

Health and Housing Scrutiny Committee Agenda



9.30 am Thursday, 2 July
2020

Via Microsoft Teams

In accordance with Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020, this meeting will be held on a virtual basis. Members of the Public can view a live stream of the meeting at:
<https://www.darlington.gov.uk/livemeetings>

1. Introduction/Attendance at Meeting
2. Appointment of Chair for the Municipal Year 2020/21
3. Appointment of Vice-Chair for the Municipal Year 2020/21
4. To consider the times of meetings of this Committee for the Municipal Year 2020/21 on the dates agreed in the Calendar of Meetings by Cabinet at Minute C104/Feb/20
5. Declarations of Interest
6. To approve the Minutes of the meeting of this Scrutiny held on :-
 - (a) 16 January 2020 (Pages 1 - 8)
 - (b) 30 January 2020 (Pages 9 - 14)
7. Work Programme –
Report of the Managing Director
(Pages 15 - 36)
8. SUPPLEMENTARY ITEM(S) (if any) which in the opinion of the Chair of this Committee are of an urgent nature and can be discussed at the meeting.
9. Questions



Luke Swinhoe
Assistant Director Law and Governance

Wednesday, 24 June 2020

Town Hall
Darlington.

Membership

Councillors Bell, Dr. Chou, Donoghue, Heslop, Layton, Lee, McEwan, Newall, Wright and Vacancy

If you need this information in a different language or format or you have any other queries on this agenda please contact Hannah Fay, Democratic Officer, Resources Group, during normal office hours 8.30 a.m. to 4.45 p.m. Mondays to Thursdays and 8.30 a.m. to 4.15 p.m. Fridays email: hannah.fay@darlington.gov.uk or telephone 01325 405801

HEALTH AND HOUSING SCRUTINY COMMITTEE

Thursday, 16 January 2020

PRESENT – Councillors Bell (Chair), Donoghue, Heslop, Layton, Lee, McEwan, Newall and Wright

APOLOGIES – Councillor Clarke

ABSENT – Councillors Dr. Chou

ALSO IN ATTENDANCE – Councillors Todd (County Durham and Darlington NHS Foundation Trust), Gillian Curry (County Durham and Darlington Foundation Trust), Diane Lax (Healthwatch Darlington), Laura Kirkbride (Tees, Esk and Wear Valleys NHS Foundation Trusts) and Leanne McCrindle (Tees, Esk and Wear Valleys NHS Foundation Trusts)

OFFICERS IN ATTENDANCE – Hannah Fay (Democratic Officer)

HH42 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

HH43 COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST - QUALITY ACCOUNTS 2019/20

The Associate Director of Nursing (Patient Safety and Governance) submitted a report (previously circulated) to update Members on the progress against the agreed priorities for 2019/20 during the period of April 2019 to September 2019.

Members were advised that the Quality Accounts for County Durham and Darlington NHS Foundation Trust included indicators set by the Department for Health and local priorities agreed through consultation with staff, governors, local improvement networks, commissioners, health scrutiny committee and other key stakeholders.

SAFETY

Patient Falls

Members were advised that the number of falls had decreased and noted that there were 5.4 acute falls per 1000 bed days and 5.5 community falls per 1000 bed days. Members were pleased to note that the dedicated falls team was embedded and that quality improvement work continued.

It was confirmed that red zimmer frames had been introduced into key areas, and Members noted that lying/standing blood pressure had been built into the electronic observations tool.

Care of patients with dementia

Members welcomed the continued development and roll out of the dementia pathway

and monitoring of care for patients with dementia and were pleased to note that, although not fully recruited to, an enhanced care team was in place, providing support on wards where required.

It was reported that the dementia screening tool had been incorporated into the electronic nerve centre, removing the need for paper based assessments; and that this would be used to measure compliance once data was migrated at the end of the year.

The Trust continues to participate in the five year research project of dementia services within Durham and the study in the development of a good practice audit tool to assess patient care and services also continues.

Healthcare Associated Infection

MRSA Bacteraemia – The Trusts target is zero and it was reported that there had been one case reported between April and September 2019.

Clostridium difficile – The target for Clostridium difficile infection (CDI) is no more than 45 cases and the trust had reported 23 cases between April and September 2019.

Following a question by Members, it was confirmed that infection was not ward specific; and the changes to the reporting mechanism for CDI were outlined, with a whole system approach now in place.

Discussion ensued in respect of communication between GP practices in Darlington. Members were advised that GP's work closely with the microbiology services at Darlington Memorial Hospital (DMH) and the CCG infection control team attends all HCA infection meetings at the hospital.

Members queried the reason for the 3pm cut off for the submission of samples at GP practices, as this resulted in a number of repeat visits.

Pressure ulcers

Members noted that the Trust was striving for zero tolerance and that there had been four cases of grade 3/4 pressure ulcers reported between April and September 2019 where lapses in care were identified.

It was confirmed that all mattresses were pressure relieving and a number of pressure reducing mattresses were available.

It was confirmed that the Trust had a training programme in place, with Wound Resource Education Nurses (WRENS) within each department.

Discharge summaries

Members noted the target of 95% (of discharge letters sent within 24 hours of discharge) and were advised that the Trust was at 94 per cent. The work programme to improve timeliness of discharge summary completion continues.

The quality and timeliness of discharge summaries was built into training and summaries were completed via an electronic system, allowing for monitoring via monthly performance reviews.

Rate of patient safety incidents resulting in severe injury or death

National Reporting and Learning System (NRLS) showed that there had been a 38 per cent increase in incidents reported from October to March 2019 when compared to the same period in 2018, and that the Trust remained within the 50th percentile.

