

Adult Social Care and Health Overview and Scrutiny Committee

21 November 2018

Agenda

A meeting of the Adult Social Care and Health Overview and Scrutiny Committee will be held at the **SHIRE HALL, WARWICK on Wednesday, 21 November 2018 at 10.30a.m.** **Please note that there is no briefing session prior to this meeting.**

Please note that this meeting will be filmed for live broadcast on the internet. Generally, the public gallery is not filmed, but by entering the meeting room and using the public seating area you are consenting to being filmed. All recording will be undertaken in accordance with the Council's Standing Orders.

The agenda will be: -

1. **General**

(1) **Apologies**

(2) **Disclosures of Pecuniary and Non-Pecuniary Interests**

Members are required to register their disclosable pecuniary interests within 28 days of their election of appointment to the Council. A member attending a meeting where a matter arises in which s/he has a disclosable pecuniary interest must (unless s/he has a dispensation):

- Declare the interest if s/he has not already registered it
- Not participate in any discussion or vote
- Must leave the meeting room until the matter has been dealt with
- Give written notice of any unregistered interest to the Monitoring Officer within 28 days of the meeting

Non-pecuniary interests must still be declared in accordance with the Code of Conduct. These should be declared at the commencement of the meeting.

(3) Chair's Announcements

(4) Minutes of previous meetings

To confirm the minutes of the meeting held on 26 September 2018.

2. Public Speaking

Any member of the public who is resident or working in Warwickshire, or who is in receipt of services from the Council, may speak at the meeting for up to three minutes on any matter within the remit of the Committee. This can be in the form of a statement or a question. If you wish to speak please notify Paul Spencer in writing at least two working days before the meeting. You should give your name and address and the subject upon which you wish to speak. Full details of the public speaking scheme are set out in the Council's Standing Orders.

3. Questions to the Portfolio Holders

Up to 30 minutes of the meeting is available for Members of the Committee to put questions to the Portfolio Holders: Councillor Les Caborn (Adult Social Care and Health) and Councillor Jeff Morgan (Children's Services) on any matters relevant to the remit of this Committee.

4. George Eliot Hospital

The Chair and Managing Director of the George Eliot Hospital Trust will provide an update and respond to questions. The Clinical Commissioning Group has also been invited to attend.

5. Update from Healthwatch Warwickshire

Chris Bain, Chief Executive of Healthwatch Warwickshire will present their Annual Report.

6. One Organisational Plan Quarterly Progress Report Q2

To consider the latest One Organisational Plan quarterly progress report.

7. Work Programme

This report reviews the recent work of the Adult Social Care and Health Overview and Scrutiny Committee and seeks the Committee's views on the proposed forward work programme.

8. Any Urgent Items

Agreed by the Chair.

DAVID CARTER
Joint Managing Director

Adult Social Care and Health Overview and Scrutiny Committee Membership

Councillors Helen Adkins, Mark Cargill, Clare Golby (Vice Chair), Anne Parry, Dave Parsons, Wallace Redford (Chair), Kate Rolfe, Andy Sargeant, Jill Simpson-Vince and Adrian Warwick.

District and Borough Councillors (5-voting on health matters*) One Member from each district/borough in Warwickshire. Each must be a member of an Overview and Scrutiny Committee of their authority:

North Warwickshire Borough Council:	Councillor Margaret Bell
Nuneaton and Bedworth Borough Council:	Councillor Chris Watkins
Rugby Borough Council	Vacant
Stratford-on-Avon District Council	Councillor Christopher Kettle
Warwick District Council:	Councillor Pamela Redford

Portfolio Holders:- Councillor Les Caborn (Adult Social Care and Health)
Councillor Jeff Morgan (Children's Services)

General Enquiries: Please contact Paul Spencer on 01926 418615
E-mail: paulspencer@warwickshire.gov.uk

* The agenda for this meeting includes item 6 that relates solely to adult social care.

**Minutes of the meeting of the
Adult Social Care and Health Overview and Scrutiny Committee
held on 26 September 2018**

Present:

Members of the Committee

Councillors, Mark Cargill, Richard Chattaway, Clare Golby (Vice Chair), Anne Parry, Dave Parsons, Wallace Redford (Chair), Kate Rolfe, Andy Sargeant, Jill Simpson-Vince and Adrian Warwick

Other County Councillors

Councillor Les Caborn, Portfolio Holder for Adult Social Care and Health
Councillor Alan Webb

District/Borough Councillors

Councillor Margaret Bell (North Warwickshire Borough Council)
Councillor Pamela Redford (Warwick District Council)

Officers

Dr John Linnane, Director of Public Health and Head of Strategic Commissioning
Nigel Minns, Strategic Director for the People Directorate
Pete Sidgwick, Head of Social Care and Support
Paul Spencer, Senior Democratic Services Officer
Jane Alsop, Vanessa Belton, Mandeep Kalsi and Melanie Parry, Planning, Performance & Improvement

Also Present:

Robyn Dorling, Engagement and Outreach Officer, Healthwatch Warwickshire
Jenni Northcote, Chief Strategy and Primary Care Officer Warwickshire North and Coventry & Rugby Clinical Commissioning Groups (CCGs)

1. General

(1) Apologies for absence

Councillor Helen Adkins (replaced by Councillor Richard Chattaway)
Councillor Christopher Kettle (Stratford District Council)
Councillor Chris Watkins (Nuneaton & Bedworth Borough Council)
Chris Bain, Chief Executive, Healthwatch Warwickshire

(2) Members Declarations of Interests

None

(3) Chair's Announcements

The Chair confirmed that on 28 September the first meeting would be held of the Oxfordshire, Warwickshire and Northamptonshire 'super' health overview and scrutiny committee. This group would review the maternity service reconfigurations at the Horton General Hospital in Oxfordshire. Councillor Cargill would attend the meeting on his behalf. The Chair had a meeting with his Coventry counterpart on 1 October. There had been further delays in the stroke service reconfiguration for Coventry and Warwickshire. It was now

anticipated that the NHS England assurance process would not be completed until November. The Chair asked that the members of the GP Services task and finish group review a consultation document from the Royal College of General Practitioners and submit their views to himself and the Portfolio Holder for Adult Social Care and Health, to enable the preparation of a response on behalf of the County Council. A copy of the review report would also be submitted.

(4) Minutes

The minutes of the Adult Social Care and Health Overview and Scrutiny Committee meeting held on 11 July 2018 were agreed as a true record and signed by the Chair.

2. Public Question Time

None.

3. Questions to the Portfolio Holders

Questions to Councillor Les Caborn, Portfolio Holder for Adult Social Care and Health

Councillor Parsons had attended one of the recent engagement events for the stroke service reconfiguration. He was more positive about the proposals, speaking particularly about the plans for additional parking provision at University Hospitals Coventry and Warwickshire (UHCW). These sessions were useful, but none had been arranged in the evenings, making it difficult for people who worked during the daytime to participate. He asked the portfolio holder to request additional evening engagement sessions and to seek more information about how the West Midlands Ambulance Service (WMAS) had been engaged in the proposals.

Councillor Caborn responded, noting that the review of stroke services had been ongoing for eight years. He was confident that WMAS had been involved. Whilst this wasn't a County Council review, he would discuss the points raised with the Director of Public Health. Jenni Northcote of Warwickshire North and Coventry & Rugby CCGs also offered to feed back the points raised.

Councillor Margaret Bell asked about the cross border service arrangements with neighbouring counties. This included step down care when patients were discharged from the acute stroke unit at UHCW. Councillor Caborn noted that the review of stroke services was a national issue, rather than just involving Coventry and Warwickshire, but he would look into the points raised.

There was no clear date for the conclusion of this review. Another member commented that many NHS reconfigurations were process led, without a visible service improvement. He asked if the portfolio holder would pass on these frustrations and Councillor Caborn confirmed he did make these points in his meetings with health colleagues. The portfolio holder was asked to provide a briefing document which identified the barriers delaying service reconfigurations and the options available, with a view to lobbying health service colleagues. He agreed to examine this request with officers and would report back to the Committee.

A related point was on WMAS response times and travel times to UHCW. Jenni Northcote confirmed that the CCG did have robust performance monitoring arrangements for WMAS.

4. Director of Public Health Annual Report

The Committee received a report and presentation from Dr John Linnane, Director of Public Health and Head of Strategic Commissioning (DPHHSC). The Director of Public Health's statutory Annual Report provided a vehicle for informing local people about the health of their community and information for decision makers in local health services and authorities on health gaps and priorities that needed to be addressed. This year's report included an overview of the health and wellbeing of the Warwickshire population, with a focus on the impact of social media on young people growing up in Warwickshire, together with information on progress with the 2017 recommendations. The report made a series of recommendations which required a concerted joint effort in order to be achieved.

In presenting his report, Dr Linnane thanked the schools for their participation in securing considerable feedback from young people, to inform the report. Key points from the report were the impact on young people's sleep, the effects of cyber bullying and the extent of some 'super users' use of social media.

The report included sections on the general health and wellbeing of Warwickshire's population. Dr Linanne confirmed the generally positive position when compared to most of the country, also referring to the data on life expectancy and the following areas of concern in Warwickshire:

- Alcohol admissions - under 18 years old
- Injuries in children
- Suicide rate
- Hospital admissions for self-harm (10-24 years old)

Questions and comments were submitted on the following areas, with responses provided as indicated:

- Members discussed the numbers of suicides in Warwickshire, which statistically was higher than for similar authorities. Research was undertaken with organisations including the Coroner's Office, Transport Police and the National Farmers' Union to audit cases, but this work wasn't published.
- Infant mortality data was also high for some areas. As with suicides, the actual number of cases was small. There were several contributors with quoted examples being smoking during pregnancy, poor nutrition and alcohol/drug addiction. The DPHHSC offered to provide a briefing note with additional information on this area.
- There was a generation gap in terms of knowledge about social media. Some of the issues that members noted were the impact on sleep, reduction in physical exercise and anti-social aspects of cyber bullying and young people being coerced into sharing inappropriate images. The Council would need to use the social media platforms to get key messages to young people.
- It was impossible to 'police' the internet or social media, but parental responsibility was a key aspect. Providing advice for parents was one way the County Council could assist. Many younger children were now required

to use the internet for research to complete their homework and needed supervision.

- This report had also been presented to the multi-agency Health and Wellbeing Board. Work took place with a range of other agencies, an example being the Royal Society for the Prevention of Accidents. Childhood safety was a key area and reference was also made to the numbers of people requiring paediatric services or presenting at A&E. The DPHHSC offered to provide a briefing note with additional information on this area.
- Several members praised the report. The involvement of young people was needed to understand their perspective on the use of social media. This had been a key strand of the research for the report with excellent involvement from Warwickshire schools and over 2300 pupils participating.
- The findings on self-harm were worrying and it was important to address this at an early stage to reduce potential for escalation to suicide. This point was noted and whilst there had been good engagement, more could be done to address mental wellbeing. The results of the survey would be fed back to schools.
- The gap between life expectancy and healthy life expectancy, known as the 'window of need', was discussed. The data for Warwickshire was better than the average for the regional area but it was a significant issue. The DPHHSC offered to provide a briefing note with additional information on this area.
- For the teenage conception data it was confirmed that this would include planned pregnancies. However, the vast majority of pregnancies would be unplanned for this age group. A lot of work was being undertaken to reduce teenage conception, it being stated that this was a constant issue.
- There were health inequalities when comparing different areas of Warwickshire and many contributors for this, but good educational attainment and employment opportunities were known factors to having a better and healthier life expectancy.
- Road traffic fatalities were discussed. There was a significant number of major roads crossing the County which was a key factor. From data, many of the fatalities involved people who were not Warwickshire residents. There was a consensus that the concerns on road traffic fatalities should be referred to the Communities Overview and Scrutiny Committee for consideration.
- A member questioned whether there was a direct link between the cuts to Public Health budgets, service reductions and the resultant report data. It was noted that the ring fenced funding allocated for Public Health in Warwickshire was the second lowest per head of population in the region.
- Points were made about sex education in schools, guidance on managing relationships and social media increased dramatically the need for young people and their parents to receive guidance including spotting potential dangers.
- Councillor Caborn thanked Dr Linnane for the excellent report, which was easy to read and he encouraged members to distribute it widely within their communities.
- Nigel Minns provided reassurance to the Committee that the data from this report and others were used to inform decision making, both at individual organisations and through multi-agency groups including the Community Safety Partnership and a specialist sub-group of the Warwickshire Safeguarding Children's Board. Guidance was provided to parents through various means. Members were encouraged to look at the cyber safe website as an example, which showed how services were connected. He offered to

provide a further briefing note from the Community Safety Partnership to give additional information to members.

