

**MINUTES of the meeting of Health Scrutiny Committee held at Town Hall, Hereford on Thursday, 13th November, 2003 at 10.00 a.m.**

**Present:** Councillor W.J.S. Thomas (Chairman)

**Councillors:** Mrs. W.U. Attfield, G.W. Davis, Mrs. J.A. Hyde, Brig. P. Jones CBE, G. Lucas, R. Mills and Ms. G.A. Powell

**In attendance:** Councillors W.L.S. Bowen, P.E. Harling and Mrs. M.D. Lloyd-Hayes

At the start of the meeting Members paid tribute to the late Councillor D.C. Short and held a minute's silence in his memory.

**9. APOLOGIES FOR ABSENCE**

Apologies were received from Councillors T.M. James and J.B. Williams.

**10. NAMED SUBSTITUTES**

There were no named substitutes.

At the start of the meeting Members paid tribute to the late Councillor D.C. Short and held a minute's silence in his memory.

**11. DECLARATIONS OF INTEREST**

There were no declarations of interest.

**12. MINUTES**

**RESOLVED:** That the Minutes of the meeting held on 8th October, 2003 be confirmed as a correct record and signed by the Chairman.

**13. IMPROVING PUBLIC HEALTH**

The Committee received a briefing on public health issues in Herefordshire and the work of the public health team.

The presentation had been requested as a means of progressing one of the three main areas identified in the Committee's proposed work programme: Improving Public Health. It had been suggested that having received a detailed briefing on the work of the public health team it would then be possible at a later date to look at the extent to which the Director of Public Health's recommendations had influenced the policy and decision making of public agencies within the County.

Dr Kathryn Millard, consultant in public health medicine, advised the Committee that because of the outbreak of Legionnaire's Disease in Hereford she was attending the Committee in place of Dr M Deakin, Director of Public Health.

She outlined the various roles of the Director of Public Health, and the structure of the Directorate of Public Health. Key roles of the Directorate included the following:

- surveillance and assessment of population health collecting statistical information which informed the production of the annual report on the health of the population of Herefordshire.
- Promoting and protecting public health through a range of services.
- Working collaboratively, building partnerships with other agencies, to improve health and reduce inequalities.
- Developing effective health programmes and services.

In response to questions Dr Millard elaborated on the programmes to encourage the consumption of five portions of fruit and vegetables a day and curb smoking.

The Chairman informed Dr Millard that the Committee would in due course be reviewing the response to the outbreak of Legionnaire's Disease in Hereford. However, it was incumbent on the Committee to take the opportunity of asking her to comment on the latest position.

Dr Millard advised that she was not directly involved in the response but explained that once a cluster of cases had become apparent investigations of likely sources had begun and these were still ongoing. A lot of work was being done in an attempt to resolve the matter.

The Chairman thanked Dr Millard for her attendance.

#### **14. WORK PROGRAMME**

The Committee gave further consideration to items for inclusion in its work programme.

The report restated the basis on which the Committee had agreed to structure its work programme in its initial discussion of the matter in October. In addition to focusing on three main areas: managing public expectations and public involvement, improving public health, and access and waiting it had proposed the formation of groups to look at delayed discharges (henceforth to be known as the safely home project), car parking at the county hospital, communication and morale, and proposals affecting the ear, nose and throat service. It was reiterated that the Committee would also respond to major consultations as required and noted that the Committee would also need to consider the operation of the new contracts for General practitioners at some point. A draft work programme incorporating these activities and suggesting a timescale was appended to the report.

The Committee was also asked to consider the establishment of special relationships with health partners.

A development programme to assist Members of the Committee in their role, based on training provided by the Patient Advice and Liaison Service to lay Members of relevant bodies, was also appended to the report.

It was also suggested that after the abolition of the Community Health Council (CHC) in December, Members of that body should be invited to act as a source of advice to the Committee as appropriate until the Patients Forums had become established.

The Chairman reported that the Primary Care Trust and the Hospital Trust had both indicated to him that the draft work programme was appropriate.

In the course of discussion the following principal points were made:

- It was reported that the Members of the Community Health Council had only received cursory thanks for their service. The Committee considered that the CHCs had been treated atrociously and felt that a letter should be sent on the Committee's behalf to recognise formally the commitment shown by the Members of the CHC to improving the health of the people of Herefordshire.
- That links with voluntary bodies who had served on the CHC should be maintained.
- That efforts should be made to establish good communication links with the new Patients Forums at the earliest opportunity.
- The Director of Social Care and Strategic Housing informed the Committee that the Government had announced a one-off payment of £2.25 million to help local authorities in their new health scrutiny role. However, the payment was to be made to the Centre for Public Scrutiny to aid development of the function in association with the Local Government Association. In terms of capacity to support the Committee directly in its work it was therefore rather disappointing.
- That a review of the response to the outbreak of legionnaire's disease in Hereford City should be added to the work programme and be undertaken as a priority as soon as the outbreak was over. There was agreement that the Committee as a whole should conduct this exercise. It was also acknowledged that this would be complementary to and not a substitute for the more detailed review which would doubtless be undertaken by NHS bodies and others.
- In relation to delays in discharging patients from hospital the Director of Social Care and Strategic Housing reported that for the last two weeks there had been no delays connected to social care within the County Hospital.
- That whilst being mindful that resources were limited the Committee must be enabled to discharge its responsibilities effectively.

- THAT**
- (a) the broad content of the work programme as set out in appendix 1 to the report be approved;**
  - (b) scoping of any Reviews be undertaken after consultation with the Chairman and reported back to the Committee as appropriate;**
  - (c) outgoing Members of the Community Health Council be thanked formally for their work and invited to act as a source of advice to the Committee, providing views to the Committee on request, until 29 February, 2004.**
  - (d) the Chairman take the lead liaising with health partners on choice;**
  - (e) a member be nominated to take the lead liaising with health partners on consultation;**

(f) the training proposals as set out in appendix 2 to the report be welcomed;

and

(g) efforts should be made to establish good communication links with the new Patients Forums at the earliest opportunity.

The meeting ended at 12.00 noon.

**CHAIRMAN**