



Health and Social Care Scrutiny Board (5)

Time and Date

2.00 pm on Wednesday, 22nd April, 2015

Place

Committee Rooms 2 and 3 - Council House

Public Business**1. Apologies and Substitutions****2. Declarations of Interest****3. Minutes**

(a) To agree the minutes of the meeting held on 18th March, 2015 (Pages 3 - 8)

(b) Matters Arising

4. Review of the Health and Well-being Board in 2014/15 (Pages 9 - 14)

Briefing Note of the Deputy Director of Public Health

The following have been invited to the meeting for the consideration of this item:

Juliet Hancox, Coventry and Rugby Clinical Commissioning Group
Ruth Light, Coventry Healthwatch
John Mason, Coventry Healthwatch

5. Outstanding Issues Report

Outstanding issues have been picked up in the Work Programme

6. Review of 2014-15 Scrutiny Activity (Pages 15 - 16)

Report of the Scrutiny Co-ordinator

7. Work Programme 2014-15 (Pages 17 - 24)

Report of the Scrutiny Co-ordinator

8. **Any other items of Public Business**

Any other items of public business which the Chair decides to take as matters of urgency because of the special circumstances involved

9. **Meeting Evaluation**

Private Business

Nil

Chris West, Executive Director, Resources, Council House Coventry

Tuesday, 14 April 2015

Notes: 1) The person to contact about the agenda and documents for this meeting is Liz Knight, Governance Services, Council House, Coventry, telephone 7683 3073, alternatively information about this meeting can be obtained from the following web link: <http://moderngov.coventry.gov.uk>

2) Council Members who are not able to attend the meeting should notify Liz Knight as soon as possible and no later than 1.00 p.m. on 22nd April, 2015 giving their reasons for absence and the name of the Council Member (if any) who will be attending the meeting as their substitute.

3) Scrutiny Board Members who have an interest in any report to this meeting, but who are not Members of this Scrutiny Board, have been invited to notify the Chair by 12 noon on the day before the meeting that they wish to speak on a particular item. The Member must indicate to the Chair their reason for wishing to speak and the issue(s) they wish to raise.

Membership: Councillors M Ali, K Caan (By Invitation), J Clifford, A Gingell (By Invitation), P Hetherington, D Howells, J Mutton, J O'Boyle, D Skinner, D Spurgeon, K Taylor and S Thomas (Chair)

Please note: a hearing loop is available in the committee rooms

If you require a British Sign Language interpreter for this meeting OR if you would like this information in another format or language please contact us.

Liz Knight

Telephone: (024) 7683 3073

e-mail: liz.knight@coventry.gov.uk

Coventry City Council
Minutes of the Meeting of Health and Social Care Scrutiny Board (5) held at 2.00
pm on Wednesday, 18 March 2015

Present:

Members: Councillor S Thomas (Chair)
Councillor J Clifford
Councillor P Hetherton
Councillor D Howells
Councillor J Mutton
Councillor J O'Boyle

Co-Opted Members: David Spurgeon

Other Member: Councillor A Gingell

Other Representatives: Dr Jamie Macpherson, Local Medical Committee
Dr Peter O'Brien, Coventry and Rugby Clinical
Commissioning Group (CCG)
Sue Price, NHS Area Team
Nikkie Taylor, Coventry and Rugby CCG
Dr Nishan Wiratunga, Coventry GP Alliance

Employees:

S Brake, People Directorate
N Brook, Chief Executive's Directorate
V Castree, Resources Directorate
P Fahy, People Directorate
P Hargrave, People Directorate
L Knight, Resources Directorate
J Moore, Chief Executive's Directorate
T Richardson, Chief Executives Directorate

Apologies: Councillors M Ali, D Skinner and K Taylor

Public Business

58. Declarations of Interest

There were no disclosable pecuniary interests declared.

59. Minutes

The minutes of the meeting held on 11th February, 2015 were signed as a true record. There were no matters arising.

60. Developing a Primary Care System Fit for the Future

The Scrutiny Board considered a report of the Director of Public Health which provided an update on the progress made against the recommendations contained in her Annual Report for 2014 concerning the development and improvement of primary care in Coventry, to ensure that the service could adapt to the challenges of the future. Dr Jamie Macpherson, Local Medical Committee, Dr Peter O'Brien and Nikkie Taylor, Coventry and Rugby Clinical Commissioning Group (CCG), Sue Price, NHS Area Team, and Dr Nishan Wiratunga, Coventry GP Alliance attended the meeting for the consideration of this issue. Councillor Gingell, Cabinet Member for Health and Adult Services also attended.

The report referred to the Council's partnership working with Coventry and Rugby CCG, NHS England, Coventry Local Medical Committee, Healthwatch Coventry, Coventry Local Pharmaceutical Committee, local GPs and patient representatives to build a shared vision of primary care in Coventry to ensure the model of care was fit for the future.

