## Health Scrutiny Committee

A G E N O A



Date:	Tuesday, 6th April, 2004
Time:	2.00 a.m.
Place:	Brockington, 35 Hafod Road, Hereford
Notes:	Please note the <b>time, date</b> and <b>venue</b> of the meeting.
	For any further information please contact:

## County of Herefordshire District Council

Pages

# AGENDA

# for the Meeting of the Health Scrutiny Committee

#### To: Councillor W.J.S. Thomas (Chairman) Councillor T.M. James (Vice-Chairman)

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

1.	APOLOGIES FOR ABSENCE	
	To receive apologies for absence.	
2.	NAMED SUBSTITUTES (IF ANY)	
	To receive details of any Member nominated to attend the meeting in place of a Member of the Committee.	
3.	DECLARATIONS OF INTEREST	
	To receive any declarations of interest by Members in respect of items on this agenda.	
4.	MINUTES	1 - 4
	To approve and sign the Minutes of the meeting held on 29th January, 2004.	
5.	EAR, NOSE AND THROAT SERVICE CONSULTATION	5 - 6
	To provide the Committee with an update on the process for responding to the Ear, Nose and Throat Service consultation exercise.	
6.	HEALTH AND SOCIAL CARE INVOLVEMENT STRATEGY	7 - 10
	To provide details of an event to support the development of a new Involvement Strategy across Health & Social Care, and consider Committee representation at the event.	
7.	WEST MIDLANDS REGIONAL OVERVIEW AND SCRUTINY SURVEY	11 - 12
	To provide the Committee with an update on the results of a survey undertaken by the West Midlands Local Government Association (WMLGA) on the regional health scrutiny development priorities.	

## PUBLIC INFORMATION

### HEREFORDSHIRE COUNCIL'S SCRUTINY COMMITTEES

The Council has established Scrutiny Committees for Education, Environment, Health, Social Care and Housing and Social and Economic Development. A Strategic Monitoring Committee scrutinises Policy and Finance matters and co-ordinates the work of these Committees.

The purpose of the Committees is to ensure the accountability and transparency of the Council's decision making process.

The principal roles of Scrutiny Committees are to

- Help in developing Council policy
- Probe, investigate, test the options and ask the difficult questions before and after decisions are taken
- Look in more detail at areas of concern which may have been raised by the Cabinet itself, by other Councillors or by members of the public
- "call in" decisions this is a statutory power which gives Scrutiny Committees the right to place a decision on hold pending further scrutiny.
- Review performance of the Council
- Conduct Best Value reviews
- Undertake external scrutiny work engaging partners and the public

Formal meetings of the Committees are held in public and information on your rights to attend meetings and access to information are set out overleaf

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- Inspect agenda and public reports at least three clear days before the date of the meeting.
- Inspect minutes of the Council and all Committees and Sub-Committees and written statements of decisions taken by the Cabinet or individual Cabinet Members for up to six years following a meeting.
- Inspect background papers used in the preparation of public reports for a period of up to four years from the date of the meeting. (A list of the background papers to a report is given at the end of each report). A background paper is a document on which the officer has relied in writing the report and which otherwise is not available to the public.
- Access to a public Register stating the names, addresses and wards of all Councillors with details of the membership of the Cabinet, of all Committees and Sub-Committees.
- Have a reasonable number of copies of agenda and reports (relating to items to be considered in public) made available to the public attending meetings of the Council, Committees and Sub-Committees.
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## **COUNTY OF HEREFORDSHIRE DISTRICT COUNCIL**

#### **BROCKINGTON, 35 HAFOD ROAD, HEREFORD.**

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#### COUNTY OF HEREFORDSHIRE DISTRICT COUNCIL

MINUTES of the meeting of the Health Scrutiny Committee held at Brockington, 35 Hafod Road, Hereford on Thursday, 29th January, 2004 at 10.00 a.m.

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

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

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

#### 15. APOLOGIES FOR ABSENCE

Apologies were received from Councillor T.M. James, R. Mills, and J.B. Williams.

