SCRUTINY BOARD (HEALTH)

TUESDAY, 30TH JUNE, 2009

PRESENT: Councillor M Dobson in the Chair

Councillors J Illingworth, G Kirkland, A Lamb, G Latty, L Rhodes-Clayton and

L Yeadon

1 Chair's Opening Remarks

The Chair welcomed everyone to the first meeting of the Scrutiny Board (Health) for this municipal year.

2 Declarations of Interest

Councillor G Kirkland declared a personal interest in his capacity as a Member of Wharfedale Hospital Board (Minute 8 refers).

3 Apologies for Absence

Apologies for absence were submitted on behalf of Councillor J Chapman, Councillor M Iqbal, Councillor C Townsley and Councillor D Congreve.

4 Minutes of the Previous Meeting held on 28th April 2009

RESOLVED – That the minutes of the meeting held on 28th April 2009 be confirmed as a correct record.

Input into the Work Programme 2009/2010 - Sources of Work and Establishing the Board's Priorities (Part 1)

The Head of Scrutiny and Member Development submitted a report on an input into the Board's work programme for 2009/10 and to identify sources of work and establish the Board's priorities.

Appended to the report were copies of the following documents for the information/comment of the meeting:-

- Scrutiny Board (Health) Terms of Reference (Appendix 1 refers).
- Leeds Strategic Plan 2008 to 2011- Executive Summary (Appendix 2a refers)
- Extract from Leeds' Director of Public Health Annual Report (2007-2008)(Appendix 2b refers)
- List of Scrutiny Board (Health) inquiries undertaken between October 2003 to April 2009 (Appendix 2c refers)

The Chair explained that both Councillor Harrand, Executive Board Member for Adult Health and Social Care and John England, Deputy Director Partnerships and Operational Effectiveness would make their presentations to this item early on the agenda in order that they could attend another meeting.

The Executive Board Member for Adult Health and Social Care outlined some of the current and future pressures on the Adult Social Services Department, including spending levels/ budgetary issues, higher levels of expectation and longer life expectancy. He also raised the issue of the separation of Health and Social Care services and the need for continued collaborative working between the Council and its NHS Partners, suggesting this might be any issue/area that the Board may want to examine during the coming year.

The Deputy Director Partnerships and Operational Effectiveness (Adult Social Services) outlined the Department's working relationship with outside organisations, such as NHS Leeds and summarised key activities and priorities for the Board to consider including in its work programme, including:

- Premature mortality issues
- Outcomes from the Joint Strategic Needs Assessment (JSNA)
 - People living longer
 - People (children and young people) needing a good start in life, covering issues such as:
 - Obesity
 - Sexual Health
 - Emotional needs and support
- Significant issues (when compared regionally and nationally), such as:
 - Obesity
 - Levels of harmful alcohol consumption
 - Drugs
 - Smoking including local differentials (i.e. health inequality issues)
- Matters highlighted in the (KPMG) Health Inequalities report, such as:
 - Targeting areas of greatest need
 - Ensuring health issues have a higher profile within the Council

Members commented and sought further clarification on some of the issues highlighted for possible inclusion in the Board's future work programme.

Following detailed discussions, the Chair thanked the Executive Board Member and the Deputy Director Partnerships and Operational Effectiveness for their contribution and attendance.

The Chair informed the Board that further input into establishing the Board's priorities from external partners would also be discussed later on the agenda.

RESOLVED - That the content of the report and appendices be noted.

6 Co-opted Members

The Head of Scrutiny and Member Development submitted a report which outlined the provisions to allow the appointment of co-opted members to Scrutiny Boards on the following basis:

- Up to five non-voting co-opted members could be appointed to the Board for a term of office which did not go beyond the next annual meeting of Council; and,
- Up to two non-voting members for a term of office which related to a particular scrutiny inquiry.

The report also made reference to the recently launched Local Involvement Network.

It was reported to the Board that both Leeds Voice and Touchstone (organisations previously represented on the Scrutiny Board) had indicated a desire to continue to be represented on the Scrutiny Board.

The Board discussed the contents of the report in detail and identified the potential benefits of appointing co-opted members from Leeds Local Involvement Networks (LINk) and to appoint co-opted members on an ad hoc basis to assist the Board with its specific inquiries during the municipal year.

RESOLVED -

- (a) That the contents of the report be noted.
- (b) That Leeds Voice (Health Forum) be allocated a non-voting co-opted seat on the Scrutiny Board (Health) and that Mr E Mack, as a representative of Leeds Voice, be appointed for the remainder of the 2009/10 municipal year.
- (c) That pending the establishment of a formal LINk Steering Group, nominations be sought from Leeds LINk for a representative to act as a non-voting co-opted member on the Board for this municipal year.
- (d) To assist the Board with any specific inquiries during the municipal year, that:
 - (i) The appointment of non-voting co-opted members (on an ad hoc basis) be kept under review; and,
 - (ii) Consideration be given to the invitation and use of expert witnesses.