Members raised concern in respect of the 38 per cent increase in reported incidents. The Associate Director of Nursing (Patient Safety and Governance) detailed the different degrees of harm which ranged from near miss to death; that the increase related to near miss incidents and this was seen as a positive because it allows any emerging themes to be identified and reviewed; that these were reported six months in arrears via the NRLS, however the Trust closely monitored the live system and uploaded incidents to the national database within seventy two hours; and that any reported incidents greater than minor harm would be subjected to a Root Cause Analysis if appropriate.

Members requested up to date figures for rate of patient safety incidents.

Improve management of patients identified with sepsis

Members noted that the actions in place to maintain improvement in relation to management of sepsis were on track.

Discussion ensued in respect of the incidents of sepsis and the sepsis 6 pathway. Members requested further information in respect of the one hour target to administer anti-biotics to sepsis patients.

EXPERIENCE

Nutrition and Hydration in Hospital

Members were pleased to note that work continues in respect of menu development and nutritional analysis. It was reported that work continues within the Trust towards achieving International Dysphagia Diet Standardisation Initiative ward menus and nutritional products.

Members also noted that the Trust would be focussing on hydration, with consideration of how a patient's hydration status would be maintained and monitored; and work to explore alternative ways of measuring oral fluid intake at ward level.

End of life and palliative care

Members noted that the Trust had an effective strategy and measures for palliative care. Mandatory training for all staff continued to be delivered and actions from a postal questionnaire of bereaved relatives and Care of Dying Audit would be implemented.

It was reported that the Trust would work with the CCG and NEAS to agree a

comprehensive approach to personalised care planning.

Members noted the recent CQC inspection which rated End of life care services in the Trust to be outstanding.

Responsiveness to patients personal needs

Members noted that the results from the national services were not yet available, however results from the local survey show the Trust to be on track.

Percentage of staff who would recommend the trust to family or friends needing care

Members noted staff survey results were not yet available.

Percentage of staff experience harassment, bullying or abuse from staff in the last 12 months

Members noted staff survey results were not yet available.

Percentage of staff believing that the Trust provides equal opportunities for career progression or promotion

Members noted staff survey results were not yet available.

Friends and family test

Members were informed that response rates from April to July had improved.

EFFECTIVENESS

Hospital Standardised Mortality Ratio (HSMR) and Standardised Hospital Mortality Index (SHMI)

Members were advised that indicators were within the expected range and a trust mortality review process was in place.

Reduction in 28 day readmissions to hospital

Members noted that the goal was set at 12 per cent but the Trust were at 12.3 per cent readmission and were advised that this was monitored through monthly performance reviews and Board reporting.

To reduce length of time to assess and treat patients in Accident and Emergency department

Members were informed that the standard was 95 per cent however the Trust's four hour indicator remained below this. A review of escalation procedures was underway and monthly monitoring through performance reviews and Board reporting was in place.

Discussion ensued in respect of the wait time in Accident and Emergency at DMH. It was reported that in the month of December, an extra 100,000 patients attended accident and emergency departments in the region when compared to the same period in the previous year, and reference was made to the Help Us Help You campaign to support patients in choosing services appropriately. Members also noted that GP's had been working extended hours over the winter period which would alleviate pressures on Urgent Care and Accident and Emergency, however these appointments were not being filled.

Following a question, the Head of Communications and Charity advised Members of a recent audit undertaken which followed the patients pathway up to the point of treatment; that this would identify if the patients attendance at Accident and Emergency was appropriate; and Members highlighted the importance of Councillors as a mechanism for communicating key messages from health services to the residents of Darlington.

Patient reported outcome measures

Members noted that the results were not yet available.

Maternity Standards

Members noted that 12 week bookings, at 91.1 per cent and smoking in pregnancy at 15.2 per cent, were both on track whilst breastfeeding rates were 57.7 per cent, 3 per cent short of the target.

Paediatric Care

Members were pleased to note that a dedicated paediatric unit had opened adjacent to the Emergency Department at the Durham site.

Excellence reporting

Members noted that excellence reporting was embedded within Care Groups.

Members also discussed the two Never Events that had been reported since April 2019 and the actions taken.

The Associate Director of Nursing (Patient Safety and Governance) advised Members that the newly formed Learning Disability standards would be included in the Quality Accounts for the 2020/21 period.

RESOLVED – (a) That the report be noted.

(b) That the Associate Director of Nursing (Patient Safety and Governance) be thanks for her informative report.

(c) That the Members be provided with:

- (i) Up to date figures for rate of patient safety incidents;

- (ii) Figures for sepsis one hour antibiotic treatment targets; and
- (iii) Details of Trust media campaign information as and when available.

HH44 TEES, ESK AND WEAR VALLEY NHS FOUNDATION TRUST - QUALITY ACCOUNT UPDATE QUARTER 2

The Head of Planning and Business Development submitted a report (previously circulated) to provide Members with an update against each of the five key quality improvement priorities for 2019/20, including performance against the agreed quality metrics up to 30 September 2019.

Members were advised that the five quality improvement priorities for 2019/20 were supported by 56 actions, 49 of which (88 per cent) were either completed or on track; the seven actions that were behind schedule and were due to be completed by Christmas had been delayed further, however the Durham and Darlington Crisis team hub was now live.

It was also reported that four of the ten quality metrics were reporting Green and six were reporting Red; three of the Red metrics had shown significant improvement from quarter 1 to quarter 2, whilst the other three metrics remained static.

