

HEALTH SCRUTINY COMMITTEE
17 MARCH 2016
DEVELOPING 2016/17 WORK PROGRAMME
REPORT OF HEAD OF DEMOCRATIC SERVICES

1. Purpose

1.1 To give initial consideration to the Committee's work programme for 2016/17 and identify potential issues for scrutiny.

2. Action required

2.1 The Committee is asked to identify potential issues for scrutiny during 2016/17, for further exploration as to potential focus, key lines of enquiry, timescales and resource requirements.

3. Background information

3.1 The Health Scrutiny Committee is responsible for carrying out the overview and scrutiny role and responsibilities for health and social care matters and for exercising the Council's statutory role in scrutinising health services for the City.

3.2 The Committee is responsible for determining its own work programme to fulfil its terms of reference. By way of a reminder the Committee's Terms of Reference are attached at Appendix 1.

3.3 In setting the work programme the Committee should aim for an outcome-focused work programme that has clear priorities and potential to contribute to improvements for local people. The work programme must be matched against the resources available to deliver the programme.

3.4 Where there are a number of potential items that could be scrutinised in a given year, consideration of what represents the highest priority or area of risk will assist with work programme planning. Changes and/or additions to the work programme will need to take account of the resources available to the Committee.

3.5 The work programme needs to be flexible so that issues which arise as the year progresses can be considered appropriately. This is likely to include consultations from health service commissioners about substantial variations and developments in health services that the Committee has statutory responsibilities in relation to.

3.6 Nottingham City and Nottinghamshire County Councils have established a Joint Health Scrutiny Committee which is responsible for scrutinising health matters which impact on both the areas covered by Nottingham City Council and Nottinghamshire County Council.

3.7 The Committee is asked to identify potential issues for scrutiny by the Health Scrutiny Committee during 2016/17:

- at monthly Committee meetings; and
- any study group reviews.

Following the meeting these issues will be explored further to identify a focus, key lines of enquiry, possible timescales and resource requirements. Based on this a proposed work programme for 2016/17 will be developed and brought to the Committee for approval in May.

4. List of attached information

4.1 Health Scrutiny Committee Terms of Reference

4.2 Health Scrutiny Committee 2016/17 Work Programme Ideas

5. Background papers, other than published works or those disclosing exempt or confidential information

5.1 None

6. Published documents referred to in compiling this report

6.1 Reports to and minutes of the meeting of the Health Scrutiny Committee during 2015/16

7. Wards affected

7.1 All

8. Contact information

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Health Scrutiny Committee Terms of Reference

- a) To set and manage its work programme to fulfil the overview and scrutiny roles and responsibilities for health and social care matters, including, the ability to:
 - (i) hold local decision-makers, including the Council's Executive, to account for their decisions, action and performance;
 - (ii) review policy and contribute to the development of new policies and strategies of the Council and other local decision-makers where they impact on Nottingham residents;
 - (iii) explore any matters affecting Nottingham and/ or its residents;
 - (iv) make reports and recommendations to relevant local agencies in relation to the delivery of their functions, including the Council and its Executive;
- b) To exercise the Council's statutory role in scrutinising health services for Nottingham City in accordance with the National Health Service Act 2006 as amended and associated regulations and guidance.
- c) To engage with and respond to formal and informal consultations from local health service commissioners and providers;
- d) To scrutinise the commissioning and delivery of local health and social care services to ensure reduced health inequalities, access to services and the best outcomes for citizens;
- e) To hold the Health and Wellbeing Board to account for its work to improve the health and wellbeing of the population of Nottingham City and to reduce health inequalities;
- f) To work with, and consider referrals from the Overview and Scrutiny Committee, to support effective delivery of a co-ordinated overview and scrutiny work programme;
- g) To respond to referrals from, and make referrals to, Healthwatch Nottingham as appropriate;
- h) In consultation with the Chair of Overview and Scrutiny, to commission time-limited panels (no more than 1 panel at any one time) to carry out a review of a matter within its remit. Commissioning includes setting the remit, initial timescale and size of membership to meet the needs of the review to be carried out. Such review panels will be chaired by the Chair of the Health Scrutiny Committee;
- i) To monitor the effectiveness of its work programme and the impact of outcomes from its scrutiny activity;
- j) To appoint a lead health scrutiny councillor for the purposes of liaising with stakeholders on behalf of the health scrutiny function, including the Health and Wellbeing Board, Healthwatch Nottingham and the Portfolio Holder with responsibility for health and social care issues;
- k) To co-opt people from outside the Council to sit on the Committee or any review panels it commissions to support effective delivery of the work programme.

