
OVERVIEW OF HEALTH AND PARTNERSHIP SCRUTINY COMMITTEE

1. Since the last meeting of the Council, the following are the main areas of work the Health and Partnership Scrutiny Committee has undertaken:-
 - (a) **Health and Wellbeing Board** – We have received a progress report from the Chief Executive following a discussion at the Tees Valley Health Scrutiny Joint Committee meeting on 26th March 2012, where each of the five Tees Valley Local Authorities were invited to outline the progress being made in establishing a local Health and Well Being Board (HWBB). Each Local Authority was asked to specifically address the progress has been made on establishing a HWBB, how the HWBB has gone about starting to build its key relationships, how the HWBB is beginning to set priorities and what they are and the HWBB’s early thoughts on how it will ensure it has access to appropriate expertise to fulfil its intended planning and strategic role. We have welcomed the steady progress made by Darlington and look forward as the HWBB develops.
 - (b) **Darlington Shadow Clinical Commissioning Group** – The Interim Deputy Chief Operating Officer, Darlington Shadow Clinical Commissioning Group (CCG), has informed us that the CCG has finalised its Clear and Credible Plan which has been sent to NHS County Durham and Darlington as part of the assessment process for authorisation. A Delivery Plan for Year 1 has also been developed which sets out the strategic priorities and areas for delivery in the coming year. We welcome the appointments of Dr Harry Bynre as the Interim Chair of the CCG, Dr Andrea Jones as Vice-Chair of the CCG and Dr Richard Harker as Quality Lead for the CCG and hope that the new management support structure will enhance the authorisation process a great deal. We know the work is underway in respect of the CCG Governance arrangements and Sub-Committees are soon to be established.
 - (c) **Quality Accounts – County Durham and Darlington NHS Foundation Trust** – We have received an overview of the County Durham and Darlington NHS Foundation Trust’s 2012/13 Quality Accounts which enabled us comment upon the priority areas identified. The purpose of the Annual Report is for the Trust to assess quality across all of the healthcare services it offers by reporting information on 2011/12 performance and identifying areas for improvement during the forthcoming year and how they will be achieved and measured. The priorities for improvement are divided into the three components of quality; safety, experience and effectiveness. We have submitted a response to the Trust ahead of the deadline and asked in future to receive quarterly updates against the priorities to enable us to be more informed in future years when being asked to comment on the Quality Accounts.
 - (d) **Telehealthcare** – We have agreed our Terms of Reference in respect of our work on Telehealthcare. There are clear cross cutting issues for this Committee and Adults and

Housing Scrutiny Committee and therefore part of the work will be carried out jointly. It is anticipated that the work will commence in the next Municipal Year.

- (e) **County Durham and Darlington NHS Foundation Trust Clinical Strategy and Vision** – We are continuing our work with the Trust to arrange meetings for Councillors to scrutinise each individual workstream within the Clinical Strategy. This work will continue into the next municipal year. There has been two very successful first meetings held in respect of Long Term Conditions and Women and Children’s Services and an initial meeting of Urgent Care/Accident and Emergency Task and Finish Group will take place imminently.
- (f) **Community contribution to Darlington Partnership** – We have approved our Final Report in respect of our work in developing the community contribution to Darlington Partnership and we will forward our report to Cabinet for approval in June 2012. We have welcomed the opportunity to be part of this work and are delighted to note the positive contributions Darlington Partnership has made to communities and hope that more publicity will be undertaken to raise the profile of its successes locally. We believe that our recommendations will assist in strengthening the relationship between elected Members and Darlington Partnership and provide an opportunity for two-way communications. We will revisit this piece of work in 12 months’ time to assess whether the structure is working and our expectations have been achieved.
- (g) **Darlington Health Profile 2010/11** – We have also approved our Final Report in respect of our work of scrutinising various indicators within the Darlington Health Profile for 2011 and we will forward our report to Cabinet for approval in June 2012. Our work has focused on the indicators in respect of oral health; hip fractures; smoking related deaths and hospital stays for alcohol related harm. We have concluded that the Health Profile is a valuable tool when commissioning services for the Borough and believe that when Public Health becomes the responsibility of the Local Authority it will be critical to ensure that partnership work remains central to continuing to tackle ill health and health inequalities for the people of Darlington. We hope that effective investment will continue around prevention and treatment. The pinnacle of this piece of work was inviting students from Mount Pleasant Primary School and Darlington School of Mathematics and Science to our meeting to present the DVD they have produced in respect of the dangers of smoking and second hand smoking to children. We were delighted with the DVD and discussed how the DVD could be promoted. The DVD now features on our Council’s website and will be promoted to all the schools within the Borough and consideration be given to utilising the DVD as far and wide as possible.
- (h) **Tees Valley Health Scrutiny Joint Committee** – Councillors H. Scott, J. Taylor and I attended a recent meeting of the Joint Committee where we considered an update from NHS Tees on the impact on local health services during the 2011/12 winter period and a briefing from Stockton on Tees Borough Council, Redcar and Cleveland Borough Council and NHS Tees in Childhood and Adolescent Mental Health Service and Learning Disabilities, Short Breaks for Teesside. The Joint Committee also considered its final report following presentations from a variety of NHS Foundation Trusts discussing the impact of the NHS Operating Framework 2012/13.

- (i) **North East Regional Joint Health Scrutiny Committee** – I recently attended the Joint Committee meeting and we received a second monitoring report on the progress that has been made on the implementation of the recommendations from the Joint Committee’s Review of the Health and Well-Being of the Ex-Service Community. As part of this discussion, Members received presentations from the Commanding Officer for the Personnel Recovery Unit and Future Horizons Programme Manager, Early Service Leavers Project. In Darlington, Officers and Members are meeting with the military at Catterick Garrison to discuss progressing an Armed Forces Community Covenant for Darlington. The Joint Committee also gave consideration to the North East Ambulance Service Quality Accounts and individual Local Authorities were encouraged to respond with any comments.

- (j) **Work Programme 2011/2012** –We have given consideration to the Work Programme for this Committee for the Municipal Year 2011/12 and possible review topics and in doing so, we have taken into account the reduced resources available and ensured that, in recommending our work programme to Monitoring and Co-ordination Group, that any work we undertake will have demonstrable outcomes and contribute to the work of the Council and its strategic aims and objectives.

Councillor Wendy Newall
Chair of the Health and Partnership Scrutiny Committee