

TITLE	Work Programme 2013/14
FOR CONSIDERATION BY	Health Overview and Scrutiny Committee on 25 November 2013
WARD	None Specific

HEALTH OVERVIEW AND SCRUTINY COMMITTEE

Work Programme from June 2013

Please note that the work programme is a 'live' document and subject to change at short notice.

The order in which items are listed at this stage may not reflect the order they subsequently appear on the agenda / are dealt with at the scrutiny meeting.

All Meetings start at 7pm in the Civic Offices, Shute End, Wokingham, unless otherwise stated.

DATE OF MEETING	ITEMS	PURPOSE OF REPORT AND REASON FOR CONSIDERATION	REPORTING OFFICER AND OFFICER CONTACT	COMMENTS
Monday 20 January 2014	Dementia Care			
	NHS Health Check	To be assured that the arrangements Public Health has put in place for the NHS Health Checks are effective going forward and to identify if there are any areas where take up may be lower	Darrell Gale, Public Health Consultant	
	Update from Care Quality Commission	To receive an update on the work of the Care Quality Commission	Tracey Halladay, Compliance Manager - CQC South (Central)	
	Update on implementation of agreed recommendations from Mental Health Task and Finish Group	To update HOSC on the implementation of agreed recommendations from the Mental Health T&FG	Various – CCG, Berkshire Healthcare NHS Foundation Trust, Adult Social Care	
	Performance Outcomes Report	To monitor performance	CCG	
	Healthwatch Update	Standing item	Healthwatch	
	Health Consultation Report	Standing item	Democratic Services	

DATE OF MEETING	ITEMS	PURPOSE OF REPORT AND REASON FOR CONSIDERATION	REPORTING OFFICER AND OFFICER CONTACT	COMMENTS
Monday 24 March 2014	Update from Health and Wellbeing Board	To inform HOSC of the work of the HWB		
	Performance Outcomes Report	To monitor performance	CCG	
	Healthwatch Update	Standing item	Healthwatch	
	Health Consultation Report	Standing item	Democratic Services	

Items also be considered:

- **Ambulance queuing and bed blocking**
- **Draft Quality Accounts**
 - Berkshire Healthcare Foundation Trust – David Cahill
 - Royal Berkshire Hospital – Dr Hester Wain
 - South Central Ambulance Trust – Duncan Burke

SITE VISITS FOR MEMBERS 2013/14

TIME OF YEAR PROPOSED	SUGGESTED PLACE OF VISITS	REASON FOR SITE VISITS	DATE OF VISITS (AGREED)	LEAD MEMBER (TO REPORT BACK TO HOSC)

ITEMS FOR REVIEW REFERRED FROM THE OVERVIEW AND SCRUTINY MANAGEMENT COMMITTEE FOR 2013/14

DATE OF MEETINGS	ITEM	PURPOSE OF REVIEW	REASON FOR CONSIDERATION	RESPONSIBLE OFFICER / CONTACT OFFICER
Task and Finish Group established 29.07.13	Meals on Wheels	It was felt that a review might look at possible ways of improving the take up of the service so that the unit cost of provision would decrease and that the quality of meals might be one issue that could be looked at as part of this.	Referred to the Committee by the OSMC	Kevin Jacob

**HEALTH OVERVIEW AND SCRUTINY COMMITTEE
TRACKING NOTE 2013/14**

ITEM NO.	ITEM/SUBJECT	OFFICER RESPONSIBLE	DATE OF MEETING	DUE DATE	COMMENTS	RESPONSE
1.	MINUTE 68 LINK UPDATE <ul style="list-style-type: none"> That the Dental Patient Information project report be circulated to Members once it had been approved by the Dental Commissioning Group. 	Tony Lloyd	22.01.13	When document available	Completed	
42	MINUTE 78 YOUR LOCAL ACCOUNT – ANNUAL REPORT FOR ADULT SOCIAL CARE 2011/12-2012/13 <ul style="list-style-type: none"> The Committee was disappointed that it had not been consulted regarding the first 'Your Local Account' and requested that they be involved at the consultation stage for the next edition. The Committee questioned whether the increase in the number of Children under 18 recorded in the report was correct. Mike Wooldridge agreed to review this. 	Mike Wooldridge	26.03.13	August/September 2013 As soon as possible	Completed	
3.	MINUTE 1 - MINUTES <ul style="list-style-type: none"> Malcolm Richards commented that car parking fees at the Royal Berkshire Hospital had increased and questioned whether the hospital received any of the parking fees. 	Madeleine Shopland	29.07.13	As soon as possible	Completed – response received 02.08.13	
4.	MINUTE 9 - CARE QUALITY COMMISSION <ul style="list-style-type: none"> The Committee asked that it receive an update in six months [on the work 	Tracey Halladay, Compliance Manager - CQC	29.07.13	20.01.14		

