ITEM NO: 39.00

TITLE Work Programme 2014/15

FOR CONSIDERATION BY Health Overview and Scrutiny Committee on 18 November 2014

None Specific **WARD**

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
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	
	Briefing on effect of pollution on public health and wellbeing in Wokingham Borough	To determine if this is an area of concern for the Borough	Public Health	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	

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				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	
		Standing item	Democratic	Improve health,	

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	Health Consultation Report		Services	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	MINUTE 36 - UPDATE ON ADULT SOCIAL CARE/ OPTALIS STAFF TRAINING	Optalis (Mette Le Jakobsen)	25.11.13	May 2014	Deferred	
	 The Committee asked that it receive a further update on the training in 6 months' time. 					
2. 2013/ 14	MINUTE 41 - WORK PROGRAMME 2013/14		25.11.13			
44	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 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			24.03.13		
	 delays in ambulance delays. It was noted that the first four reports from the [CQC's] new hospital 			Fallender	Completed	
	inspections regime had been published.			Following		

ITEM NO.	ITEM/SUBJECT	OFFICER RESPONSIBLE	DATE OF MEETING	DUE DATE	COMMENTS	RESPONSE
	These would be circulated to the Committee.			meeting		
3. 2013/ 14	MINUTE 58 - REPORT ON DEMENTIA SERVICE DEVELOPMENT ACROSS THE WEST OF BERKSHIRE		24.03.14			
	 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. In response to a question regarding specialist accommodation for those 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 	Drs Wilson and Madgwick Stuart Rowbotham			Response received and circulated Response received and circulated	
4.	Committee. MINUTE 63 - WOKINGHAM	The state of the s	24.03.14			
2013/ 14	CLINICAL COMMISSIONING GROUP PERFORMANCE OUTCOMES REPORT FEBRUARY 2014					

ITEM NO.	ITEM/SUBJECT	OFFICER RESPONSIBLE	DATE OF MEETING	DUE DATE	COMMENTS	RESPONSE
THE REAL PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDR	 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. 	Councillor Holton			Completed	
5.	MINUTE 19 - UPDATE ON STRATEGIC DEVELOPMENT LOCATIONS AND PRIMARY CARE FACILITIES The Committee requests information on local Primary Care workforce	NHS England	10.09.14		Completed - circulated	
6. 45	levels. MINUTE 20 - REPORT OF THE POSSIBLE IMPLICATIONS FOR SCRUTINY OF THE FRANCIS REPORT WORKING GROUP		10.09.14			
	 It was suggested that contact with the Care Quality Commission (CQC) could be improved and it was recommended that the Chairman of HOSC and one other Committee member maintain contact with the local CQC managers and meet with them no less than twice a year. Nicola Strudley agreed to provide the 	HOSC Nicola Strudley			Completed Completed	
7.	local CQC contact details. MINUTE 22 - WOKINGHAM CLINICAL COMMISSIONING GROUP PERFORMANCE OUTCOMES REPORT SEPTEMBER 2014		10.09.14			

ITEM NO.	ITEM/SUBJECT	OFFICER RESPONSIBLE	DATE OF MEETING	DUE DATE	COMMENTS	RESPONSE
_47	 With regards to Ambulance Response Times, Members were disappointed to note that performance against the Red 2 standard in 8 minutes had deteriorated further in June to 71.7%. It was noted that although the 75% target with South Central Ambulance Service was only required to be delivered on a Thames Valley basis, the CCG had agreed a 70% floor target in the contract at Berkshire West level and that the Trust achieved this 70% standard. Tim Holton questioned why the 70% target had been put in place. The CCG was in the highest performing quintile nationally for the Composite Avoidable Non-Elective Admissions measure and it was therefore difficult to make significant reductions in this area. It was noted that during Quarter One, Wokingham CCG had 514 non-elective admissions in this category against a target of 500 and was therefore marginally outside of target levels. Kate Haines asked why the target had not been met and whether there was a correlation with A&E figures. 	CCG	10.09.14	Response received and circulated Response received and circulated		
8.	MINUTE 24 - WORK PROGRAMME 2014/15 The Committee was due to receive an update on increased A&E attendance of Wokingham residents aged in their 40s-60s at its November meeting. It was	RBH/CCG/ Public Health	10.09.14			

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NO	suggested that this include: Perceived reasons for this increase; The impact on A&E Action being taken to reduce the A&E attendance of Wokingham residents aged in their 40s-60s. The Committee had requested an update from the CCG as commissioners on the Royal Berkshire NHS Foundation trust, one of the main acute trust serving Wokingham residents, for its November meeting. Members were asked to inform the Principal Democratic Services Officers of areas that they would like the CCG to focus upon. A&E wait times, equipment and dermatology were suggested. With regards to the Adult Safeguarding Annual Report, Kate Haines requested that the Committee also be provided with the previous year's report as to enable comparisons. It was noted that the Overview and Scrutiny Management Committee at its June meeting had considered a scrutiny suggestion from a member of the public regarding the effect of pollution on public health and wellbeing in Wokingham Borough and had suggested that the Health Overview and Scrutiny Committee be	CCG Public Health	METING	19.01.14		
	Overview and Scrutiny Committee be asked to consider the issue and that Officers be asked to provide data and a commentary to that Committee. A briefing on this issue					

ITEM ITEM/SUBJECT NO.	OFFICER RESPONSIBLE	DATE OF MEETING	DUE DATE	COMMENTS	RESPONSE
was scheduled for the Committee's January meeting.	Securities of the section of the sec				

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.
- CNS Clinical Nurse Specialist
- 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
- CoSRR Continuity of Services risk rating
- 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