

**HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL (V3)**

**POTENTIAL ISSUES IDENTIFIED FOR INCLUSION IN THE WORK PROGRAMME 2017/18**

Issue	Put forward by	Approach and areas of focus	OFFICER/ HEALTH PARTNER COMMENTS
<b>FULL PANEL DISCUSSION ISSUES</b>			
<p><b>1. Financial position of North Kirklees CCG and Greater Huddersfield CCG</b></p>	<p>Carried forward from 2016/17</p>	<p>The Panel has received an update on the CCG’s financial position and agreed to continue to monitor the CCG’s finances to include:</p> <ul style="list-style-type: none"> <li>• A focus on the work being undertaken to reduce costs and increase efficiencies to include :               <ul style="list-style-type: none"> <li>○ Monitoring the impact of the ‘Talk Health Kirklees’ campaign.</li> <li>○ Assessing the various CIP’s and reviewing the impact of any proposed changes to the commissioning of services.</li> </ul> </li> <li>• Considering the wider transformation programmes being undertaken by both Greater Huddersfield CCG &amp; North Kirklees CCG to include assessing their: contribution to increasing efficiencies and impact on services. (Potential to merge with the North Kirklees Transformation programme detailed below).</li> </ul>	<p><b>South West Yorkshire Partnership Foundation Trust (SWYPFT)</b></p> <p>No issues in the short term as contracts signed re 17/18, but CCG’s financial position may have implications longer term re impact on non-acute services.</p>
<p><b>2. North Kirklees CCG Transformation Programme</b></p> <p>NK CCG’s ambition is to move towards population based commissioning and break down the silos in current service delivery in order to focus on integrated patient centred care and health and wellbeing, whilst reducing health inequalities for the local population.</p>	<p>Carried forward from 2016/17</p>	<p>7 February 2017 – The Panel received an update on the development and implementation of a range of programmes which support the CCG’s ambition.</p> <p>No further areas of work have been identified and the Panel will need to consider its approach to monitoring this area of work. The Panel noted that the NKCCG programme is closely linked to the work that is being developed through CC2H, the Healthy Child Programme (HCP) and Meeting the Challenge</p>	<p><b>SWYPFT</b></p> <p>Locala are the lead for the Healthy Child Programme but SWYPFT, as a sub-contractor of the services, would be happy to contribute as required.</p> <p><b>Commissioning, Public Health and Adult Social Care (CPA)</b></p> <p>Potential for this item to be withdrawn from the</p>

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			programme with the Panel focusing on the various strands of work being developed through CC2H, HCP and Meeting the Challenge.
<p><b>3. Kirklees Sustainability and Transformation Plan (STP)</b></p>	<p>Carried forward from 2016/17</p>	<p>To maintain an overview of the Kirklees STP including :</p> <ul style="list-style-type: none"> <li>• Progress of the implementation of the plan;</li> <li>• Monitoring impact of changes;</li> <li>• Assessing how local changes fit/link with the wider transformational changes taking place across West Yorks</li> </ul>	<p><b>CCGs</b> Have suggested that it may be of benefit for the Panel to include a focus on public sector estate.</p> <p>There are likely to be some areas of proposed primary care development in Huddersfield e.g. Princess Royal that will be useful to update the Panel on. Timescales for updates are likely to be better if scheduled towards the end of the year.</p> <p>These updates can be done through the STP item or alternatively included as an item for Lead member briefing.</p>