7 Legislation and Constitutional Changes

The Head of Scrutiny and Member Development submitted a report requesting the Board to note the changes to the Council's Constitution in relation to Scrutiny. Specific matters outlined in the report related to:

- Councillor Call for Action (CCfA) Provisions
- Arrangements for the Scrutiny of Crime and Disorder Functions and Local Crime and Disorder Matters
- Local Involvement Networks (LINkS)
- Responding to inquiry report and recommendations
- Scrutiny of Partners

RESOLVED – That the contents of the report and appendices be noted.

Input into the Work Programme 2009/2010 - Sources of Work and Establishing the Board's Priorities (Part 2)

Further to Minute 4 above, the Chair welcomed the following representatives to the meeting:-

- Jill Copeland (Executive Director of Partnerships and Development) NHS Leeds
- Chris Butler (Chief Executive) Leeds Partnerships Foundation Trust (LPFT).
- Sylvia Craven Leeds Teaching Hospitals NHS Trust

Each of the above gave a brief presentation and outlined key issues and priorities relevant to the organisations they represented, as follows:

Leeds Partnerships NHS Foundation Trust

- Completing the redesign of Older People's Mental Health Services
- Improving the Trust's position with regard to delayed transfer of care (between service providers both health and social care)
- Building on the Trust's work on patient safety, further improving the quality of, and reducing the variation in, services (related to excellence in service provision and delivering the aims of "Healthy Ambitions")
- Understanding the implications and planning for a downturn in NHS finances.
- Challenging stigma and discrimination often associated and with mental health problems and learning disabilities, and promoting social inclusion.

NHS Leeds

- Saving lives and reducing health inequalities
- Improving health, wellbeing and healthcare
- Responding to population needs
- Sustaining performance against access and safety standards
- Shaping the provider landscape
- Becoming a world class commissioner

Leeds Teaching Hospitals NHS Trust

- Key performance targets
 - Improving the excellence of clinical outcomes
 - Improving the management of business
 - Becoming the hospital of choice (for patients and GPs)
- Service provision in a changing financial environment focusing on improving productivity, efficiency and the quality of services
- Outcomes of Leeds Strategic Review (focusing on Leeds Health Economy) being undertaken by the Strategic Health Authority
- Providing care closer to home, including different models of care (including services not based at hospitals)
- Clinical Services Reconfiguration Programme
- Foundation Trust status process including the need to act like a business when considering changes to services and delivery models
- Internal and external cultural changes associated with changes in service models and delivery

Members received and commented on the presentations and raised a number of queries, including the following issues, for which written responses would be sought:

NHS Leeds

- To provide a copy of the Young People's Sexual Health / Teenage pregnancy report, presented to NHS Leeds Board – February 2009 (received)
- To provide the Board with health data/ information on a geographical basis, highlighting particular health issues across the city, particularly in deprived areas.

LPFT

The Trust's power (and associated processes) for detaining patients

LTHT

 To provide confirmation of any proposed changes to the membership of Wharfedale Hospital Consultative Committee, in addition to any proposed changes to the operation/ role of Wharfedale Hospital.

The Chair thanked Jill Copeland, Chris Butler and Sylvia Craven for their presentations and advised that the Scrutiny Board would like further updates (i.e. on a quarterly basis) on the identified key issues and priorities. The Chair also suggested that future updates might usefully include areas where the local authority could improve in order to be a more effective partner.

RESOLVED - That any outstanding issues referred to above be dealt with by those officers now identified within the minutes.

9 Leeds Local Involvment Network (LINk) - Annual Report

The Head of Scrutiny and Member Development submitted a report to provide Scrutiny Board (Health) with the first Annual Report of Leeds Local Involvement Network (LINk). The Annual Report was tabled for the information/comment of the meeting.

It was reported to the Board that the purpose of the item was to:

- Continue to raise awareness of the role and work of Leeds' LINk (both publicly and among members of the Scrutiny Board (Health);
- Provide members with more detail of what Leeds' LINk has done during its first year, alongside any future plans; and,
- Provide an opportunity for a general discussion between the Scrutiny Board (Health) and representative members of Leeds' LINk, including any work programme issues.

