

<b>TITLE</b>	<b>Work programme 2014/15</b>
<b>FOR CONSIDERATION BY</b>	Health Overview and Scrutiny Committee on 10 September 2014
<b>WARD</b>	None Specific

## HEALTH OVERVIEW AND SCRUTINY COMMITTEE

### Work Programme 2014/15 from July 2014

**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	COUNCIL PRIORITY/ UNDERPINNING PRINCIPLE	COMMENTS
Tuesday 18 November 2014	Increased A&E attendance of Wokingham residents aged in their 40s-60s	To receive an update on increasing A&E attendance of Wokingham residents aged in their 40s-60s.	RBH/CCG/Public Health	Look after the vulnerable  Improve health, wellbeing and quality of life	
	Update on RBH – (from CCG as commissioners)	To receive an update from commissioners on the main acute trust serving Wokingham residents	CCG	Look after the vulnerable  Improve health, wellbeing and quality of life	
	Preparedness for obligations of the Care Bill	To seek assurance regarding the Council's preparedness for meeting the obligations of the Care Bill (assuming Royal Assent)	Director Health and Wellbeing/ Head of Adult Social Care	Look after the vulnerable  Improve health, wellbeing and quality of life	
	Update from Health and Wellbeing Board	To inform HOSC of the work of the HWB	Chairman Health & Wellbeing Board	Look after the vulnerable  Improve health, wellbeing and quality of life	
	Adult Safeguarding Annual Report	General update and review of the Annual Report	Sarah O'Connor, Adult Safeguarding	Look after the vulnerable	

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			Service Manager	Improve health, wellbeing and quality of life	
	Performance Outcomes Report	To monitor performance	CCG	Improve health, wellbeing and quality of life	
	Health Consultation Report	Standing item	Democratic Services	Improve health, wellbeing and quality of life	
	Healthwatch update	Standing item	Democratic Services	Look after the vulnerable Improve health, wellbeing and quality of life	
	Work Programme	Standing item	Democratic Services		

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Monday 19 January 2015	Update on RBH	To receive a general update on performance, patient satisfaction and any issues identified in the CQC inspection (March 2014)	RBH	Look after the vulnerable  Improve health, wellbeing and quality of life	
	Workforce use – increased use of nurses and patients' views	To receive information on increasing use of nurses	CCG/Healthwatch	Look after the vulnerable  Improve health, wellbeing and quality of life	
	Performance Outcomes Report	To monitor performance	CCG	Improve health, wellbeing and quality of life	
	Health Consultation Report	Standing item	Democratic Services	Improve health, wellbeing and quality of life	
	Healthwatch update	Standing item	Democratic Services	Look after the vulnerable  Improve health, wellbeing and quality of life	
	Work Programme	Standing item	Democratic Services		

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Monday 23 March 2015	Update on implementation of Better Care Fund Plan (particularly integration of short term care)	To update the Committee on progress being made	Adult Social Care / CCG	Look after the vulnerable  Improve health, wellbeing and quality of life	
	Update from Health and Wellbeing Board	To inform HOSC of the work of the HWB	Chairman Health & Wellbeing Board	Look after the vulnerable  Improve health, wellbeing and quality of life	
	Draft Work Programme 2015/16	To consider the Committee's draft Work Programme for 2015/16	Democratic Services		
	Healthwatch Wokingham Borough Annual Report	To receive the annual report of Healthwatch Wokingham Borough	Healthwatch Wokingham Borough	Look after the vulnerable  Improve health, wellbeing and quality of life	
	Performance Outcomes Report	To monitor performance	CCG	Improve health, wellbeing and quality of life	

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	<b>Health Consultation Report</b>	Standing item	Democratic Services	Improve health, wellbeing and quality of life	

**Currently unscheduled topics:**

- Draft Quality Accounts
  - Berkshire Healthcare NHS Foundation Trust
  - Royal Berkshire Hospital NHS Foundation Trust
  - South Central Ambulance NHS Foundation Trust
- Ambulance queuing and bed blocking
- CCG Funding allocation
- Access to cataract services

**Possible topics for 2015/16:**

- Berkshire Public Health Agreement
- Sexual health contract procurement look back (for early 2015/16)
- Health Protection Arrangements

**Possible referrals to Children's Services Overview and Scrutiny Committee/ joint working**

- School nursing – involving internal and external partners
- 0-5 health offer (health visiting service) – late 2015/16?

**HEALTH OVERVIEW AND SCRUTINY COMMITTEE  
TRACKING NOTE 2014/15**

ITEM NO.	ITEM/SUBJECT	OFFICER RESPONSIBLE	DATE OF MEETING	DUE DATE	COMMENTS	RESPONSE
1. 2013/ 14	<b>MINUTE 36 - UPDATE ON ADULT SOCIAL CARE/ OPTALIS STAFF TRAINING</b> <ul style="list-style-type: none"> <li>• The Committee asked that it receive a further update on the training in 6 months' time.</li> </ul>	Optalis (Mette Le Jakobsen)	25.11.13	May 2014		
2. 2013/ 14 69	<b>MINUTE 37 - POTENTIAL IMPLICATIONS OF THE FRANCIS REPORT FOR THE HEALTH OVERVIEW AND SCRUTINY COMMITTEE</b> <ul style="list-style-type: none"> <li>• A Working Group be established to look at the next steps the Committee may wish to take in response to the recommendations and lessons from the Francis report on the Mid Staffordshire NHS Trust and report back to a future Committee meeting.</li> </ul>	HOSC	25.11.13	Ongoing	Completed	
3. 2013/ 14	<b>MINUTE 41 - WORK PROGRAMME 2013/14</b> <ul style="list-style-type: none"> <li>• Following the presentation from the South Central Ambulance Services, the Chairman asked whether Members were assured that action was being taken to improve targets. Members agreed that it was important to continue to monitor this</li> </ul>		25.11.13	24.03.13		



