

**Meeting: Adult Social Care, Health & Wellbeing Sub-committee**

**Date: 2 June 2016**

**Title: Overview and Scrutiny Work Programme 2016/17**

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**Service: Law and Governance**

**Wards affected: All**

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## **1. Purpose of Report**

- 1.1** To inform Members of the topics received for potential inclusion in the 2016/17 Adult Social Care, Health and Wellbeing Sub-committee work programme, to set-out the work programme process to date and the next steps for finalising the topics to be included.

## **2. Recommendations**

- 2.1** The sub-committee is recommended to agree the work programme items that have been evaluated and prioritised so far and identify any further topics relevant to the remit of the sub-committee that could be included in the 2016/17 work programme.

## **3. Details**

- 3.1** The process of establishing the 2016/17 overview and scrutiny work programme began in February 2016 with an email to all Members and Tier 1, 2 and 3 managers, seeking ideas for topics scrutiny could usefully look at. It was explained with this request that, as in previous years, the focus of overview and scrutiny would be on contributing to policy development.
- 3.2** The Senior Leadership Team discussed the work programme at a meeting in March 2016, helping to identify some key policy areas for scrutiny to focus on. The work programme process and suggestions received to date was also discussed at a meeting of scrutiny chairs and deputies in March 2016.
- 3.3** In addition to asking senior staff and Members to put forward ideas, an article was also placed in the residents' magazine inviting members of the public to raise any issue that they thought would be suitable for scrutiny to investigate. As a result 2 suggestions were submitted: one in relation to Alzheimer's support and one in relation to pedestrian routes.
- 3.4** In order to ensure that the topics selected will deliver the greatest value in terms of policy development, relevant officers have done some preliminary work to scope and evaluate the topics that been received. These have been shared and discussed with the Chair and Deputy Chair at a pre-agenda meeting. A full list of the suggestions received relevant to the Adult Social Care, Health and Wellbeing Sub-committee is attached as

Appendix A. These have been split into topics that would constitute an in-depth investigation (to be undertaken by a sub-group) and monitoring reports that could be dealt with during committee meetings.

- 3.5** In determining which topics should be prioritised for in-depth investigation, the following criteria have been considered:
- Is it timely?
  - Will it duplicate any other work ongoing within the Council or the NECA scrutiny work programme?
  - Will it add value/contribute to policy development?
- 3.6** Topics which meet all three of the above criteria have been prioritised for in-depth investigation. Scoping documents for each in-depth topic put forward for this sub-committee are attached as Appendix B. This scoping document also contains information relating to whether the topic meets the above criteria. Following this evaluation process, it is recommended that the Sub-committee prioritise an investigation into Older People Mental Health.
- 3.7** As has been practice in previous years, it is recommended that sub-groups (of around 4/5 members) be established to carry out the topics that have been selected for in-depth investigation. These sub-groups operate in a more informal way and can consult with a wide range of witnesses in various settings, often over a shorter period of time. When dealing with a specific topic, this focused way of working is often more productive than trying to achieve the same in a formal committee setting. Whilst more than one topic can be prioritised across the municipal year, only one sub-group per committee/sub-committee can be established at any one time due to resourcing restraints.
- 3.8** If there are several in-depth investigation topics identified by a committee/sub-committee that are unlikely to be completed within the municipal year, these can be carried forward to the next municipal year, providing they would still be timely to consider at that time.
- 3.9** During the meeting, Members will have the opportunity to raise any other topics relevant to the remit of the sub-committee that they think should be included in the work programme. Additional topics raised will be scheduled accordingly in consultation with the Chair and the Deputy Chair.

#### **4. Appendices**

**Appendix A** - 2016/17 work programme suggestions for Adult Social Care, Health and Wellbeing Sub-committee.

**Appendix B** – Scoping documents for topics prioritised for in-depth investigation

#### **5. Background Information**

The following documents have been used in the compilation of this report and may be inspected at the offices of the author.

## Appendix A

### In-depth Reviews (by a sub-group)

1 Older Person's Mental Health	To examine the support people living at home with dementia and Alzheimer's receive and how a culture of support can be built around them.
2 End of Life Care	To examine various initiatives to facilitate end of life care and the development of plans to increase choice in this area. As this is a wide area, it would be beneficial to focus on a small number of initiatives to ensure a focused and manageable study.