The Chair welcomed the following representatives who were in attendance to introduce the report and to respond to Members questions and comments:

- Emily Wragg (LINk Co-ordinator) Shaw Trust (Leeds host organisation)
- Joy Fisher, Co-Chair, Leeds LINk Interim Steering Group
- Arthur Giles, Co-Chair, Leeds LINk Interim Steering Group

Joy Fisher addressed the meeting and welcomed the Board's willingness to work with Leeds LINK in the future and pointed out some of the following issues that had already been identified by their group:

Key issues raised by the public:

- Better Services for Older People
- Better Support for People with mental health problems
- Improved out hours services
- Free access to GP (No 0845 numbers)
- Better transport for patients
- Better listening and communication. Examples were:
 - o GP'S giving patients more time
 - Regular updates for patients on waiting lists
 - Carers being kept informed and involved
- Better training and support for staff working in care homes
- More respite care so that Carers can have a break
- Improved access for people from BME Communities

Issues identified by LINk Members:

- Eccleshill
- Dentistry
- Quality controls in NHS facilities and inspection

- Early discharge and re- admissions- a joined up health and social care service
- Personalisation Agenda
- Intermediate care
- Maternity provision
- Out of hours
- Strokes

The Chair thanked the representatives of Leeds LINk for attending the meeting and requested that the following information be provided to the Board as soon as practicable:

- Details of the overall membership of Leeds LINk (i.e. total number of members)
- Details of the organisations currently represented through membership of Leeds LINk
- The outcome of the forthcoming elections and membership of the Steering group proper.

RESOLVED - That the contents of the report and appendices be noted.

10 KPMG Audit Report

The Head of Scrutiny and Member Development submitted a report on a recent KPMG external audit review of Scrutiny. The report provided details of management's response to the review recommendations.

Peter Marrington, Head of Scrutiny and Member Development presented the report and responded to Members' queries and comments.

In brief, specific reference was made to the following issues:-

- The need for clearer roles for scrutiny with a view to focusing more on policy development.
- The need to produce smaller agenda in order to keep Members at the meeting.
- The need to employ experts in a particular field.
- That Members concerns should also be put in writing to KPMG on the quality of the information in their Review report.
- The need for Scrutiny Boards to look at how they framework their work programmes.

RESOLVED -

- (a) That the contents of the report and appendices be noted.
- (b) That the Review's recommendations and accompanying management responses be noted and that the above comments be referred to the Scrutiny Advisory Group for consideration.

11 Determining the Work Programme 2009/2010

The Head of Scrutiny and Member Development submitted a report to aid the Scrutiny Board to determine its priorities and work programme for 2009/2010.

Appended to the report were copies of the following documents for the information/comment of the meeting:-

- Draft Protocol between Scrutiny Board (Health) and NHS Bodies in Leeds (Appendix 1 refers)
- Scrutiny Board (Health) Health Proposals Working Group terms of reference (Appendix 2 refers)
- Minutes of the Executive Board meeting held on 13th May 2009 and 17th June 2009
- Scrutiny Board Procedure Rules Guidance Note 7 Inquiry Selection Criteria (Appendix 3 refers)
- Scrutiny Board (Health) Draft Work Programme 2009/2010

The Board raised and discussed the following issues for possible inclusion in the Board's work programme:

- Renal Unit Provision at Leeds General Infirmary (LGI).
- Alcohol and its related harm, including the role of the Authority in promoting sensible and responsible alcohol consumption, and highlighting the associated health implications, especially for those citizens living in the most deprived areas of the city.
- Childhood Obesity and levels of physical activity.
- Health considerations with the Council's decision-making processes.
- Smoking Cessation to reduce the number of people who smoke.
- Young People's sexual health and teenage pregnancies.
- Focusing on 'the health of young people'
- The role of the Health Proposals Working Group, including arrangements for meetings to take place immediately prior to the Scrutiny Board (Health) meetings on a quarterly basis
- Quarterly updates from NHS partners on the key issues and priorities identified earlier in the meting (minute 8 refers)

In relation to keeping the Board up to date with proposed services changes, associated consultation and implementation (work previously undertaken through the Health Proposals Working Group), the Chair proposed that such matters be incorporated into the arrangements for quarterly updates, with any urgent matters relayed through the Chair in the first instance.

The Chair requested that the Principal Scrutiny Adviser inform the NHS bodies of these new arrangement.

RESOLVED -

(a) That the contents of the report and appendices be noted.

- (b) That the Protocol between Scrutiny Board (Health) and NHS Bodies in Leeds, as presented (Appendix 1 refers) be agreed.
- (c) That the Principal Scrutiny Adviser, in conjunction with the Chair and taking account of the issues raised at the meeting, formulate a more detailed work programme to be presented and considered at the next Scrutiny Board meeting..

12 Date and Time of Next Meeting

Tuesday, 28th July 2009 at 10.00 a.m. (Pre-meeting at 9.30 a.m.)

(The meeting concluded at 1.00 p.m.)