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<b>FULL PANEL DISCUSSION ISSUES</b>			<p><b>Calderdale and Huddersfield NHS Foundation Trust (CHFT)</b>                      For the Panel to assess decisions being made at a West Yorkshire STP level, and how these impact on the local population. The two services that spring to mind at the moment are provision of Vascular Surgery and Stroke Services.</p> <p><b>SWYPFT</b>                      Happy to provide input covering Mental Health and Learning Disability streams as required.</p> <p><b>CPA</b>                      To Note that Cllr David Sheard has been appointed as Chair of the Health and Wellbeing Board and will be leading on this work.</p>
<p><b>4. Healthwise Optimisation Programme</b>                      An initiative being considered by the CCG's that will support people prior to surgery who are deemed to be at higher risk of complications that can occur during or after surgery. Initial</p>	<p>Health and Social Care Scrutiny Panel</p>	<p>Consider an overview of the programme including planned timescales for development and implementation of the programme.</p>	<p><b>SWYPFT</b>                      No specific issues to highlight unless the Panel wish to look at the links between physical and Mental Health.</p>

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<b>FULL PANEL DISCUSSION ISSUES</b>			
<p>areas of focus will cover obesity and smoking.</p>			
<p><b>5. Integration of Health and Social Care</b> The integration of Health and Social Care is at the centre of government reforms and with the introduction of STP's there is a clear expectation for there to be significant measurable progress in health and social care integration by 2020.</p>	<p>Carried forward from 2016/17</p>	<p>To maintain an overview of progress of the Integration of Health and Social to include: considering how performance will be measured; assessing the pace of change; and reviewing the impact on the standard and quality of services being delivered in Kirklees.</p> <p>In addition the Panel will also consider the overall impact of the reductions in budgets across the whole of the health and social care economy to include assessing if there is any disproportionate impact on certain groups.</p> <p>The Panel will receive an update report to include an outline of the action plan early in the 2017/18 municipal year. (there is a potential to merge this area of work with item 20 Better care Fund)</p>	<p><b>SWYPFT</b> Not applicable at a strategic level but there are links at an operational level such as the integrated teams that the Panel may wish to consider.</p> <p><b>CPA</b> Support the inclusion of this work item. Due to the broad area of work it is suggested that the Panel may find it helpful to have a discussion with CPA in order to scope out specific areas of focus.</p> <p>Integration is moving at a pace and would agree this area of work could be linked with item 20 – Better Care Fund and include a focus on integrated commissioning.</p>
<p><b>6. CQC Inspections</b></p>	<p>Carried forward from 2016/17</p>	<p>To maintain an overview of the progress of the Action Plans developed by a number of local providers following an CQC inspection including:</p> <ul style="list-style-type: none"> <li>• South West Yorkshire Partnership NHS Foundation Trust</li> <li>• Mid Yorkshire Hospitals NHS Trust</li> </ul>	<p><b>CCGs</b> Suggestion to consider including GPs to the list of providers with a focus on the small number of practices that have been rated as</p>

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		<ul style="list-style-type: none"> <li>• Calderdale and Huddersfield NHS Foundation Trust</li> <li>• Locala Community Partnerships</li> </ul>	inadequate. <b>SWPFT</b> Quality summit held 13 June 2017 and final report can be made available to the Panel.
<b>7. Early Intervention and Prevention (EIP) – All Age Disability</b>	Carried forward from 2016/17	The Panel will receive regular update reports on the following EIP /All Age Disability workstreams:- <ul style="list-style-type: none"> <li>• Adults Pathway (to include supporting carers, volunteering, community capacity building, grant funding) – scheduled for July 2017</li> <li>• YPAT – short breaks and respite care</li> </ul>	<b>SWPFT</b> Not applicable at a strategic level, but there are links to the work that SWYPFT are doing in localities including: volunteering, Recovery Colleges and Carers charter. <b>CPA</b> Proposed approach would be to have two scheduled updates during the year to include one interim update followed by a more detailed review in Q4 (Jan – March 2018) that summarises progress across 2017. Areas of focus to include : progress ; impact on people ; quality ; and performance
<b>8. Kirklees Joint Strategic Assessment (KJSA)</b> KJSA is seen as the local foundation of priority setting, informing	Carried forward from 2016/17	Item was included in the 2016/17 Work Programme (WP) but due to the volume of work it was agreed to move to the 2017/18 WP.  Areas of focus:	<b>CPA</b> Proposal that this item is taken alongside the Kirklees element of the STP with the