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	of the CQC in the Wokingham Borough].	South (Central)				
5. 43	MINUTE 11 - WOKINGHAM CLINICAL COMMISSIONING GROUP PERFORMANCE OUTCOMES REPORT JUNE 2013 <ul style="list-style-type: none"> The Committee asked that a representative from Wokingham Clinical Commissioning Group be invited to the September meeting to provide information on what was being done to improve the performance of these targets. ['Referral to Treatment (RTT) within 18 Weeks' and 'Ambulance Handover Delays'] 	CCG	29.07.13	11.09.13	Information contained in August performance report	
6.	MINUTE 21 - UPDATE ON NHS 111 <ul style="list-style-type: none"> Tim Holton went on to ask how people could complain if they wished. People could write, email or phone SCAS. Tim Holton questioned whether the Committee could receive monthly figures which were sent to the Board. John Nichols agreed that this information could be provided. 	SCAS	11.09.13	As soon as possible Ongoing	Completed - Link to feedback form circulated to Committee	
7.	MINUTE 22 - '7 DAY WORKING' – STROKE SERVICES <ul style="list-style-type: none"> A member of the public asked what proportion of patients who had a stroke, received thrombolysis (clot busting drug). Mandy Claridge 	RBH	11.09.13	As soon as possible	Completed -response received 12.09.13	Royal Berkshire consistently achieve above 21% of all ischaemic (clot type) strokes being thrombolysed, (receive clot busting drug) The Trust is meeting international levels

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	agreed to feed back.					of achievement, the expected level nationally is above 15%.
8.	MINUTE 23 - HEALTHWATCH UPDATE <ul style="list-style-type: none"> Members asked that they receive an update on Healthwatch Wokingham's '90 day programme' and information regarding the volume of calls the Healthwatch helpline had received, at its next meeting in November. 	Healthwatch Wokingham	11.09.13	25.11.13		
9. 44	MINUTE 24 - WOKINGHAM CLINICAL COMMISSIONING GROUP PERFORMANCE OUTCOMES REPORT AUGUST 2013 <ul style="list-style-type: none"> With regards to 'Diabetes 9 care processes', Kay Gilder expressed concern that this indicator was showing as red. A local data extract in July of the diabetes 9 care process performance for the 12 months up to the end of June had showed that Wokingham CCG had achieved 25.3% for patients with diabetes receiving all 9 care processes. Members asked whether this was low. It had been identified that the main issues had been with the urine albumin test and retinal screening and that both of these issues related to coding. Members questioned whether any reasons for the 	CCG	11.09.13	25.11.13		

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45	<p>underperformance of the indicator, other than coding issues, had been identified.</p> <ul style="list-style-type: none"> • Wokingham CCG had 3 Clostridium Difficile cases reported during June 2013 against a trajectory of 3 for the month. Sam Rahmouni asked whether these had occurred at a single site. • Members requested that the South Central Ambulance Service NHS Foundation Trust be invited to its next meeting to explain why the 'Ambulance handover and crew clear delays' and the 'Ambulance Response Times' targets were not being achieved and what action was being taken to improve matters. 	SCAS				
10.	<p>MINUTE 28 - WORK PROGRAMME 2013/14</p> <ul style="list-style-type: none"> • The Committee would request an update on its work, from the Health and Wellbeing Board, at the November meeting. • At the Committee's previous meeting, the Chairman of the Health and Wellbeing Board had suggested that Members may wish to visit Beeches Manor, extra care housing for those with dementia. The Committee would be considering dementia care at its January meeting and felt that a site visit around that time would provide a picture of some of the facilities available to those with dementia. 	<p>Health & Wellbeing Board</p> <p>Democratic Services</p>	11.09.13	<p>25.11.13</p> <p>January</p>		

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	<ul style="list-style-type: none"> The Committee agreed to consider a report at its November meeting regarding the implications of the Francis Report for scrutiny. It was agreed that an update on NHS Health Checks, which were now commissioned by Public Health, be requested for the Committee's January meeting. 	<p>Democratic Services</p> <p>Public Health</p>		<p>25.11.13</p> <p>20.01.13</p>		

Glossary:

