
OVERVIEW OF HEALTH AND WELL BEING SCRUTINY COMMITTEE

1. Since the last meeting of the Council, the following are the main areas of work the Health and Well Being Scrutiny Committee has undertaken: -
 - (a) **Stroke Services at Darlington Memorial Hospital** – Members were briefed at the June Committee meeting by Edmund Lovell, who updated the Committee about the positive progress made within the Stroke Services at Darlington Memorial Hospital (DMH). He reported that a new Stroke Consultant had been appointed and would commence duties in the summer. The two retiring Stroke consultants have both agreed to continue to work in the stroke unit for 1 year in the first instance and reviewed annually. There are also a locum stroke consultant, a locum doctor and a locum care of the elderly consultant in place and advertisements for three permanent positions would be imminently undertaken. The Stroke Unit has eight acute beds and the Trust are confident that they can manage with eight beds. The Stroke pathway is well developed at DMH and is working well, as soon as patients are able to they are transported to the Bishop Auckland General Hospital (BAGH) to receive rehabilitation. The length of stay within the Stroke Unit is fairly short.
 - (b) **Care Closer to Home – Shift in services at Darlington Memorial Hospital** – The Trust will close the 20 beds on Ward 52 (medical beds) from the end of July 2010. Ward 52 will remain available for use if necessary, but the Ward may not be re opened if the schemes to reduce the length of stay schemes and reduce unnecessary admissions are successful. During the summer time the pressures on hospital wards are somewhat reduced and it is considered the most appropriate time to make changes to provision. The resources will be invested into the newly developed Rapid Access Medical Assessment Centre (RAMAC) and other developments. The staff from the Ward will be re deployed into other wards. A number of service developments have been introduced such as RAMAC, estimated date of discharge and extension to the discharge lounge. Such developments will reduce the delays in discharge, reduce the length of stay and reduce the amount of unnecessary hospital admissions. The introduction of a RAMAC was a recommendation from Professor George Alberti as part of seizing the future. The RAMAC has opened in DMH and will provide rapid access to consultants and tests. This will enable the decision to be made of whether an admission is necessary or a supportive discharge pathway is the best option for the patient.
 - (c) **Director of Public Health Annual Report – Healthier Lives for Children and Young People in County Durham and Darlington** – At our Special meeting on 6th July 2010, all five Scrutiny Committee Chairs presented their areas of work in respect of scrutinising the Director of Public Health Annual Report to the Local Authority Director of Public Health for Darlington. Each Scrutiny Committee scrutinised an element of the report in relation to their Scrutiny Committee and reported its findings to this meeting. This is the first time that all five Scrutiny Committees have undertaken a cross-cutting

scrutiny project to scrutinise and challenge key messages and outcomes of a partner organisation. Each Chair presented their report and findings on their reviews in respect of housing benefits and council tax for Resources Scrutiny; the effect of worklessness on children and families for Economy and Environment Scrutiny; alcohol and drug misuse for Neighbourhood Services Scrutiny; teenage pregnancy, conception rates and health education in schools for Children and Young People Scrutiny and alcohol related hospital admissions for Health and Well Being Scrutiny Committee. The Chief Executive of NHS County Durham and Darlington was present, together with all Officers involved in the reviews as we presented our completed work to the Director of Public Health Darlington. The work undertaken by all Scrutiny Committee reports were approved by this Committee as lead and were formally handed over to the Director of Public Health to be published as an accompaniment to the Director of Public Health's Annual Report 'Healthier Lives for Children and Young People in County Durham and Darlington'. I am delighted that the other Scrutiny Committee signed up to this piece of work as health is a cross cutting issue which effects as all. Through successful joined up working and thinking we have scrutinised one of our partners which has demonstrated our commitment to addressing health inequalities in Darlington.

- (d) **Alcohol Admissions Task and Finish Review Group** – As part of the work being undertaken by each Scrutiny Committee in relation to the Director of Public Health's Annual Report entitled 'Healthier Lives for Children and Young People in County Durham and Darlington'. This Committee scrutinised the alcohol related hospital admissions of under 18's. In undertaking this work, the Task and Finish Review Group have identified pertinent NICE Guidance as a basis for the scrutinising alcohol admissions for under 18 year olds; reviewed the development of acute emergency/paramedic pathway within County Durham and Darlington and have established the basis the PCT commissions paediatric services to assist in reducing hospital admissions of under 18 year olds. We have developed a series of recommendations which we hope will challenge and encourage all partner organisations to continue to work together to reduce hospital admissions.
- (e) **Seizing the Future Oversight Delivery Board** – The lead Members of the Scrutiny Committee continue to attend the Seizing the Future Delivery Oversight Board, along with colleagues from Durham County Council and other NHS Partners and brief the Scrutiny Committee at regular intervals. At most recent meeting was held on 14th May 2010 and we were fully reassured that the changes implemented were having a positive impact on the hospital services.
- (f) **Adult Social Care Commissioning Intentions** – The Committee has received a report on the Council's challenging change agenda to transform the current model of social care to one that is driven by people directing their own support to meet their own identified social care outcomes. A key element of this transformation will involve commissioning, investing and using resources in different ways. To ensure some clarity for providers and other key stakeholders a commissioning intentions plan has been developed within Adult Social Care. It is planned that these explicit intentions will enable and support the social care market to develop to meet the needs of those who require social care support. Supporting the citizenship of those people who use adult social care is a central theme of current social policy. A more explicit focus on

citizenship rather than meeting care needs will improve individual outcomes. As a result Members of the Committee have agreed to establish a Task and Finish Review Group to consider personal budgets.