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<p>commissioning strategies and plans and helping local people to hold providers and commissioners to account. The strategy provides the framework for joint commissioning plans and specific, detailed commissioning plans for the NHS, social care and public health. The JSA was being refreshed during 2015/16.</p>		<ul style="list-style-type: none"> <li>• An overview of the process that is followed in the development of the KJSA</li> <li>• Presenting an example of the work that is carried out on updating a section of the KJSA</li> <li>• Outlining the approach that is taken to implementing actions to address the issue(s) and monitoring progress.</li> </ul> <p>Officer Leads: Helen Bewsher/Rachel Spencer-Henshall</p>	<p>focus on how it's used and less emphasis on how it's put together.</p>
<p><b>9. The Healthy Child Programme (0-19 services)</b> The Kirklees Integrated Healthy Child Programme (KIHCP) is seen as a catalyst for transforming work with children and young people across a range of systems, interventions, sectors and services over the next 5 - 10 years.</p>	<p>Carried forward from 2016/17</p>	<p>7 March 2017 - The Panel were presented with an update on the KIHCP procurement process; the approach being taken to implementing the programme; and progress of implementation. The Panel has agreed to maintain an overview of the development of the service.</p> <p>A report is scheduled to be considered by the Panel in September 2017.</p>	<p><b>Mid Yorks Hospitals NHS Trust</b> To enhance the 0-19 service healthy child programme update item the Panel could look at how the system is working to ensure "Children have the best possible start in life". This is the most important priority for all sorts of reasons and the Trust believes it would be timely to have a deep dive into this topic.</p> <p><b>SWYPFT</b> Locala are the lead provider but SWYPFT does have input on Child and Adolescent Mental Health Services.</p>

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<b>FULL PANEL DISCUSSION ISSUES</b>			<p><b>CPA</b> Support the continued focus on maintaining an overview of this area of work.</p>
<p><b>10. Integrated Wellness Model</b> The wellness approach goes beyond looking at single-issue, healthy lifestyle services with a focus on illness, and instead aims to take a whole-person and community approach to improving health. Based on self-care and intervening as early as possible but as late as necessary, it is clear that individuals who manage their own lifestyles are healthier, more productive, have fewer absences from work, and make fewer demands for medical and social services.</p>	<p>Carried forward from 2016/17</p>	<p>7 March 2017 - The Panel received an update on the progress of work that has taken place to develop a Kirklees Wellness Model. Panel has agreed to keep the issue on the Work Programme and for a further update to be scheduled to include:</p> <ul style="list-style-type: none"> <li>• Scoping out the detail of the Wellness Model’s functions;</li> <li>• Developing the details for the Service Specification;</li> <li>• Producing a timeline to include key milestones and decision making;</li> <li>• Understanding the outcomes and impact for service users; and</li> <li>• Clarification on what services/provision will align virtually or work on the periphery of the model.</li> </ul>	<p><b>CPA</b> Support the continued focus on maintaining an overview of this area of work.</p>
<p><b>11. Robustness of Adult Social Care</b></p>	<p>Amanda Evans</p>	<p>A report is scheduled to be considered by the Panel in October 2017, which will include homecare provision; state and resilience of the adult social care market; and an update on preparations for winter.</p>	<p><b>CPA</b> Confirm that timescale for this item should be October 2017 once the contracts are in place for domiciliary care.</p>
<p><b>12. Attention Deficit Hyperactive Disorder (ADHD) – Adults</b></p>	<p>Carried forward from 2016/17</p>	<p>4 April 2017 - The Panel were presented with an update on waiting times and numbers for Adult ADHD and an overview of the work that was being developed to enhance the capacity of service and improve the consistency of the service delivered across West Yorks. The Panel has agreed to arrange a further update at a date to be arranged</p>	<p><b>CPA</b> Agree this is important but when taking into account the totality of the scrutiny work programme the Panel may wish to consider assessing</p>