The submitted report provided information in relation to those six red quality metrics which were Metric 1 – Percentage of patients who report ‘yes, always’ to the question ‘Do you feel safe on the ward?’; Metric 3 – Number of incidents of physical intervention/restraint per 1000 occupied bed days; Metric 6b - Average length of stay for patients in Mental Health Services for Older People Assessment and Treatment wards; Metric 7 – Percentage of patients who reported their overall experience as excellent or good; Metric 8 – Percentage of patients that report that staff treated them with dignity and respect; and Metric 9 – Percentage of patients that would recommend our service to friends and family if they needed similar care or treatment.

In relation to Metric 1 it was reported that whilst still below the Trust target of 88 per cent, this metric had seen a significant improvement from 65.59 per cent in Q1 to 79.17 per cent in Q2.

In relation to Metric 3 it was reported that the Trusts position had also seen a significant improvement, from 38.18 per cent in Q1 to 31.03 per cent in Q2, and that all three geographic localities had seen significant reductions, however this was still above target.

With regard to Metric 6b it was reported that the target was not being met, however Q2 had seen an improvement in length of stay which was 5 days better than in Q1.

In relation to the patient experience Metrics 7, 8 and 9, these had remained static with small quarter to quarter fluctuations however developments within TEVV’s business plan would hopefully lead to sustained improvements for these metrics.

Discussion ensued on the priorities for next year’s Quality Account, with particular reference made to the priority ‘Improving Child to Adult service transitions’. Members

were advised of a review of serious incidents in relation to transitions was underway, incorporating historic data from 2016; and were assured that all transition actions were reporting green.

In relation to the priority 'Reducing preventable deaths it was reported that regionally there had been an increase in suicides and work was being undertaken to prevent this, including early intervention and support; and a review of urgent care, involving multi-agencies, was ongoing.

Members raised concern in respect of cuts to counselling services and were advised that the Urgent Care work stream would be looking at the introduction of the safe haven model; a national trailblazer programme to provide mental health support in schools and colleges had been launched and a bid for Darlington would be submitted in the next round; and Members requested details of the waiting times for Talking Changes.

Following a question, discussion ensued in respect of the safeguards in place for those staffing the Crisis Hub; Members were assured that staff had received specialist clinical training; that onsite support would be provided by Registered Nurses and senior clinical staff; and an update in respect of dual diagnosis would be provided at the Stakeholder Event.

Following a question, Members were notified of the Darlington Living Well Directory, a service that provides information and signposting to a wide range of services, activities and organisations in Darlington.

Members noted that the Trust's Draft Quality Accounts would be presented to TEWV's Quality Account Stakeholder event at Scotch Corner on 4 February 2020.

RESOLVED – (a) That the report be noted.

(b) – That the Head of Quality Governance and Compliance and Planning and Business Development Manager be thanked for their informative update.

(c) That the Members be provided with:

- (i) Talking Changes wait times; and
- (ii) Details of the Living Well Directory

This page is intentionally left blank

HEALTH AND HOUSING SCRUTINY COMMITTEE

Thursday, 30 January 2020

PRESENT – Councillors Bell (Chair), Clarke, Donoghue, Heslop, Layton, Lee, McEwan, Newall and Wright

APOLOGIES –

ABSENT – Councillors Dr. Chou

ALSO IN ATTENDANCE –

OFFICERS IN ATTENDANCE – Miriam Davidson (Director of Public Health), Pauline Mitchell (Assistant Director Housing and Building Services), Christine Shields (Assistant Director Commissioning, Performance and Transformation), Michael Houghton (Director of Commissioning Strategy and Delivery), Becky James (Public Health Portfolio Lead), Lisa Soderman (Head of Leisure) and Hannah Fay (Democratic Officer)

HH45 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

HH46 TO APPROVE THE MINUTES OF THE MEETING OF THIS SCRUTINY HELD ON :-

(1) 5 DECEMBER 2019

Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 5 December 2019.

RESOLVED – That the Minutes of the meeting of this Scrutiny Committee held on 5 December 2019 be approved as a correct record.

(2) 11 DECEMBER 2019 AND

Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 11 December 2019.

RESOLVED – That the Minutes of the meeting of this Scrutiny Committee held on 11 December 2019 be approved as a correct record.

(3) 10 JANUARY 2020

Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 10 January 2020.

RESOLVED – That the Minutes of the meeting of this Scrutiny Committee held on 10 January 2020 be approved as a correct record.

HH47 COMMUNITY EYE CARE SERVICE - BRIEFING

The Director of Commissioning Strategy and Delivery, NHS Durham Dales, Easington and Sedgefield Clinical Commissioning Group (CCG) and North Durham CCG submitted a briefing note (previously circulated) on Darlington CCG's intention to commission a high quality, safe and sustainable community eye care service to deliver virtual glaucoma monitoring and post-op cataract care in the community.

It was reported that County Durham and Darlington CCG's had been working collaboratively with County Durham and Darlington NHS Foundation Trust (CDDFT) for a number of years to reduce activity to the overstretched Ophthalmology department; the community services would improve the patient pathway, reduce the number of review attendances at hospital and create capacity for newly diagnosed and more complex patients.

It was also reported that approximately 2,000 patients were suitable for transfer to a community virtual glaucoma monitoring service and 2,300 patients were suitable for transfer to a post-op cataract service; and that feedback from patient engagement on the community service had been positive.

Details were provided of the procurement process; and Members noted that the service was expected to be in place from 1 April 2020. Members were assured that as part of the procurement process, mobilisation plans would be submitted by providers; and that there were no issues anticipated in respect of the launch date.