Resolved

That the Committee:

1. Notes and supports the Director of Public Health Annual Report 2018.
2. Agrees to endorse the recommendations stated in the report.

5. Performance Monitoring - Clinical Commissioning Groups (CCGs): April 2017-March 2018

In November 2017, the Committee received the commissioning intentions of the three CCGs and this item provided a report back on performance. Jenni Northcote presented the feedback on behalf of the CCGs.

Additionally, Dr John Linnane the Director of Public Health and Head of Strategic Commissioning (DPHHSC) had prepared a performance report. This was derived from reports considered by the Governing Boards of the CCGs. It provided a snapshot of the generally good performance across the three CCGs. Dr Linnane referred to specific indicators concerning referral to treatment times, cancer waits, GP provision, mixed sex accommodation breaches and cancelled operations. A particular area of challenge was the A&E four hour wait target which all CCGs had failed to achieve.

All three CCG's commissioned Coventry and Warwickshire Partnership Trust to provide mental health and learning disability services for children, adults and older adults. South Warwickshire NHS Foundation Trust provided a range of community services including district nursing, health visiting, school nursing, occupational therapy, podiatry, rehabilitation services and speech and language therapy. This report also included relevant extracts for the annual reports of each CCG and links were provided to the full annual reports.

It was noted that the commissioning intentions were an annual process, to set out the priorities to focus health services and maximise health outcomes for the local population. The intentions were published in September to give service providers time to respond to the revised requirements for the following year. Details were provided on how the 2018/19 commissioning intentions had been developed and the priority areas. A summary of progress against the current priorities and key areas of achievements to date were reported for the following areas:

- Primary Care
- Out of Hospital
- Maternity and Paediatrics
- Urgent Care
- Planned Care
- Mental Health

The following questions and comments were submitted with responses provided as indicated:

- Members asked about the improvements made to the child and adolescent mental health services. The number of cases with a waiting time of over twelve weeks had reduced from 86 to 17 during this period. Members requested more information on typical waiting times and this would be provided through a subsequent briefing note.
- The information on psychology therapies was welcomed, with more specific detail being requested through a briefing note.
- The report was welcomed by members. For future reports it would be more helpful to have specific data on the target outcomes. However, it was noted that for the commissioning intentions it wasn't always possible to provide a specific measure of success for every area.
- Members asked about the early diagnosis of atrial fibrillation (AF). This was a heart condition that caused an irregular and often abnormally fast heart rate. Through checking the regularity of a patient's pulse, this sought to provide early interventions as patients with AF could potentially be at risk of a stroke. This was a partnership approach working with Public Health.
- The Brownsover Medical Centre in Rugby and the services it was planned to deliver from this centre. Initially, there would be a focus on GP services, but then additional services were planned. It was confirmed that there would be a pharmacy. Councillor Webb, in attendance at the meeting declared a non-pecuniary interest in the new Brownsover medical centre, due to his involvement in a local association.
- Similar discussion took place about the development of new premises for primary care at Hartshill and at Wellesbourne. At Wellesbourne, the construction works were ongoing and the premises were due to be open by March 2019. It was understood that there would be a range of services collocated at this centre including homeopathic services, podiatry and a pharmacy. This was a large building to provide capacity for future service need.
- For the Hartshill development, this similarly would need to have capacity to meet the needs of future population growth, as well as providing out of hospital services. Councillor Margaret Bell spoke of the delays in progressing this scheme. She then referred to the findings of the GP Services task and finish review and it would be helpful to have a documented process on the stages required for provision of new medical centres. Jenni Northcote explained that there were at least three different ways that new facilities were funded, each with differing governance processes. It would be possible to provide a key milestones document which included where delays were typically experienced.
- Members welcomed the report from Dr Linnane and it was agreed to have further monitoring reports on a six-monthly basis.

The Chair thanked Jenni Northcote and Dr John Linnane for this useful report.

Resolved

That the Overview and Scrutiny Committee notes the report on performance monitoring by the three Clinical Commissioning Groups (CCGs) and agrees to receive six monthly reports on CCG performance.

6. One Organisational Plan 2018-19 Quarter One Progress Report

Pete Sidgwick, Head of Social Care and Support introduced this item. The One Organisational Plan (OOP) progress report for the period April to June 2018 was considered and approved by Cabinet at its meeting on 13 September 2018. The report to this Committee focussed on the 11 key business measures within the Committee’s remit, which related to Adult Social Care and Health & Wellbeing. The report also provided strategic context on the One Organisational Plan for the period 2017 to 2020 and a financial commentary.

Mr Sidgwick provided additional information on a key area of progress in reducing delayed transfers of care. This was welcomed by members. Related to this, members were advised about the process to assess continuing healthcare funding eligibility and the impact for social care, when people weren’t entitled to receive this funding from the NHS. Provision of bed spaces in non-acute settings across the county were also discussed. An area where performance had reduced was in relation to the take up of direct payments. This was due to the implementation of a new IT solution (MOSAIC) and the required data cleansing. It was noted that performance in this area had improved since the time of the submitted report. There was currently a budget surplus, but by 2020, the current iBCF (Better Care Fund) would cease and there was less certainty on funding for social care, so a prudent approach was required.

Resolved

That the Committee notes the progress in the delivery of the One Organisational Plan 2020 for the period, as contained in the report.

7. Work Programme

The Committee reviewed its work programme.

Resolved

That the work programme is noted.

8. Any Urgent Items

None.

The Committee rose at 12.45pm

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Chair

Agenda Item 5



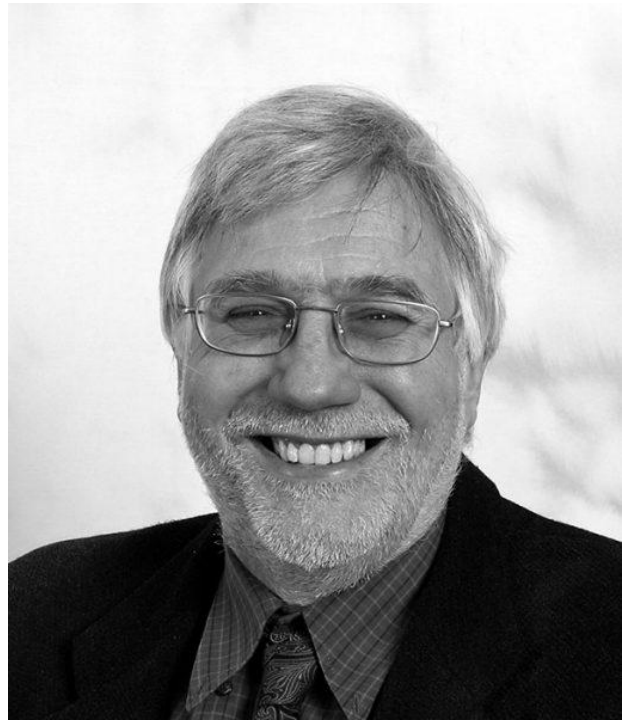
**Healthwatch
Warwickshire**

Annual Report 2017/18



Message from our Chair

The year 2017/18 has been an eventful and successful one for Healthwatch Warwickshire



We welcomed three new members of the Board (Trevor Wright, Leonard Harvey and Bob Malloy), who collectively bring with them a wealth of knowledge about the health and social care sector, as well as experience in local government. We are sorry to lose Sue Green, Carol Musgrove and Sue Gillespie this year. I'd like to take this opportunity to thank them for their services and wish them all the best for the future. My longer serving colleagues on the Board have remained a constant source of support and advice throughout the year. I look forward to working with them to achieve our objectives for the coming year.

Of particular note this year has been our success in the re-tendering process. I wish to yet again thank Chris Bain and his team for producing an excellent proposal. I also wish to thank both Mike Flaxman and Trevor Wright, who, as individual Directors, helped make a substantial contribution to our tender. The new contract itself starts in November 2018 but we are already planning the changes we need to make to both our staffing structure and our activity schedule. The new contract, which becomes active in November, provides a number of challenges within, as expected, a tighter budgetary envelope. This means that we need to plan now for a schedule of significant changes in priorities for both activities and staffing.

We have continued to work closely with our colleagues at Healthwatch Coventry. We also have quarterly joint meetings with Andy Hardy, the Chief Executive Officer of University Hospitals Coventry and Warwickshire, and Simon Gilby, Chief Executive of Coventry and Warwickshire Partnership Trust. We continue to play an active role in the West Midlands Healthwatch Network, hosted by Healthwatch England.

The Warwickshire Health and Wellbeing Board is an opportunity for us to ensure that the patient and public voice is central to the plans and proposals for the strategic priorities in Warwickshire. A good example of this is the new emphasis on patient voice in the Better Health, Better Care, Better Value proposals in Coventry and Warwickshire.

I would also like to thank John Linnane and his team in Public Health, for helping to ensure that our relationship with the County Council remains positive, challenging, testing and developmental. Good working relationships will continue to be important as we strive to maintain the balance between quality, value for money and an increasing number of service users with complex health and social care needs.

However, as long as we stay true to what we believe in; a commitment to placing people at the centre of our thinking and evidence based analysis, we can continue to make a real difference.



Message from our Chief Executive

This annual report is an opportunity to take stock, to reflect on what has been achieved with very limited resources, and thank those who made it happen

It has been a year of intense activity and real change for Healthwatch Warwickshire. We have said farewell to some staff and welcomed new ones. We were delighted to have secured the Tender to deliver Healthwatch Services for the next three years, starting on the 1st November 2018. There have been three very high profile public events and an escalating program of activity working with local groups.

Our Enter and View Service has entered a new and fascinating phase of activity that is making a real difference to our local communities. We also now have a new and much improved website and have greatly strengthened our social media presence, helping us to reach even more people.

None of the things that have happened over the last year would have been possible without our incredible group of committed, creative and experienced volunteers. It has been a real privilege to work with them.

This year we have said farewell to some of our longest serving members of staff, Michelle Williamson, Jennie Day, and Lianne Burton. We thank them for all of their hard work and wish them well in the future. We welcomed Rosalind Currie, Vina Fatania, Anne Deas, Claire Jackson and Louise Wilson to the team. Anne, who was on a fixed term contract, has now moved on to another job and we wish her all the best for the future.

I would like to thank the whole team, staff and volunteers, for the work they did to help us secure the Healthwatch contract for the next three years. I also want to thank our Directors, who fed their thoughts into our bidding document, particularly Trevor Wright who read the entire document and critically appraised it! Many thanks Trevor. My personal thanks also go to Mike Flaxman, our Chair of Finance and Audit, who put in a huge amount of time and expertise to make the bid so much stronger.

