



REPORT OF: Scrutiny Manager

REPORT TO: Health and Adults Overview and Scrutiny Committee.

ON: 7th April 2014.

RE: Health and Adults Overview and Scrutiny Committee's work programme.

1. Purpose of the Report

For Members of the Health and Adults Committee to note the progress made with the Committees 2013/14 work programme throughout the year.

2. Background

In June the Committee received the priorities, challenges and pledges of the Executive Member for Health and Adult Social Care with a more detailed work programme being agreed by Committee on 15th July. The last update report was given to the Committee at its meeting on 22nd January.

3. Recommendations

- 3.1 That progress made of the Committees work programme be noted and;
- 3.2 That the suggested timelines for outstanding reviews to be agreed.

4. Outline work Programme

Benchmarking:

- 1. Requested and received the health data for Blackburn with Darwen, specifically on obesity, smoking, alcohol, housing and any other areas that may be significantly underperforming;
- 2. Compared health data against some of our nearest neighbour comparators, and then the Committee studied the areas of underperformance and challenges and looked at how this is being addressed; and

3. The Committee looked at best practice and best outcomes in other areas and ascertained if similar principles could be applied to Blackburn with Darwen.

Actions 2 & 3 were completed at the 22nd January meeting. Although it has not been possible to secure something on the scale of a peer review visit. The Committee agreed that the overview of nearest neighbour comparators with hyperlinks to each of the Councils Health and Wellbeing Boards, Joint Strategic Needs Assessment and other relevant data is made available for Members of next years Committee to review, dependent on the work programme they choose.

Public Health inclusion:

1. The Committee were given a breakdown of the 55 Public Health contracts that have become a Council responsibility; and

The breakdown supplied by Public Health of the 55 Public Health contracts were circulated and the Executive Member and Director of Public Health provided an overview of how those services were being promoted and embedded into the main function of the Council which was then the subject of a presentation at the September meeting. This topic was revisited at the January meeting and has been successfully concluded.

2. The Executive Member demonstrated how the services are being promoted and embedded into the main function of the Council; outlining the key individuals taking responsibility for ensuring their delivery.

As agreed, this item formed part of the 22nd January meeting to discuss the delivery of Public Health service initiatives and has been successfully concluded.

Review methodology:

1. The Committee analysed the National Institute for Clinical Excellence (NICE) data to ascertain if reviews have been done in the areas of interest the Committee may choose; and

2. If a review is not available for the Committee to follow, then the principles that have been outlined in other reviews should be followed.

These two “review methodology” items remained in place throughout the year.

PRE decision Scrutiny: Potential areas for consideration:

Adult Social Care

1. Future housing and care needs of frail older people, including care homes, sheltered housing and extra care.

2. Tackling social isolation
3. Falls prevention

It should be noted that the Committee chose none of the above items, having previously scrutinised social isolation and falls prevention.

Health

1) Keogh Review Report: This was due out late July with suggestions and recommendations for the hospital following their review. There was potential for health scrutiny to review this report and make some possible further suggestions for actions that the hospital could implement to address any of the identified problems.

Completed. An informal discussion took place on 3rd September with East Lancashire Hospital Trust and the CCG, along with partnership representation from AgeUK and Blackburn with Darwen Healthwatch. A further formal scrutiny review with colleagues from Lancashire County Council had been considered once the second (follow up) risk summit had taken place. Provisionally this was scheduled for January 2014, however the date is still to be announced. A meeting was held on 31st March 2014 for a collaborative enquiry between the Health and Wellbeing Board, Scrutiny and external partners.

2) Health and Wellbeing Strategy implementation.

As agreed this item formed part of the agenda for 15th January 2014 meeting where the Committee received an update from the Health and Wellbeing Board an update on the implementation and delivery of the Health and Wellbeing Strategy. This item has been successfully completed.

3) Vaccination and Immunisation uptake rates in Blackburn with Darwen:
This required scrutiny of Public Health England's plans for Blackburn with Darwen (as this became their responsibility from 1/4/13) and the new operating model for this system from April 1st.

This item was the main item for the 13th November meeting and formed part of the agenda for the January meeting where it was agreed that the Public Health department and Scrutiny team consolidate the recommendations for the Committee.

26th February meeting

This meeting concluded the work programme for the year in advance of the Annual review of Scrutiny which will take place on 7th April 2014.