Considerable progress had been made across a number of areas. Public Health had continued to work with primary care to deliver lifestyle services and had developed an online directory to provide an overview of community initiatives and lifestyle services within Coventry. A hard copy of this directory was tabled at the meeting. The Primary Care Quality Group were exploring asset based development approaches to encourage and empower people to have a greater role in managing their own health. Public Health had also completed a pharmaceutical needs assessment to ensure pharmacy provision was adequate in the city.

The Coventry GP Alliance was established in 2014 by local GPs with the vision of protecting, improving and enhancing primary care in the city. Reference was made to a workshop held in February 2015 which was attended by representatives from across the primary care system to start building a shared vision.

The Board were informed that future work would continue to build upon these areas with innovative practice being celebrated at a GP award evening planned to take place in June. The Primary Care Quality Group would also work to address the challenges primary care faced, undertaking projects to improve GP recruitment and retention in the city and empowering and enabling people to access community, lifestyle and pharmacy services as well as looking after themselves.

The medical representatives present informed of their involvement with the development of primary care in the city. Attention was drawn to the bid made by the GP Alliance to the Prime Minister's Challenge Fund 'Best Care, Anywhere: Integrated Primary Care in Coventry'. The bid put forward the following three high impact schemes which would link to existing services:

- (i) An extended hours hub which offered weekday urgent appointments between 4.00 pm and 8.00 pm and weekend routine appointments
- (ii) A Primary Care Frailty Team determining discharge and care planning for frail patients and managing them in proactive community based primary care
- (iii) A GP Primary Care Team in the Emergency Department treating patients with minor issues.

The Board questioned the officers and representatives on a number of issues and responses were provided. Matters raised included:

- Further information on the bid to Prime Minister's Challenge Fund including timescales and plans to move the initiatives forward if the bid was not successful
- Implementing the announcement made that day concerning pharmacists working from GP surgeries, the potential for triaging and making best use of their expert knowledge
- The future role of single and small GP practices with particular reference to performance outcomes and the need for gender balance
- The benefits of GP networks to share knowledge and expertise
- Partnership working with Whitefriars
- The problems for residents who have had benefit reductions imposed on them and the GP advocate support role
- The additional problems that can arise for patients and their families when patients with mental health problems have to wait for assessments and treatment and how improvements to primary care could help such cases
- The support available for GPs if more patients with mental health issues are discharged to their care
- Support for the healthy lifestyle services directory which would be used by both the public and professionals working in primary care
- Concerns about the low morale of some GPs which was causing them to look for employment outside of the NHS and the need for positivity
- The potential to further develop relationships with Warwick University Medical School
- What patients would want and expect the Primary Care system to deliver and the importance of being able to provide continuity of care
- The importance of data sharing, in particular the walk in centre and any out of hours service being able to access to patient records.

RESOLVED that:

(1) The suggested approach for continuing to develop and improve primary care in Coventry be endorsed.

(2) A summary of the discussions concerning the vision for primary care in Coventry be circulated to all the representatives present.

(3) Members to be informed of the outcome of the bid to the Prime Minister's Challenge Fund for three high impact primary care schemes aimed at improving access and ensuring continuity of care.

61. **Coventry's Smokefree Strategy 2015-2020**

The Scrutiny Board considered a briefing note and received a presentation of the Director of Public Health introducing the proposed Smokefree strategy for Coventry. A copy of the draft strategy which covered 2015-2020 was set out at an appendix to the briefing note. The issue was introduced by Councillor Clifford, Chair of Coventry's Smokefree Alliance. Councillor Gingell, Cabinet Member for Health and Adult Services attended for the consideration of this item.

Results from the household data survey indicated that 22% of adults in the city smoked. Smoking was still the biggest cause of preventable death in the country and was directly responsible for approximately 400 deaths in Coventry each year. It was also the biggest cause of inequalities in death rates between rich and poor.

Coventry's Smokefree Alliance was set up to provide a partnership forum to initiate, co-ordinate and develop a coherent approach for Coventry. The Forum met on a quarterly basis and representation was outlined. The previous Smokefree Strategy ran from 2010 to 2013 and produced many achievements including increased numbers of people stopping smoking with the help of commissioned services; high levels of compliance with regulations governing the sale of tobacco products and smoking in enclosed public areas; improved awareness of shisha as a tobacco product; the creation of smokefree areas at schoolgates, playgrounds, early years settings and University Hospital Coventry and Warwickshire; and a reduction in the numbers of pregnant mothers who smoked.

The main aim of the new strategy was to reduce smoking prevalence to 14% by 2020 and less than 5% by 2035, which was in line with national goals. The key priorities were:

- i) Promote non-smoking as the social norm in Coventry
- ii) Help more tobacco users to quit
- iii) Protect priority groups from smoking related harm – pregnant women, children, people with mental health conditions and people with long term conditions
- iv) Effectively respond to smoking related behaviours such as vaping and using shisha
- v) Providing leadership and developing a workforce competent to help reduce the harms of smoking.