There are so many exciting developments happening. Our work with seldom heard groups, our Standing Conference, which brings patient groups from across Warwickshire together, a new programme of voluntary Enter and View visits being requested by local providers, our Health and Social Care Forum taking on critical issues such as loneliness and isolation, our participation in the Homelessness Strategy Group, our place on the national steering group for the ReSPECT program, and much more.

2018/19 promises to be just as exciting, with 2019 being the Year of Wellbeing. The theme of our Annual Conference this coming year will be wellbeing and we will be bringing our key partners and patient groups together to explore what wellbeing means in practice and how we can work together to achieve it. We just can't wait to get started!

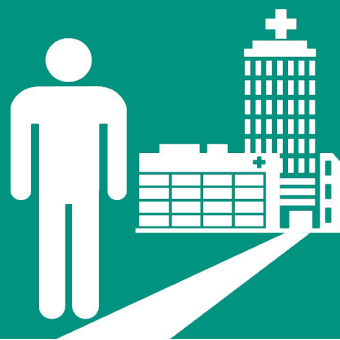
Highlights from our year

Since its launch in December 2017,

1,525 people have visited our new website



Our team has spoken at **18** community forums



Our **12** volunteers help us with everything from Enter & View to Outreach activity



We have attended the PPG meetings of

28 GP surgeries



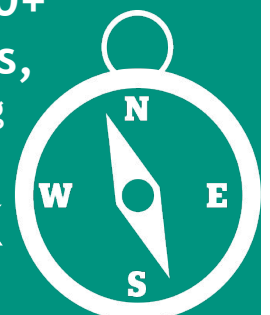
We've spoken to more than **2,000** local people about their experiences

Our Standing Conference on Consumer Voice attracted **50+** attendees,

representing the views of

100k

local people



Who we are



Everything we say and do is informed by local people.

As the independent ‘consumer champion’ for local health and social care services, we are here to ensure that local people have a voice in the design and delivery of these services. Our role is to ensure that local service providers and decision makers always put your experiences at the heart of your care.

Health and social care that works for you

We believe that by asking you to share your experiences we can identify issues that, if addressed, will help us to make improvements to Warwickshire’s health and social care services that will benefit everyone.

Our purpose is to ensure the voice of patients is heard in every decision that affects them

Meet the team



Prof. Robin Wensley
Chair



Chris Bain
Chief Executive



Robyn Dorling
PA to Chief Executive and
Chair



Claire Jackson
Finance and HR Officer



Louise Wilson
Engagement and Outreach
Officer



Vina Fatania
Engagement and Outreach
Officer

Meet our volunteers



Alison Wickens
Authorised Representative



Anita Vig
Authorised Representative



David Alexander
Authorised Representative



Dianne Stobbs
Authorised Representative



Dilys Skinner
Authorised Representative



Gillian Fletcher
Authorised Representative

Meet our volunteers



Heather Cadbury
Volunteer



Jackie Prestwich
Authorised Representative



Maggie Roberson
Authorised Representative



Sue Roodhouse
Authorised Representative



Sue Tulip
Authorised Representative



Susan Jenkins
Authorised Representative

Your views on health and social care



Standing Conference



We invited members and organisers of Patient Participation Groups (PPGs) from providers and commissioners of health and social care in Warwickshire, to come together to discuss public engagement and some of the issues affecting the people they represent. The 50+ attendees included members of PPGs from across Warwickshire's 82 GP surgeries.

It is all about bringing together a group of extremely important individuals, who otherwise would not have the opportunity to meet, to reinforce their messages from grass roots level. It is a way of obtaining the key messages of the public experience at county-wide level.

Robin Wensley,
Chair, Healthwatch Warwickshire

Staff and volunteers facilitated discussions and captured the public's views, highlighting the most common concerns, such as the lack of integration of health and social care services, and, as a related concern, the implications of the Sustainability and Transformation Partnerships (STPs). You can [read the full report on our website](#).

Engagement and Outreach Activity

Our face-to-face promotional and engagement activities play an important role in stimulating greater involvement from patients and the public.

Our Engagement and Outreach Officers, with the support of appropriately trained volunteers, attend events held by partner organisations, visit local support and community groups, give talks and run workshops, all with the purpose of listening to issues that are of concern to people in health and social care.





Listening to people's views

This year, we implemented our new staff structure, welcoming an Information and Communications Officer and two new Engagement and Outreach Officers to the team. This allowed us to increase our engagement activity with local people, with a focus on gaining more insight from seldom heard groups.



Healthwatch Events

We held three major events this year:

- + 150 local people registered to attend our **Annual Conference**, at which we gathered intelligence from local guests. Our Chief Executive Chris Bain shared the various ways we have made a difference locally as well as his vision for the year ahead, and our Chair Robin Wensley spoke about the challenges of public engagement. Guests also heard from long-time volunteer Gill Fletcher, who is an Active Observer on the Healthwatch Warwickshire Board, as she spoke about her experience of being a volunteer and the important contribution volunteers make to our work
- + More than 90 people from third sector organisations across Warwickshire attended our **Health and Social Care Forum**, where we heard from key stakeholders. Beate Wagner, Head of Service for Children & Families at Warwickshire County Council, Chris Lewington, Head of Strategic Commissioning at Warwickshire County Council, and Andy Hardy, CEO of University Hospitals Coventry and Warwickshire (UHCW) and Chair of the STP (Sustainability and Transformation Partnerships) Transition Board discussed the implications of integration, updated the audience and took questions on the latest developments regarding the Sustainability and Transformation Plan and Accountable Care Systems
- + Our first **Standing Conference on Consumer Voice** attracted more than 50 attendees, representing the views of more than 100,000 Warwickshire residents.

Engagement and Outreach Activity



Our increased focus on Engagement and Outreach has seen great results, with the numbers of local people we engage with dramatically increasing following the implementation of our new operational plan.

This year, our Chief Executive Chris Bain has attended the PPG groups of 28 surgeries to gather your views, as well as visiting local health and social care services and talking to people face to face at community events. Between us, the team has also spoken at a total of 18 community forums, including parish and community-led forums as well as those led by voluntary organisations.

In Quarter 4 alone, we engaged with 750 local people, bringing the total number of local people we engaged with in 2017/18 to more than 2,000. The feedback we have received from the community has been, and continues to be, vital to our work, and helps us to set the priorities for the year ahead.

Online feedback

The launch of our new website in December 2017, which has additional functionality allowing us to receive feedback online, has also allowed us to engage with even more local people, attracting 1,526 users since its launch. More than 350 people have given feedback via the online form since the site went live.



With our increased focus on improving our online presence, we also made extensive use of social media to receive and respond to your feedback. Boosted Facebook campaigns extended our online reach to an audience of 5,000 in quarter four, including one targeted campaign in Polish to help us further engage with local Polish communities.

Seldom heard groups

Key seldom heard groups and communities have been mapped and identified in each of the three districts that are currently prioritised.

The areas identified for engagement and outreach for 2017/18 were Nuneaton and Bedworth, Rugby and Warwick districts. We increased our profile and established a strong presence in these areas over the course of the year, and we have been working with local partners to further engage with, and understand the needs of, those who are seldom heard.

Local partners we have developed relationships with include:

- + Carers Trust Heart of England, EQUIP, Healthy Living Network, Hatters Space, Hope4, Macmillan, Way Ahead, Leamington Night Shelter, LWS Night Shelter, Doorway Nuneaton, Rugby Foodbank, P3, Warwickshire PRIDE, Springfield MIND, Rugby Dementia Support Group, Asian ladies groups, Asian Elders Day Community groups, Multi-link, Children Centres, Making Space and the South Warwickshire Clinical Commissioning Group (SWCCG)
- + We have also met with advocacy organisations, including Independent Advocacy, PoHWER and VoiceAbility, to discuss collaborative working
- + We took part in the appointments of lay members to Coventry and Rugby CCG and Warwickshire North CCG.

In March 2018, our staff members spent some time volunteering at Leamington Night Shelter, to better understand the health and social care experiences of some of the more vulnerable members of our community.

Making sure services work for you

Domiciliary care



We have continued our focus on Domiciliary Care with our ongoing communications campaign to gather your feedback, so that we can share your views with those who commission local services.

We have already begun working with Warwickshire County Council to make improvements to your services, based on the responses we've received.

Enter and View

Our Enter and View service remains widely recognised as being exceptionally strong and effective in evaluating local services that have been identified by Warwickshire residents and/or their representatives as having areas of concern.

With the help of our dedicated volunteers, all of whom are trained as Authorised Representatives to carry out visits to local service providers, we conducted eight Enter and View visits to local service providers this year, to ensure that they are fit for purpose. All of our visits were carried out in response to complaints and/or intelligence received, including referrals by local MPs. We visited:

- + Ambleside Care Home
- + Bracebridge Court
- + Manor Court
- + Oldbury Grange, and
- + Four local GP surgeries
- + We also did 16 re-visits to local GP surgeries.

In all cases, our resulting reports and recommendations were accepted by the home or practice owners and registered managers. All of our Enter and View reports, and any managers' responses (as agreed with the service provider), are [published on our website](#).

Our Enter and View reports on care homes have also been reviewed by Healthwatch England (HWE) and included in their national report on care homes - 'What's it like to live in a care home?', which led to a local press article, raising awareness of our services.

Ensuring your voice is heard

In 2017/18, Healthwatch Warwickshire represented the experiences of local people at 75 strategic body meetings both locally and nationally.

To ensure that your views are heard, we remain active in our statutory roles on:

- + The Health and Wellbeing Board
- + The Health and Wellbeing Board Executive
- + The Adult Safeguarding Board.

We also continue to have active input to:

- + The STP Transition Board
- + The Health Overview and Scrutiny Committee
- + The Arden Herefordshire and Worcestershire Quality Surveillance Group
- + Several working groups.



We also have strong collaborative relationships with other local Healthwatch organisations, and Healthwatch England (HWE), with whom we attend regular quarterly meetings.

Helping you find the answers



How we have helped the community get the information they need

We have helped members of the public to find the information they need about local health and social care services in a variety of ways, including:

- + **Direct Contact** - In total, we have kept more than 3,450 people informed via a combination of direct calls, emails and our website and information service. The number of direct calls to the office has reduced following the launch of our new website and updating of our telephone lines to include a recorded message, explaining our services and promoting the new site as a useful resource
- + **Engagement and Outreach** - We have engaged with more than 2,000 people through our attendance at community events, visiting local support and community groups, giving talks and running workshops
- + **Events** - We hosted three large events: The Health and Social Care Forum, our 2017 Annual Conference and our Standing Conference
- + **Newsletter** - Our regular newsletter has a distribution list of more than 1,200 people. We were also featured in some partners' email newsletters, widening our reach to an even larger audience. Partners who featured us include Warwickshire Community and Voluntary Action (WCAVA) and the WCC Localities team in Rugby
- + **Social media** - We have increased our social media activity this year, and we now have 1,355 followers on Twitter. Improvements to our Facebook page has seen the number of 'likes' increase to 164 (with 166 followers) this year. We also ran two targeted Facebook campaigns, one on our Domiciliary care survey and another in Polish, targeting the Polish community. The total reach of these campaigns was a potential audience of more than 5,000 people.



- + healthwatchwarwickshire.co.uk - Our new website, which now meets all accessibility requirements and includes a language translation service, was launched in December 2017. The new site has attracted 1,526 users since its launch, with an average of 382 users accessing the site each month. Improved online signposting, with an updated 'Get Help' section - providing advice and links to information about local NHS and care services - saw the number of people accessing this section increase dramatically, jumping from 144 in Quarter 3 to 354 in Quarter 4. An article about our new website tools was printed in Making Space magazine, whose audience has an interest in Mental Health services in Warwickshire.