Following questions Scrutiny was advised that eight optometrists had shown an interest; that this work had been undertaken in conjunction with NHS Durham Dales, Easington and Sedgefield Clinical Commissioning Group (CCG) and North Durham CCG; and that the pathways would be available across County Durham and Darlington.

RESOLVED – That the community eye care service pathway be noted.

HH48 DARLINGTON CHILDHOOD HEALTHY WEIGHT PLAN

The Director of Public Health submitted a report (previously circulated) updating Members on the Darlington Childhood Healthy Weight Plan.

It was reported that the scope and vision of the Plan was to ensure that more children leave primary school aged 10-11 years with a healthy weight; that childhood obesity in Darlington was above the national average at both reception and Year 6 age groups; that 21.2 per cent of Darlington children at Year 6 were categorised as obese; and obesity was linked to a range of diseases.

The submitted report detailed the overall objectives of the Healthy Weight Plan; outlined the partnership event held on 24 September 2019 to officially launch the Plan and the key themes identified from discussions at the event; and outlined the actions that had been proposed to align with the priorities of the Plan to achieve a population approach to tackling the issue.

Discussion ensued on engagement with parents, local supermarkets, shops and restaurants; and the Public Health Portfolio Lead advised Members that the Plan was

underpinned by a strong communications plan which would target the whole community.

Reference was made to the vending machine provision in the town and the need for healthier food and drink choices, in particular for those vending machines located within council buildings. The Head of Leisure assured Members that the Dolphin Centre vending machines provided a balanced option to customers; and that Members comments would be taken into consideration.

Following a question it was confirmed that new parents received advice from the midwifery service in respect of breastfeeding and noted that the Health Visiting Service would be an opportune time to provide nutrition advice to parents in respect of a child's early years.

Members made reference to their responsibility in promoting physical activity in the community; and it was confirmed that a Darlington Young Advisors Board had been established to undertake engagement work with young people.

RESOLVED – (a) That the report be noted.

(b) That Members support the actions set out in the report (previously circulated) to implement a whole systems approach to tackling obesity.

HH49 PERFORMANCE INDICATORS - QUARTER 2 2019/20

The Director of Economic Growth and Neighbourhood Services and Director of Children and Adults Services submitted a report (previously circulated) to provide Members with performance data against key performance indicators for Quarter 2 2019/20.

It was reported that 36 indicators were reported to this Scrutiny Committee, six Housing indicators, six Culture indicators and twenty four Public Health indicators.

At Quarter 2, data was available for nine of the twelve Housing and Culture indicators. It was noted that two indicators which had a target to be compared against, HBS 016 – Rent arrears of current tenants in the financial year as a % of rent debit (GNPI 34) and HBS 016 – Rent collected as a proportion of rents owed on HRA dwellings *including arrears b/fwd, were both showing performance not as good as their target; and that, of the nine indicators reported quarterly, three indicators demonstrated an improved performance compared to the same point in the previous year whilst six indicators, which included the three Culture indicators, showed a performance not as good as that recorded at the same time in the previous year.

In relation to Public Health indicators it was reported that three of the twenty-four indicators had data available at quarter 2, those indicators being PBH 044 – Alcohol related admissions to hospital, PBH 046 – Cumulative percentage of eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check in the five year period and PBH 052 – Adjusted antibiotic prescribing in primary care by the NHS; and all three indicators were showing performance better than the same point in the previous year.

RESOLVED – That the performance data reported for Quarter 2 2019/20 be noted.

HH50 WORK PROGRAMME

The Managing Director submitted a report (previously circulated) requesting that consideration be given to this Scrutiny Committee's work programme and to consider any additional areas which Members would like to suggest should be included in the previously approved work programme.

There was discussion on the current status of a number of topics on the work programme. Members were advised that Voluntary Sector Funding would now sit within the remit of Communities and Local Services Scrutiny Committee; that updates were being provided to four scrutiny committees; and the Assistant Director of Commissioning, Performance and Transformation questions the possibility of one meeting to update all four scrutiny committees.

In relation to Loneliness and Connected Communities, it was confirmed that an initial scoping meeting had been held and an invitation would be extended to Members of this scrutiny for the next meeting.

RESOLVED – That the current status of the work programme be noted.

(4) QUAD OF AIMS

Councillor Mills submitted a Quad of Aims requesting that this Scrutiny Committee consider a joint review group to examine autism provision within Darlington Borough Council.

Discussion ensued in respect of the wording relating to the 'Reason for request', highlighting the requirement of NHS involvement in the review.

RESOLVED – (a) That a joint review group be established to undertake the work outlined in the Quad of Aims.

(b) That the quad of aims be updated to reflect the requirement of NHS involvement.

(b) That Councillors Bell, Heslop and Layton be nominated to represent this Scrutiny Committee on the joint review group.

(c) That the Work Programme be updated accordingly.

HH51 HEALTH AND WELL BEING BOARD

Members were advised that the next meeting of the Health and Well Being Board was scheduled for 26 March 2020; and this meeting would be a stocktake of priorities.

RESOLVED – That Members look forward to receiving an update on the work of the Health and Well Being Board at a future meeting of this Scrutiny Committee.

HH52 QUESTIONS

The Chair raised a question in respect of coronavirus and incident plans; highlighted the ward closures at Darlington Memorial Hospital as a result of norovirus; and questioned how people could be encouraged to stay away unless absolutely necessary.

The Director of Public Health assured Members that GP practices were receiving regular updates in respect of coronavirus; Members were signposted to the Public Health England website for up to date information and guidance on coronavirus; and noted that comments in respect of hospital attendance would be fed back to County Durham and Darlington NHS Foundation Trust communications team.