Membership

The Health Scrutiny Committee comprises 9 members.

Labour Group: 8

Conservative Group: 1

Quorum

The quorum for a meeting of the Health Scrutiny Committee is three members.

Chairing

The Chair will be a member of the pool of five overview and scrutiny chairs and is appointed by Full Council. The Vice-Chair will be appointed at the first meeting of the Health Scrutiny Committee from the membership of the Committee.

Health Scrutiny Committee 2016/17 Work Programme Ideas

Listed below are some possible issues for scrutiny as a starting point for discussion. Councillors may wish to propose other issues at, or following the meeting.

It is likely that additional issues will emerge during the year, including from the following sources:

- Consultation by commissioners on substantial variations in health services
- Suggestions from the Portfolio Holder for Adults and Health
- Issues highlighted through area cluster health review activity
- Issues highlighted at the Youth Council 'Healthy Creative You' meeting on 1 June
- Suggestions/ referrals from Healthwatch Nottingham
- Emerging national, regional and local issues

The work programme needs to be flexible to respond to such emerging issues.

Regular issues for scrutiny

Every year the following items are always included in the work programme and it is proposed to schedule them accordingly for 2016/17:

- Nottingham CityCare Partnership Quality Account [January and May]
- Scrutiny of the Portfolio Holder for Adults and Health (from 2016/17 to focus on performance against relevant Council Plan priorities) [June tbc]
- Healthwatch Nottingham Annual Report [July tbc]

Issues provisionally scheduled during 2015/16

During the course of its work in 2015/16 the Committee provisionally scheduled the following items. The Committee is asked to consider whether they are still relevant:

- Flu immunisation update [May]
- Strategic response to health inequalities – pre/ ante natal care/ low birth weight [May]
- Visit to Urgent Care Centre [late May/ June]
- Development of Nottingham City CCG Strategic Priorities [May/ June]
- Sex and Relationships Education in Schools [June]
- Family Nurse Partnership/ health visitor update [July]
- Improving the quality of GP services [November]

Possible issues for scrutiny

The following potential issues have been identified by the Committee during 2015/16, councillor suggestions, current health and social issues. Councillors may wish to propose other issues at the meeting. The Committee is asked to consider whether they wish to include any of these on the work programme for 2016/17 and if so discuss a potential focus/ key lines of enquiry.

- a) End of Life/ Palliative Care Services for children and young people (identified during review of adult end of life care)
- b) Follow up and support to people diagnosed with terminal and/or life altering conditions and their carers (came out of end of life care review)

- c) Home care services
 - Service user experience of home care services (one year into new framework) (postponed from 2015/16 work programme)
 - How home care agencies used by the Council are selected and scrutinised (councillor suggestion)

- d) Mental health
 - “Wellness in Mind” Nottingham City Mental Health and Wellbeing Strategy 2014-17 – what progress has been made against the Strategy? ‘so what’ for outcomes for people
 - Health and Wellbeing Board agreed to champion mental health and wellbeing to give it parity with physical health – what evidence is there that this has happened and what difference has it made (context of Five Year Forward View of Mental Health)
 - Health and Wellbeing Board agreed that mental health should be a consideration in all reports to the Board – what evidence is there that this has happened and what difference has it made
 - Have the Health and Wellbeing Strategy objectives in relation to mental health been achieved?
 - Mental health services for homeless people
 - Mental health services for students/ young adults
 - Integration of physical and mental health

- e) Improving health literacy to reduce health inequalities (link to Marmot) – potential links to increasing focus on self-management (CityCare 2016/17 priority).

- f) Public health commissioning
 - Public health commissioning for social value
 - Robustness of EIAs in public health commissioning

- g) GP services
 - GP provision in the City – service availability/ sustainability of services
 - Protocol on GP mergers/ closures (possible joint work with Nottinghamshire County Council)

- h) Isolation and loneliness
 - Isolation and loneliness as a public health issue (LGA Guide)
 - Proposed priority for future Health and Wellbeing Strategy so could look at implementation?

- i) Health outcomes and inequalities for a particular population group (to be determined) and how to close the gap

- j) Access to dental care
 - In 2009 the Committee carried out a review of access to NHS dental care - has access and uptake improved since then?
 - Child dental health

k) Future capacity of the care home sector and market development activity