How we have helped the community get the information they need

Further communications activities we undertook, to make sure the people of Warwickshire were aware of our service and could access the information they need, included:

- **Local radio appearances** - Chief Executive Chris Bain was a guest on seven local radio shows, commenting on local health and social care issues including the GP and nursing recruitment crisis and the plans to merge East and West Midlands ambulance services, which would negatively affect the service provided to Warwickshire residents
- **Newspaper articles** - Including one regarding the Healthwatch England Care Homes Report and two relating to the Health and Social Care Forum
- **Posters and leaflets** - We printed promotional material explaining our service, for distribution in the local area. Leaflets were distributed via all mobile libraries across the county and some were placed in bedside tables at University Hospitals Coventry and Warwickshire NHS Trust
- **Promotional postcards** - 1,500 postcards were distributed via third party partners such as MacMillan, Age UK and local hospices.



**TALK TO US ABOUT
YOUR HOME CARE.**

Healthwatch Warwickshire is an independent organisation that represents the interests of local people.

If you have anything to say, confidentially, about the professional care you receive at home, good or bad, please let us know.

Phone: 01926 422 823
Email: info@healthwatchwarwickshire.co.uk
Write to:
Healthwatch Warwickshire, 4-6 Clemens Street, Leamington Spa, Warwickshire, CV31 2DL

1,500 postcards were distributed via third party partners

Making a difference together



How your experiences are helping to influence change

The intelligence we gather through our Engagement and Outreach activity is reviewed by our internal performance review group. This group then identifies how the information can be shared with the appropriate service providers to ensure the experiences of local people are captured effectively, and that Healthwatch Warwickshire are able to use this intelligence to effect positive change for the community.

Key influencing activity this year included:

Brownsover surgery - We have been invited to assess their consultation procedures.

Coventry and Warwickshire Partnership Trust (CWPT) report on Mental Health - This was well received, and our agreed action plan of 42 recommendations has now been implemented by CWPT.

Enter and View - Following direct referrals from a local MP, raising concerns about three local care homes, we carried out internal investigations and spoke to the Care Quality Commission (CQC) and Adult Social Care to discern appropriate action. Both have planned visits to the establishments as a result of our concerns.

Our GP revisit programme - We identified a number of findings for improvements to service provision. The report with key findings has been published and shared with key decision makers.



Working with other organisations

We continue to maintain positive working relationships with relevant public bodies and strategic groups, championing the views of patients and the public, and offering robust and credible evidence to help inform policy, practice and commissioning decisions. We have also been developing new relationships with local partners to help us better understand the needs of local people, especially the seldom heard.

This year, Chief Executive Chris Bain attended more than 21 partnership meetings with other bodies, including Coventry and Warwickshire Partnership Trust, University Hospitals Coventry and Warwickshire, North Warwickshire CCG and South Warwickshire CCG.

Key strategic meetings that we have contributed to include:

- + **Health and Wellbeing Board (HWBB) Executive** - We are now included in the Place Based Joint Strategic Needs Assessment (JSNA)
- + **Health Overview and Scrutiny Committee** - Member of the agenda setting group. We promoted five items, which have been included in the work program for 2018/19, and we took the lead on interrogating the CCGs about Commissioning Intentions, giving evidence to the GP Task and Finish Group
- + **Joint Strategic Needs Assessment (JSNA) Strategic Group** - Contributed to a meeting on 14th September.

Other key partnership activity this year includes:

- + **Coventry and Warwickshire Partnership Trust (CWPT) Quality Summit** - We are now part of the CWPT Action Plan regarding patient involvement
- + **Domiciliary Care campaign** - This campaign has been developed in partnership with Warwickshire County Council (WCC) Commissioners and other local partners: Age UK, Carers' Trust, WCAVA and Macmillan. A report on the project findings will be published by summer 2018, and shared with the Health Overview and Scrutiny Committee
- + Working with **Patient Participation Groups (PPGs)** to develop the Standing Conference
- + Complaint made to Chair of the **STP Transition Board** about the continued lack of patient and public engagement in the STP.

We also continue to develop a strong and productive relationship with Healthwatch England (HWE), sharing information of national significance.

This sharing of data and intelligence with HWE led to the recent production of the [Care Homes report](#), in which our work was cited.



it starts with
YOU



#ItStartsWithYou



Use your voice to make a difference

Everything we do is only possible with your voice. Our connections to local people allow us to gather your feelings and thoughts about how local services are working well, and how they can work better, for you.

The more of you who share your experiences with us, the more we can share with service providers, to help them understand what works and what doesn't, to inform their improvement plans for the future of your care.

Looking ahead, on 3rd September 2018, as we celebrate the NHS turning 70, Healthwatch England is running a national social media campaign, #ItStartsWithYou. The campaign aims to raise awareness of the impact people can have on their care by sharing their views, and encourage more people to share their stories with their local Healthwatch.

We have had some great successes this year but feel that personal stories are best told by the people who lived them. So, we're asking you to get in touch and let us know if you'd be happy to share your story about how we've helped you. This campaign starts on 25th June 2018 and runs until September, so we would love to hear from you soon!

If you only have a little time to spare, or don't want to share your full story, there are lots of ways to help us spread the word. You can:

- + Join [the Thunderclap](#) on social media
- + Share a short version of your story on social media and add the tag #ItStartsWithYou. Don't forget to tag us (@HealthwatchWarw on Facebook and Twitter)!
- + Share your story anonymously [via our website feedback form](#) (do please state if you're happy for it to be used for the campaign), and
- + Encourage others to share their experiences.

We would love to hear your stories!

Our plans for next year



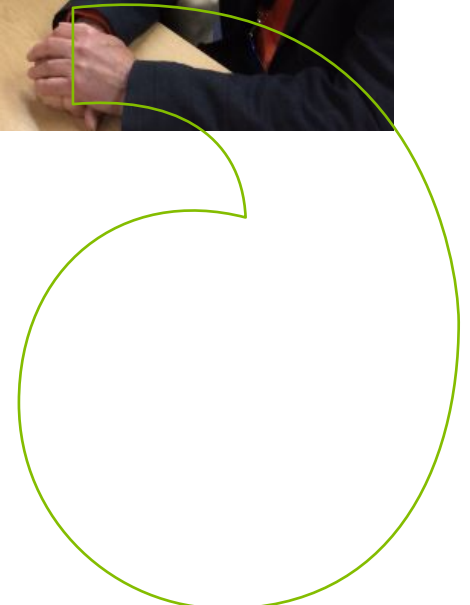
What next?

There are a range of emergent priorities for the 2018/19 financial year, which are outlined below. None of these are new and they sit alongside our ongoing priorities of:

- + Care at home
- + Mental health services in the community
- + Reaching seldom heard groups.

Additional priorities for 2018/19

1. Delayed transfers of care
2. End of Life care
3. Housing developments without the accompanying medical facilities
4. Health inequalities
5. Homelessness
6. Transport (especially in the North and the rural South)
7. Waiting times for assessments and referrals.



Our people



Sydenham
History Project

healthwatch
Warwickshire

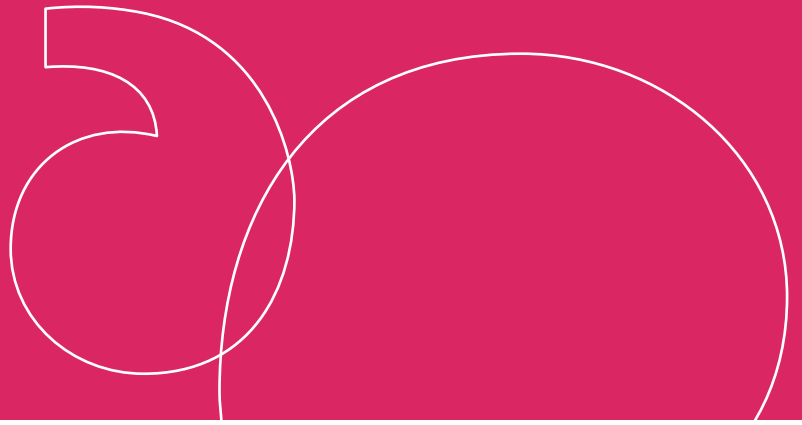
Your
new consumer
organisation for
health and
social care

Our work would not be effective without your input. It's thanks to you, sharing your experiences, that we are able to do what we do.


Vina Fatania

Engagement and Outreach Officer

Our finances



Financial Information



Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	£262,000
Additional income	N/A
Total income	£262,000
Expenditure	£
Operational costs	£48,106
Staffing costs	£196,022
Office costs	£17,500
Total expenditure	£261,628
Balance brought forward	£372

*Please note that the above figures are subject to audit.

Decision making

Our Board of Directors is appointed by application and interview. Board meetings are held bi-monthly and we have a number of sub-groups that oversee specific functions: Human Resources, Finance & Audit and Performance & Monitoring.

How we involve the public and volunteers

We collect the views and experiences of local people:

- + By talking to the public at local GP surgeries, care homes and hospitals
- + Through our Engagement & Outreach activity
- + At local Healthwatch events
- + Through specific campaigns
- + From phone calls to our office and feedback via our online feedback facility.

All of this work is ably supported by our volunteer team, who also have representation on our Board and help to inform our decision making. These activities help us to gain a detailed overview of the needs of local people and this intelligence is used to inform our work.

The Board then reviews the information gathered to help set the priorities for the year ahead. Once the short, medium and long-term goals have been set, the Chief Executive leads on their implementation with the Healthwatch Warwickshire staff and volunteer team.

Prof. Robin Wensley
Chair

Elizabeth 'Liz' Hancock
Deputy Chair

Gita Patel

Paul Tolley

Cllr Jerry Roodhouse

Dr Leonard Harvey FRCOG LLM

John Copping

Bob Malloy

Mike Flaxman

Trevor Wright

Gill Fletcher
Volunteer Representative/Active
Observer

Susan Jenkins
Volunteer Representative/Deputy
Active Observer



Contact us

Get in touch

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Healthwatch Warwickshire CIC
4-6 Clemens Street
Leamington Spa
Warwickshire
CV31 2DL

