

Scrutiny Board (Health)

Inquiry into the role of the Council and its partners in promoting good public health

Draft Terms of reference

1.0 Introduction and background

1.1 The Government's White, *Choosing Health: making healthy choices easier*, was published in November 2004. The thrust of the *Choosing Health* focused on increasing healthy behaviour and how people can be supported to make healthier and more informed choices about their health. The white paper identified the following 6 key priorities:

- Tackling health inequalities
- Reducing the number of people who smoke
- Tackling obesity
- Encouraging and supporting sensible drinking
- Improving sexual health
- Improving mental health and wellbeing

1.2 In 2009, these issues remain priorities areas and are reflected in the Health and Wellbeing Partnership Plan 2009-2012, in which the agreed health and wellbeing improvement priorities for Leeds have identified as:

- Reduce premature mortality in the most deprived areas;
- Reduce the number of people who smoke;
- Reduce alcohol-related harm;
- Reduce the rate of increase in obesity and raise physical activity for all;
- Reduce teenage conception rates and improve sexual health;
- Improve the assessment and care management of children, families and vulnerable adults;
- Improve psychological and 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 who receive community services enjoying choice and control over their daily lives; and
- Improve safeguarding arrangements for vulnerable children and adults through better information, recognition and response to risk.

1.3 At its meeting on 30 June 2009, the Scrutiny Board (Health) received a number of inputs to help members consider the Board's priorities during the 2009/10 municipal year. This included specific inputs from:

- Executive Board Member for Adult Health and Social Care
- Deputy Director (Adult Social Services)
- NHS Leeds
- Leeds Teaching Hospitals NHS Trust (LTHT)
- Leeds Partnerships Foundation Trust (LPFT)

1.4 A number of potential areas for inquiry were identified by members of the Scrutiny Board, including:

- To consider 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 living in the most deprived areas of the city.
- To consider how health priorities are considered and reflected within the Council's decision-making processes.
- To consider the health of young people across a range of issues, including:
 - Alcohol consumption;
 - Obesity and levels of physical activity;
 - Smoking;
 - Sexual health and teenage pregnancies;

1.5 At its meeting in July 2009, the Scrutiny Board (Health) agreed the terms of reference for a proposed scrutiny inquiry around alcohol related harm, subject to some minor amendments identified at the meeting.

1.6 However, given the range of potential areas for inquiry identified by members of the Scrutiny Board, a revised approach is now proposed, that will allow the Board to consider a range of issues under the umbrella of a single inquiry.

2.0 Scope of the inquiry

2.1 The purpose of the Inquiry is to make an assessment of and, where appropriate, make recommendations on the role of all partners in developing, supporting and delivering targets associated with improving specific aspects of public health, as set out in the Leeds Health and Well-being Plan (2009-2012) and associated strategies, particularly in relation to:

- Promoting responsible alcohol consumption;
- Reversing the rise in levels of obesity and promoting an increase in the levels of physical activity;
- Reducing the level of smoking;
- Improving sexual health and reducing the level of teenage pregnancies

2.2 The Board hopes that its findings will provide a timely and positive contribution to the delivery of the public health agenda and the management of any necessary changes in behaviour.

3.0 Comments of the relevant director and executive member

3.1 Comments received on these draft terms of reference will be reflected in the final version.

4.0 Timetable for the inquiry and submission of evidence

4.1 The inquiry will commence in October 2009 and is likely to take place over a number of sessions. A provisional timetable is outlined below:

Session 1 (October 2009)

To consider issues associated with ***improving sexual health and reducing the level of teenage pregnancies***, such as:

- The role of the Council and its NHS health partners in developing and delivering appropriate strategies that:
 - Raises general public awareness of the health risks associated with poor sexual health and the impact of teenage pregnancies.
 - Identifies and targets those groups most at risk of poor sexual health and teenage conceptions.
 - Promotes easy access to associated services and treatments.
 - Assesses the quality and effectiveness of associated services and treatments.
- Progress against the recommendations identified in the Scrutiny Inquiry report – *Improving Sexual Health Among Young People (April 2009)*.

Session 2 (November 2009)

To consider issues associated with ***promoting responsible alcohol consumption***, such as:

- The role of the Council in terms of licensing policy and associated enforcement/ control procedures.
- The role of the Council and its NHS health partners in developing and delivering an alcohol strategy that:
 - Raises general public awareness of the health risks associated with alcohol consumption.
 - Identifies and targets those groups most at risk from the affects of alcohol abuse, ensuring they have access to the most appropriate services and treatments.
 - Assesses the quality and effectiveness of services and treatments associated with reducing alcohol related harm.
- The social responsibility role of breweries, retailers and licensees and how this shapes the consumption of alcohol in Leeds.

Session 3 (January 2010)

To consider issues associated with ***reversing the rise in levels of obesity and promoting an increase in the levels of physical activity***, such as:

- The role of the Council and its NHS health partners in developing and delivering appropriate strategies that:
 - Raises general public awareness of the health risks associated with obesity and inactive lifestyles.
 - Identifies and targets those groups most at risk of becoming obese and leading inactive lifestyles.
 - Assesses the quality and effectiveness of services and treatments associated with obesity.
 - Promotes easy access to leisure facilities and activities.
- The role of the Council in terms of its power of well-being through planning policies and associated enforcement/ control procedures.
- The role of commercial sector partners in promoting healthier lifestyles.

Session 4 (February 2010)

To consider issues associated with *reducing the level of smoking* , such as:

- The role of the Council and its NHS health partners in developing and delivering appropriate strategies that:
 - Raises general public awareness of the health risks associated with smoking.
 - Identifies and targets those groups most at risk of smoking and smoking related illnesses.
 - Assesses the quality and effectiveness of services and treatments associated with smoking cessation.

4.2 To help provide a rounded view of any issues, the Scrutiny Board will consider evidence from a range of stakeholders and interested parties at each session of the inquiry. The Scrutiny Board will also consider any emerging issues to inform further sessions and/or assist with the production of the final inquiry report.

4.3 The Board will aim to conclude its inquiry before April 2010, with the publication of a formal report setting out the Board's findings, conclusions and recommendations.

5.0 Witnesses

5.1 The following witnesses have been identified as possible contributors to the Inquiry:

- Executive Board Member for Adult Health and Social Care (Leeds City Council)
- Director of Adult Social Care (Leeds City Council).
- Director of Public Health and appropriate public health specialists for each of the specific areas identified (NHS Leeds).
- Director of City Development (Leeds City Council).
- Head of Licensing and Registrations (Leeds City Council).
- Business Development Manager (Drug Action Team, Leeds City Council).
- Healthier Leeds Partnership representatives, as appropriate.
- Independent experts for each of the specific areas identified, as appropriate.
- Commercial representatives, as appropriate.
- Service user representatives, as appropriate.

6.0 Monitoring Arrangements

6.1 Following the completion of the scrutiny inquiry and the publication of the final inquiry report and recommendations, the implementation of the agreed recommendations will be monitored.

6.2 The final inquiry report will include information on the detailed arrangements for monitoring the implementation of recommendations.

7.0 Measures of success

7.1 It is important to consider how the Board will deem whether its inquiry has been successful in making a difference to local people. Some measures of success may be obvious at the initial stages of an inquiry and can be included in these terms of reference. Other measures of success may become apparent as the inquiry progresses and discussions take place.

7.2 The Board will look to publish practical recommendations.

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