ITEM NO.	ITEM/SUBJECT	OFFICER RESPONSIBLE	DATE OF MEETING	DUE DATE	COMMENTS	RESPONSE
67	<p>area. Ian Pittock commented that coordination between the commissioners, the Ambulance Trust and the Hospitals was important and suggested that the Committee may wish to look at the whole system holistically. It was proposed that consideration be given to inviting the commissioners, the ambulance service and representatives from the Royal Berkshire Hospital to the Committee's March meeting to further explain and give their views on the delays in ambulance delays.</p> <ul style="list-style-type: none"> <li>It was noted that the first four reports from the [CQC's] new hospital inspections regime had been published. These would be circulated to the Committee.</li> </ul>			Following meeting	Completed	
4. 2013/ 14	<p><b>MINUTE 58 - REPORT ON DEMENTIA SERVICE DEVELOPMENT ACROSS THE WEST OF BERKSHIRE</b></p> <ul style="list-style-type: none"> <li>With regards to referrals 2013-14 Q1-3, Tim Holton asked why 23 Wokingham patients were recorded as 'waiting to be seen.' Dr Madgwick commented that this may be the result of people delaying appointments. Drs Wilson and Madgwick agreed to establish why 23 people had been recorded as 'waiting to be seen' and to feedback to the Committee.</li> <li>In response to a question regarding specialist accommodation for those</li> </ul>	<p><b>Drs Wilson and Madgwick</b></p> <p><b>Stuart Rowbotham</b></p>	24.03.14		Response received and circulated	

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	with dementia, Stuart Rowbotham commented that in addition to Suffolk Lodge and Beeches Manor there were a number of independent specialists within the area. Stuart Rowbotham agreed to establish the number of registered beds currently filled and to feedback to the Committee.				Response received and circulated	
5. 2013/14	<b>MINUTE 63 - WOKINGHAM CLINICAL COMMISSIONING GROUP PERFORMANCE OUTCOMES REPORT FEBRUARY 2014</b> <ul style="list-style-type: none"> <li>The Chairman write to the Clinical Commissioning Group on behalf of the Committee expressing concern that the Ambulance Handover Delay target continued not to be met.</li> </ul>	Councillor Holton	24.03.14		Completed	
	<b>MINUTE 64 - HEALTH OVERVIEW AND SCRUTINY COMMITTEE DRAFT WORK PROGRAMME 2014/15</b> <ul style="list-style-type: none"> <li>Malcolm Richards commented that Philip Houldsworth had had concerns regarding post stroke care. The Principal Democratic Services Officer agreed to establish whether he wished for this topic to be included in the Committee's work programme.</li> <li>Members agreed to refer School nursing – involving internal and external partners and 0-5 health offer</li> </ul>	Madeleine Shopland	24.03.14	Ongoing	Completed	

ITEM NO.	ITEM/SUBJECT	OFFICER RESPONSIBLE	DATE OF MEETING	DUE DATE	COMMENTS	RESPONSE
	<p>(health visiting service) (for possible consideration late 2015/16) to the Children's Services Overview and Scrutiny Committee for possible consideration.</p> <ul style="list-style-type: none"> <li>A scrutiny review suggestion had been received from the Executive Member for Health and Wellbeing regarding Day care services; Residents needing two carers as part of their care package and employment support beyond six weeks. Nicola Strudley suggested that as part of this, Members might wish to look at 15 minute care calls.</li> </ul>					

## Glossary:

- **Bariatrics** – branch of medicine that deals with the causes, prevention, and treatment of obesity.
- **BHFT** – Berkshire Healthcare NHS Foundation Trust
- **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.
- **CAM** - Confusion Assessment Method
- **CCG** – Clinical Commissioning Group
- **CDU** – Clinical Decisions Unit
- **CHIS** - Child Health Information Systems - patient administration systems that provide a clinical record for individual children and support a variety of child health and related activities, including universal services for population health and support for statutory functions.
- **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
- **CPN** - Community Psychiatric Nurse
- **CQC** – Care Quality Commission
- **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.
- **CST** - Cognitive Stimulation Therapy
- **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
- **HALO** - Hospital Ambulance Liaison Officer
- **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
- **MHP** - mental health practitioner
- **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
- **OPMHS** – Older Persons Mental Health Services
- **Orthopaedics** - branch of surgery concerned with conditions involving the musculoskeletal system
- **OT** – Occupational Therapy
- **Outlier** - a person or thing situated away or detached from the main body or 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.
- **RAT** – Rapid Access Treatment
- **RBFT/ RBH** - Royal Berkshire NHS Foundation Trust
- **RCA – Root Cause Analysis** - When incidents happen, Roots Cause Analysis Investigation is a means of ensuring that lessons are learned across the NHS to prevent the same incident occurring elsewhere.
- **RGN** - Registered General Nurses
- **RMN** - Registered Mental Health Nurses
- **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.

- **SEAP** – Support Empower Advocate Promote - confidential, independent advocacy service (health and mental health)
- **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.
- **Talking Therapies** – free and confidential counselling service with a team of advisors and therapists.
- **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
- **WBCH** – West Berkshire Community Hospital
- **WTE** - whole-time equivalents (in context of staff)
- **YLL** – years of life lost
- **YPWD** - Younger People with Dementia
- **YTD** – Year to date