Phone

01926 422823

Email

info@healthwatchwarwickshire.co.uk

Website

www.healthwatchwarwickshire.co.uk

Facebook

facebook.com/HealthwatchWarw

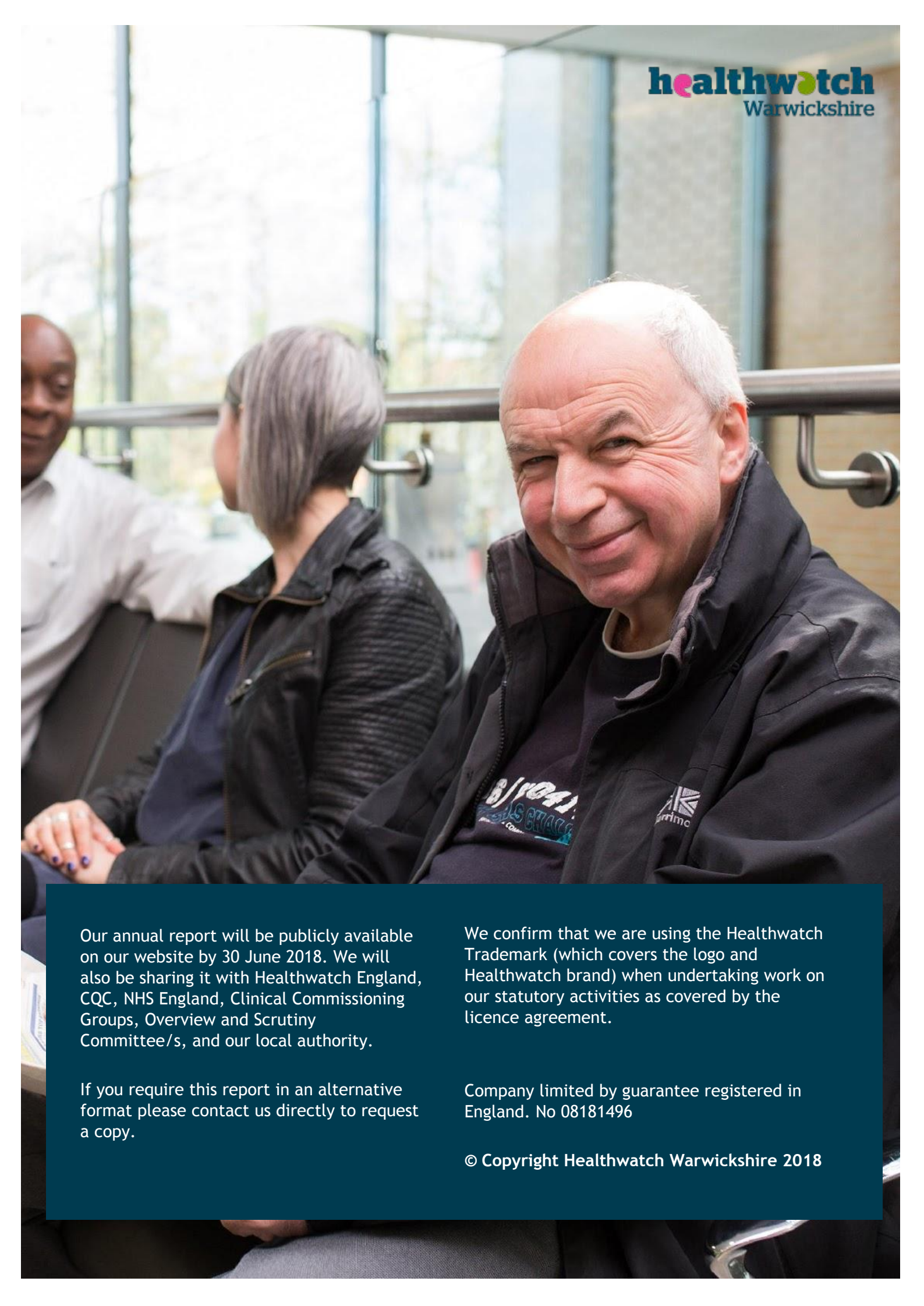
Twitter

[@HealthwatchWarw](https://twitter.com/HealthwatchWarw)

Address of contractors

We are accountable to Warwickshire County Council, Public Health. Their contact details are:

Public Health Warwickshire, Communities Group
Warwickshire County Council
Shire Hall
Barrack Street
Warwick, CV34 4RL
Website: publichealth.warwickshire.gov.uk



Our annual report will be publicly available on our website by 30 June 2018. We will also be sharing it with Healthwatch England, CQC, NHS England, Clinical Commissioning Groups, Overview and Scrutiny Committee/s, and our local authority.

If you require this report in an alternative format please contact us directly to request a copy.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

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Adult Social Care & Health Overview & Scrutiny Committee

21st November 2018

One Organisational Plan Quarterly Progress Report: Period under review: April to September 2018

Recommendation

That the Overview and Scrutiny Committee:

- (i) Considers and comments on the progress of the delivery of the One Organisational Plan 2020 for the period as contained in the report.

1. Introduction

- 1.1. The One Organisational Plan (OOP) Quarterly Progress Report for the period April 1st to September 30th 2018 was considered and approved by Cabinet on 8th November 2018. It provides an overview of progress of the key elements of the OOP, specifically in relation to performance against key business measures, strategic risks, workforce management, revenue and capital budgets, reserves and savings targets and financial information on Business Units.
- 1.2. This report draws on information extracted from the Cabinet report to provide this Committee with information relevant to its remit.

2. One Organisational Plan 2020: Strategic Context

- 2.1 The OOP 2020 Plan aims to achieve two high level Outcomes. These are measured through 62 Key Business Measures (KBMs) which are grouped under, and reported against, the seven agreed policy areas.

For the outcome Warwickshire's communities and individuals are supported to be safe, healthy and independent there is a total of 35 Key Business Measures included in four Policy area dashboards:

- Children are Safe - 15 Key Business Measures
- Adult Social Care - 8 Key Business Measures
- Health & Wellbeing - 6 Key Business Measures
- Community Safety and Fire - 6 Key Business Measures

For the outcome Warwickshire's economy is vibrant and supported by the right jobs, training, skills and infrastructure there is a total of 13 Key Business Measures included in two Policy area dashboards:

- Economy, Infrastructure and Environment - 10 Key Business Measures
- Education & Learning - 3 Key Business Measures

To demonstrate OOP delivery by ensuring that WCC makes the best use of its resources a total of 14 Key Business Measures have been developed.

2.2 The table below provides an overview and Key Lines of Enquiry regarding performance for a total of 11 KBMs across 2 policy areas as appropriate for this Committee;

Adult Social Care (8 KBMs)
<p><u>Areas of Good Progress</u></p> <p>The Reablement Service continues to perform well with the number of service exits achieving target overall and the number of permanent admissions to residential or nursing care is on a declining trajectory across the year. The number of exits not leading to an Adult Social Care service, increased slightly in July and August. The service is using technology, including a customer feedback app and an electronic appointment booking system, to improve the service provision across the County.</p> <p><u>Areas of concern including remedial action</u></p> <p>With regards to the Average Daily Beds Occupied by Delayed Warwickshire Patients measure, performance has declined over the last quarter with delays increasing in July and August, however performance is still close to the target and the number of delays has halved compared to the same period last year. A number of reasons have been given which include the hot weather, issues with two Care Providers (provider failure and significant quality concerns) and increased frailty of the patients. As part of the Countywide Delayed Transfer of Care project, future improvement activities include;</p> <ul style="list-style-type: none"> ● one Trusted assessor placed with a hospital team to complete assessments on behalf of a number of care homes, ● Hospital Social Care Team process improvements, ● Hospital Social Care Dashboard under development. <p>The number of people in receipt of an Adult Social Care service has started to increase over the 12 month period with 6639 people in receipt of a service at September. This increase is being managed within the resources allocated and the Business Unit continues to assist people to be as independent as possible whilst meeting statutory duties.</p> <p>Over the 12 month period there has been a reduction in the number of people receiving a Direct Payment with a total of 1077 recipients in September 2018. However during quarter 2 there has been a slight increase compared to the levels in quarter 1. Changes in the recording system and processes have resulted in further checks being completed to verify the data, for example, annual payments are being recorded as a rolling Direct Payment rather than as a one off.</p> <p>Key areas of development to increase the uptake of Direct Payments include:</p> <ul style="list-style-type: none"> ● Independent Living Team Officers have been co-located with social care and support teams since July 2018, to support social care practitioners with their knowledge and understanding of Direct Payments ● Process mapping of the customer journey has identified hot spots and areas of improvement to streamline the process for customers accessing Direct Payments ● Work is underway to introduce a pre-payment card for new customers in January 2019 to make access to Direct Payments easier. ● A further work stream has also been identified to work with the market (current providers and community options) to increase the availability of resources for customers to use their Direct Payments in a more flexible way. ● Managers (Operations Managers and Team Leaders) have completed training on Direct Payments to increase their knowledge to better support practitioners with offering Direct Payments to customers.

Health and Wellbeing (3 KBMs)

Areas of concern including remedial action

Quarter 1 data, which has just been received, has shown a slight increase in the percentage of women who smoke at the time of delivery. The number of referrals to the Smoking in Pregnancy Specialist Service from the midwifery service has decreased compared to the previous quarter which could be linked to the increase in the percentage of women who smoke at the time of delivery across Warwickshire in quarter 1 2018/19 compared to quarter 4 2017/18. This may be due to the increase in the appointment of newly trained midwives who would not yet have received training in smoking in pregnancy; this training has now been delivered.

The Smoking in Pregnancy Specialist Service has been integrated within the Health Visiting and Family Nurse Partnership Service delivered by South Warwickshire NHS Foundation Trust (SWFT).

The aim is to reduce the number of women who resume smoking after giving birth through providing continued support for women during the postnatal period and reduce the number of women smoking during second pregnancy.

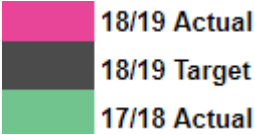




Areas to note

Data for the following measures will not be available until later in the year:

- % women who smoke at the time of delivery- quarter 2 data due late October
- Rate of hospital admissions for alcohol related conditions per 100,000 population (all ages) - February 2019 annual data due.
- % of eligible population aged 40-74 offered a NHS Health Check who received a NHS Health Checks - November 2018 for quarter 2.

2.3 More detailed progress on the 11 KBMs relevant to this Committee is reported through the Scorecards in the following pages.

One Organisational Plan Key Business Measures Scorecard

	Direction of travel (DoT) of performance (compared to annual trend)	
		Positive improved
		Positive decline
		Decline
		Steady

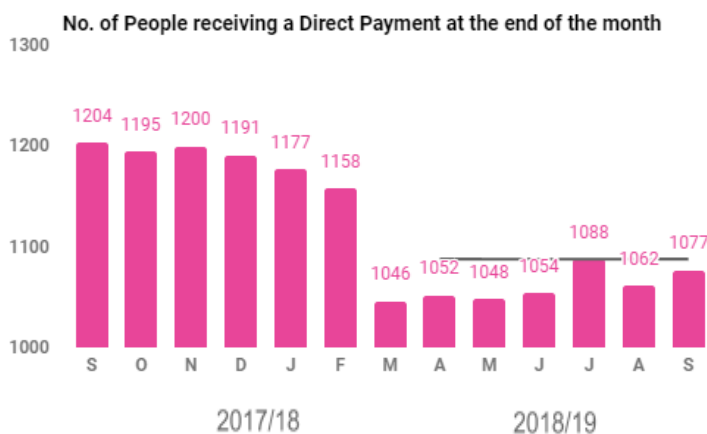
15/16	16/17	17/18	DoT
1,074	1,212	1,046	↓

The number of people receiving Direct Payments has increased during quarter 2 2018/19 in comparison to quarter 1 2018/19.

Changes in the recording system and processes have resulted in further checks being completed to verify the data, for example, annual payments are being recorded as a rolling Direct Payment rather than as a one off.

Key areas of development to increase the uptake of Direct Payments include:

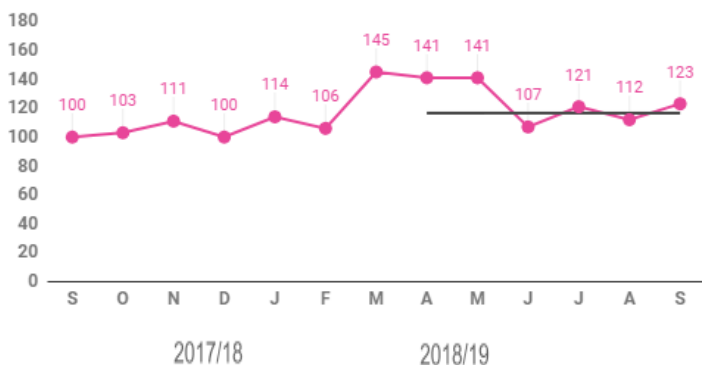
- Independent Living Team Officers have been co-located with social care and support teams since July 2018, to support social care practitioners with their knowledge and understanding of Direct Payments
- Process mapping of the customer journey has identified hot spots and areas of improvement to streamline the process for customers accessing Direct Payments
- Work is underway to introduce a pre-payment card for new customers in January 2019 to make access to Direct Payments easier.
- A further work stream has also been identified to work with the market (current providers and community options) to increase the availability of resources for customers to use their Direct Payments in a more flexible way.
- Managers (Operations Managers and Team Leaders) have completed training on Direct Payments to increase their knowledge to better support practitioners with offering Direct Payments to customers.



