HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL – WORK PROGRAMME 2018/19

MEMBERS: Cllr Liz Smaje (Lead Member), Cllr Nell Griffiths, Cllr Fazila Loonat, Cllr Alison Munro, Cllr Gemma Wilson, Cllr Habiban Zaman, Peter Bradshaw (Co-optee), David Rigby (Co-optee).

SUPPORT: Richard Dunne, Principal Governance & Democratic Engagement Officer

	FULL PANEL DISCUSSION		
	ISSUE	APPROACH/AREAS OF FOCUS	OUTCOMES
1.	Financial position of the Kirklees Health and Adult Social Care Economy.	 Maintain a focus on the finances of the health and social care system in Kirklees to include: Reviewing any emerging transformation programmes and assessing their contribution to increasing efficiencies and impact on services. Considering the various Cost Improvement Schemes (CIPs) and their impact on the delivery and commissioning of services. 	 Panel meeting 19 June 2018 The Panel received an update on the financial position of the health and adults social care economy. The Panel agreed : To look in detail at the Cost Improvement Plans from NHS Partners and the Council. That the Panel would wish to see more discussions taking place across CCG and Acute Trust areas to better support the work of Place in Kirklees. To receive a copy of the Kirklees Integrated Commissioning Boards Work Plan. To receive a copy of the Winter Pressures report that will go to the Kirklees Health and Wellbeing Board
2.	Kirklees Health and Wellbeing Plan (STP) to include work emerging from the West Yorkshire and Harrogate Health and Care Partnership (WY&H HCP)	 Monitor progress and implementation of the Local and West Yorkshire plans to include: Assessing any emerging proposals (West Yorkshire wide) that relate to the measures that were proposed within the Health Optimisation Programme (withdrawn locally by the CCGs). 	

FULL PANEL DISCUSSION

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	 Reviewing any West Yorkshire wide reconfiguration proposals and assessing their impact on local services. Assessing progress and effectiveness of the Care Closer to Home programme with a focus on the progress being made in reducing demand on hospital services including winter pressures. Considering the governance arrangements for West Yorkshire and Harrogate Health and Care Partnership. This has been scheduled for the Panel meeting 14 August 2018. 	
3. Integration of Health and Adult Social Care	 Continue to monitor the planned activity outlined in the Integrated Kirklees Commissioning Plan. Assess the impact of the work on the robustness of Adult Social Care. Assess how effectively the Better Care Fund is being used to support and progress the work on integration. Review the effectiveness of the implementation of the integrated approach to the delivery of community services through Care Closer to Home. Looking at Primary Care in Kirklees and the role of GPs in supporting the delivery of Care Closer to Home. 	
4. CQC inspections	Review progress of key local providers following a CQC inspection to include looking at the provider action plan and outcomes.	

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5. Integrated Wellness Model	Receive an update following completion of the procurement process.		
6. Quality of Care in Kirklees	Receive an annual presentation from CQC on the State of Care across Kirklees		
7. Suicide Prevention	 Review progress of the Kirklees Suicide Prevention Action Plan to include: Looking in more detail at the relationship between the West Yorkshire and Harrogate Health Care Partnership (WYHCP) Suicide Prevention Strategy and the Kirklees Strategy/Plan. Challenges of data sharing. The work with GPs. Looking at the overall local financial envelope to support the Council's work on suicide prevention. 		
8. Podiatry Services	 Maintain an overview of the implementation of the new service to include : Assessing the impact on individuals who are housebound. Assessing the outcome of the further review of transport options to include a focus on the impact on services users of those clinics proposed for closure (particularly the centrally located clinics). Reviewing feedback of the alternative provision being provided by Age UK. 		

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9. Mental Health Services – Transformation Programme	 Areas of focus to include: Overview of progress of the programme to include timelines covering key areas of transformation work. Where implementation has taken place considering the emerging outcomes and lessons learned. Consideration to be given to having a wider session on mental health services to include suicide prevention. 	
10. Interim Changes to Acute Inpatient Elderly Medicine, Cardiology and Respiratory Services provision at Calderdale and Huddersfield NHS Foundation Trust (CHFT).	 Panel visit to CHFT to see first-hand the changes that have taken place. Subject to outcomes of the visit and panel sign off move item to Lead Member briefings to monitor impact of changes. 	
11. Wheelchair Services	 Follow up progress of panel recommendations from meeting held in January 2018. Review plans being developed to reprocure services to include considering the proposed model and if required consultation plan and document. This has been scheduled for the Panel meeting 14 August 2018. 	
12. Adult Care Offer Consultation	To receive and consider:• Results from the analysis of the consultation.• The draft proposalsThis has been scheduled for the Panel meeting 17 July 2018.	

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13. Kirklees Safeguarding Adults Board (KSAB) 2017/18 Annual Report	To receive and consider the KSAB Annual Report.	
14. Mental Health Rehabilitation and Recovery Services Transformation Project.	 To receive and consider : Details of the new proposed service. The Communication and Engagement Plan. This has been scheduled for the Panel meeting 17 July 2018. 	
15. Carers in Kirklees	 An adult safeguarding review undertaken by Healthwatch Kirklees focused on the feedback of the experience of people with dementia and their carers. The report highlighted the important role of carers and the challenges they faced when trying to help a family member or friend with dementia navigate the social care support pathways. Has been identified as having the potential for being a focused pieced of work that could potentially be undertaken as a task oriented (ad hoc) review. An initial scoping exercise will be carried out to identify the key areas of focus 	
16. Diabetes in Kirklees	To receive an update on prevalence rates in Kirklees and to look more closely at the work being done by Public Health to help people manage and control the condition.	

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	This area of work may also be developed through the Health and Wellbeing Plan and would potentially help to inform the work of the Panel.	
17. NHS Continuing Healthcare	Continuing care means care provided over an extended period of time, to a person aged 18 or over, to meet physical or mental health needs that have arisen as a result of disability, accident or illness.	
	 Areas of focus could include: Getting an overview from CCGs of what has happened to continuing care over the last 3 years; Looking at the impact it has had on the authority in the last few years. 	
	LEAD MEMBER BRIEFING ISSUES	
ISSUE	APPROACH/AREAS OF FCOUS	
1. Care Act 2014	Maintain a High level overview of the implementation of the Act.	
All Aco Dischility and Adult Dathways	This could be picked up alongside the Green Paper and the Care Offer	
2. All Age Disability and Adult Pathways	Monitor progress of the various transformational workstreams and the redesign of Adult Services pathways. This could also be picked up as part of the Adult Care Offer Consultation work and the Green Paper.	
3. Deprivation of Liberty Safeguards	Maintain a High Level overview of the numbers and impact on service. This could be considered as part of the robustness of social care.	
4. Healthy Child Programme	Maintain an overview of the progress of the implementation of the programme to include: feedback from practioners and services users; and assessing the CAMHS cancellation policy.	

MONITORING ITEMS	
ISSUE	APPROACH/AREAS OF FOCUS
1. Review of Mental Health Assessments	An update outlining progress on the recommendations from the review was issued to the Panel in April 2018. It has been identified that further work on dual diagnosis is required. This work will initially be led by the Lead Member and one other member from the Ad Hoc Panel. Findings will be reported back to full panel to consider next steps.