#### 16. NAMED SUBSTITUTES

Councillor Mrs P.A. Andrews substituted for Councillor T.M. James.

#### 17. DECLARATIONS OF INTEREST

There were no declarations of interest.

#### 18. MINUTES

**RESOLVED:** That the minutes of the meeting held on 13th November, 2003 be confirmed as a correct record and signed by the Chairman.

#### 19. EAR, NOSE AND THROAT SERVICE CONSULTATION

The Committee considered a report on the process for responding to a consultation on proposals for the Ear, Nose and Throat service.

It was reported at the meeting that the Primary Care Trust had not, as had been expected, approved a consultation document on the future arrangements for the service at its meeting on 28th January. It now planned to do so in March. However, the view was that the Committee could proceed with the arrangements suggested in the report.

The Director of Social Care and Strategic Housing and the Head of Policy and Communication commented on the approach which it was proposed to follow and there was an initial discussion of some of the issues which would need to be taken into consideration.

# RESOLVED: That the arrangements for undertaking the response to the consultation report on the future arrangements for the Ear Nose and Throat Service as set out in the report be approved.

#### HEALTH SCRUTINY COMMITTEE

#### 20. REVIEW OF MANAGEMENT OF LEGIONNAIRES DISEASE OUTBREAK

The Committee considered a draft scoping statement to guide the work of the Committee in relation to its review of how the recent outbreak of Legionnaires disease had been managed.

The Committee discussed the scope of the review and it was suggested that the terms of reference should be augmented to provide for review of the overall effectiveness of the joint response to the outbreak of the agencies involved. It was also proposed that the Chairman of the Environment Scrutiny Committee should be invited to support the review.

#### **RESOLVED**:

That (a) the draft scoping statement attached at appendix 1 to the report be approved as amended;

and

(b) the Chairman of the Environment Scrutiny Committee be invited to support the review of how the recent Legionnaires disease outbreak had been managed.

#### 21. EMERGENCY CARE ACCESS

The Committee considered a draft scoping statement for the review of emergency care access.

It was noted that evidence gathered in the response to the consultation on proposals for the Ear Nose and Throat Service might be useful in the context of the review and that duplication of evidence gathering should be avoided. It was suggested that ensuring equality of access should be added to the review's desired outcomes.

#### **RESOLVED:**

That (a) the scoping statement for the review of emergency care access as appended to the report be approved as amended;

and

(b) Councillors Mrs WU Attfield, G Lucas and Mrs G.A. Powell be nominated to serve on the Review Group and Councillor Mrs P.A. Andrews also be invited to serve on the Group.

#### 22. CAR PARKING - HEREFORD HOSPITAL

The Committee received an update on car parking provision at Hereford Hospital.

The report set out discussions which had taken place with representatives from the Hereford Hospitals NHS Trust and Mercia Health Care about car parking at the site. It was noted that additional car parking on the site amounting to 110 places was still available under the terms of the original planning permission and that this was now expected to be available by April, 2004. Further discussions were to take place on possible areas where additional car parking could be provided within the constraints of the site. The Trust and Mercia Health Care were also to monitor the situation as an ongoing action. Further reports would be made to the Committee as appropriate.

#### HEALTH SCRUTINY COMMITTEE

The Committee welcomed the progress which was being made. However, in the course of discussion it was proposed that the Trust should be requested to consider whether there was scope for management of car parking at the site to be improved. It was suggested that the present charging structure, involving a fixed payment of  $\pounds 1.50$  for the first three hours, should be reviewed to see if greater turnover of vehicles could be encouraged; that consideration should be given to increasing provision the number of parking spaces for those with a disability, and reviewing arrangements for accommodating the air ambulance.

RESOLVED: That the Hereford Hospitals NHS Trust be asked to consider whether there was scope for management of car parking at the site to be improved, noting concerns about the charging structure, the provision of parking spaces for those with a disability and the arrangements for accommodating the air ambulance.

The meeting ended at 11.12 a.m.

