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**Health and Adult Social Care Scrutiny Committee – 28th September 2011**

**Report of the Lead Officer to the Committee**

**Responses arising from previous Committee**

**Purpose of Report**

1. To update Committee on queries raised at the last Committee meeting held on 4 July 2011, in connection with the delivery of health and social care.

**Background**

3. Information requests are received on a regular basis from Members relating to a wide-range of services within health and social care to improve health and wellbeing and tackle health inequalities in Dudley; including public health, community and hospital care and mental health services. Some queries cannot be answered immediately with some prompting further investigation, or consultation, prior to being reported back to Committee.
4. To keep Committee updated, progress reports and responses are included at appendix 1; the resulting proposal is set out at the end of each paragraph.

**Finance**

5. Where there are financial implications of the actions listed below that impact on Council responsibilities, these will be financed from existing Council resources.

**Law**

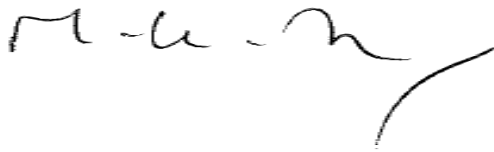
6. Section 111 of the Local Government Act 1972 authorises the Council to do anything which is calculated to facilitate or is conducive or incidental to the exercise of any of its functions.
7. The Local Government and Public Involvement in Health Act 2007 provides for Health Overview and Scrutiny Committees to review and scrutinise the actions of key health and social care providers.

### **Equality Impact**

8. The work of Dudley's health and social care community can be seen as contributing to the equality agenda in the pursuit of improving care for all. This implies a challenge to ensure that services meet the needs of all sectors of the community to make this an even greater reality in Dudley.

### **Recommendation**

9. That the proposals contained at Appendix 1 be approved.



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**Mohammed Farooq – Interim Assistant Director Corporate Resources**

**LEAD OFFICER TO THE HEALTH AND SOCIAL CARE SCRUTINY  
COMMITTEE**

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Background documents used in the preparation of this report:-

1. Minutes from 4th July 2011 Committee.

## Appendix 1

### RESPONSES TO QUERIES RAISED AT THE COMMITTEE MEETING HELD 4TH JULY 2011

#### 1. Dudley Group of Hospitals – Outpatient appointments re-arranged

##### Background/Request:

Members requested a monthly breakdown of appointments re-arranged at Dudley Group of Hospitals between April 2010 and June 2011.

The request also sought to identify the distribution of consecutive re-appointments experienced per person and identify common/underlying contributory factors.

##### Response:

Count of Reschedules	Year / Month															Grand Total
	2010									2011						
Notice Period	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	
Less Than 6 Weeks	2560	2370	2297	2358	2691	2649	2874	2483	2569	3305	2700	2732	2486	3759	3055	40888
More Than 6 weeks	3141	5315	2973	2628	3157	3203	3213	4682	2499	3510	3342	4115	2999	4378	3859	53014
<b>Grand Total</b>	<b>5701</b>	<b>7685</b>	<b>5270</b>	<b>4986</b>	<b>5848</b>	<b>5852</b>	<b>6087</b>	<b>7165</b>	<b>5068</b>	<b>6815</b>	<b>6042</b>	<b>6847</b>	<b>5485</b>	<b>8137</b>	<b>6914</b>	<b>93902</b>

Number of patients with more than 5 consecutive hospital reschedules without intervening events = 18

Number of patients with more than 10 consecutive hospital reschedules without intervening events = 0

Most consecutive hospital reschedules for a referral = 10 (one patient only)

The appointments were rescheduled with the following reason –‘RESCHEDULED BY HOSPITAL’

**Additional Comment:**

A programme of service improvement is currently underway in the Trust with outpatient processes and patient experience a major component of the programme. A pilot is currently underway to 'partially book' patients. This means they are added to a waiting list and only invited to contact the Trust 6 weeks before they should be seen. In this way, the number of rescheduled appointments should be significantly reduced because the appointments will be made much nearer to the appropriate time and will therefore, be able to take into account planned clinician leave. The patient will also have more choice on the time and date of their appointment and so will be less likely to reschedule or to DNA (did not attend).

**Proposal:** Members note this information and consider whether to look at this issue within the context of wider partnership arrangements; in order to attain a deeper understanding of priorities.

## **2. Dudley Group of Hospitals – Maternity Capping**

**Background/Request :** Arising from Maternity Capping Update members queried both the number of births to overseas visitors and ratio of planned home births in Dudley

**Response:**

The Trust recorded a total of 18 births to overseas visitors in 2010/11.

The total percentage of planned home births recorded in 2010/ 11 was 1.35% compared to 1.14% in 2009/10.

**Proposal:** That Members note this information

## **3. Directorate of Adult Community and Housing Services**

**Background/Request :** Arising from the Directorate's Equality and Diversity Action Plan members requested clarity on the average waiting time for major adaptations 2010/11

**Response:**

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A total of 533 major adaptations were completed in 2010/11. The average waiting time recorded is 11.4 weeks.

The timescales relate to receipt of the formal referral from the Occupational Therapist through to grant approval/works order being placed.

Members should be advised that further details on the provision of housing adaptations and improvements will be set out in a full Committee report - as requested in April - to go before the November meeting.

**Proposal:** Members note this information and comment as appropriate on any other areas they wish to be considered in the future report.