The Board were informed that the Smokefree Alliance was developing an action plan to deliver the strategy and would be accountable to the Health and Well-being Board. The draft strategy was to be considered by Cabinet and the Health and Well-being Board as well as the partner organisations.

The Board questioned the officers on a number of issues and responses were provided. Matters raised included:

- Clarification about the accuracy of the statistics which stated that smoking was the largest cause of preventable premature death, particularly in light of people having a number of linked conditions eg smoking and obesity
- Further information about the introduction of the no smoking policy at the hospital including the implications for mental health and vulnerable patients who smoke
- The importance of school outreach work to help achieve the vision of a smokefree generation
- What legislation and additional actions could help to reduce smoking prevalence across the city.

RESOLVED that:

(1) Councillor Lucas, in her capacity as Chair of the Local Government Association Safer and Stronger Communities Board, be asked to raise the following issues at national level:

a) Who will have responsibility for enforcing the smokefree legislation due to come into force on 1st October, 2015 when drivers will be banned from smoking in private vehicles when children are present

b) The introduction of smokefree areas at school gates, playgrounds and parks which will be more beneficial if introduced on a national basis.

(2) Councillor Kershaw, Cabinet Member for Education, be requested to work with School Governing Bodies to promote smokefree environments both inside and outside of school premises.

(3) Additional information on the leading causes of preventable death be circulated to members of the Board.

62. Outstanding Issues Report

The Scrutiny Board noted that all outstanding issues had been included in the Work Programme for the current year.

63. Work Programme 2014-15

The Scrutiny Board noted the Work Programme for 2014-15.

64. Any other items of Public Business

There were no additional items of public business.

(Meeting closed at 4.10 pm)

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Coventry City Council

Briefing note

To: Health and Social Care Scrutiny Board (5)

Date: 22nd April 2015

Subject: Review of Health and Well-being Board in 2014/15

1 Purpose of the Note

- 1.1 To update members of Health and Social Care Scrutiny Board (5) on the work of Coventry's Health and Well-being Board in 2014/15 and to outline on-going priorities for the Health and Well-being Board in 2015/16.

2 Recommendations

- 2.1 Health and Social Care Scrutiny Board (5) is asked to:

- 1) Note the key areas of work carried out by Coventry's Health and Well-being Board and;
- 2) Review the initial priority areas for 2015/16.

3 Background

- 3.1 Coventry's Health and Wellbeing Board was established under the 2012 Health and Social Care Act. The key statutory functions of the board are as follows:
- To prepare a joint strategic needs assessment and joint health and wellbeing strategies
 - To encourage integrated working between health and social care, including providing advice or assistance or other support to encourage section 75 (NHS Act 2006) arrangements around lead commissioning, pooled budgets and/or integrated provision
 - To encourage close working between commissioners of health related services and the board itself.
- The 2012 Act also sets out statutory minimum membership of the Health and Wellbeing Board: the Directors of Public Health, Adult Social Services and Children's Services, at least one elected member, a representative of the local Clinical Commissioning Group, and Healthwatch.

4 Coventry's Board

- 4.1 In Coventry in February 2014, following a peer review by the Local Government Association, changes were made to the membership of the board to include key NHS providers (Coventry & Warwickshire Partnership Trust, University Hospital Coventry and Warwickshire). Coventry's board also includes other organisations who have a contribution to make to improve health and well-being in the City: West Midlands Police, West Midlands Fire Service, Coventry University, University of Warwick, and NHS England. At this time and on the recommendation of the peer review, the responsibilities of Health Overview and Scrutiny Committee and the Health and Wellbeing Board were clarified, creating a clearer separation between the scrutiny function and delivery.

- 4.2 Membership of the board is subject to an annual review locally, to take place in June 2015. The aim of this review is to ensure that membership continues to be fit for purpose locally and reflects national and regional best practice. A regional review of Health and Well-being Boards is currently underway and it is anticipated that the findings of this will inform any future changes to Coventry's board.
- 4.3 Following this review, the frequency of board meetings was also increased to a maximum of 6 meetings a year to build relationships between board members and to implement a rolling programme of work. Provision was also made for informal development sessions to bring together a wider range of stakeholders on specific topics.

5 Key work areas in 2014/15

5.1 The Health and Well-being Board works to an annual work programme. This reflects statutory responsibilities, national requirements and key local priority areas identified in the Health and Well-being Strategy. Many of the individual work areas of the Health and Well-being Board have been reported to Health and Social Care Scrutiny Board (5) over the last year. The key areas of work that the Health and Well-being Board have led in 2014/15 are set out below:

5.2 **Health and Well-being Strategy:** Coventry's Health and Well-being Strategy is a three year strategy which was launched in 2012. Based on an analysis of health and well-being in the city, identified in the joint strategic needs assessment, it identifies four key priority themes for all partners across the city to address to improve health and reduce health inequalities. These themes are:

- Healthy People: early years (pre-natal to two years) and older people
- Healthy Communities, focusing on obesity, mental wellbeing, domestic violence and abuse & sexual violence
- Reducing variation: smoking, alcohol, infectious diseases (TB & HIV)
- Improving outcomes: cancer, variations in primary care, managing lifestyle risks

These four themes are supported by work to promote community engagement, focus on prevention and develop strong partnership working arrangements.