RESOLVED – (a) That the position be noted.

(b) That the Director of Public Health provides feedback CDDFT communications team.

This page is intentionally left blank

HEALTH AND HOUSING SCRUTINY COMMITTEE 2 JULY 2020

WORK PROGRAMME

SUMMARY REPORT

Purpose of the Report

1. To consider the work programme items scheduled to be considered by this Scrutiny Committee during the 2020/21 Municipal Year and to consider any additional areas which Members would like to suggest should be included.

Summary

2. Members are requested to consider the attached draft work programme (**Appendix 1**) for the next Municipal Year which has been prepared based on Officers recommendations and recommendations previously agreed by this Scrutiny Committee in the last Municipal Year.
3. Once the work programme has been approved by this Scrutiny Committee, any additional areas of work which Members wish to add to the agreed work programme will require the completion of a quad of aims in accordance with the previously approved procedure (**Appendix 2**).

Recommendation

4. Members are requested to consider and approve the attached draft work programme as the agreed work programme for the Municipal year 2020/21 and consider any additional items which they might wish to include.

Paul Wildsmith
Managing Director

Background Papers

No background papers were used in the preparation of this report.

Author : Hannah Fay

S17 Crime and Disorder	This report has no implications for Crime and Disorder
Health and Well Being	This report has no direct implications to the Health and Well Being of residents of Darlington.
Carbon Impact	There are no issues which this report needs to address.
Diversity	There are no issues relating to diversity which this report needs to address
Wards Affected	The impact of the report on any individual Ward is considered to be minimal.
Groups Affected	The impact of the report on any individual Group is considered to be minimal.
Budget and Policy Framework	This report does not represent a change to the budget and policy framework.
Key Decision	This is not a key decision.
Urgent Decision	This is not an urgent decision
One Darlington: Perfectly Placed	The report contributes to the Sustainable Community Strategy in a number of ways through the involvement of Members in contributing to the delivery of the eight outcomes.
Efficiency	The Work Programmes are integral to scrutinising and monitoring services efficiently (and effectively), however this report does not identify specific efficiency savings.
Impact on Looked After Children and Care Leavers	This report has no impact on Looked After Children or Care Leavers.

MAIN REPORT

Information and Analysis

5. The format of the proposed work programme has been reviewed to enable Members of this Scrutiny Committee to provide a rigorous and informed challenge to the areas for discussion.
6. Each topic has been reviewed to link it to the outcomes and the conditions in the Sustainable Community Strategy – One Darlington Perfectly Placed:-

SCS Outcomes

- a) Children with the best start in life
- b) More businesses more jobs
- c) A safe and caring community
- d) More people caring for our environment
- e) More people active and involved
- f) More people healthy and independent
- g) A place designed to thrive

Three Conditions

- a) Build Strong Communities
- b) Grow the Economy
- c) Spend every pound wisely

7. In addition, each topic links to performance indicators from the Performance Management Framework (PMF) to provide robust and accurate data for Members to use when considering topics and the work they wish to undertake. There are some topics where appropriate PMF indicators have not yet been identified however; these can be added as the work programme for each topic is developed.

Forward Plan and Additional Items

8. Once the Work Programme has been agreed by this Scrutiny Committee, any Member seeking to add a new item to the work programme will need to complete a quad of aims.
9. A copy of the Forward Plan has been attached at **Appendix 3** for information.

This page is intentionally left blank

HEALTH AND HOUSING SCRUTINY COMMITTEE WORK PROGRAMME

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<p>Performance Management and Regulation/ Management of Change</p> <p>Regular Performance Reports to be Programmed</p>	<p>Quarter 4/Year End 3 September 2020</p>	<p>Relevant AD</p>	<p>A safe and caring community</p> <p>Children with the best start in life</p> <p>More people healthy and independent</p> <p>More people healthy and independent</p>	<p>Build strong communities.</p> <p>Spend every pound wisely</p>	<p>Full PMF suite of indicators</p>	<p>To receive biannual monitoring reports and undertake any further detailed work into particular outcomes if necessary</p>

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<p>Monitoring Outcomes from the Medium Term Financial Plan 2016-20</p> <p>Impact of ceasing/reducing the following and has there been any cost shunting to other areas within the Council as a result of:-</p> <p>Healthwatch Darlington - Streamlined Service offered by HWD since April 2017 - The Annual Report of Healthwatch Darlington</p>	3 September 2020	Michelle Thompson, HWD	<p>A safe and caring community</p> <p>Children with the best start in life</p> <p>More people healthy and independent</p>	<p>Build strong communities.</p> <p>Spend every pound wisely</p>		To scrutinise and monitor the service provided by Healthwatch – Annual
Director of Public Health Annual Report and Health Profile	17 December 2020	Miriam Davidson	More people healthy and independent			Annual report
CCG Stroke Services/Review of Stroke Rehabilitation Services	To be agreed Deferred from 26 March 2020	Katie McLeod CCG	More people healthy and independent	Spend Every Pound Wisely	To be determined	To scrutinise and challenge the CCG's and review of Stroke Rehabilitation Services in the community following discharge from Bishop Auckland Hospital

