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Report of the Head of Democratic Services

Report to West Yorkshire Joint Health Overview and Scrutiny Committee

Date: 19 November 2019

Subject: West Yorkshire and Harrogate Health and Care Partnership: Improving Planned Care Programme

Are specific electoral wards affected? If yes, name(s) of ward(s):	Yes	⊠ No
Has consultation been carried out?	☐ Yes	⊠ No
Are there implications for equality and diversity and cohesion and integration?	☐ Yes	⊠ No
Is the decision eligible for call-in?	☐ Yes	⊠ No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	Yes	⊠ No

1. Purpose of this report

1.1 The purpose of this report is to introduce a report from the West Yorkshire and Harrogate Health and Care Partnership (the Partnership) regarding the Improving Planned Care Programme. The Partnership report is attached as Appendix 1.

2. Background information

- 2.1 The Improving Planned Care Programme is one of the local priority programmes of the Partnership. The programme Senior Responsible Officer (SRO) is Dr Matt Walsh (Chief Officer, Calderdale CCG); the Clinical Lead is Dr James Thomas (Clinical Chair, Airedale, Wharfedale and Craven CCG) and the Programme Director is Catherine Thompson.
- 2.2 The Programme is delivered in close partnership with the West Yorkshire Association of Acute Trusts. An update on the work of WYAAT and the Acute Care Collaboration programme is presented elsewhere on the agenda.
- 2.3 The Improving Planned Care programme aims to take a 'right care, right time, right place' approach and has a focus on reducing the variation in:
 - Access to health care services;

- Experience of health care services; and,
- Outcomes from health care services.
- 2.4 The Improving Planned Care programme also has a focus on reducing the health inequalities evident across West Yorkshire and Harrogate.
- 2.5 There are a number of work streams within the programme, as follows:
 - Clinical Thresholds Standardising commissioning policies across Clinical Commissioning Groups within the Partnership, including aligning with a national programme of work on Evidence Based Interventions
 - .Clinical Pathways Standardising care pathways and services available within specific clinical specialities; aiming to ensure people across West Yorkshire and Harrogate have equitable access to care.
 - Prescribing Standardising commissioning policy for drugs and some medical devices across Clinical Commissioning Groups within the Partnership, using a targeted approach by seeking to address areas of high cost or significant variation across the Partnership. The work stream also aligns with national programmes of work such as NHS England's low value medicines programme to ensure implementation of national policy is consistent across the Partnership.
- 2.6 The Joint Committee has not previously given any detailed consideration to the Partnership's Improving Planned Care Programme.

3. Main issues

- 3.1 The Partnership report on the Improving Planned Care Programme is attached at Appendix 1.
- 3.2 In considering the details presented, the Joint Committee may find it useful to consider the following agreed aims and criteria for working jointly across the Partnership:
 - To achieve a critical mass beyond local population level to achieve the best outcomes;
 - To share best practice and reduce variation; and
 - To achieve better outcomes for people overall by tackling 'wicked issues' (i.e., complex, intractable problems).
- 3.3 Appropriate representatives from the Partnership have been invited to the meeting to discuss the details presented in the attached report and address questions from the Joint Committee

4. Corporate considerations

4.1 Consultation and engagement

4.1.1 Public and service user engagement and consultation are key considerations for the West Yorkshire and Harrogate Health and Care Partnership across all of its programme areas.

4.1.2 The Joint Committee may wish to give specific consideration to any specific engagement and consultation activity that may be required in relation to particular elements of the Improving Planned Care Programme.

4.2 Equality and diversity / cohesion and integration

- 4.2.1 No specific implications have been identified as part of this report.
- 4.2.2 The Joint Committee may wish to give specific consideration to any equality and diversity implications relevant to particular elements of the Improving Planned Care Programme.

4.3 Council policies and best council plan

- 4.3.1 No specific implications have been identified as part of this report.
- 4.3.2 The Joint Committee may wish to give specific consideration to any specific policy issues relevant to any constituent local authority and associated with particular elements of the Improving Planned Care Programme.

Climate emergency

- 4.3.3 No specific implications have been identified as part of this report.
- 4.3.4 The Joint Committee may wish to give specific consideration to any climate emergency implications relevant to particular elements of the Improving Planned Care Programme.

4.4 Resources and value for money

- 4.4.1 No specific implications have been identified as part of this report.
- 4.4.2 The Joint Committee may wish to give specific consideration to any resource and value for money implications relevant to particular elements of the Improving Planned Care Programme.

4.5 Legal implications, access to information, and call-in

- 4.5.1 There are no specific access to information implications arising from the report and decisions of external bodies are not eligible for Call In.
- 4.5.2 The Joint Committee may wish to give specific consideration to any legal implications relevant to particular elements of the Improving Planned Care Programme.

4.6 Risk management

- 4.6.1 No specific implications have been identified as part of this report. .
- 4.6.2 The Joint Committee may wish to give specific consideration to any identified risks (and associated mitigations) relevant to particular elements of the Improving Planned Care Programme.

5. Recommendations

5.1 The West Yorkshire Joint Health Overview and Scrutiny Committee is asked to consider the details presented in this report and any appendices; and agree any specific recommendations and/or further scrutiny activity.

6. Background do	ocuments ¹
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6.1 None

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.