

HEALTH SCRUTINY ACTION PLANS

The table below refers to the Health Scrutiny Action Plans that should have been implemented by May 2006.

Report Title	Total Number of Recommendations	Recommendations Implemented	Recommendations partially implemented	Recommendations not implemented
Review of District General Hospital Services July 2003	11	8 (Plus 1 with no target date)	1 Ref: 12/10 (Target Date – 30/03/04) The Strategic Health Authority has launched a Tees-wide review of primary, secondary, mental health and community services. A strategy for delivering further acute services in the community will be developed as an outcome of the Tees Review. Response - The timetable for completing the Tees Review has slipped and will not now be complete until January 2006. The consultation period is now over with, however, the local NHS and Scrutiny are at present developing a resolution.	1 Ref: 12/1 (Target Date – 30/09/2003) Enhancing the level of NHS funding received by Middlesbrough PCT. Response - Action was not implemented due to discussions with Middlesbrough PCT and the Strategic Health Authority.
Review of Patient & Public Involvement September 2003	14	10	2 Ref: 17/06 (Target Date – 31/03/04) PPI strategies and plans refer to the Middlesbrough Youth Parliament as an example of a mechanism for engaging with young people. Response – The Youth Parliament will be referred to when plans are next updated. Awaiting confirmation of upcoming changes to NHS Trust structures. Ref: 17/11 (Target Date – 31/03/04) Documents about PPI produced by the PCT and Trusts be amended to mention 'Strengthening Accountability', 'Keeping the NHS Local', Patients Forums, Health Scrutiny and the Independent Reconfiguration Panel and the emerging strategy for 'joined-up' consultation through the Local Strategic Partnership. Response – The information will be included where relevant and appropriate. Awaiting confirmation of upcoming changes to NHS structures.	1 Ref: 17/02 (Target Date – 31/03/2004) The PCT and Trusts establish a more challenging but realistic timescale for completing a baseline assessment of PPI and endorsing PPI strategy. Response – The PCT and Trusts consider that to establish a more challenging deadline would be unrealistic. (Plus 1, no target date) Ref:17/04 (Target Date – Unknown) PPI targets in Local Delivery Plan for years 2 and 3 be made more robust and reflective of national guidance. Response – The targets in the Local Delivery Plan that have been approved by the Strategic Health Authority are in accordance with national targets and will not be amended.

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<p>Appropriate Hospital Care for Older People</p> <p>March 2004</p>	10	5	<p>4</p> <p>Ref: 18/02 (Target Date – 30/06/04) The Executive Member for Social Services and Health Care works with the National Care Standards Commission and the independent sector providers to review the arrangements for recruiting and training homecare workers. And the scope for providing a homecare service that is shaped around the individual needs of patients and carers. Response - Good progress in selection process reported - on target for April 2005. The preferred provider selection process which has taken over 6 months is about to come to an end and we expect a decision June /July 2005. This will finalise arrangements with independent domiciliary care providers and is designed to give them reliable volume of service provision and therefore improved service. Reconfiguration of Local Authority Services is still in progress, both in house and in discussion with the PCT re-integrated services.</p> <p>Ref: 18/03 (Target Date – 30/09/04) The Executive Member for Housing to ensure that the terms of any housing stock transfer oblige the new landlord to become an active member of the integrated arrangements for delivering services for older people and disabled people. The landlords should maximise the opportunities to provide the types of accommodation that encourage and support older people to live independently in the community. Response – The Executive Member for Housing will take this recommendation forward by incorporating in to a service level agreement with the shadow Board of Erimus Housing Association a requirement for active participation in the integrated delivery arrangements for older people’s services. Other registered social landlords will be encouraged to participate under the Council’s retained housing functions.</p> <p>Ref:18/05 (Target Date – 31/03/05) The Executive Member for Social Services and Health Care and the Middlesbrough PCT review the current arrangements for providing respite care for carers of people with mental illness and dementia, with a view to identifying ways to provide more appropriate respite care for those patients that are more active. Response – This recommendation will be taken forward as part of the on-going review of Elderly Mentally Ill services undertaken by the Older People’s NSF “Standard 7 Sub-Group” working with the North East Dementia Collaborative. This will include a review of the range of respite services.</p>	<p>1</p> <p>Ref: 18/09 (Target Date – 30/04/2006) Develop the information that patients receive. Response - Middlesbrough PCT will take this recommendation forward by using a range of methods to develop the information and support that patients receive in primary care. This will include the Expert Patient initiative, leaflets and signposting via the PALS service. The PCT is also developing a chronic disease management programme using NRF resources and this will have a strong element of patient and carers involvement.</p>