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
Integrated Care System (ICS) (Formerly Sustainability and Transformation Plan (STP) including the Better Health Programme (BHP))	Engagement and Communication Strategy To be agreed Deferred from 26 March 2020	Simon Clayton, NECS	More people healthy and independent	Spend every pound wisely Build Strong Communities		To scrutinise and challenge progress of the principles underpinning the ICS and BHP and timelines for progress
Customer Engagement in Housing Services	To be agreed	Pauline Mitchell	More people active and involved	Build strong communities		To look at work being done within communities and how the Customer Panel engage with new communities.
Homelessness Strategy and the Homelessness Reduction Act	To be agreed	Pauline Mitchell	A safe and caring community Enough support for people when needed	Build strong communities		To look at the impact following the introduction of the Act. Update on current position within Darlington
Review of the Housing Allocations Plan	To be agreed	Pauline Mitchell/ Janette McMain	Enough support for people when needed	Spend every pound wisely Build strong communities		To update Members on the implementation of the Housing Allocation Policy
Monitoring Outcomes from the Medium Term Financial Plan 2016-20		Miriam Davidson/	A safe and caring community	Build strong communities.	Full PMF suite of indicators	To receive monitoring reports and undertake any further detailed

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<p>Impact of ceasing/ reducing the following and has there been any cost shunting to other areas within the Council as a result of:-</p> <p>Voluntary Sector Funding</p>	<p>Last considered 5 December 2019</p>	<p>Christine Shields</p> <p>Christine Shields</p>	<p>Children with the best start in life</p> <p>More people healthy and independent</p>	<p>Spend every pound wisely</p>		<p>work into particular outcomes if necessary</p> <p>To update Members following the monitoring and evaluation of this funded projects</p>
<p>NHS Clinical Commissioning Group Financial Challenges and Impact on Services</p>	<p>Last considered 5 December 2019</p>	<p>Mark Pickering, NHS Darlington CCG</p>	<p>More people healthy and independent</p>	<p>Build Strong Communities</p> <p>Spend Every Pound Wisely</p>		<p>To scrutinise and monitor the CCG to ensure delivery of the necessary QIPP required in order to achieve its financial duties and service delivery</p>

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<p>Primary Care (to include GP Access to appointments)</p> <p>To include:-</p> <p>Digital Health (formerly Telehealth)</p>	<p>Last considered 31 October 2019</p> <p>Last considered 19 December 2018 ; and by Review Group 16 Nov 2016</p>	<p>Rebecca Thomas CCG/ Amanda Riley PCN</p> <p>Ian Dove CDDFT</p>	<p>More people healthy and independent</p> <p>More people active and involved</p>	<p>Build Strong Communities</p> <p>Spend Every Pound Wisely</p>		<p>To scrutinise development around Primary Care Network and GP work, including digital health and its application, including signposting to services.</p>
Crisis Service Changes	Last considered 29 August 2019	TEWV				To receive a briefing and undertake any further detailed work if necessary.
Right Care, Right Place	Last considered 29 August 2019	TEWV				To receive a briefing and undertake any further detailed work if necessary.

JOINT COMMITTEE WORKING – ADULTS SCRUTINY COMMITTEE

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
Loneliness and Connected Communities Adults and Housing to Lead	Scoping meeting 28 January 2020					
CQC Ratings in the Borough of Darlington Health and Housing to Lead	Scoping Meeting held 18 November 2019					

Page 24

JOINT COMMITTEE WORKING – CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<p>Childhood Healthy Weight Plan (Childhood Obesity Strategy)</p> <p>Children and Young People to lead</p>	<p>Last considered 30 January 2020</p> <p>27 November 2017. Interim report to Cabinet 11 September 2018.</p> <p>Review suspended –to examine childhood obesity and mental health links by monitoring the effectiveness of the Childhood Healthy Weight Plan.</p>	<p>Ken Ross</p>	<p>Children with the best start in life</p>	<p>Spending Every Pound Wisely</p> <p>Build Strong Communities</p>	<p>To be determined</p>	<p>To review the effectiveness of the Childhood Healthy Weight Plan on childhood obesity and mental health links in children and young people.</p>

JOINT COMMITTEE WORKING – CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE AND ADULTS SCRUTINY COMMITTEE

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
Autism Provision Review Group	Scoping meeting held 2 March 2020		Enough support for people when needed			To review the provisions and services and contractual arrangements between this Council and our providers who provide the Autism provisions, diagnoses and support services for Darlington.

