

## Select Committee on Good Heath, 28th September 2005

# Report of Head of Personnel and Support Services, Lead Officer for **Health Scrutiny**

## Work Programme for 2005-2006

## **Purpose of Report**

1 To provide Members with a draft work programme for 2005-2006 for discussion and amendment.

## Background

2 The work programme is set out in the attached report. Chairmen and Chief Executive's of the local NHS Trusts have contributed suggestions for the work programme.

## **Finance**

3 There are no financial implications arising from this report at this stage.

## Law

4 The relevant statutory provisions regarding the Council's Constitution are contained in Part 11 of the Local Government Act 2000, together with Regulations, Orders and Statutory Guidance issued by the Secretary of State.

#### **Equality Impact**

5 This report complies with the Council's equality and diversity policy.

## **Recommendation**

It is recommended that :-

- That Members discuss, and amend, the programme where necessary.
- That Members agree to submit the programme to health and social care partners for their comments.

Steve Woodall

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Head of Personnel and Support Services

Lead Officer for Health Scrutiny

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List of Background Papers:- No Background Papers

#### Attachment.

# Select Committee on Good Health Annual Work Programme 2005-2006

## 1. Maternity Review

- Publish and circulate Maternity Review Report
- Track and monitor recommendations
- Complete Evaluation.

#### 2. Wheelchair Services Review

- Circulate questionnaire to users/carers
- Analyse responses
- Hold focus groups with users
- Hold meetings with providers: DGOH; Centro; Housing etc.

# 3. Review into progress of Health Inequalities Strategy

- To begin early 2006
- · With emphasis on obesity and lifestyles

#### 4. Review of GP out-of-hours services and NHSDirect

## 5. Review of NHS quality and perceptions of quality

- Examine National and local NHS policy in respect of quality and measure/ evaluate the congruence between standard NHS concepts of quality and safety and what patients, carers and staff think of as quality.
- NHS National and Local:
  - Local governance processes,
  - o bench marks such as "Essence of Care",
  - local good practice,
  - guidance from DOH, such as "Standards for Better Health"; "A First Class Service"; "Service with a memory".
  - Healthcare Commission Annual healthcheck.
- Patients and staff:
  - Select groups for focus groups; one-to-one interviews; questionnaire

#### 6. Review of West Midlands Ambulance Service:

Patient and Public Involvement processes.

## 7. Select Committee Meetings

- Continue to scrutinise Social Services: Children's Directorate; Adult Services.
- Continue to scrutinise NHS with a focus on (in order of importance):
  - Accessible and responsive care

- Patient-led NHS
- Safety
- o Environment of care for patients
- Public health
- Governance
- o Clinical and cost-effectiveness of services

In addition to deal with consultations on changes in services when matters arise. Matters at present in the pipeline:

- Merger of the Dudley PCTs and the development of practice-based commissioning and the future provision of community health services.
- Merger of Wolverhampon and Walsall Acute Hospital Trusts
- Merger and reconfiguration of Ambulance Services.
- Developments following the merger of Sandwell and City (Birmingham)
   Acute Hospital Trusts
- Development of Dudley Group of Hospitals towards Foundation status
- Commissioning a Patient-Led NHS and Healthcare outside hospital White Papers.

# 8. Evaluate feasibility of a joint review with Wolverhampton and Walsall on the role and effectiveness of cancer networks.

# 9. Seminar opportunities for Members

Provide members with a menu of suggested seminar themes and arrange sessions accordingly:

Seminar	Programme	Menu
Organisation	Subject	Choice (Tick)
National Health Service	1. Structure of the NHS	
	2. How the NHS is funded	
	3. Public Health Developments Choosing Health; Health Inequalities	
	4. The purpose of National Service Frameworks.(Heart Disease; Cancer; Mental Health;Older People;Diabetes; Children and Maternity Care; Long Term Conditions; Renal; Paediatric Intensive Care)	
	5. Quality of Care and the role of healthcare audit and inspection – looking at the work of the HealthCare Commission, NICE)	
	6. Patient and Public Involvement in the NHS: Duties of the NHS to consult; role of Patients Forums; Patient Advice and	

	Liaison Services; Independent Complaints Service. 7. The role of the Primary Care Trust 8. The role of Dudley Group of Hospitals 9. Role of Strategic Health Authority	
Social Services	<ol> <li>Adult Social Services</li> <li>Family and Children Services</li> <li>The Children Act 2004 and its implications.</li> <li>Care for Older People</li> <li>Care for people with disabilities</li> <li>Inspection and evaluation of Social Services: Commission for Social Care Inspection.</li> </ol>	
	7. The interaction of health and social services in Dudley	
The Scrutiny Process	1. What is scrutiny? critical friend; reflect voice and concerns of the public; taking the lead and owning the scrutiny process on behalf of the public;make an impact on the delivery of services.	
	2. Approaches to health scrutiny: responsive or reactive; prospective or proactive; organisation-based; service-based; user group based; population-based; cross-cutting/thematic.	
	3. Good practice – protocols – making friends and influencing people.	
	4. How is scrutiny done elsewhere: the work of other Local Authorities OSCs; the work of the House of Commons Health Committee.	

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	4. The purpose of National Service	
	Frameworks.(Heart Disease; Cancer;	
	Mental Health;Older People;Diabetes; Children and Maternity Care; Long	
	Term Conditions; Renal; Paediatric	
	Intensive Care)	
	5. Quality of Care and the role of	
	healthcare audit and inspection – looking	
	at the work of the HealthCare	
	Commission, NICE)	
	6. Patient and Public Involvement in the	
	NHS: Duties of the NHS to consult; role	
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