5.3 Specific plans are in place to deliver improvements in these areas, led by a number of partnership groups across the city including the Children's Joint Commissioning Board, Adult Joint Commissioning Board, Police and Crime Board, Coventry & Warwickshire Health Protection Committee as well as the Health and Well-being Board itself, which has oversight of the whole strategy. An update on progress implementing the Health and Wellbeing Strategy is due to go to the Health and Wellbeing Board in June. A revised Health and Well-being Strategy will be produced in 2015/16, supported by an updated Joint Strategic Needs Assessment. This will be informed by 'deep dive' needs assessments including recently completed work on mental health & sexual violence.

5.4 In 2014/15 the Board has overseen a number of new strategies which have identified areas where progress has been made in improving health and set new priorities to accelerate improvement. This has included a new drugs strategy, supporting the alcohol strategy which was revised in 2013, and a new tobacco control strategy which has been developed by Coventry's SmokeFree Alliance, and the Active Citizens, Strong Communities Strategy which is aiming to increase community engagement and develop asset based working locally.

5.5 **Health and Social Care Integration** In 2014/15, this has been a significant area of oversight for the Health and Wellbeing Board, reflecting national policy changes and a stronger drive to improve the integration of health and social care services. This has included overseeing the Better Care Fund which is being implemented jointly.

- 5.6 The Better Care Fund programme supports the Health and Wellbeing Strategy objective of improving outcomes for older people as well as improving the integration of health and social care for young people with complex health and social care needs. It consists of four key programmes: 1) reducing emergency admissions to hospital, 2) improving personalised short-term care to maximise older people's independence, 3) better integration of long-term care and support for people with complex long-term needs (all ages), and 4) improving the care of people with dementia, including better support before and after a formal diagnosis is made. This programme builds on work carried out in 2013/14, including an informal Health and Well-being Board development session on dementia which was co-produced with people living with dementia and their carers. The four Better Care programmes are supported by other shared priorities around improving IT infrastructure and through the piloting of new Integrated Neighbourhood Teams.
- 5.7 The Joint Adult Commissioning Board (Coventry and Rugby Clinical Commissioning Group and the City Council) are responsible for ensuring Better Care Coventry is delivered and that the pooled budget is managed in line with the partnership agreement. The Health and Well-Being Board holds the Joint Adult Commissioning Board to account for the delivery of Better Care Coventry and provides strategic direction.
- 5.8 The Health and Wellbeing Board has also overseen the development and resourcing of Coventry's **Age Friendly City programme**. This is being jointly delivered by Coventry City Council, Coventry University and Age UK and is part of a global network of cities which aim to influence environmental, social and economic factors that affect the health and well-being of older people. This work builds in an important preventative component into the wider programme of work to improve health and social care for older people.
- 5.9 **Female Genital Mutilation.** Following full Council motion to eliminate FGM in Coventry, led by the Cabinet Member, Health and Adult Services (the first of its kind in the country), the Health and Well-being Board has led a programme of work to tackle FGM in the city. This has led to the development of a city-wide pledge to eliminate FGM as well as specific activities designed to raise awareness of FGM with schools and to identify and support women who have been subject in FGM through general practice and midwifery. Reporting rates for FGM in the city are high, giving evidence of both need in the city and demonstrating a high level of awareness amongst health professionals of FGM.
- 5.10 **Primary Care Quality.** Coventry's Local Government Association peer review identified the crucial role that high quality general practice has in improving life expectancy and health outcomes. Reducing variation in primary care was also identified in the Health and Well-being Strategy as an important local priority.
- 5.11 The 2014/15 Director of Public Health Annual Report focused on primary care in the city, identifying the significant progress that has been made in improving primary care and some of the key challenges that remain, including the recruitment and retention of GPs and primary care staff. Developed in conjunction with the Local Medical Committee, Coventry and Rugby Clinical Commissioning Group, NHS England, the Local Pharmaceutical Committee, Healthwatch and local GPs, the actions identified in this report continue to be implemented by a steering group which reports to the Health and Well-being Board. This forms part of a much wider approach to transform primary care in the city, including the new Coventry GP Alliance which has been awarded funding from the Prime Minister's Challenge Fund to develop extended hours in general practice, put in place a primary care frailty team and locate a GP in the Emergency Department at UHCW.
- 5.12 **Active Citizens, Strong Communities.** Jointly led by the Cabinet Member for Health and Adult Services and the Cabinet Member for Community Development, Cooperatives and Social Enterprise, this work has been developed to improve the way we work with local people and build more effectively on the strengths and capabilities in local communities.