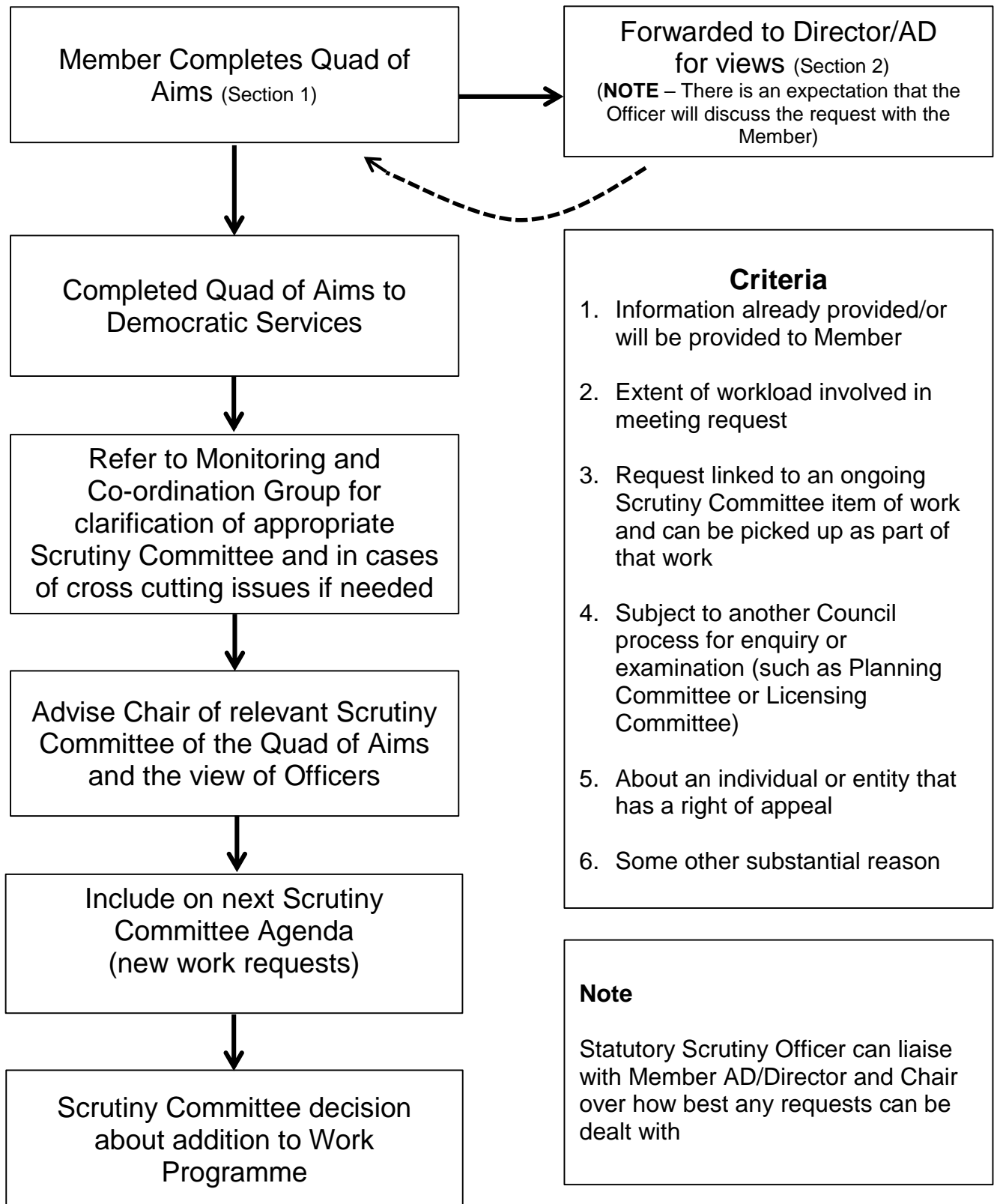
ARCHIVED ITEMS

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<p>End of Life and Palliative Care – To include the Dementia End of Life Pathway</p> <p>Health and Housing to lead</p>	<p>Final Report received on 5 December 2019</p>	<p>CDDFT/CCG</p>	<p>A safe and caring community</p> <p>Enough support for people when needed.</p>	<p>Spending Every Pound Wisely</p> <p>Build Strong Communities</p>	<p>To be determined</p>	<p>To scrutinise the provision of end of life care for people suffering from dementia across all agencies and service providers</p>
<p>Medium Term Financial Plan</p>	<p>Special 10 January 2020</p>	<p>Elizabeth Davison</p>	<p>A place designed to thrive</p> <p>A safe and caring community</p> <p>More people healthy and independent</p> <p>Enough support for people when needed</p>	<p>Build strong communities</p> <p>Spend every pound wisely.</p> <p>Grow the Economy</p>		<p>To enable the Committee to give consideration to those areas of the MTFP within the Committee's remit</p>

Page 27

Council Plan	Special 10 January 2020	Neil Bowerbank	A place designed to thrive A safe and caring community More people healthy and independent Enough support for people when needed	Build strong communities Spend every pound wisely. Grow the Economy		
---------------------	----------------------------	-------------------	---	--	--	--

PROCESS FOR ADDING AN ITEM TO SCRUTINY COMMITTEE'S PREVIOUSLY APPROVED WORK PROGRAMME



PLEASE RETURN TO DEMOCRATIC SERVICES

QUAD OF AIMS (MEMBERS' REQUEST FOR ITEM TO BE CONSIDERED BY SCRUTINY)

SECTION 1 TO BE COMPLETED BY MEMBERS

NOTE – This document should only be completed if there is a clearly defined and significant outcome from any potential further work. This document should **not** be completed as a request for or understanding of information.

REASON FOR REQUEST?	RESOURCE (WHAT OFFICER SUPPORT WOULD YOU REQUIRE?)
PROCESS (HOW CAN SCRUTINY ACHIEVE THE ANTICIPATED OUTCOME?)	HOW WILL THE OUTCOME MAKE A DIFFERENCE?

Page 30

Signed Councillor

Date

SECTION 2 TO BE COMPLETED BY DIRECTORS/ASSISTANT DIRECTORS

(NOTE – There is an expectation that Officers will discuss the request with the Member)

Page 31

	Criteria
1. (a) Is the information available elsewhere? Yes No If yes, please indicate where the information can be found (attach if possible and return with this document to Democratic Services)	1. Information already provided/or will be provided to Member
(b) Have you already provided the information to the Member or will you shortly be doing so?	2. Extent of workload involved in meeting request
2. If the request is included in the Scrutiny Committee work programme what are the likely workload implications for you/your staff?	3. Request linked to an ongoing Scrutiny Committee item of work and can be picked up as part of that work
3. Can the request be included in an ongoing Scrutiny Committee item of work and picked up as part of that?	4. Subject to another Council process for enquiry or examination (such as Planning Committee or Licensing Committee)
4. Is there another Council process for enquiry or examination about the matter currently underway?	5. About an individual or entity that has a right of appeal
5. Has the individual or entity some other right of appeal?	6. Some other substantial reason
6. Is there any substantial reason (other than the above) why you feel it should not be included on the work programme?	