### Topics to be discussed at sub-committee meetings

- Better Care Fund (BCF) - Monitoring outcomes of the BCF and individual projects
- Urgent Care Strategy (implementation)
- Urgent Care changes and how these will impact on Emergency Care
- The role of assistive technology
- Accountable Care Organisation
- Commitment to Carers' – Monitoring of the actions
- NHS England Commissioning for Carers Principles (self-assessment)
- Healthwatch reports
- Transforming Care Programme and the Crisis Concordat (mental health)
- Feedback from CQC inspections – Northumbria Healthcare Foundation Trust
- Loneliness and Social Isolation
- North East Ambulance Service (covering handover times at NSECH)
- Quality monitoring and sector report from CQC
- Evaluation of the new emergency care model
- Advice and information to prevent and/or delay the need for care and support
- NHS Counter Fraud Team

## Proposed Scope Older People's Mental Health

Title of study		Older People's Mental Health
Originating committee/sub-committee		Adult Social Care, Health and Wellbeing Sub-committee
Membership		
1	Focus of study	
	To examine the support people living at home with dementia and Alzheimer's receive and how a culture of support can be built around them.	
2	Objectives	
	<p>To determine the extent to which all community health care professionals are trained to detect the signs of dementia and Alzheimer's and the skills they are equipped with to provide support to individuals and families.</p> <p>To determine whether any improvements could be made to the services delivered.</p> <p>To add value to work that is being done in terms of developing an Older Person's Mental Health Strategy.</p>	
3	Key questions	
	<p>What services are currently available to support patients living at home with dementia or Alzheimer's?</p> <p>What research has been collected on the feedback/experiences of the support families receive when caring for an Alzheimer's/dementia patient?</p> <p>What additional support is available to individuals living at home without any family/friends support network?</p> <p>Do GP practices have dementia champions in place so that someone with specialist knowledge is available to support other staff and patients and their families?</p>	
4	Obtaining evidence	
	<p>Officers from Adult Social Care</p> <p>Feedback from service users.</p>	

5	Support required by the group/sub committee
	Officers in Adult Social Care. Democratic Services support in administering meetings, carrying out research and writing the final report.
6	Consultees for draft report
	All those consulted during the study.
7	Date draft report required
	TBA
8	Date final report required
	TBA
9	Evaluation
	Any recommendations reported to Cabinet will require a response within 2 months, under the requirements of Section 122 of the Local Government and Public Involvement in Health Act 2007. Cabinet will be asked to clearly state whether or not it accepts the recommendations and the reasons for this decision. Cabinet must indicate what action, if any, it proposes to take.  If recommendations are accepted by Cabinet, the proposed action to implement the recommendations can be monitored by the sub-committee.

## Evaluation of topic

### - Is it timely?

Yes, the study will compliment other work being undertaken around older people's mental health.

### - Will it duplicate any other work ongoing within the Council or the NECA scrutiny work programme?

It won't duplicate any work, rather the outcomes of the scrutiny study will feed into the development of the Older Person's Mental Health Strategy.

### - Will it add value/contribute to policy development?

Yes, as above, it will feed into the Older Person's Mental Health Strategy.

## Proposed Scope – End of Life Care

Title of study	End of Life Care
Originating committee/sub-committee	Adult Social Care, Health and Wellbeing Sub-committee
Membership	
1	Focus of study
	To examine the various initiatives to facilitate end of life care and the development of plans to increase choice in this area. As this is a wide area, it would be beneficial to focus on a small number of initiatives to ensure a focused and manageable study.
2	Objectives
	There have been recent developments in the delivery of end of life care. A scrutiny study could look at the implementation of specific elements of these changes and the observed benefits they have brought. Members could specifically look at Hospice at Home (aka RAPID) and enhanced primary care in care homes.
3	Key questions
	What options are available for end of life care and the extent to which individual wishes are able to be granted?  How have the changes to looking after patients in a care home setting been implemented and has this decreased the admissions to hospital from people in a care home setting?
4	Obtaining evidence
	Officers from Adult Social Care Representatives of the CCG Potentially service users
5	Support required by the group/sub committee
	Officers from Adult Social Care. Information will be required from the CCG and trust. Democratic Services support in administering meetings, carrying out research and writing the final report.
6	Consultees for draft report
	Officers involved in providing evidence Any service users consulted
7	Date draft report required
	TBA
8	Date final report required

	TBA
9	Evaluation
	<p>Any recommendations reported to Cabinet will require a response within 2 months, under the requirements of Section 122 of the Local Government and Public Involvement in Health Act 2007. Cabinet will be asked to clearly state whether or not it accepts the recommendations and the reasons for this decision. Cabinet must indicate what action, if any, it proposes to take.</p> <p>If recommendations are accepted by Cabinet, the proposed action to implement the recommendations can be monitored by the sub-committee.</p>

### Evaluation of topic

- **Is it timely?**

The sub-committee discussed End of Life Care with the CCG during 2015/16. To avoid any repetition of this work, End of Life Care should be considered later in the municipal year and focused on the areas identified above.

- **Will it duplicate any other work ongoing within the Council or the NECA scrutiny work programme?**

Duplication will not take place if the study is kept focused to specific areas.

- **Will it add value/contribute to policy development?**

Yes, it will help to determine if all is being done to implement end of life care initiatives and if the perceived benefits associated with these are being met. This will help improve services for residents.