This supports the delivery of the Health and Well-being Strategy theme around strengthening community engagement.

- 5.13 Endorsed by the Health and Well-being Board, this work recognises that strong, cohesive and active communities have improved health and well-being. The work is being jointly delivered by a multi-agency group, chaired by West Midlands Police. This includes Coventry City Council, Whitefriars Housing, Voluntary Action Coventry, Grapevine, Coventry Law Centre and Coventry & Rugby Clinical Commissioning Group. Specific projects which are in train include the development of social prescribing in general practice (led by Coventry & Rugby CCG & Public Health), testing out community-led approaches to developing local areas using section 106 funding, developing a community directory (led by the City Council) and the development of Places of Welcome (accessible community facilities which provide informal advice and welcome) (led by Whitefriars). This work has been developed with input from Communities and Neighbourhoods Scrutiny Board 4. In addition, the Council and other partners have worked with Coventry Law Centre to secure £1.5 million funding over 5 years to work with local people to embed early intervention and prevention into children's services and social housing in two areas of the city.
- 5.14 **Reducing health inequalities: Coventry as a 'Marmot' City.** The Health and Well-being Board has oversight of the Marmot programme which is a comprehensive, city-wide programme to reduce health inequalities, including tackling the wider determinants of health. This programme has just finished its first two years and held a large conference to showcase its work in March 2015. There has been a commitment made to continue this programme for a further period.
- 5.15 **Safeguarding.** Although the prime responsibility for assuring effective multi-agency safeguarding sits with the Adults and Children's Joint Safeguarding Boards, the Health and Well-being Board has an annual discussion of safeguarding locally and receives the annual reports of both safeguarding boards.
- 5.16 **Local commissioning priorities.** In 2014/15 the Health and Well-being Board has also contributed to the oversight of local NHS commissioning plans, helping to ensure that these reflect local priorities outlined in the Health and Well-being Strategy. This has included reviewing draft commissioning plans for Coventry & Rugby Clinical Commissioning Group (CCG) and the CCG's 5 Year Vision.
- 5.17 **Health Protection.** In 2014, the Health and Well-being Board were briefed on Ebola, recognising that dealing with major health incidents requires effective joint working across all agencies. The Board also received updates from Coventry and Warwickshire's Health Protection Committee on local health protection issues, including our local responses to TB, HIV and other infectious diseases.

6 Public engagement

- 6.1 In 2014/15 the Health and Wellbeing Board has continued to develop its engagement with patients, the public and wider stakeholders. New webpages have been developed giving more information about the board and how it works and a new health and well-being e-newsletter and social media presence has been developed to share information about key areas of work more widely. Healthwatch have two allocated places on the Health and Well-being Board and have led specific pieces of work to increase patient and public input into key areas of work, including feedback on patients' views of primary care.
- 6.2 Older people have been directly involved in the development of the Age Friendly City Programme through the older people's partnership. In February 2015, the Board hosted a stakeholder conference at UHCW, which was attended by patients, carers, voluntary sector partners and staff from across health and social care to share plans to improve the integration of health and social care.

- 6.3 The work around female genital mutilation has also been driven by people with direct experience of FGM and Voluntary Action Coventry supported a workshop to consult with men about FGM.
- 6.4 Developing effective public and wider stakeholder engagement will continue to be an important priority in 2015/16, including in the development of the next Health and Well-being Strategy.
- 6.5 **Coordination with other boards.** Arrangements have been put in place to strengthen the coordination between the Health and Well-being Board and other key strategic boards, including the Children's and Adults' Joint Commissioning Board, Safeguarding Boards and Police and Crime Board. These include sharing forward plans for the boards and ensuring that there is effective sharing of areas of mutual interest, reduced duplication between boards and clarity around governance of specific areas of work. In 2014/15 this has included a joint meeting between Board Chairs. In addition, in 2014 Coventry hosted a joint development session for Coventry and Warwickshire's Health and Well-being Boards to share priorities and identify potential areas of shared interest.
- 6.6 **Developing priorities for 2015/16.** Key priorities for 2015/16 will be agreed with the Health and Well-being Board and Chair at its first meeting of the new municipal year but it is proposed that these include:
- Continued oversight of health and social care integration, including dementia, and the implementation of Better Care Coventry
 - Oversight of the JSNA and Health and Well-being Strategy including the development of the next three-year strategy.
 - Continued implementation of this year's priorities. This will include Coventry as a Marmot City, Age Friendly City, Active Citizens, Tackling Female Genital Mutilation and other key areas of work included in the current Health and Well-being Strategy.

