

HEALTH SCRUTINY PANEL

29 MAY 2008

HEALTH SCRUTINY WORK PROGRAMME 2008/9

PURPOSE OF THE REPORT

1. To advise the Health Scrutiny Panel of the need for a work programme in 2008/9 and to appraise the Panel of possible subjects to consider in 2008/9.

RECOMMENDATIONS

2. That the Panel considers the topics put forward, in addition to any other topics the Panel would like to consider, and makes a decision on its work programme for 2008/9.

CONSIDERATION OF REPORT

3. The purpose of this report is to provide the Health Scrutiny Panel with information, extracted from various sources to assist the consideration of suitable topics for inclusion in the Panel's Work Programme for 2008/9.
5. The Health Scrutiny Panel is required to develop a Work Programme, to guide its work during 2008/9, together with an outline timeframe for each topic. Detailed terms of reference can be developed at the start of each review. Once agreed by the Panel, the work programme will be put before the Overview & Scrutiny Board for consideration and approval, following any amendments felt necessary.
6. To this end the Strategic Plan, the Forward Work Programme, Director of Social Care, senior officers of local NHS Trusts, Councillors and current local/national policy documents have been the main sources of information for this report. A list of the issues suggested, together with the source of the suggestion is outlined overleaf.
7. It should, however, be appreciated that some of the areas detailed below are continually evolving and further details will emerge throughout the year.

8. In addition to establishing the Panel's Work Programme, the Panel may consider it appropriate to receive illustrations from representatives of the local health economy in relation to impending legislation and to respond on an ad hoc basis to emerging issues which would be considered appropriate for an investigation or review to be undertaken.

9. The Panel is also reminded that under the terms of the Local Government Act 2000, local authorities have a responsibility of community leadership and a power to promote community well being. In addition, therefore, to the Scrutiny Panel's specific health scrutiny powers, scrutiny panels have the power to consider **any** matters which are not the responsibility of the Council but which affect the local authority **or** the inhabitants of its area.

Topic and Brief Explanation	Source
Practice based commissioning: How the relationship between PBC and Social Care can be developed to ensure a whole system approach to commissioning to improve health and social care well being of the population	Dept of Social Care
Intermediate Care: How Intermediate Care services could contribute to prevention of hospital admissions	Dept of Social Care
Occupational Therapy: How does it/can it contribute to prevention of acute admissions/timely discharge. Is it fit for future purpose given the likely increased demand in the near future?	Dept of Social Care
Continuing Health Care criteria: To review the impact of CHC since the introduction of new national guidance in Oct 2007	Dept of Social Care
Suicide Prevention: Middlesbrough has the highest rate in the region. A Review could focus on developing systems, information sharing and co-ordinated work	Dept of Social Care/ Public Health Dept
Stroke Services	South Tees Hospitals NHS Trust
Revised Mental Health Act	Tees, Esk & Wear Valleys NHS Trust
New National Care Programme Approach policy	Tees, Esk & Wear Valleys NHS Trust
Middlesbrough Primary Care Trust Annual Operational Plan	Middlesbrough PCT
Middlesbrough Primary Care Trust Patient Experience Strategy	Middlesbrough PCT
Application to become a Foundation Trust	North East Ambulance Service
North East Ambulance Service Vision	North East Ambulance Service

and Strategy	
Developments within Ambulance Contact Centres – Specifically around Triage, pathway referrals and about becoming a single point of contact for urgent and unscheduled care.	North East Ambulance Service
North East Ambulance Service Emergency Planning arrangements	North East Ambulance Service
How the Mental Health Trust's Foundation Trust status and Service redesigns will be implemented in Middlesbrough and affect Middlesbrough Mental health service provision	Department of Social Care
How is the proactive mental health and emotional wellbeing agenda being delivered in Middlesbrough?	Department of Social Care
How will the new Dementia Strategy be delivered in Middlesbrough	Department of Social Care
How are the key health priorities highlighted in "Valuing People Now" (published in Dec 2007) to be delivered in Middlesbrough? Especially in relation to Primary and Acute Care services?	Department of Social Care
Cancer Screening Services, issues of take up rate amongst eligible populations	Support Officer Research

COMMENTARY

10. As the Health Scrutiny Panel is aware, it is often the case that issues can emerge throughout the year that require Health Scrutiny's input, particularly around statutory consultations. There is actually one consultation that is presently live, which is concerned with GP Practice and GP led Health Centre Development Proposals. Information on that set of proposals will be presented to the next meeting of the Health Scrutiny Panel, so it can be considered and a response submitted by the PCT's deadline. It is also anticipated that there will be a consultation in mid to late summer around the proposed Joint Strategic Needs Assessments.
11. As the Panel can see, a significant number of topics have been suggested for Health Scrutiny's attention during 2008/9. During 2007/8, the Health Scrutiny Panel has conducted three detailed reviews into Cardiovascular Disease, Audiology Services and Patient Transport, that have been influential in how local health services are planned and delivered.

12. It would seem that two or three detailed reviews within a municipal year is an appropriate and manageable number for the Panel to complete, with scope to consider additional updates or briefings on a single meeting basis.
13. An analysis of the topics considered by Health Scrutiny in the last two or three years indicates that whilst the Health Scrutiny Panel has produced a number of high quality, influential reports, they have largely focussed upon public health matters or service based topics of a physical health nature. To expand, the Health Scrutiny Panel has not considered mental health services in the recent future and on that point, the Panel may wish to include a Mental Health topic within its work programme for 2008/9.
14. Following the Panel making a decision on its work programme for 2008/9, detailed scoping papers will be prepared at the commencement of each piece of work suggesting possible witnesses, potential approaches to the review and terms of reference.

BACKGROUND PAPERS

15. No background papers were used in the production of this report.

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