


<p align="center">Health and Wellbeing Board Tuesday 7th July, 2015</p>	
<p>Report of the London Borough of Tower Hamlets</p>	<p>Classification: [Unrestricted or Exempt]</p>
<p align="center">CARE QUALITY COMMISSION REPORT</p>	

Lead Officer	Somen Banerjee, Director of Public Health
Contact Officers	Somen Banerjee, Director of Public Health
Executive Key Decision?	No

Executive Summary

This paper provides the Board with a briefing on the outcomes of the CQC report on Barts Health, the response of the trust and implications for the Board

Recommendations:

The Health and Wellbeing Board is recommended to:

1. to note the report and discuss how it would seek to be updated on progress against the improvement plan and its role in supporting its delivery

1. REASONS FOR THE DECISIONS

1.1 This is a briefing for discussion

2. ALTERNATIVE OPTIONS

2.1 N/A

3. DETAILS OF REPORT

3.1 Attached

4. COMMENTS OF THE CHIEF FINANCE OFFICER

4.1. There are no direct financial implications for the Council as a result of the recommendations in this report.

5. LEGAL COMMENTS

5.1. The Health and Social Care Act 2012 (“the 2012 Act”) makes it a requirement for the Council to establish a Health and Wellbeing Board (“HWB”). S.195 of the 2012 Act requires the HWB to encourage persons who arrange for the provision of any health or social care services in their area to work in an integrated manner.

5.2. This duty is reflected in the Council’s constitutional arrangements for the HWB which states it is a function of the HWB to have oversight of the quality, safety, and performance mechanisms operated by its member organisations, and the use of relevant public sector resources across a wide spectrum of services and interventions, with greater focus on integration across outcomes spanning health care, social care and public health.

5.3. Additionally, under the Care Act 2014 (“the 2014 Act”) the Council has a number of general duties in ss.1-7 including a duty to co-operate with NHS bodies in the area and further to promote the integration of care support with health services.

5.4. The Council’s general duties meet with the goal of aiming for higher quality health, care and support to individuals in order to have a positive impact on their wellbeing.

5.5. In ensuring the Council meets with its general duty it is important that consideration is given to how co-operation and integration between services can be embedded into any response to the CQC report.

5.6. However, s.22 of the 2014 Act retains the boundary between the legal responsibilities of the NHS and the Council so this distinction must be maintained.

5.7. When considering any action plan regard must be given to the public sector equalities duty to eliminate unlawful conduct under the Equality Act 2010. The duty is set out at Section 149 of the 2010 Act. It requires the Council, when exercising its functions, to have 'due regard' to the need to eliminate discrimination (both direct and indirect discrimination), harassment and victimization and other conduct prohibited under the Act, and to advance equality of opportunity and foster good relations between those who share a 'protected characteristic' and those who do not share that protected characteristic.

6. ONE TOWER HAMLETS CONSIDERATIONS

6.1. The report relates to how people living and working in the borough get the best possible healthcare care services

7. SUSTAINABLE ACTION FOR A GREENER ENVIRONMENT

7.1 N/A (not within scope of the CQC report)

8. RISK MANAGEMENT IMPLICATIONS

8.1. The report does not make any proposals so there are no specific risk implications. Excellent care provided by Barts Health involves working with council services in an integrated way to provide the best outcomes

9. CRIME AND DISORDER REDUCTION IMPLICATIONS

9.1 N/A

10. EFFICIENCY STATEMENT

10.1 The report does not propose expenditure

Appendices and Background Documents

Appendices

- APPENDIX 1 - Briefing paper on CQC report attached

Background Documents

- NONE