No of Reablement Service Exits

15/16	16/17	17/18	DoT
Not previously monitored	1387	1358	↓

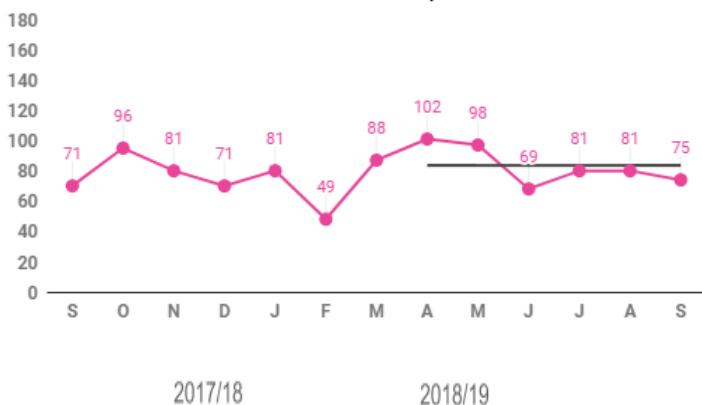
No. of Reablement Service Exits



No of Reablement Completions

15/16	16/17	17/18	DoT
Not previously monitored	1084	984	↓

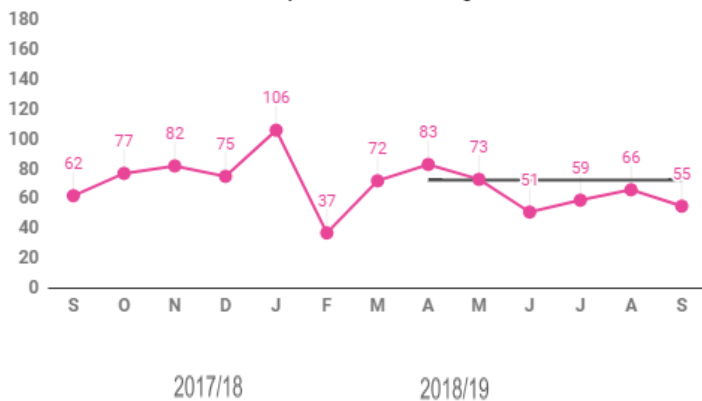
No. of Reablement Completions



No of Service Exits not leading to ASC Service

15/16	16/17	17/18	DoT
Not previously monitored		1034	N/A

No. of Reablement completions not leading to an ASC service



The number of people exiting the Reablement Service during the summer months are in line with the same quarter last year.

The number of people completing their reablement programme has reduced slightly in comparison to the same quarter last year, this could in part be due to the service providing some short term support in preventing hospital admissions.

Key areas of development during quarter 2 for the Reablement Service include;

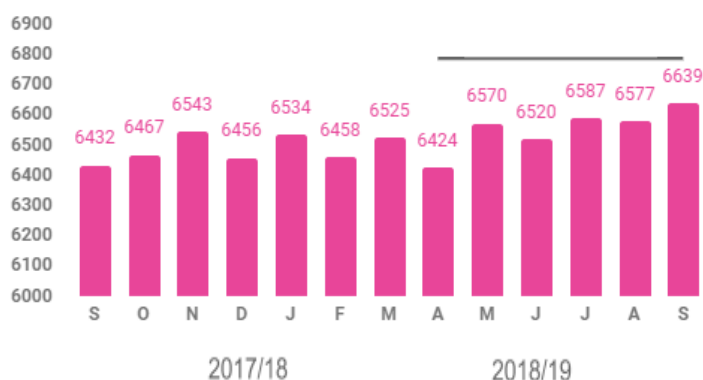
- Completed a pilot on the use of Assistive Technology to address customers who potentially have difficulty in maintaining their hydration (fluids), and managing their medicines. This new service offer is now being rolled out to both teams in the service.
- Customer Feedback is now being collated with the use of a new Customer Feedback App.
- Implemented IConnect, an electronic

appointment schedule for staff. This has allowed daily alterations to be made electronically, enhancing staff safety as they can now log in and out of appointments, which is then monitored in the office and produces alerts to notify any missed appointments.

- The Care Quality Commission inspected the South Team in September; the service have received a provisional outcome of 'Good'.

15/16	16/17	17/18	DoT
N/A	6,270	6,525	↑

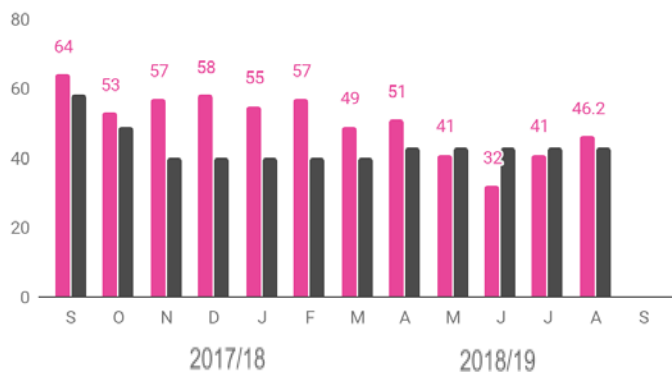
No. of People in receipt of an adult social care service



The number of people being supported by Adult Social Care overall appears to be on an upward trajectory. This increase is being managed within the resources allocated and the Business Unit continue to assist people to be as independent as possible whilst meeting statutory duties.

15/16	16/17	17/18	DoT
Not previously monitored	42	49	↑

Average Daily Beds Occupied by delayed Warwickshire Patients



Due to the hot weather, staff availability over the holiday period, issues with two Domiciliary Care providers (provider failure and significant quality concerns) and the increased frailty of patients, delays have increased in July (41) and August (46) but are still hovering around the target of 43.

Over the last five weeks (to the week ending 20/9/18), the average performance at the three main Warwickshire providers has been just above target. Performance at the Warwickshire acute sites are at or below target over this period. Delays at St Cross and the Royal Leamington Spa Rehab Hospital are still significantly above target, although delays at the former have been on a downward trend since the peak in early August. Delays of Warwickshire


residents at out of county providers have dropped significantly in the last 2 months (June & July).

As part of the Countywide Delayed Transfer of Care Project, future improvement activities include:

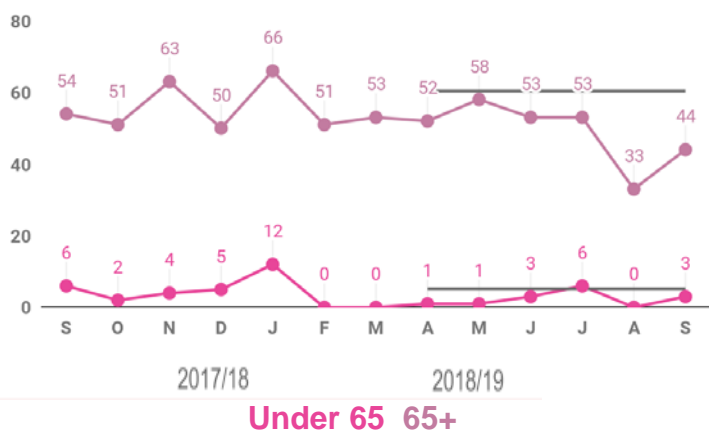
- One Trusted assessor placed with a hospital team to complete assessments on behalf of a number of care homes
- Hospital Social Care Team process improvements
- Hospital Social Care Dashboard under development

Please note : Performance is reported two months in arrears.

No. of permanent admissions of people to residential and nursing care homes (**aged 18-64**)

15/16	16/17	17/18	DoT
Not previously monitored	33	60	

No. of permanent admissions to residential or nursing care



Support planning for individuals will continue to ensure that community support is considered for all customers and residential and nursing care provision is the last option.

An increase in this cohort has arisen over the last year due to individuals transferring funding streams from health to social care; practitioners will apply Continuing Healthcare (CHC) criteria robustly to ensure individuals are in receipt of the most appropriate support to meet their needs.

Please note Performance Dashboards are updated within 9 days following month end. By the end of the month a number of packages which were implemented during the month may still have to be confirmed and recorded. As such monthly performance figures are amended retrospectively.

There are a variety of aspects impacting

long term admissions into residential and nursing care.

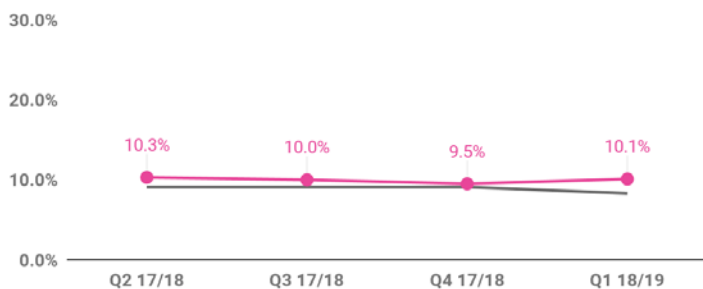
The numbers leaving hospital requiring this level of support continue to rise and pathways 3 beds within acutes have increased and continue to be increased by Clinical Commissioning Groups in response to Delayed Transfer of Care pressures, especially in the Rugby area. No new Extra Care Housing schemes have been available for 12 months, with limited potential new availability in 2018 / 19 planned. Individual length of stays within residential and nursing care are increasing in longevity.

Please note Performance Dashboards are updated within 9 days following month end. By the end of the month a number of packages which were implemented during the month may still have to be confirmed and recorded. As such monthly performance figures are amended retrospectively.

15/16	16/17	17/18	DoT
662	552	696	↑

15/16	16/17	17/18	DoT
10.6	9.9	9.5	↓

% of women who smoke at the time of delivery across Warwickshire



Quarter 2 2018/19 data is due late October 2018.

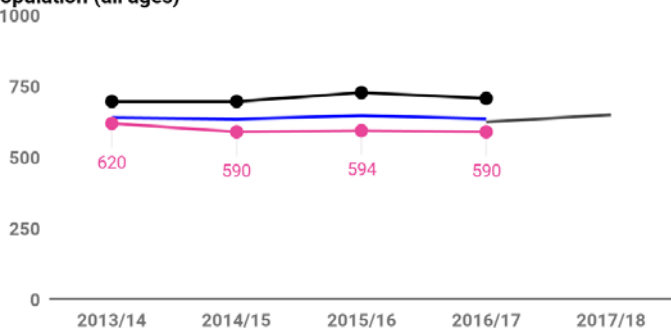
The number of referrals to the Smoking in Pregnancy Specialist Service from the midwifery service has decreased compared to the previous quarter which could be linked to the increase in the percentage of women who smoke at the time of delivery across Warwickshire in quarter 1 2018/19 compared to quarter 4 2017/18. This may be due to the increase in the appointment of newly trained midwives who would not yet have received training in smoking in pregnancy. This training has now been delivered.

The Smoking in Pregnancy Specialist Service has been integrated within the

Health Visiting and Family Nurse Partnership service delivered by South Warwickshire NHS Foundation Trust (SWFT).

The aim is to reduce the number of women who resume smoking after giving birth through providing continued support for women during the postnatal period and reduce the number of women smoking during second pregnancy.