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<p>Appropriate Hospital Care for Older People</p> <p>March 2004</p> <p>CONT....</p>			<p>Ref: 18/05 CONT.... The PCT and Middlesbrough Social Services are already exploring the provision of appropriate services for younger people with dementia.</p> <p>Ref:18/08 (Target Date –30/09/04) As a way of linking the implementation of the NSFs for Older People and Mental Health, the Middlesbrough PCT considers employing Community Psychiatric Nurses to: -- Undertake assessments of the elderly mentally ill at James Cook University Hospital. -- Support GPs with early referral of patients with suspected mental illness/dementia. Response - Agreement in place. Implementation agreed for November 2004 within Local Development Plan.</p>	
<p>Dental Health</p> <p>May 2004</p>	6	4 (Plus 1 with no target date)		(1 with target date subsequent to May 2006)
<p>Emergency Admissions into James Cook University Hospital</p> <p>December 2005</p>	7	0	0	<p>(7 with no target date)</p> <p>Ref: 05/09/01 The improvement of both community facilities/ premises and the development of community services. Responsibility of: Middlesbrough PCT.</p> <p>Ref: 05/09/02 The PCT will work with the James Cook University Hospital to review discharge processes. Responsibility of: South Tees Hospital Trust.</p> <p>Ref: 05/09/03 The PCT will work with the James Cook University Hospital to review current information provided to patients. Responsibility of: South Tees Hospital Trust.</p>

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<p>Emergency Admissions into James Cook University Hospital</p> <p>December 2005</p> <p>CONT....</p>				<p>Ref: 05/09/04 The PCT will work with the James Cook University Hospital to ensure that a process is established to ensure rapid reassessment of patients. Responsibility of: Middlesbrough PCT</p> <p>Ref: 05/09/05 The PCT will work with the James Cook University Hospital to ensure that a process is established to investigate any inappropriate discharges. Responsibility of: South Tees Hospital Trust.</p> <p>Ref: 05/09/06 Middlesbrough PCT has been monitoring the effectiveness of the Out of Hours service provided by Primecare. Responsibility of: Middlesbrough PCT.</p> <p>Ref: 05/09/07 PCT to continue discussions with the James Cook University Hospital&TNEY Trust regarding the potential for a Deliberate Self Harm Unit. Responsibility of: Tees & North East Yorkshire Trust.</p> <p style="text-align: center;">GENERAL RESPONSE TO ABOVE RECOMMENDATIONS.</p> <p>The PCT is the lead agency for response on items 3.1, 3.4 and 3.6 and should respond accordingly, timescales should be in accordance with the PCT business plan. Budget costs cannot be identified at this stage, but resources would need to be found from Access and Community Services budgets as required.</p> <p>South Tees Hospitals Trust has shared their response with the PCT. As many of the issues in the Action Plan relate to discharge processes which are of equal interest to the PCT, it is recommended that these are taken forward jointly.</p> <p>A number of working groups have met in the past looking at issues around discharge, including the reimbursement agenda, complaints, establishing an integrated discharge team. It is recommended that a small multi-agency group is re-established to take forward these issues, to report back to the South Tees Emergency Care Group.</p>

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<p>Emergency Admissions into James Cook University Hospital</p> <p>December 2005</p> <p>CONT.....</p>				<p>Active engagement of Practice Based Commissioning Localities should be sought in responding to these issues and other related areas of concern.</p>