Name Ruth Tennant

Job Title: Deputy Director of Public Health, Coventry City Council

Contact Details: 024 76 831 606

ruth.tennant@coventry.gov.uk

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Coventry City Council

Briefing note

To: Health and Social Care Scrutiny Board (5)

Date: 22 April 2015

Subject: Review of 2014/15 Scrutiny Activity

1 Purpose of the Note

- 1.1 To review the work of the Scrutiny Board carried out during the course of the 2014/15 municipal year and identify any priorities or issues for consideration when planning next year's scrutiny work programme.

2 Recommendations

- 2.1 The Scrutiny Board is asked to review the activities and issues covered by the Board during the year and make any comments or recommendations for consideration as part of work programming and planning for the 2015/16 municipal year.

3 Information/Background

- 3.1 During the year, the Board has met 9 times and considered the items set out in the work programme, included at item 9 on this meeting's agenda.
- 3.2 The Cabinet Members and portfolio responsibilities covered by the Board are set out in Appendix 1.
- 3.3 To help with the review, it is suggested that the Board include consideration of the following questions:
- 3.3.1 Recognising that the Board cannot cover everything, the work programme was used to prioritise issues for consideration. There are some issues on the work programme that were not covered during the year and some areas of Cabinet Member portfolios that were not addressed. The national and local policy landscape is also constantly changing.
Are there any issues that should be given priority for next year?
- 3.3.2 During the year, Scrutiny Boards have carried out their business through a range of activities including traditional board meetings, task and finish groups and visits. Boards have gathered evidence from and engaged with Cabinet Members, council officers, partner organisations from the public, private and third sectors and members of the public.
What has worked most effectively and what should be taken into account when planning arrangements for next year?

Victoria Castree
Scrutiny Team
024 7683 1122

Health and Social Care Scrutiny Board (5)

Cabinet Member	Portfolio Responsibility
Health and Adult Services	Coventry and Warwickshire Partnership Trust – progress following the CQC Inspection
	Social Isolation
	NHS Targets
	Community Mental Health Services
	Increase in smoking during pregnancy
	Update on Sexual Health Services
	Implementation of the Director of Public Health Annual Report recommendations regarding primary care
	Patient Transport
	Clinical Training
	Deprivation of Liberty Implications
	Care Act
	Section 117 Policy
	Renal Recommissioning
	Clinical Management of Large Scale Chronic Diseases – Progress reports on pilots

Health and Social Care Scrutiny Board (5) Work Programme 2014/15

For more details on items, please see pages 3 onwards

30 July 2014

- Coventry and Warwickshire Partnership Trust (CWPT) Quality Account
- West Midlands Ambulance Services (WMAS) Quality Account
- Patient Transport Services
- Follow up to Peer Review of Adult Social Care

10 September 2014

- Coventry Safeguarding Adults Board Annual Report
- Adult Social Care Local Account
- Patient discharge/winter pressures from UHCW
- UHCW Quality Account

15 October 2014

- Public Health – progress since joining the Council
- Learning Disabilities Strategy
- Increased Community Support through Telecare
- Winterbourne

19 November 2014

- Director of Public Health Annual Report
- Sexual Health Services – proposed re-commissioning
- Overview of the Care Act and Coventry's Preparations for when this becomes Legislation
- ABCS Implementation
- Adult Social Care Complaints and Representations Annual Report 2013-14

10 December 2014

- Mrs D – Progress following SCR
- Winterbourne View
- Update on the Care Quality Commission Wave 1 Pilot Inspection

7 January 2015

- Towards Children and Young People's Emotional Health and Well-being

11 February 2015

- Winter Pressures
- Clinical management of large scale chronic diseases

18 March 2015

- Developing a Primary Care System fit for the Future
- Tobacco Control Policy

22 April 2015

- Review of the Health and Wellbeing Board
- Deprivation of Liberty Implications

Date to be determined

- Coventry and Warwickshire Partnership Trust – progress following CQC Inspection
- Social Isolation
- NHS Targets
- Community Mental Health Services
- Increase in smoking in during pregnancy

Update on Sexual Health Services

Implementation of the Director of Public Health Annual Report recommendations regarding primary care