Rate of hospital admissions for alcohol related conditions per 100,000 population (all ages)



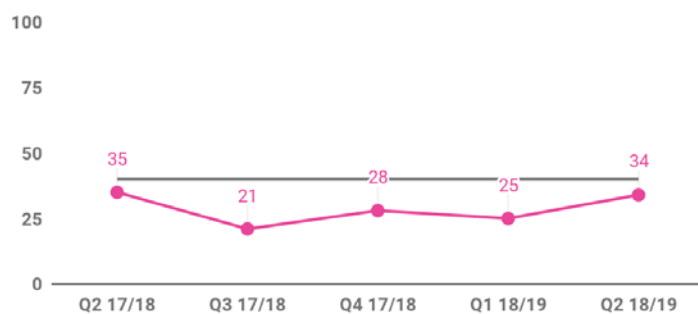
Warwickshire West Midlands England

15/16	16/17	17/18	DoT
594	590	Due Feb 19	↓

The 2017/18 annual data will be available in May 2019

Warwickshire's 2016/17 annual rate is 590 per 100,000 this is below the West Midlands and England average. The new service is being rolled out and a more preventative approach is being adopted, which will yield benefit, but takes time to be seen in the figures.

% of eligible population aged 40-74 offered a NHS Health Check who received a NHS Health Check



15/16	16/17	17/18	DoT
27.8	45.4	28	↓

Opportunities for delivering NHS Health Checks through the workplace and within local communities are being explored with various providers to offer an alternative setting to GP Practice with the aim of increasing uptake.

Financial Commentary – relevant finance information taken from Cabinet report

4.1 Revenue Budget

4.1.1 The Council has set the following performance threshold in relation to revenue spend: a tolerance has been set of zero overspend and no more than a 2% underspend. The following table shows the forecast position for the Business Units concerned.

	2018/19 Budget '000	2018/19 Outturn '000	Revenue Variance £'000 %	Retained Reserves £'000	Financial Standing '000
Social Care & Support	139,695	136,135	(3,560) -2.55% underspend	(11,959)	(15,519)
SCS transferred £3m to reserves, and increased iBCF forecasts by £300,000, leaving a forecast underspend of £3.5m. Some of this will be used to protect services in C&F the outcomes from which impact on demand for Adults Services. Remainder will cover possible changes in income forecast, and possible further investment of iBCF into transformation and integration work. There remains a £1m risk around income forecasts.					
Strategic Commissioning & Public Health	35,729	34,286	(1,443) -4.04 underspend	(5,184)	(6,627)
We are maintaining tight budgetary control on all spend to ensure we are in a good position to meet all our savings targets for next year					

4.2. Delivery of the 2017-20 Savings Plan

4.2.1. The savings targets and forecast outturn for the Business Units concerned are shown in the table below.

	2018/19 Target £'000	2018/19 Actual to Date £'000	2018/19 Forecast Outturn £'000	2018-2020 Implementation Status
Social Care & Support	2,562	2,017	2,762	Green
The in year savings will be delivered / met. However, how this is achieved recurrently is uncertain as this is dependent on the recurrency of one off funding (BCF / iBCF), the Social Care Precept and the central government settlement.				
Strategic Commissioning & Public Health	406	406	406	Green

4.3 Capital Programme

4.3.1. The table below shows the approved capital budget for the business units and any slippage into future years.

	Approved budget for all current and future years (£'000)	Slippage from 2018/19 into Future Years £'000	Slippage from 2018/19 into Future Years (%)	Current quarter - new approved funding / schemes (£'000)	All Current and Future Years Forecast (£'000)
Social Care & Support	3,350	(825)	-35%	0	3,350
Delays in creating Extra Care Housing have occurred.					
Strategic Commissioning & Public Health	6,216	(243)	-5%	0	6,216

5 Supporting Papers

5.1 A copy of the full report and supporting documents that went to Cabinet on the 8th November 2018 is available via the following [link](#) and in each of the Group Rooms.

6 Background Papers

None

Authors	Vanessa Belton, Performance and Planning Business Partner vanessabelton@warwickshire.gov.uk Mandeep Kalsi, Performance Officer mandeepkalsi@warwickshire.gov.uk
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	John Linnane, Assistant Director People: johnlinnane@warwickshire.gov.uk
Strategic Directors	Nigel Minns, Strategic Director, People Group nigelminns@warwickshire.gov.uk
Portfolio Holders	Cllr Les Caborn, Adult Social Care & Health; cllrcaborn@warwickshire.gov.uk

Adult Social Care and Health Overview and Scrutiny Committee

21 November 2018

Work Programme Report of the Chair

Recommendations

That the Committee reviews and updates its work programme.

1. Work Programme

The Committee's work programme for 2018/19 is attached at Appendix A for consideration. The programme was discussed by the Chair and Party spokespeople at their meeting on 29 October. A copy of the work programme will be submitted to each meeting for members to review and update, suggesting new topics and reprioritising the programme.

2. Forward Plan of the Cabinet

The Cabinet and Portfolio Holder decisions relevant to the remit of this Committee are listed below. Members are encouraged to seek updates on decisions and identify topics for pre-decision scrutiny. The responsible Portfolio Holders have been invited to the meeting to answer questions from the Committee.

Decision	Description	Date due	Cabinet / PfH
School Health & Wellbeing Service Commissioning Approval	The School Health & Wellbeing Service is being recommissioned as part of the on-going commissioning cycle. The current contract will end on 31st October 2019.	11 December 2018	Cabinet
Commissioning of Care Service Provision in Extra Care Housing schemes managed by Orbit	The existing contract is coming to an end. A new commissioning process is required to ensure seamless transition to any new contracting arrangements for the provision of care services across the five Extra Care Housing schemes suitable for older people aged 55+.	11 December 2018	Cabinet

3. Forward Plan of Warwickshire District and Borough Councils

Set out below are scheduled reports to be considered by district and borough councils at their scrutiny / committee meetings that are relevant to health and wellbeing. Further updates will be sought and co-opted members are invited to expand on these or other areas of planned activity.

Date	Report
North Warwickshire Borough Council	
	<p>In North Warwickshire, the focus on health is provided through two forums, the Warwickshire North Health and Wellbeing Partnership (covering both North Warwickshire and Nuneaton and Bedworth), and the Borough Council's Health and Wellbeing Working Party. Examples of recent work are shown below:</p> <p>Warwickshire North Health and Wellbeing Partnership:</p> <ul style="list-style-type: none"> • End of Life Care • Addressing Teenage Conceptions – Sustainability of the service • Access to Health Services – Community Transport Initiatives • Services at George Eliot Hospital and its Future Vision • #onething – Focus and sustainability of the service <p>Health and Wellbeing Working Party</p> <ul style="list-style-type: none"> • The Corporate Health and Wellbeing Action Plan - Delivery • The evolving Strategic Leisure Review – Ensuring that it addresses issues of relevance to the health and wellbeing of the local community • End of Life Care • Addressing Teenage Conceptions - The service afforded to young people in North Warwickshire • Access to Health Services – Community Transport Initiatives • #onething • Fitter Futures and its services in North Warwickshire
Nuneaton and Bedworth Borough Council – Health Overview and Scrutiny Panel	
2018/19	<ul style="list-style-type: none"> • The concerns and priorities for Healthwatch • Improving Stroke Services in Coventry & Warwickshire. A request from WNCCG to consult on the document (after inspection probably in Aug) • Discharge Protocol. A review of the current situation with regard to hospital discharges and how GEH is working with Housing and other partners. Is there a robust discharge protocol? • Gambling and its impact on health and wellbeing. What is the position locally, can licensing have an effect, what help, advice and assistance is available locally?
18 October 2018	<ul style="list-style-type: none"> • Presentation by Healthwatch Warwickshire - Annual Report 2017/18

	<ul style="list-style-type: none"> • Presentation by David Eltringham, Managing Director, George Eliot Hospital NHS Trust • CAMHS - Mental Health matters and the provision of services in the borough
6 Dec 2018	<ul style="list-style-type: none"> • HWBB Annual Report 17/18. Annual Report from Health & Wellbeing Board • Improving Stroke Services in Coventry & Warwickshire • Teenage Conception Update. An update on the current rates of teenage conceptions in the Borough together with the Address Teenage Conception Task and Finish Group Action Plan update. • JSNA & Public Health Update. A presentation and report from Public Health on the priorities for health
18 April 2019	<ul style="list-style-type: none"> • CAMHS Mental Health matters and the provision of services in the borough are of concern • George Eliot Hospital Update. A presentation from the GEH on the current services and funding situation, including the provision of additional hospice beds
Rugby Borough Council – Customer and Partnerships Committee	
15 October 2018	<ul style="list-style-type: none"> • Air Quality Monitoring – Annual Review
Date to be set	<ul style="list-style-type: none"> • Encouraging the Community to Adopt Healthy Lifestyles - To monitor the delivery of priorities and associated costs of initiatives the Council could support.
Stratford-on-Avon District Council – Overview and Scrutiny Committee	
31 October 2018	<ul style="list-style-type: none"> • Update on Home Environment Assessment & Response Team (HEART)
Date to be set	<ul style="list-style-type: none"> • Health - inviting in South Warwickshire CCG, Local Workforce Action Board, and the Chairman of the Warwickshire HOSC Health Overview and Scrutiny Committee (WCC HOSC) (Originated from July OSC)
Warwick District Council – Health Scrutiny Sub-Committee	
5 February 2019	<ul style="list-style-type: none"> • Progress report on the HEART service
Date to be set	<ul style="list-style-type: none"> • Care Quality Commission – external speaker • Policy on Regulating the Private Rented Sector – Health & Wellbeing Aspects • Cultural Services – Physical Activity promotion and development
Each meeting	Health and Wellbeing Update
Each meeting	Updates from representative on WCC ASC&H OSC

4.0 Briefing Notes Circulated Since the Last Meeting

- 4.1 The work programme at Appendix A lists the briefing notes circulated to the Committee. Members may wish to raise questions and to suggest areas for future scrutiny activity, having considered those briefing notes.

5.0 Joint Health Overview and Scrutiny Committees (JHOSC)

- 5.1 Members will recall the previous reports about the review of stroke services. The assurance process is still to be completed, to allow the formal consultation to be commenced with the JHOSC and others. The Chair continues to meet with his Coventry counterpart, most recently on 1 October 2018 to discuss issues affecting both areas.
- 5.2 At its meeting on 15 May 2018 the County Council agreed to participate in the Joint Health Scrutiny Committee with Oxfordshire and Northamptonshire County Councils, for the purpose of responding to the consultation for substantial reconfiguration of consultant-led obstetric services at the Horton General Hospital. The Chair of this Committee, Councillor Wallace Redford is this Council's appointed representative. The first meeting of the JHOSC took place on 28 September and the next meeting will take place on 26 November 2018.

Background Papers

None.

	Name	Contact Information
Report Author	Paul Spencer	01926 418615 paulspencer@warwickshire.gov.uk
Head of Service	Sarah Duxbury	Head of Law and Governance
Strategic Director	David Carter	Joint Managing Director
Portfolio Holder	n/a	

The report was circulated to the following members prior to publication:

Local Member(s): None

Other members: Councillor Wallace Redford

Adult Social Care and Health Overview and Scrutiny Committee Work Programme 2018/19

Date of meeting	Item	Report detail
21 November 2018	George Eliot Hospital	Originally scheduled for September, this item was added to the programme to focus on progress made in relation to the action plan arising from the CQC inspection, particularly in relation to end of life care services. Other areas of focus will be the foundation approach, staffing and recruitment, how well the Trust is prepared to meet winter pressures and the GEH Community Liaison Board.
21 November 2018	Update from Healthwatch Warwickshire	Chris Bain, Chief Executive of Healthwatch Warwickshire will present their Annual Report.
21 November 2018	One Organisational Plan Quarterly Progress Report Q2	To consider the latest One Organisational Plan quarterly progress report.
30 January 2019	Update on Delayed Transfers of Care (DToC)	A comprehensive item was provided to the Committee on 24th January 2018 including a joint presentation on Warwickshire's current DTOC performance and actions to improve this. It is proposed to have an update on this important service aspect to explain the progress made in reducing DToC. This item was raised at the Chair and Spokes meeting in September 2018. The Chair has asked for a further update to members in January 2019.
30 January 2019	Update on the Hospital to Home Scheme	The 'hospital to home' scheme is delivered by Warwickshire Fire and Rescue Service. At the Chair and Party Spokes meeting in October, this was added to the work programme for the January 2019 meeting. A key aspect is future funding as the current funding stream (Better Care Fund) will cease in 2020.
30 January 2019	One Organisational Plan Quarterly Progress Report Q3	To consider the latest One Organisational Plan quarterly progress report.
6 March 2019	GP Services TFG	To receive an update on the implementation of recommendations arising from the work of the GP Services TFG. The report was approved by Cabinet at its meeting in June and by the Health and Wellbeing Board in September.