As a discussion item at the 26th February meeting the Committee were asked to consider the following questions. What has worked during the year? What

could be improved for next year? And to use a successful model of “you said, we did, so what?” by means of challenge. The responses and outcomes of these discussions formed an outline for the Annual review of Scrutiny on the 7th April 2014.

In conclusion:

As the resources for local authorities continue to diminish it becomes increasingly necessary to focus on the “so what?” element of everything we do. This year there were six full committee meetings and a series of working group meetings outside of Committee. Below are the suggested outcomes from the work programmes:

Integration of Public Health

Over the year the Committee have become aware of the purpose of the Public Health Grant, the outcomes it is required to deliver, the priorities set in Blackburn with Darwen, where the grant funding is invested in Blackburn with Darwen – and why, the Committee looked in some depth at the £1m Social Determinants of Health allocated and what had been achieved to date and kept the integration of Public Health as a Council function firmly on the corporate agenda all year.

Health and Wellbeing Strategy implementation.

The commitment made to keep the Committee informed of the work of the Health and Wellbeing Board has been honoured, with a mature approach to partnership ongoing joint working continuing to be delivered. Further work to ascertain each individual body's responsibilities and accountabilities remains ongoing.

Vaccination and Immunisation uptake rates in Blackburn with Darwen:

One of the first local authorities to deliver this type of review using a Collaborative Inquiry methodology; the Committee alongside the Executive and Lead Members have a good understanding of what was in place pre April 2013, what should be in place now, and have made recommendations on the back of this evidence to Central Government.

Keogh Review Report:

Pre Keogh team review

Once it became known that East Lancashire Hospital Trust was to be reviewed by the Keogh team {as a result of high mortality ratios} plans were put into place to ensure Members at Blackburn with Darwen Borough Council were fully briefed on the key issues that could arise from such a review. This mitigated similar criticism to that made of the Mid-Staffs inquiry of the Scrutiny function at Blackburn with Darwen Borough Council.

All-Member briefing

An awareness session for all elected Members took place on 10th June and was supported by Mark Brearley Chief Executive and Mrs Renike Schram Medical Director East Lancashire Hospital Trust (ELHT). Both representatives addressed several questions asked by the Members in a lively and engaging debate. A further session for the Health and Adults Overview and Scrutiny Committee was facilitated by the Director of Public Health, along with a further briefing for the Chair and Vice Chair of the Committee. As part of the awareness session, Members were given an explanation of the differences in mortality ratios and the methods of recording (including the time lapse post discharge of 30 days). Amongst other issues, Members were advised of the key differences mortality rates and avoidable deaths. At the end of the meeting there was an agreement to update Members about the findings once the Keogh Review concluded.

Preparing for the Keogh Review outcomes

In the run up to the release of the Keogh Review, Members of Blackburn with Darwen Health and Wellbeing Board, Blackburn with Darwen Health Watch and the Council's Overview and Scrutiny Committee had all suggested some level of involvement once the outcomes of the Review were known. Subsequently, an informal discussion with ELHT and Blackburn with Darwen Clinical Commissioning Group (CCG) was arranged for 3rd September between Blackburn with Darwen Health and Wellbeing Board representatives (Cllr Kate Hollern as Chair and Cllr Mohammed Khan, the Executive Member for Health and Adult Social Care) the Chair of Blackburn with Darwen Healthwatch, the Chief Executive of Blackburn and Darwen AgeUK and 4 members of the Health and Social Care Overview and Scrutiny Committee (the Chair, Vice Chair and members from the opposition groups). As well as discussing local action taken or planned following the Keogh review, it was hoped that the discussion would provide an opportunity for partners to discuss how they could work together to support positive outcomes once the review summit takes place in September.

Health data for Blackburn with Darwen, and nearest neighbour comparators, along with best practice and best outcomes in other areas.

A significant piece of research was carried out to support the Committee's work programme. Members were given web links to a number of Blackburn with Darwen's Nearest Neighbour Comparator's;

- Health and Wellbeing Board general membership and information
- Health and Wellbeing Strategy Documents
- Joint Strategic Needs Analysis (JSNA) Documents

This has identified areas of best practice and best outcomes that can be utilised by Blackburn with Darwen in future reviews.

Ben Aspinall
Scrutiny Manager