Signed **Position** **Date**

PLEASE RETURN TO DEMOCRATIC SERVICES

This page is intentionally left blank

**FORWARD PLAN
FOR THE PERIOD: 3 JUNE 2020 - 30 OCTOBER 2020**



What is a Forward Plan?

The Forward Plan is a list of all of the decisions, which are due to be taken by Cabinet. The Plan also includes all Key Decisions to be taken by Cabinet, a Member of the Cabinet or a designated Officer in accordance with the Local Authorities (Executive Arrangements) (Access to Information) (England) Regulation 2012. It also gives notice of the decisions that are likely to be taken in private. These decisions need to be published on the Forward Plan at least 28 clear days before the decision is to be taken. The Plan is updated on an ad hoc basis, but at least once a month. It can be accessed on the Council website www.darlington.gov.uk.

What is a Key Decision?

A key decision in the Council's constitution is defined as to:

1. result in the Borough Council incurring expenditure which is, or the making of savings which are, significant having regard to the budget for the service or function to which the decision relates; or
2. be significant in terms of its effects on communities living or working in an area comprising one or more wards in the Borough.

What are the reasons that a report can be held in private?

Whilst the majority of the Executive decisions listed in this Forward Plan will be open to the public and media organisations to attend, there will inevitably be some decisions to be considered that contains, for example, confidential, commercially or personal information.

The Forward Plan is a formal notice under the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 that some of the decisions listed in this Forward Plan will be held in private because the report will contain exempt information under Schedule 12A of the Local Government Act 1972 (set out below) and that the public interest in withholding the information outweighs the public interest in disclosing it.

1. Information relating to any individual
2. Information which is likely to reveal the identity of an individual
3. Information relating to the financial or business affairs of any particular person (including the authority holding that information)
4. Information relating to any consultations or negotiations, or contemplated consultations or negotiations, in connection with any labour relations matter arising between the authority or a Minister of the Crown and employees of, or office holders under the authority

5. Information in respect of which a claim to legal professional privilege could be maintained in legal proceedings
6. Information which reveals that the authority proposes:–
 - (a) to give under any enactment a notice under or by virtue of which requirements are imposed on a person; or
 - (b) to make an order or direction under any enactment
7. Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime.

Who takes Key Decisions?

Under the Council's constitution, key decisions are taken by Cabinet.

Are only Key Decisions listed in the Forward Plan?

The Council only has a statutory obligation to publish key decisions and decisions that are to be heard at a private meeting, however, all decisions to be taken by Cabinet are included on the plan to give Scrutiny Committees and the public an early indication of decisions to be made.

What does the Forward Plan tell me?

The Plan gives information about:

- What decisions are coming up
- What key decisions are coming up
- When those decisions are likely to be made
- Which decisions will be held in private
- Who will make those decisions
- The relevant Scrutiny Committee that the decision relates to
- What consultation will be undertaken
- Whether the decision will be an open or closed report (and the reason why) (public and press are not allowed to access closed reports and will not be able to stay in the Cabinet meeting when a closed report is being considered)
- Who you can contact for further information

How to make representations

Members of the public have a right to make representations to the Council, including whether they think that any items we are proposing to consider in private should be dealt with in public. The Council will consider any representations before a decision is taken.

Anyone who wishes to make representations to the decision maker about a particular matter should do so in writing, at least a week before it is due to be considered, either by letter or email to Lynne Wood using the contact details set out below.

How and who do I contact?

Each entry in the Plan indicates the names of all the relevant people to contact about that particular item.

For general information about the decision-making process and for copies of any documents outlined in the Forward Plan please contact Lynne Wood, Elections Manager, Democratic Services, Resources Group, Town Hall, Feethams, Darlington, DL1 5QT. Tel: 01325 405803. Email: lynne.wood@darlington.gov.uk.

Title	Decision Maker and Date
Annual Procurement Plan	Cabinet 14 Jul 2020
Waste Contract 2020	Cabinet 14 Jul 2020
Representation on Other Bodies 2020/21	Cabinet 14 Jul 2020
Project Position Statement and Capital Programme Monitoring Outturn 2019/20	Cabinet 14 Jul 2020
Replacement of Dog Control Orders with Public Space Protection Orders	Cabinet 14 Jul 2020
Revenue Budget Outturn 2019/20	Cabinet 14 Jul 2020
School Term Dates 2022/2023	Cabinet 15 September 2020
Xentrall Shared Services Annual Report	Cabinet 14 Jul 2020
Revenue Budget Monitoring - Quarter 1	Cabinet 14 Jul 2020
Project Position Statement and Capital Programme Monitoring - Quarter 1	Cabinet 14 Jul 2020
Draft Climate Change Strategy	Cabinet 14 Jul 2020
Darlington Sports Village	Cabinet 14 Jul 2020
Complaints Made to Local Government Ombudsman	Cabinet 15 Sep 2020
Agreed Syllabus for Religious Education	Cabinet 15 Sep 2020
Treasury Management Annual and Outturn Prudential Indicators 2019/20	Council 24 Sep 2020 Cabinet 15 Sep 2020
Regulatory Investigatory Powers Act (RIPA)	Cabinet 15 Sep 2020
Complaints, Compliments and Comments Annual Reports 2019/20	Cabinet 15 Sep 2020
Annual Review of the Investment Fund	Cabinet 15 Sep 2020

This page is intentionally left blank