Appendix A

6 March 2019	Performance Monitoring - CCGs	The Committee considered the CCG commissioning intentions in 2017 and in September 2018, received a comprehensive report to monitor performance against those commissioning intentions. It was agreed to receive these reports at six-monthly intervals.
26 June 2019	Update on Public Health Commissioned Services for Drugs and Alcohol	The Committee received a presentation at its meeting on 11 July 2018. It was agreed that a further update be provided on this service area after twelve months.
25 September 2019	Performance Monitoring - CCGs	The Committee considered the CCG commissioning intentions in 2017 and in September 2018, received a comprehensive report to monitor performance against those commissioning intentions. It was agreed to receive these reports at six-monthly intervals.
20 November 2019	Local Suicide Prevention Plan	At the Chair and Party Spokes meeting in October 2018, this was added to the work programme for an update in November 2019. A document from the LGA on self-assessment of local suicide prevention plans had been circulated. The County Council has an approved suicide prevention plan; it has a higher number of suicides than for comparative councils and has received extra funding from NHS England for two years to start implementation of the suicide prevention strategy.
Future Work Programme Suggestions	Out of Hospital Programme.	Suggested by Councillor Parsons at the Chair/Spokes meeting on 21 June.
	Mental Health and Wellbeing	This item was added to the work programme in June 2018, with the item scheduled for the November Committee. Further discussion at the Chair and Party spokesperson meeting on 29 October, when the item was deferred. A revised date and scope for this review area needs to be agreed.
	Better Health, Better Care, Better Value (BHBCBV) – Proactive and Preventative Workstream	Suggested by Councillor Margaret Bell. The Proactive and Preventative work stream of the STP. The suggestion is to find out more: What is happening; what is the plan; how is it to be funded; when will we see results?
	BHBCBV – George Eliot Hospital Campus Model	Suggested by Councillor Clare Golby. To understand how the proposals for the George Eliot Hospital (GEH) Campus Model will fit into other health services for the north of Warwickshire and the implications for residents. Councillor Parsons supported this area, raising concerns about the potential downgrading of services delivered at GEH.
	Review of the Adult Transport Policy	Cabinet approved a revised Adult Transport Policy on 25 January 2018. This has been suggested as an area for the Committee to review after 12 months of implementation.
	The 111 Service	Suggested by Councillor Margaret Bell. Areas to examine are: How do they refer people to health services; how do they link in with the relevant CCG; how do they know where services are commissioned; also what do they do about patients with no transport who are referred to an Out of Hours Service at, say, the early hours of the morning.
	Local Commissioning of Services	Suggested by Councillor Mark Cargill. A pilot scheme has been undertaken in Alcester.

Appendix A

	Director of Public Health Suggestions	From the Director of Public Health's annual report. The theme this year is 'Vulnerability'. The Joint Strategic Needs Assessment and linked to this the commissioning of health, wellbeing and social care services. The JSNA aims to establish shared evidence on the key local priorities across health and social care. Other areas are: Health & Wellbeing Strategy, Sustainability & Transformation Plan (STP), Out of Hospital Programme, Community Hubs and the County Council Transformation Plans, suicide prevention and Mental health and substance misuse.
	Coventry and Warwickshire Partnership Trust	Suggested by Healthwatch. There has been a re-inspection of the CWPT by the Care Quality Commission. Originally planned for the Trust to present its progress against the action plan to the January 2018 meeting, which was considered to be too soon for the Trust to have implemented actions from the CQC review. Suggestion to have a written update and then programme for a formal report to provide assurance that the 'must do' and 'should do' recommendations are being implemented.

BRIEFING SESSIONS PRIOR TO THE COMMITTEE

Date	Title	Description
6 March 2019	Access to Primary Care Services for Homeless People	Healthwatch Warwickshire will provide an interim report on their project on access to primary care services for homeless people. WCC has a project mapping such services. This will be a joint briefing session from both WCC and HWW.
30 January 2019	Direct Payments and the introduction of Pre-payment cards.	At the Chair and Party Spokes meeting in October 2018, it was agreed to have a briefing session prior to this meeting on direct payments and the introduction of pre-payment cards.
21 November 2018	None	
26 September 2018	Dementia Awareness	A detailed report and presentation was provided in September 2017. The Committee agreed to consider the additional work being undertaken through Warwickshire's Living Well with Dementia Strategy (2016-2019), the potential areas of focus being timely diagnosis and support in acute/residential housing with care settings.
11 July 2018	Presentation on developing Fire and Health/Social care agenda.	A presentation from Officers of the Fire and Rescue Service on the support they are providing to the work of Social Care.
9 May 2018	None	There is no separate briefing session for this meeting. The Committee will have two key areas, being the report of the GP Services TFG and the care market and domiciliary care.
14 March 2018	None	Originally intended to have a session on Integrated Care, which subsequently became part of the main Committee meeting.
24 January 2018	Proposal from Chair and Party Spokes Meeting - Direct Payments	An initial briefing note on direct payments would be useful, ahead of the January session.

Appendix A

22 November 2017	Housing Related Support	Hugh Gaster, Housing Related Support Officer to lead on this. A briefing beforehand to remind of recent history and the briefing session to bring up to date with current position / developments.
13 September 2017	Out of Hospital Programme	A significant and positive step forward on the Out of Hospital Programme. It is felt members need to be sighted and engaged in this development. This session would include representatives of the clinical commissioning groups.
12 July 2017	Overview of Strategic Commissioning	Chris Lewington provided an overview of the work of Strategic Commissioning.

BRIEFING NOTES

Date Requested	Date Received	Title of Briefing	Organisation/Officer responsible
08/10/18	29/10/18	The Chair has asked officers to prepare a briefing note for the Committee on the revised Care Act guidance (issued 1 October 2018), the key implications for WCC and officer plans to respond to this guidance.	Pete Sidgwick
-	05/10/18	People Group Year End Customer Feedback 2017-18	
-	02/10/18	An update from George Eliot Hospital on its response to the CQC Action Plan.	
26/09/18	Integrated Care Systems	The Committee considered a report in March 2018 on Integrated Care Systems. It was agreed to have a further update after six months. This will now be provided via a briefing note.	
21/06/18	26/09/18	Request for a briefing note on the patient transport service was raised at the Chair & Spokes meeting. This involves several commissioners and service providers, notably five voluntary groups, WMAS, WFRS and CWPT.	DPH and SC
-	14/05/18	NHS England provided a briefing on the need to close a dental practice in Nuneaton.	NHS England
09/05/18		Dr John Linnane offered to circulate a briefing note on a service delivery review by the Coventry and Warwickshire Partnership Trust.	DPH and SC
22/02/18	18/04/18	Drug and Alcohol Service. A briefing from the Director of Public Health. This is the subject of a member briefing session at the meeting on 11 July.	
14/03/18	03/05/18	GEH Mortality Briefing – A briefing note to explain the actions taken to respond to two areas of concern on end of life care and an increase in Hospital Standardised Mortality Ratio.	
-	03/05/18	DPH Annual Report Update – A briefing paper to set out the topic of the next annual report. The theme for this report is the impact of social media on young people's health and wellbeing.	
22/02/18		A briefing note was requested at the Chair and Party Spokes Meeting on 22 February, to update the OSC on the work of the Safeguarding Adults Board, including the work of the MASH.	
22/11/17	19/01/18	Direct Payments Briefing Note - This briefing note provided an overview of the background and principles for Direct Payments. It described what they are, how they	

Appendix A

		can be accessed and the support available to ensure people manage them successfully.	
31/10/17	10/01/18	Community Meals Service	Claire Hall
22/11/17	21/12/17	Self-Harm – A briefing on data for intentional self-harm in Warwickshire and the support services available.	Paula Mawson
22/11/17	21/12/17	Childhood Obesity – A briefing on the levels of obesity affecting both adults and children, the health consequences of childhood obesity, data for Warwickshire and the support services available.	Fran Poole
22/11/17	21/12/17	#onething - Launched in 2015, this campaign asked people in the north of Warwickshire to think about just one thing they could change in their life to be a little healthier, with the overall aim of reducing the risks of heart disease, a significant health issue across the north of the county.	Yasser Din
22/11/17	21/12/17	Teenage Pregnancy – The Director of Public Health agreed to send the Committee more information on teenage pregnancy rates.	Etty Martin
22/11/17	21/12/17	NHS Health Checks - Members providing publicity of the local health check offer. Further information on health checks would be provided to the Committee for this purpose.	Sue Wild
22/11/17	21/12/17	Discussion about the school health and wellbeing service. The Director of Public Health offered to recirculate a briefing on this service.	Kate Sahota
31/10/17		Update on progress with reducing delayed transfers of care	Chris Lewington
-	01/11/17	Healthwatch England Publication – Readmission to Hospital	Paul Spencer
-	31/10/17	LGA Publication – Adult Social Care Funding	Paul Spencer
12/07/17	07/09/17	Dementia – Enhancing Awareness and Understanding Across Warwickshire	Claire Taylor
12/07/17	05/09/17	Summary of the CAMHS Redesign Process	Andrew Sjurseth
-	20/07/17	Healthwatch Report into Warwickshire Mental Health Services	Chis Bain
01/03/17	23/03/17	Maternity Briefing Note	
-	16/01/17	NHS Dental provision in Stratford	

TASK AND FINISH GROUPS

ITEM AND RESPONSIBLE OFFICER	OBJECTIVE OF SCRUTINY	TIMESCALE	FURTHER INFORMATION
GP Services	The Committee agreed this TFG area at its meeting on 15 September. The report of the TFG presented in May 2018.	May 2018.	The review report was approved by Cabinet in June 2018 and submitted to the Health and Wellbeing Board in September 2018.
Joint Health Overview and Scrutiny Committee	This is the first of the joint committees, working with Coventry City Council to focus on Stroke Services.	To be confirmed	There have been delays in the commencement of the work due to the NHS assurance process required ahead of the public consultation. Two informal meetings have taken place.
Maternity and Paediatric Services	The Committee agreed this TFG area at its meeting on 15 September. The detailed scoping of this area is still to be determined.	Review starts after completion of the GP Services TFG.	
Quality Accounts 2016/17. Paul Spencer and Coventry City Council / Healthwatch	QA Groups for each of the 5 Trusts to work with the Trusts on quality accounts over the year.	June 2016 – completed	Follows the format used for 2015/16, with WCC leading on the TFGs for George Eliot Hospital, West Midlands Ambulance Service and South Warwickshire Foundation Trust. Coventry City Council and Healthwatch Coventry to lead on the reviews for UHCW and CWPT.
Quality Accounts 2015/16, Paul Spencer and Coventry City Council / Healthwatch	QA Groups set up for each of the 5 Trusts to work with the Trusts on quality accounts over the year.	June 2016 – completed	The reviews are complete. This year, WCC led on the TFGs for George Eliot Hospital, West Midlands Ambulance Service and South Warwickshire Foundation Trust. Coventry City Council and Healthwatch Coventry led on the reviews for UHCW and CWPT.