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			where this issue fits within the overall priority of the Panel WP.
<b>13. Quality of Care in Kirklees</b>	Carried forward from 2016/17	In April 2017 CQC presented to the Panel an outline of its activity and an overview of the outcomes of the inspections in Kirklees. It was agreed that a further update be arranged with a focus on adult social care at date to be confirmed.	
<b>14. Suicide Prevention</b> The House of Commons Health Committee has recommended to Government that health overview and scrutiny committees should be involved in ensuring effective implementation of local authorities' suicide prevention plans. This should be established as a key role of these committees. Effective local scrutiny of a local authority's suicide prevention plan should reduce or eliminate the need for intervention by the national implementation board.	National Recommendation	The Panel will need to view and assess the Kirklees Suicide Prevention Plan and agree its approach to monitoring the effectiveness of the Plan.	<b>SWYPFT</b> SWYPFT's deputy director of nursing is leading on this work stream which is included in the West Yorks STP and would be happy to assist the Panel.
<b>15. Changes to Podiatry Services – outcomes of consultation</b>	Locala/GH CCG – S True/R Flack/V Dutchburn	A report on the outcomes of Locala's consultation on the Changes to Podiatry Services is scheduled to be considered by the Panel in November 2017.	
<b>16. Mental Health Services – Transformation Programme</b> SWYPFT are continuing to work through a major service	Carried forward from 2016/17	Panel to receive an update on the progress of the programme including: an overview of the key services that are/have been transformed; details of where implementation has taken place; and an overview of emerging outcomes including lessons learned.	<b>SWYPFT</b> Update could be provided jointly with CCG. Suggested timescale is Spring 2018.

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<p>transformation programme with a focus on: recovery; putting more people in charge of the care they get; providing more support to people when they need it; helping people to leave hospital when they are ready; and ensuring that GP's stay at the heart of care</p>			
<p><b>17. Care Closer to Home (CC2H)</b> CC2H remains a key transformational change for Clinical Commissioning Groups (CCG's). A key aim of CC2H is to develop an integrated community based health care service for all including the frail, vulnerable, older people and end of life care. The programme has critical inter-dependencies with the two hospital services programmes (Righty Care Right Time Right Place and Meeting the Challenge). The CC2H contract is delivered by Locala and GHCCG is the lead commissioner.</p>	<p>Carried forward from 2016/17</p>	<p>7 February 2017 – The Panel considered an update on the implementation of the programme and received the February 2017 copy of the Locala Quality Dashboard.</p> <p>Areas that the Panel has agreed to focus on include:</p> <ul style="list-style-type: none"> <li>• Maintaining an overview of progress of the programme;</li> <li>• Assessing the effectiveness of CC2H in supporting the two hospital services programme with a particular focus on the changes taking place across Mid Yorkshire Hospitals Trust.</li> <li>• Considering the impact of the reduction in funding for community pharmacy on the programme.</li> </ul> <p>In addition panel members will need to undertake a further review of the Locala Quality Dashboard to identify if there are any themes they wish to focus on.</p>	
<p><b>18. CCGs' Primary Care Strategies</b> Greater Huddersfield CCG and North Kirklees CCG have developed Primary Care Strategies which are seen as key elements of their respective strategic work</p>	<p>Carried forward from 2016/17</p>	<p>The Panel will review both strategies at its informal meeting 16 May 2017.</p> <p>In addition the Panel will:</p> <ul style="list-style-type: none"> <li>• Consider if there are any specific elements that require a more detailed assessment.</li> </ul>	

