

Health Scrutiny Work Programme 2016/17

1. Introduction

- 1.1 This report proposes a work programme for the Health Scrutiny Panel (HSP) for 2016/17.
- 1.2 The report sets out the process used to develop the work programme and suggests a number of ways in which HSP may wish to approach the workload.
- 1.3 Appendix 1 sets out the schedule for items across the HSP meetings for 2016/2017, along with the topics for 'Scrutiny Review' and site visits to be undertaken.

2. Recommendations

The Health Scrutiny Panel is asked to:

- 2.1 Consider and agree on the draft work programme items and schedule for HSP.
- 2.2 Agree options for managing the HSP work programme.

3. Background

- 3.1 The Health Scrutiny Panel is a fundamental part of the local democratic process, enabling elected councillors to hold local NHS bodies to account for the quality of the services they deliver. In Tower Hamlets, HSP is also responsible for scrutinising social care services for adults and older people.
- 3.2 According to the Centre for Public Scrutiny (CfPS) the main role of HSP is to act as a lever to improve health and wellbeing in its local area and ensure that:
 - The needs of local people are an integral part of the commissioning, development and delivery of health services;
 - All sections of the community have equal access to health and wellbeing services;
 - All sections of the community have an equal chance of a successful outcome from the services they use;
 - Proposals for substantive service changes are reasonable;
 - Delivery partners work together to provide more joined up services.
- 3.3 HSP draws its statutory duty and powers from the 'Health and Social Care Act 2001', which requires Local Authorities with social service responsibilities to have an Overview and Scrutiny Committee (O&S) function that can respond

to consultation by NHS bodies on significant changes and developments in health services, and provide for broader oversight of health and wellbeing issues.

3.4 The 'Local Government and Public Involvement in Health Act 2007' strengthens these powers further, and provides for O&S Committees to review and scrutinise the performance of public service providers, as well as empowering councillors to raise issues through a 'call for action'.

3.5 In Tower Hamlets the HSP has been established as a sub-committee of the main O&S Committee, with a Terms of Reference to:

- Review and scrutinise matters relating to the health and social care within the borough and make reports and recommendations in accordance with any regulations made;
- Respond to consultation exercises undertaken by any NHS body;
- Question appropriate officers of local NHS bodies in relation to the policies adopted and the provision of the services.

3.4. During the induction process for councillors appointed to HSP for 2016/17, members met to discuss the strategic focus for the panel in the year ahead. It was agreed that HSP will take a thematic approach to its work programme, with at least one agenda item per meeting focussing on issues related to '*access to health and social care*'.

3.5 In addition to, HSP will continue to receive items as part of its regular, rolling work programme in order to support:

- Health promotion and prevention through work with health partners and other third sector organisations;
- Developing better integration and partnership to improve joint service provision;
- Improving access to services as a key way of tackling health inequalities.

4. Access to Health and Social Care

4.1. Due to increasing demand for services and static/reducing levels of resource in both the NHS and local authorities, access to health and social care services has become a pressing concern in recent years. This is likely to be exacerbated in coming years by a range of social, economic and political factors.

4.2. Demographically speaking, Tower Hamlets has seen the largest population growth of any area in the country over the last decade - increasing by 27%. This trend is projected to continue over the next 10 years, with the borough expected to grow by a quarter to 2024 – again, the largest in England. The scale of this growth alone will place a major burden on local health and social care providers as a larger number of residents seek to access their services.

- 4.3. Moreover, the diversity of the Tower Hamlets population and its high level of deprivation mean that in addition to this higher volumetric demand there will also be more acute need. Many residents suffer from chronic conditions linked to poverty, and certain cultural issues amongst our communities restrict local understanding about how to access appropriate provision.
- 4.4. The growing aggregate demand for services and the severity of local need is unlikely to be fully matched by increased resources. Challenging efficiency targets for the NHS and persistent reductions to local authority budgets will impact on the capacity of the health and social care system to respond – locally Barts Health has the largest deficit of any hospital trust in England, and Tower Hamlets Council has to make £63 million of savings though to 2018/19.
- 4.5. Only through innovation across prevention, early intervention and demand management will services be able to meet local needs and provide effective care. By reviewing ‘access health and social care services’ in Tower Hamlets, HSP has the opportunity to take a pro-active role in supporting the local health & social care system meet these challenges.

5. **Inner North East London Joint Health Scrutiny Committee (INEL)**

- 5.1. The Council has assumed responsibility for Chairing INEL in 2016/17. INEL is a Joint Health Overview & Scrutiny Committee (JHOSC) made up of councillors from the London Boroughs’ of Hackney, Tower Hamlets, Newham, and the City of London Corporation.
- 5.2. INEL is a statutory body that the same formal scrutiny powers as an individual health overview and scrutiny committee (HOSC) including:
 - Access to information when requested;
 - Requiring members, officers or partners to attend and answer questions;
 - Making reports or recommendations to any NHS body or unitary authority with social care responsibility.
- 5.3. Significantly, the NHS has a duty to consult with INEL when it is proposing a major ‘Case for Change’ of services at the sub-regional/regional level. For example, INEL is currently reviewing the Sustainability and Transformation Plan (STP) for the North East London NHS region and the Transforming Services Together (TST) programme that covers the London Boroughs’ of Tower Hamlets, Newham, Redbridge and Waltham Forest (the latter two of which sit on the Outer North East London (ONEL) JHOSC).
- 5.4. INEL can co-operate with any other Health Overview and Scrutiny Committee (HOSC), JHOSC or committee established by two or more local authorities within the Greater London area.
- 5.5. Efforts will be made to avoid duplication of work, and the councils HSP will endeavour not to replicate any work undertaken by the INEL. All scrutiny statutory powers for that topic being reviewed will be transferred to the INEL.

