HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL

MEMBERS: Cllr Bill Armer (Lead Member), Cllr Beverley Addy, Cllr Itrat Ali, Cllr Jo Lawson, Cllr Alison Munro, Cllr Habiban Zaman, Helen Clay (co-optee), Kim Taylor (co-optee).

SUPPORT: Richard Dunne, Principal Governance Officer and Yolande Myers, Principal Governance Officer

THEME/ISSUE	APPROACH AND AREAS OF FOCUS	OUTCOMES
Resources of the Kirklees Health and Adult Social Care Economy	To consider the resources of the health and social care system in Kirklees to include: • An overview of the financial position of the local health and social care system to include: the work that is being carried out to meet current year budgets; and to identify any risks.	
2. Capacity and Demand – Kirklees Health and Adult Social Care System	 To monitor the work being done by Kirklees core physical providers to manage demand and catch up with delayed planned surgery, therapeutics, and diagnostics to include: Receiving updated data on waiting list times by service to assess progress against data received by the Panel last year (August 2022) to include: update on waiting times for children requiring dental extractions under general anaesthetic and actions being taken to reduce delays (see item 7). An update on diagnostic waiting times. An update on the management of waiting lists and plans to reduce and catch up with delays in planned surgery with a particular focus on the numbers of people waiting 52 weeks or longer. Review of cancelled elective/ planned procedures. Considering new developments and initiatives, such as the community diagnostic hubs, that are being introduced to address the backlog. 	

3. Joined up Care in Kirklees Neighbourhoods	 To continue to review the work of health services in the community to include: Assessing progress of the integration of services and workforce. Considering the work that is being done locally to action the national delivery plan for recovering access to primary care. An update on the work of community pharmacy and the proposals from Government and NHS on price concessions reform and relief measures to ease pressure on pharmacies. 	
4. Mental Health and Wellbeing	 An overarching theme that looks at services that focus on providing support in areas that cover mental health and wellbeing to include: A focus on access to inpatient services including the proposals for transforming Older People's Mental Health Inpatient services. Look at the work being undertaken by the Kirklees Integrated Wellness Service and the Thriving Kirklees Single point of Access Service with a focus on CAMHS. 	
5. Managing capacity and demand	 To look at the work that is being done in the community to reduce unnecessary admissions to hospital to include: Considering the actions and initiatives to support hospital avoidance and provide the appropriate level of care and support at or closer to home. To look at the work being done by the local authority and Locala on providing reablement support to include work being done predischarge, during discharge and post discharge. To review the data on the numbers of discharges and readmissions (after 28 days) from all health care settings over the last 12 months. 	

6. Maternity Services	 To follow up on the concerns of the Panel that women who live in Kirklees are currently unable to access a birth centre located in their local district to include: An update on the work being done by CHFT and MYHT to reintroduce birthing centres in Kirklees. Establishing a timeline for the reopening of services and submission of the proposed maternity services model for Kirklees. An update on maternity services workforce. Formally agreeing next steps to include the approach to communicating and publicising the issue. 	
7. Access to dentistry	 To follow up on the concerns of the Panel regarding the significant delays for children requiring dental extractions under general anaesthetic to include: An update from Locala, CHFT and MYHT on the actions being taken to enable the availability of appropriately staffed theatre time to support the management of the waiting list. Input from the West Yorks Integrated Care Board (WYICB) to include its response to the delays as the new commissioner of dental services in West Yorkshire. 	
8. Kirklees Safeguarding Adults Board (KSAB) and the Care Quality Commission (CQC)	 To receive and consider the KSAB Annual Report 2022/23 in advance of discussions with the KSAB Independent Chair to enable the Panel to identify areas of concern and/or interest. Receive a presentation from CQC on the State of Care of regulated services across Kirklees. To arrange a discussion with both KSAB and CQC to help provide the Panel with an overview of the quality and safety of adult social care provision. 	

9. Adult Social Care (ASC)	 To continue to focus on the services being delivered by Kirklees Adult Social Care to include: Considering the new CQC inspection areas of responsibility to understand the assurance regime. Looking at the Council's approach to preparing for the CQC inspections. To look at emerging themes and outcomes from the CQC pilot inspection sites. Workforce challenges. Receive details of the broader range of changes that the Council is developing to improve the social care offer. 	
10. Joined up hospital services in Kirklees.	 To look at the work being developed by Calderdale and Huddersfield NHS Foundation Trust and Mid Yorkshire Teaching NHS Trust to provide joined up services in Kirklees to include: The approach to delivering non-surgical oncology services for Kirklees residents. The approach being taken to develop the partnership working between the two trusts including details of other services that have the potential to be jointly delivered and/or supported. 	
11. External Consultancy	Adult social care has recently instructed an external commission consultant to support the identification of pathway and demand efficiencies. The commission will take the form of an exploration/analysis stage and then a potential change programme of work to embed efficiency opportunities.	

Golden Threads: Workforce recruitment and retention.

Impact of Covid-19.

Performance data to be included where appropriate to inform the individual strands of work.

Inequalities in health to include checking the work being done to promote the range of services and support available to deprived communities and actions/initiatives to increase uptake of services and screening programmes.