Patient Transport

Clinical Training

Care Act

Section 117 Policy

Clinical Management of Large Scale Chronic Diseases – Progress reports on pilots

Renal recommissioning

Health and Social Care Scrutiny Board (5) Work Programme 2014/15

Meeting Date	Work programme item	Lead officer	Brief Summary of the issue	Source
30 July 2014	Coventry and Warwickshire Partnership Trust (CWPT) Quality Account	Tracy Wrench (Director of Nursing)	NHS Provider Trusts are required to produce annual statements of quality and outcomes. The Board has a role in providing a short commentary on progress.	Annual Report
	West Midlands Ambulance Services (WMAS) Quality Account	Anthony Marsh, CEX	The Board has asked to receive a short presentation from WMAS on its Quality Account 2014/15, with commentary on measures being taken to address improvements to targets not achieved. They are also interested to have information about the “make ready” process, its impact on the service and patient care in terms of efficiency, effectiveness and financial considerations.	Annual Report and informal Scrutiny meeting 02/07/14
	Patient Transport Services	Steve Allen/ Clare Hollingworth CCG	Review of progress since the Board discussed at its 5 March 2014 meeting the delayed plans to re-commission Patient Transport Services in Coventry and Warwickshire following concerns raised by Healthwatch. West Midlands Ambulance Service to be invited to attend.	SB5 05/03/14
	Follow up to Peer Review of Adult Social Care	Mark Godfrey	Review of progress on the recommendations arising from the Peer Challenge of Adult Social Care that took place in March 2013, including a focus on personalisation, client centred care and managing the adult social care budget. NB The Peer Challenge report specifically recommended that some increased scrutiny on adult social care such as commissioning, transformation and budget plans, and progress on personalisation would now seem timely and that the Board consider further which adult social care matters should be the subject of scrutiny in its programme for 2014/15.	Recommendations from Peer Challenge
10 September 2014	Coventry Safeguarding Adults Board Annual Report	Brian Walsh / Sara Roach/ Isabel Merrifield	This multi-agency Board is responsible for co-ordinating arrangements to safeguard vulnerable adults in the City. The Annual Report sets out progress over the 2013/14 municipal year and provides members with some data to monitor activity. Representatives of the Safeguarding Board to be invited.	Annual Report

Health and Social Care Scrutiny Board (5) Work Programme 2014/15

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Meeting Date	Work programme item	Lead officer	Brief Summary of the issue	Source
	Adult Social Care Local Account	Brian Walsh / Mark Godfrey/ Pete Fahy/ David Watts/ Gemma Tate	This is the annual report of the Council related to services provided to Adult Social Care clients. The report summarises performance, provides commentaries from key partners and representatives of users and sets strategic service objectives for the future.	Annual agenda item
	Patient discharge/winter pressures from UHCW	Rebecca Southall (UHCW) / CCG/ ASC	To include review of effectiveness of 2013/14 winter arrangements and preparations for 2014/15. To include CCG, provider organisations and social care.	Annual item
	UHCW Quality Account	Andy Hardy (Chief Executive)	NHS Provider Trusts are required to produce annual statements of quality and outcomes. The Board has a role in providing a short commentary on progress.	Annual Report c/f from 30/07/14
15 October 2014	Public Health – progress since joining the Council	Dr Jane Moore / Ruth Tennant	Public Health transferred from the NHS to the Council in April 2012. A report has been prepared highlighting progress and achievements since the transfer and the Board would like to review this.	Informal work planning meeting 18/06/14
	Learning Disabilities Strategy	Mark Godfrey/ David Watts/ Lavern Newell	To contribute to the planned review of the strategy	c/f from 2013/14
	Increased Community Support through Telecare	Pete Fahy/ Michelle McGinty	To review the delivery of the high level strategy agreed with health partners, with recommendations to be made to CM (Health and Adult Services) on how the delivery of the strategy is progressed. The Board is interested to hear about the impact with regard to the Aylesford and its proposed cessation; and to understand any changes to the impacts identified.	CM(Health and Adult Services) 17/06/14 Cabinet 17/06/14

Health and Social Care Scrutiny Board (5) Work Programme 2014/15

Meeting Date	Work programme item	Lead officer	Brief Summary of the issue	Source
	Winterbourne	Pete Fahy/ Jon Reading	To consider the report prior to its sign-off by the Health and Well Being Board in November 2014	
19 November 2014	Director of Public Health Annual Report	Dr Jane Moore / Ruth Tennant/ Tanya Richardson	The DPH has a statutory opportunity to issue Annual Reports which provide a commentary of local public health profiles and priorities. (Depending on focus of the report, this could be considered by Scrutiny Co-ordination Committee instead)	Annual agenda item
	Sexual Health Services – proposed re-commissioning	Dr Jane Moore / Nadia Inglis	The Council's Public Health service is re-commissioning sexual health services for the City in partnership with colleagues in Warwickshire. This will provide an opportunity for the Board to review progress once the new contract has been awarded, including how recommendations made at its 2 April 2014 meeting have been followed up.	SB5 02/04/14
	Overview of the Care Act and Coventry's Preparations for when this becomes Legislation	Mark Godfrey/ Emma Bates	Progress report to be submitted to a future meeting of the Board in six months including information on the financial implications. To include information on the Safeguarding Boards preparedness. (Steve Mangan and Mark Godfrey to attend)	SB5 30/04/14 and 30/07/14
	ABCS Implementation	Pete Fahy	The People Directorate is undertaking a significant programme of transformation affecting local people, the organisation, partners and resources. The Board would like to review progress with implementation and understand the impacts, particularly in relation to the way we have worked with partners.	Informal work planning meeting 18/06/14
	Adult Social Care Complaints and Representations Annual Report 2013-14	John Teahan	To review levels of complaints, the way they are managed and how they are used to learn lessons and deliver improvements.	

