

## MIDDLESBROUGH COUNCIL

### HEALTH SCRUTINY PANEL

#### Setting the Scrutiny Panel's Work Programme 2019/2020

9 JULY 2019

#### PURPOSE OF THE REPORT

1. To invite the Health Scrutiny Panel to consider its work programme for the 2019/20 municipal year.

#### BACKGROUND

2. At the start of every municipal year, scrutiny panels discuss the topics that they would like to review during the coming year.
3. Work programmes are useful as they provide some structure to a scrutiny panel's activity and allow for the effective planning and preparation of work.
4. As part of the process for establishing the work programme, support officers gather information/views from a number of sources. Below is a list of topics which are anticipated to be of particular interest to the scrutiny panel. Members are advised that the list of possible topics is not exhaustive and that additional topics can be added and considered at the scrutiny panel meeting.

#### Topics agreed in 2018/19, which have not been investigated

- Suicide prevention

#### Topical issues

Topic	Details
Opioid related harm: an emerging issue	There's an awareness across various services locally that increased opioid use is an issue of concern and is extremely complex to address. Thousands of people are taking prescribed / non prescribed painkillers and weening people off these type of medications is resource intensive. There's also issues with people giving prescription medications to family and friends. A grey list of drugs has been issued which GPs are no longer able to

	<p>prescribe in an effort to curb spending.</p> <p>The panel has previously been advised that it is an opportune time for a piece of work to be undertaken on the topic of opioid related harm. The establishment of Primary Care Networks also creates an opportunity to examine GP pathways of review.</p> <p>A whole range of systems and players needed to be involved in examining this issue.</p>
Effectiveness of local immunisation strategies	<p>The Centre for Public Scrutiny have produced a document '10 questions to ask if you are scrutinising local immunisation services' due to increasing concerns nationally about the take up of immunisations and reports of measles outbreaks.</p>
Access to sexual health services	<p>A study of 220 of the country's 248 genitourinary medicine (GUM) clinics has found it has become harder to access sexual health services in the UK.</p> <p>UK standards advise that 98 per cent of people should get seen within 48 hours of contacting a clinic. But in 2015, researchers pretending they had symptoms were able to get appointments within this window less than 91 per cent of the time. In 2014 it was possible 95 per cent of the time.</p> <p>Researchers saying they had no symptoms got appointments within 48 hours in less than 75 per cent of cases. Many of these were not fixed – simply invitations to wait their turn at a walk-in service.</p>
Improving oral health – reducing instances of decayed, missing and filled teeth	<p>It is well recognised that oral health is an important part of general health and wellbeing. Whilst there have been welcome improvements in the oral health of children in England, significant inequalities remain.</p> <p>The Health and Social Care Act (2012) conferred the responsibility for health improvement, including oral health improvement to local authorities.</p> <p>The study '<i>National Dental Epidemiology Programme for England, oral health survey of five-year-old children 2014-15</i>' is the third national survey that has been undertaken. .</p> <p>Despite showing an overall improvement in the number of children free of tooth decay, it has been highlighted that 38.8% of five year olds in Middlesbrough have tooth decay (report by Public Health England May 2016). Of those 5 year old children with dental decay, an average of 4 teeth per child are decayed.</p> <p>The JSNA highlights that a school in Gresham ward has over 60 % of its 5-year-old children having had some decay compared to a school in Nunthorpe with 12%.</p>
Emergency hospital	<p>QualityWatch has found that the number of babies and young</p>

<p>admissions for children and young people</p>	<p>children admitted to hospital in an emergency has grown by almost a third over the past decade, and many children are being admitted to hospital for conditions like asthma and tonsillitis – admissions that could potentially have been avoided with better care and support out of hospital.</p> <p>It finds that emergency hospital admissions for the under 25s have grown by 14% over the time period – less than the population as a whole - but that the very youngest children experienced a disproportionate rise in emergency admissions, with babies experiencing a 30% rise over the decade.</p> <p>The authors say these findings raise questions about where children and young people can access high quality treatment outside of the hospital emergency care setting.</p> <p>The South Tees Hospitals NHS Foundation Trust Quality Report for 2017/18 highlighted that emergency re-admission rates within 28 days of discharge (age 0 – 15) have increased slightly year on year between 2013/14 and 2015/16, before stabilising in 2016/17 and remaining similar at 11% in 2017/18. The paediatric service has an open access day unit facility where children that have a recent acute admission or a long term chronic condition can return if they deteriorate.</p>
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**Suggestions**

Suggestion	Details
<b>Disabled access to maternal services including the maternity ward at James Cook University Hospital</b>	Suggestion from Councillor
<b>Breast feeding and the reasons as to why drop off rates are so high after 6 weeks</b>	Suggestion from Councillor

5. It should be noted that the suggested topics outlined above are exactly that, suggestions. The content of the scrutiny panel’s work programme is entirely a decision for the panel to make. When considering the work programme, the panel is advised to select topics that are of interest to it, as well as topics that the panel feels by considering, it could add value to the Local Authority’s work.
6. In addition to undertaking the agreed work programme, scrutiny panels have also previously responded on an ad-hoc basis to emerging issues - such as considering relevant new legislation, guidance or Government consultation documents. This

approach occasionally results in further topics being identified for investigation or review throughout the year.

7. On occasion ad-hoc scrutiny panels may also be established throughout the year to undertake additional investigations, for example to examine areas of work which overlap more than one scrutiny panel.
8. The scrutiny panel is also advised that, under the terms of the Local Government Act 2000, local authorities have a responsibility of community leadership and a power to secure the effective promotion of community well-being. Therefore, in addition to the scrutiny panel's generally recognised powers (of holding the Executive to account, reviewing service provision, developing policy, considering budget plans and performance and financial monitoring), panels also 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. For example, nationally, local authorities have undertaken scrutiny work on issues such as post office closures, rural bus services, policing matters and flood defence schemes.

## **PURPOSE OF THE MEETING**

9. The scrutiny panel is asked to consider and agree its work programme for the 2019/20 municipal year.
10. When considering its work programme, the scrutiny panel is asked to ensure that topics agreed for inclusion:
  - Affect a group of people living within the Middlesbrough area.
  - Relate to a service, event or issue in which the Council has a significant stake or over which the Council has an influence.
  - Are not issues which the Overview and Scrutiny Board or the scrutiny panels have considered during the last 12 months. Do not relate to an individual service complaint; and
  - Do not relate to matters dealt with by another Council committee, unless the issue deals with procedure.
11. It is suggested that the scrutiny panel has a mixture of working styles in its programme. This can include detailed and in-depth reviews, shorter topics, or one-off investigations.
12. Once the scrutiny panel has identified the areas of priority, support staff will draw those topics into a programme for approval by the Overview and Scrutiny Board.

## **RECOMMENDATION**

13. That the scrutiny panel identifies two topics it would like to include in its work programme for 2019/20, for consideration/approval by the Overview and Scrutiny Board.

## **BACKGROUND PAPERS**

14. Throughout the report, reference is made to documents published by the Kings Fund, the Centre for Public Scrutiny (CfPS), the Nuffield Trust, the Department of Health, NHS England, Public Health England and QualityWatch.

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