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<b>FULL PANEL DISCUSSION ISSUES</b>			
programmes		<ul style="list-style-type: none"> <li>Assess the approach to monitoring the implementation of the strategies to include performance indicators.</li> <li>Look at the development of GP Federations in Kirklees and assess their role in the wider health care landscape.</li> </ul>	
<b>19. Developing a working protocol with Healthwatch Kirklees and Kirklees Health and Wellbeing Board</b>	Carried forward 2016/17	Further work is required to finalise the protocol. Lead member to agree a final draft before presenting to the wider panel for sign off.	
<b>20. Health and Wellbeing Board – Better Care Fund (BCF)</b> The BCF provides a significant financial incentive for the integration of health and social care. CCG's and LA's are required to pool budgets and agree an integrated spending plan on how they will use their BCF allocation.	Health and Social Care Scrutiny Panel	Approach to assessing this item to be confirmed.  (potential to merge with Item 5 Integration of Health and Social Care)	

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<b>LEAD MEMBER BRIEFING ISSUES</b>			
<b>21. Care Act 2014</b>	Carried forward 2016/17	Lead Member to maintain an overview of the implementation of the reforms on the Council including impact of financial challenges and rising demand; and workforce challenges.	<b>CPA</b> Would suggest that consideration be given to withdrawing the item from the WP given the length of time that has passed since the Care Act was implemented.

<p><b>22. Changes to GP Contracts</b> Following a national review of the Personal Medical Services (PMS) contract all practices will be moved into a core funding contract and to ensure equitable funding the additional funds from the PMS contracts will be more fairly distributed across all practices.</p>	<p>Carried forward 2016/17</p>	<p>In July 2016 the Panel considered a report from GHCCG on the changes to GP contracts, funding and implications for practices in Greater Huddersfield. The Panel was informed of on local practice that was in dispute with NHS England about the process and policy and the funding regards this practice remains unclear.</p> <p>Lead Member will continue to monitor the situation and report back to the Panel.</p>	<p><b>CCGs</b> Agreement now reached with the local practice and will provide an update to the Lead Member at the next scheduled briefing session.</p>
<p><b>23. Deprivation of Liberty Safeguards</b></p>	<p>Carried forward 2016/17</p>	<p>Lead Member to maintain a watching brief and arrange for a year end update report to be distributed to the wider panel.</p>	<p><b>CPA</b> Support the continued inclusion of this item supported by a report for information.</p>
<p><b>MONITORING ITEMS</b> Routine follow up to previous recommendations to demonstrate Scrutiny outcomes</p>			<p><b>OFFICER /HEALTH PARTNER COMMENTS</b></p>
<p><b>Issue</b></p>	<p><b>Areas of Focus</b></p>		
<p><b>24. Tuberculosis (TB) in Kirklees</b></p>	<p>Following an update in April 2016 the Panel agreed to continue to monitor TB in Kirklees to include arranging a further update to cover:</p> <ul style="list-style-type: none"> <li>• Looking at the work being undertaken to reduce TB rates in Bradford and Leeds and to highlight examples of good practice.</li> <li>• Getting clarification on staffing ratios for the current TB nursing establishment as per the recommendations from the Royal College of Nursing.</li> <li>• Receiving an action plan on the work being undertaken in Kirklees to reduce the high levels of TB in the borough.</li> </ul>		
<p><b>25. Review of Mental Health Assessments</b></p>	<p>Panel will need to agree a time line for reviewing progress of the recommendations of the Ad-hoc Panel following the presentation of the report to Cabinet 25 July 2017.</p>		<p><b>CPA<sup>1</sup></b> It may be helpful to continue to monitor this alongside the SWYPFT transformation programme</p>

<sup>1</sup> **General Comment from CPA:** It would be helpful to clarify whether an item is being considered as “pre-scrutiny” to assist the formation of an item or as a review of a decision made or the implementation of that decision.

PROPOSED NEW ITEM	AREAS OF FOCUS	OFFICER/HEALTH PARTNER COMMENTS
<p><b>26. Interim Changes to hospital services</b></p> <p>To scrutinise any interim changes to hospital services that the Calderdale and Huddersfield NHS Foundation Trust (CHFT) are considering prior to reconfiguration.</p>	<p>CHFT are currently reviewing inpatient provision of Cardiology, Respiratory and Elderly Medicine.</p>	<p>New item proposed by CHFT</p>