

AGREED that prior to submission of the Strategic Plan to the Overview and Scrutiny Board further information be provided on the areas identified by the Panel as outlined.

SCRUTINY REVIEW – RECOMMENDATIONS IMPLEMENTATION

In a report of the Scrutiny Support Officer the Panel was advised of the progress achieved with the implementation of agreed Executive actions resulting from the consideration of scrutiny reports since the last update to the Panel.

Of the 57 Executive actions which should have been implemented by February 2007, 51 had been implemented, 5 partially completed and 1 had not been implemented.

Members welcomed the extent to which the Panel's recommendations and Executive actions had been implemented and the co-operation received from the local NHS organisations.

AGREED that the information provided be noted.

**** OVERVIEW AND SCRUTINY BOARD UPDATE**

In a report of the Chair of the Health Scrutiny Panel, Members were advised of the key matters considered and action taken arising from the meetings of the Overview and Scrutiny Board held on 27 February and 6 March 2007.

NOTED