



Report of the Head of Scrutiny and Member Development

Scrutiny Board: Scrutiny Board (Health)

Date: 30 June 2009

Subject: Input to the Work Programme 2009/10 – Sources of Work and
Establishing the Board's Priorities

Electoral Wards Affected:

Ward Members consulted
(referred to in report)

Specific Implications For:

Equality and Diversity
Community Cohesion
Narrowing the Gap

1.0 Purpose of Report

1.1 This report provides information and guidance to assist the Board develop its work programme for 2009/10.

2.0 Background

2.1 For reference and/ or information purposes, a copy of the Board's terms of reference is attached at Appendix 1.

2.2 In addition, relevant information from the following key sources have been extracted appropriate to this Board's responsibilities and attached (Appendix 2) to this report to assist Members in developing the Board's work programme for 2009/10:

- Leeds Strategic Plan 2008 -2011 – Executive Summary
- Leeds' Director of Public Health Annual Report (2007-2008) (extract) – recommendations for action to reduce health inequalities
- List of scrutiny inquiries relevant to the Board's portfolio undertaken since 2003

2.3 Once agreed, the Scrutiny Board's work programme should be considered as a live document that will evolve over time to reflect any changing and/or emerging issues identified throughout the year. As such, other sources of work will continue to be 'requests for scrutiny' and corporate referrals.

3.0 Health and Well- Being Partnership Plan (2009 – 2012)

- 2.1 In February 2009, the Scrutiny Board (Health) considered the draft Health and Well-Being Partnership Plan (2009 – 2012), which builds on the partnership priorities previously consulted on and agreed in the Leeds Strategic Plan. The final draft of the plan was presented to the Executive Board in May 2009 and is scheduled to be presented to Council for final approval.
- 2.2 The Health and Well-Being Partnership Plan (2009 – 2012), identifies four main strategic objectives. These are:
- Reducing Health Inequalities
 - Improving Quality of Life
 - Enhanced Safety and Support for Vulnerable People
 - Inclusive Communities
- 2.3 The Plan also identified the following agreed improvement priorities for health and wellbeing:
- Reduce premature mortality in the most deprived areas
 - Reduction in the number of people who smoke
 - Reduce alcohol related harm
 - Reduce rate of increase in obesity and raise physical activity for all
 - Reduce teenage conception and improve sexual health.
 - Improve the assessment and care management of children, families and vulnerable adults.
 - Improve psychological, mental health, and learning disability services for those who need it
 - Increase the number of vulnerable people helped to live at home
 - Increase the proportion of people in receipt of community services enjoying choice and control over their daily lives
 - Improve safeguarding arrangements for vulnerable children and adults through better information, recognition and response to risk
- 2.4 In considering the draft Health and Well-Being Partnership Plan (2009 – 2012), the previous Scrutiny Board made the following observations:
- The improvement priorities identified should act as the foundation for the Health Scrutiny Board's future work programme;
 - The actions template for 2009 – 2012 provides the Health Scrutiny Board with a key performance management tool;
 - The success of the Plan depends on the ability of the Council to act as 'one' and to successfully work with our partners, particularly through the Healthy Leeds Partnership.
 - The implementation of the Plan should not be seen as the sole preserve of health professionals but the responsibility of all directorates. In this regard it would not be inappropriate for the Health Scrutiny Board to request to see officers from other Directorates when looking at performance outcomes and holding officers to account.
- 2.5 Members are specifically asked to consider the agreed improvement priorities for health and wellbeing and the observations of the previous Board in determining the work programme for 2009/10, detailed elsewhere on the agenda.

3.0 Guidance

- 3.1 Over the last few years of Scrutiny Board work, experience has shown that the process is more effective if the Board seeks to minimise the number of substantial inquiries running at any one time.
- 3.2 This view is echoed within the findings of the recent KPMG external report on the Scrutiny function in Leeds, which is discussed elsewhere in this agenda. The Board is advised to consider the benefits of single item agendas (excluding miscellaneous information and minutes) in order to focus on all the relevant evidence and complete an inquiry in a shorter period of time. There are various mechanisms available to assist the Board in concluding inquiries quickly, such as working groups and site visits.
- 3.3 The agreed Memorandum of Understanding between Executive Board and Overview and Scrutiny which sits within the Council's Constitution states;

The responsibility of those setting scrutiny work programmes is, therefore, to ensure that items of work come from a strategic approach as well as a need to challenge service performance and respond to issues of high public interest.

It is recognised that Scrutiny Boards have a 'watching brief' role. In addition information is required for members' own development process, particularly as membership of the Boards is changed annually.

However, it is also recognised that agendas are often filled up with reports for this purpose, which takes up time for both officers and Members. Where Scrutiny Boards wish to ask questions at a general or more strategic level and/or be updated on issues already considered in detail, the facility of Members' Questions – where a verbal exchange replaces written reports - should be used.

It is expected that where ever possible prior notification is given of the likely questions to be asked”.

- 3.4 Over recent years the Children's Services Board in particular has developed the approach of devoting one meeting per quarter to performance management and 'horizon scanning' issues. This includes discussing with Executive Members and officers relevant issues, and is acknowledged within the KPMG report as good practice.

4.0 Work programming

- 4.1 To assist the Scrutiny Board and contribute to the discussions about the Board's work programme for 2009/10, the following have been invited to attend the meeting:
- Councillor Peter Harrand, Executive Member for Adult Health and Social Care;
 - The Director of Adult Social Services (or nominee);
 - The Chief Executive of NHS Leeds (or nominee);
 - Leeds Director of Public Health (NHS Leeds) (or nominee);
 - The Chief Executive of Leeds Teaching Hospitals NHS Trust (LTHT) (or nominee);
 - The Chief Executive of Leeds Partnerships Foundation NHS Trust (LPFT) (or nominee).

4.2 Following discussions and detailed elsewhere on the agenda, the Board will be asked to determine an outline work programme that prioritises the issues to be investigated.

5.0 Recommendations

5.1 Members are requested to use the attached information and the discussion with those present at the meeting to develop its work programme.

6.0 Background Papers

The Council's Constitution

Council Business Plan 2008 – 2011

Leeds Strategic Plan 2008 – 2011

Leeds Health and Well-Being Partnership Plan (2009 – 2012) (draft)