- (g) **Preventing and supporting under 18 conceptions ‘Teenage Pregnancy’** – The Acting Health Improvement Strategic Lead for Sexual Health and Teenage Pregnancy NHS County Durham and Darlington reported that Darlington has significantly higher under 18 conceptions rates than the National England average. National evidence shows that improving uptake and use of effective contraception combined with better Sex and Relationship Education (SRE) will have the biggest and quickest impact on improving current performance in reducing conception rates including second conceptions. Members were advised that work is underway with Schools to provide clinics making available contraception in school settings. There has been an appointment of a dedicated Sex and Relationships Officer employed by the Council and leading on the strategic development for education, the workforce and parents. There is an established young parent’s care pathway being developed to incorporate secondary conceptions, as approximately 20% of under 18 conceptions are secondary pregnancies. The team are also involved in developing NICE guidance in respect of contraception provision for socially disadvantaged young people. A further report will be submitted to the Committee in February 2011.
- (h) **GOLD Dignity Action Days** – Members of GOLD introduced a power point presentation at the June Committee meeting which highlighted the work undertaken. Members were informed of the designated Dignity Action Days that members of GOLD have held with their main purpose being to highlight and promote the Department of Health’s Dignity in Care campaign, and to encourage people to sign up as a Dignity Champion; to ask people (whether members of the public or hospital staff) their top priorities in Dignity in Care; to ask people to give examples of dignity and respect in the care they have seen or received and at the Hospital Dignity Action day to consult on types of new crockery which have been developed to be more beneficial for people with dementia. Members are delighted with the work that GOLD has undertaken.
- (i) **Sports And Physical Activity Strategy Update** – At the June meeting of the Committee Mike Crawshaw updated Members on the excellent work that has been undertaken in relation to the Sports and Physical Activity Strategy, in terms of engaging with communities and increasing participation in activities. As Members we welcomed the report and are delighted with the progress made against the objectives Strategy which is driven by Community Sports Network. Members would still like to see better use of the Multi Use Games Areas but understand associated difficulties.
- (j) **Regional Health Scrutiny** – Councillors I Haszeldine and Newall attended the Baseline Evidence Day in Durham for the launch of the Regional Health Scrutiny Project concerning scrutinising the health needs of ex service community and their families. The work will be undertaken in three work streams those being physical health, mental health and social and economic wellbeing. Each workstream will address the age ranges as follows; under 24, 24 - 49 and over 50. Darlington has agreed to be part of the social and economic wellbeing together with Gateshead (lead), Stockton and Sunderland Councils. Building on the success of the cross cutting work

undertaken by each Scrutiny in relation to scrutinising the Director of Public Health report it has been agreed that we continue to establish Best Practice and draw on Members expertise within relevant strands within the work stream. Therefore, other Scrutiny Chairs will be involved in this piece of work. Councillor Haszeldine and I will continue to be the constant Member representative with other Scrutiny Chairs being involved when it is relevant to their Committees remit.

- (k) **Alcohol Harm Reduction National Support Team Visit to Darlington** – The Head of Safer Darlington and the Locality Director of Public Health in Darlington presented the outcome and findings of the National Support Team visit to Darlington to review actions and plans to reduce alcohol related harm to a recent Committee meeting. It was reported that areas of good practice and overall strengths were identified with good partnership working in place; however, the National Support Team did make some recommendations to strengthen the planning and delivery of alcohol services. Particular reference was made to work with the Paramedic Programme which maximised partnership working and the effectiveness of this working arrangement during the World Cup when a lot of ambulance call outs were saved by the paramedic working, which enabled savings could be made and the ambulance service could channel their resources to emergencies. It is proposed to communicate to Mark Cotton, North East Ambulance NHS Trust Services the acknowledgement of this Scrutiny Committee on the success of the Paramedic Programme.
- (l) **CQC Inspection Action Plan for Adult Social Services** – The Head of Operations, Adult Social Care gave a presentation to Members of the Committee at a recent meeting advising of the inspection carried out by the Care Quality Commission in August, 2009 and the action plan comprised following the inspection. The inspection which was carried out over two weeks, engaging all key partners, covering two areas of service delivery being safeguarding and quality of life for older people. The Inspectors concluded that performance was ‘adequate’ for safeguarding and ‘good’ for quality of life for older people with a capacity to improve as ‘promising’. Following the inspection an Action Plan was compiled with included 20 recommendations to be implemented over a 12 month timescale. A mid-term inspection was carried out in April, 2010. The Committee will continue to monitor the progress made against the Action Plan.
- (m) **Work Programme 2010/2011** – We have given consideration to the Work Programme of this Committee for the Municipal Year 2010/11 and possible review topics. We have examined Cabinet’s Forward Plan, in order to identify areas of particular interest or concern and I have extended an open invitation for the inclusion of additional items on the Committee’s Work Programme.

- 2. Since the last meeting of Council, the Chair of the Committee has attended various briefings with Officers.

Councillor Marian Swift
Chair of the Health and Well Being Scrutiny Committee