Health and Social Care Scrutiny Board (5) Work Programme 2014/15

Meeting Date	Work programme item	Lead officer	Brief Summary of the issue	Source
10 December 2014	Mrs D – Progress following SCR	Brian Walsh / Simon Brake	To review progress against the action plan put in place following the Serious Case Review into the death of a vulnerable adult Mrs D, considered by the Board on 18 December 2013.	SB5 18/12/13
	Winterbourne View	Pete Fahy/ Jon Reading	To consider the report prior to its sign-off by the Health and Well Being Board in November 2014 (This items was originally scheduled for October but deferred)	
	Update on the Care Quality Commission Wave 1 Pilot Inspection	Josie Spencer	To provide an update to the Board on progress on the improvements implemented following the Care Quality Commission Inspection.	SB5 April 14
7 January 2015	Towards Children and Young People's Emotional Health and Well-being	Jacqueline Barnes	To consider the report by the West Midlands Quality Review Service into Child and Adolescent Mental Health Service in Coventry and Warwickshire. A number of partner organisations have been invited to the meeting to discuss this report.	
11 February 2015	Winter Pressures	UHCW/CCG/ Social Care	Winter pressures has made headlines throughout January. This is an opportunity to look at how Coventry is coping with winter pressures. UHCW, the CCG and Adult Social Care representatives have been invited to the meeting.	
	Clinical management of large scale chronic diseases	Valerie De-Souza	To review how pathways are being managed in primary care for a range of challenges including diabetes	
18 March 2015	Developing a Primary Care System fit for the Future	Sue Price (Local Area Team) / Ruth Tennant/ CCG	Review of what good primary care looks like and whether different models of provision produce better outcomes. Invite 2 or 3 GP practices and patient panel representatives and Healthwatch in relation to patient engagement. (Needs to link with any Health and Well-being Board work)	c/f from 2013/14
	Tobacco Control Strategy	Berni Lee	To seek approval for the Tobacco Control Strategy – a Cabinet report will be going on 14 th April.	Forward Plan

Health and Social Care Scrutiny Board (5) Work Programme 2014/15

Meeting Date	Work programme item	Lead officer	Brief Summary of the issue	Source
22 April 2015	Review of the Health and Wellbeing Board		The Board would like to review the effectiveness of the working of the HWBB organisationally and corporately.	SB5 30/07/14
Date to be determined	Coventry and Warwickshire Partnership Trust – progress following CQC Inspection	CWPT	To review progress against the action plan put in place following the Care Quality Commission’s review of the Trust, particularly in relation to the enforcement notice and issues relating to Quinton Ward.	SB5 30/04/14
	Social Isolation		The Board would like to understand the extent of social isolation in the city and particularly how this is addressed when people are being supported to live in their own homes. This may involve discussions with representatives of the third sector.	Informal work planning meeting 18/06/14
	NHS Targets		Performance against NHS targets has been raised as a national concern this year, particularly in relation to waiting times for cancer. The Board would like to understand the extent to which targets are being met locally.	Informal work planning meeting 18/06/14
	Community Mental Health Services	Josie Spencer	To provide information to the Board on the services provided through the shared budget of the Better Care Fund in relation to community mental health services and integrated team working.	SB5 10/9/14
	Increase in smoking in during pregnancy			
	Update on Sexual Health Services		To provide an update on sexual health services following the re-commissioning of services for the City in partnership with colleagues in Warwickshire. Suggested that this item is held summer 2015.	SB5 19/11/14

Health and Social Care Scrutiny Board (5) Work Programme 2014/15

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Meeting Date	Work programme item	Lead officer	Brief Summary of the issue	Source
	Implementation of the Director of Public Health Annual Report recommendations regarding primary care	Dr Jane Moore	The Board would like an update of the implantation of the recommendations contained within the DofPH annual report 2014.	SB5 19/11/14
	Patient Transport		To look at the patient transport service and how well it is serving Coventry residents visiting UHCW.	SB5 19/11/14
	Clinical Training		An item linked to the education sector, including the vocational nature of courses. Consideration to be given to the recruitment and retention of staff.	SB5 10/12/14
	Care Act	Mark Godfrey	To look at the Care Act and understand the possible implications for the Council and Residents.	
	Section 117 Policy	Lavern Newell	To be taken in 2015/16	Forward Plan
	Clinical Management of Large Scale Chronic Diseases – Progress reports on pilots	Dr Jane Moore	Future progress reports on the pilot projects are brought for consideration by the Scrutiny Board as and when appropriate.	SB5 11/02/15
	Deprivation of Liberty Implications	David Watts	To inform the Board of the current position with regards to Deprivation of Liberty assessments.	Forward Plan Jan 15
	PALS Service at UHCW		To look at the PALS Service at UHCW following feedback from the Quality Accounts meeting	Quality Accounts March 2015
	Renal Recommissioning	NHS England	To look at progress on the business case.	Councillor suggestion March 2015