- **Bariatrics** – branch of medicine that deals with the causes, prevention, and treatment of obesity.
- **BETT** – Berkshire East Talking Therapies – free and confidential counselling service with a team of advisors and therapists which covers the Berkshire East area.
- **C&B – (Choose and Book)** is a national electronic referral service which gives patients a choice of place, date and time for their first outpatient appointment in a hospital or clinic.
- **CCG** – Clinical Commissioning Group
- **CDU** – Clinical Decisions Unit
- **Contract Query Notice** - A specific action taken by the PCT against the Provider as per the contract. It is a notice served when a contractual target is not being met. As a result of such a notice, an action must be agreed that results in recovery of performance within a set timescale.
- **COF** - Commissioning Outcomes Framework
- **CPA - Care Programme Approach** - is a system of delivering community mental health services to individuals diagnosed with a mental illness
- **CQUIN – Commissioning for Quality and Innovation.** is an incentivised money reward scheme that has been developed to allocate payments to providers if they meet quality outcomes identified to improve local quality issues.
- **CSU** - Commissioning Support Unit
- **Cytology** – the study of cells
- **DPH** – Director of Public Health
- **EPR – Electronic Patient Record** – means of viewing a patient’s medical record via a computerised interface.
- **ESD** – Early Supported Discharge service - pathways of care for people transferred from an inpatient environment to a primary care setting to continue a period of rehabilitation, reablement and recuperation at a similar level of intensity and delivered by staff with the same level of expertise as they would have received in the inpatient setting.
- **FFCE - First Finished Consultant Episode** - first completed episode of a patient's stay in hospital.
- **FPH** – Frimley Park Hospital

- **GRACe** - General Referral Assessment Centre
- **GSCC** – General Social Care Council
- **HASU** - Hyper-Acute Stroke Unit
- **HWPFT** - Heatherwood and Wexham Park Hospitals NHS Foundation Trust
- **LES** – Local Enhanced Service
- **LOS** - Length of Stay
- **LTC** – long term conditions
- **MH** – Mental Health
- **Monitor** - Oversees the performance of NHS Foundation Trusts
- **MSA** - Mixed sex accommodation
- **Never Events** - Never Events are serious, largely preventable patient safety incidents that should not occur if the available preventative measures have been implemented
- **NHSCB** – National Health Service Commissioning Board (now NHS England)
- **NHS Safety Thermometer** –tool to measure 4 high volume patient safety issues – falls in care; pressure ulcers; urinary infections (in patients with a urinary catheter); and treatment for VTE
- **NICE** – National Institute of Health and Care Excellence
- **OHPA** – Office of the Health Professions Regulator
- **ONS** – Office for National Statistics
- **Ophthalmology** – branch of medicine that deals with diseases of the eye
- **Orthopaedics** - branch of surgery concerned with conditions involving the musculoskeletal system
- **PALS** – Patient Advice and Liaison Service
- **PHE** – Public Health England
- **PPCI** – Primary Percutaneous Coronary Intervention
- **PPIs** - Proton Pump Inhibitors

- **PROMs** - Patient Reported Outcome measures are questions asked of patients before and after a specific treatment, to measure improvements to quality of life from the patient's point of view.
- **QIPP** - Quality, Innovation, Productivity and Prevention. The purpose of the programme is to support commissioners and providers to develop service improvement and redesign initiatives that improve productivity, eliminate waste and drive up clinical quality.
- **RBFT** - Royal Berkshire NHS Foundation Trust
- **RCA – Root Cause Analysis** - When incidents happen, Root Cause Analysis Investigation is a means of ensuring that lessons are learned across the NHS to prevent the same incident occurring elsewhere.
- **RTT - referral to treatment time** – waiting time between being referred and beginning treatment.
- **SCAS** – South Central Ambulance Service
- **SCR – Summary Care Record** - electronic record which contains information about the medicines you take, allergies you suffer from and any bad reactions to medicines you have had in the past.
- **SHA** – Strategic Health Authority
- **SHMI - Summary Hospital-level Mortality Indicator** - ratio between the actual number of patients who die following treatment at a trust and the number that would be expected to die on the basis of average England figures, given the characteristics of the patients treated there. Covers all deaths reported of patients who were admitted to non-specialist acute trusts in England and either die while in hospital or within 30 days of discharge.
- **SIRI** – Serious incidents that require investigation
- **SLA** – Service Level Agreement
- **SSNAP** - Sentinel Stroke National Audit Programme
- **STAR-PU - Specific Therapeutic group Age-sex Related Prescribing Units** - a way of weighting patients to account for differences in demography when distributing resources or comparing prescribing.
- **Thrombolysis** – breakdown of blood clots by pharmacological means
- **TIA** - transient ischemic attack – mini stroke
- **TTO** – to take out
- **TVPCA** – Thames Valley Primary Care Agency

- **VTE** - venous thrombosis -blood clot that forms within a vein
- **WTE** - whole-time equivalents (in context of staff)
- **YLL** – years of life lost
- **YTD** – Year to date