Appendix 1: Health Scrutiny Work Programme 2016/17

Key

Access to health and social care	Agenda item relates to the Health Scrutiny theme of Access to health and social care
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Work Programme

Meeting	Agenda	Outcomes	Lead Officer	Method
Thursday 15th September, 2016 Paper Deadline: Tuesday 6th September, 2016	Setting the scene: Feedback on access to health & social care	<ul style="list-style-type: none"> Collect community intelligence on the theme of access to health & social care. Understand the key issues restricting service access to health and social care services are. 	Healthwatch CCG LBTH Adults & Childrens	Report/Presentation
	Role of Community Pharmacies	<ul style="list-style-type: none"> Explore the role of community pharmacies and where they fit in the health care system. Develop an understanding of the proposed cuts to community pharmacy funding and the impact this will have on the community. Develop an understanding of how the pending changes to prescribing and the impact this will have. 	Somen Banerjee (LBTH Public Health)	Report/Presentation
Wednesday, 2nd November, 2016	Early years and access to care: <ul style="list-style-type: none"> Early interventions 	<ul style="list-style-type: none"> Explore the issues impacting access to health and social care for 0-5 year olds. Consider the over reliance on A&E for 0-5 year olds and think of innovative ways to reduce this. 	Debbie Jones (LBTH Children's Services)	Report/Presentation

Paper Deadline: Monday, 24th October, 2016	improving outcomes for 0-5 year olds.	<ul style="list-style-type: none"> Form recommendations to improve access to health and social care services for 0-5 year olds. 		
	Refreshing Commissioning Prospectus	<ul style="list-style-type: none"> Review Tower Hamlets CCG Commissioning Prospectus to develop an understanding of their key priorities and commissioning activities. Consider how CCG commissioning fits in with Transforming Services Together and the North East London Sustainability and Transformation Plan. 	Jane Milligan (CCG)	Report/Presentation
Tuesday, 17th January, 2017 Paper Deadline: Friday, 6th January, 2017	Planning and GP's/health infrastructure	<ul style="list-style-type: none"> Understand how significant increases in the Population and number of new homes impact health services Review the Local Plan to help form an understanding of the relationship between housing and health and social care. 	CCG (Housing Scrutiny link in)	Report/Presentation
	Carers Strategy	<ul style="list-style-type: none"> Review the implementation of the new Carers Strategy following health Scrutiny Review in 2015. Measure how effectively the recommendations from the review have been implemented. 	Karen Sugars (LBTH Service Head Commissioning and Health)	Report/Presentation
Tuesday, 14th March, 2017 Paper Deadline: Friday, 3rd March, 2017	Access to care for people with mental health problems	<ul style="list-style-type: none"> Develop an understanding of the key barriers restricting access to mental health services Consider how the ELFT community pathways redesign will impact on access for people with a mental health problem, 	Denise Radley (LBTH Adults Services)	Report/Presentation

	Bart's Health & East London Foundation Trust Quality Account	<ul style="list-style-type: none"> Review and provide feedback to the Barts Health Trust and ELFT Quality Accounts. 	Barts Health Trust ELFT	Report/Presentation
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Scrutiny Review and/or Challenge Session		
Topic	Scope	Date
Access to effective re-ablement services	<p><u>Description</u></p> <p>This is an area which is seen as critical to a sustainable adult social care as it helps people to get back on their feet and regain their independence following a period of hospitalisation.</p> <p>The LBTH service is currently provided in house and there is a good evidence base for re-ablement services nationally. Currently, Tower Hamlets benchmark poorly in terms of the number of people discharged from hospital who receives the service and also the effectiveness of our intervention (measured by the number of people who receive it and don't require further care).</p> <p>This review will have a significant focus on over 65s and access to short term evidence based interventions which help people to regain skills and independence</p> <p>Outcomes</p>	TBC

	<ul style="list-style-type: none"> • Scrutinise the performance of the re-ablement provision and make recommendations to improve access to the service and its effectiveness. • Understand the reasons for the poor performance of the service in LBTH. • Analyse what has worked nationally and how this can be adapted in LBTH • Feed findings into the current review of the service being undertaken by Impower. 	
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Site Visits		
Location	Outcome	Date
New Maternity Co-Location Unit at Royal London Hospital	<p>Visit the Midwife Lead Unit at the Royal London Hospital on the invitation of the Chief Executive, Alwen Williams Bart's Health Trust.</p> <p>Follow up on the recommendations of the scrutiny review focusing on maternity services at the Royal London Hospital.</p>	December 2016 /January 2017