CHAIRMAN

6TH APRIL, 2004

## EAR, NOSE AND THROAT SERVICE CONSULTATION

**Report By: Director of Social Care and Strategic Housing** 

## Wards Affected

County-wide

### Purpose

1. To provide the Committee with an update on the process for responding to the Ear, Nose and Throat Service consultation exercise.

## **Financial Implications**

2. No significant resource implications have been identified in relation to the current proposal for the Ear, Nose and Throat Service consultation exercise.

## Background

- 3. In January the Committee approved arrangements for undertaking the response to the consultation report on the future arrangements for the Ear Nose and Throat (ENT) Service. It was reported at the meeting that the Primary Care Trust had not, as had been expected, approved a consultation document on the future arrangements for the service at its meeting on 28th January, 2004, but planned to do so in March. However, the view was taken that the Committee could proceed to begin to gather evidence about the issues facing the Service.
- 4. In accordance with this decision the Sub-Group established by the Committee has gathered written evidence about the ENT Service and held discussions with the Chief Executives of both the Primary Care Trust and the Hereford Hospitals NHS Trust, the two Consultants presently delivering the Service, representatives of the General Practitioners and ENT Consultants at the Royal Worcester Hospital.

## The Consultation Exercise

- 5. The consultation document was approved by the Primary Care-Trust Board on 24th March and a copy is enclosed separately. The consultation period ends on 7th May, 2004.
- 6. It would be inappropriate for the Committee to debate the proposals pending the gathering of further evidence and the completion of the Sub-Group's draft report for the Committee's consideration. Any views Members may have should be submitted to the Group for its consideration.
- 7. However, it is considered appropriate, as this is the first consultation exercise in which the Committee has been engaged, to remind Members of some of the provisions relating to the consultation process itself.
- 8. Paragraph 10.1.7 of the Department of Health's Guidance on the Overview and Scrutiny of Health states that: "Government Guidance on Consultations states that full consultation should last for a minimum of twelve weeks and that consultations should ensure that groups the NHS has traditionally found hard to reach and the

Further information on the subject of this report is available from Alan Blundell, Head of Policy and Communication on (01432) 260268

#### HEALTH SCRUTINY COMMITTEE

wider community should be consulted. It is also considered good practice for staff from the NHS body or bodies carrying out consultation, to work closely with the Overview and Scrutiny committee during this period. This should help all parties to reach agreement about how the proposed substantial development or variation might be progressed."

- 9. Paragraph 10.6.4 states amongst other things that where the Committee is not satisfied with "the content of the consultation or that sufficient time has been allowed", it may report the issue to the Secretary of State. "It should be noted that the referral power for Overview and Scrutiny Committees in the context of inadequate consultation, only relates to the consultation with committees by the NHS and not consultation with other stakeholders. Section 11 of the (Health and Social Care) Act (2001) requires more wide ranging involvement and consultation but no referral power relates to that wider duty. Paragraph 11.2 states that "When the committee has considered the proposals and local evidence, it should prepare its comments (if any) to the local NHS body undertaking the consultation. It must respond within the timescale (if any) specified by that local NHS body. If the committee does not support the proposals it should provide reasons and evidence for this. In circumstances where the Committee is concerned about the adequacy of the consultation it should make the reason why clear in its comments. The committee should not consider any referral to the Secretary of State until the NHS body has had an opportunity to respond to the committee's comments, if it so wishes, and an effort at local resolution has been made."
- 10. The Committee needs to take a view on the scale of proposed change and whether the timetable in the report is appropriate.
- 11. A meeting of the Committee will need to be arranged prior to the deadline to consider and approve a response. The timescale will need to take account of the need to consider the views of other consultees in particular the Patients Forums and, as outlined to the Committee in January, the views of the Council's executive.

### RECOMMENDATION

THAT (a) the latest position on the preparation of the response to consultation report on the future arrangements for the Ear Nose and Throat Service be noted;

and

(b) a date be agreed to consider the Committee's response to the Consultation, which ensures that the response reaches the Primary Care trust by 7<sup>th</sup> May, 2004.

#### BACKGROUND PAPERS

• None identified

6TH APRIL 2004

## HEALTH AND SOCIAL CARE INVOLVEMENT STRATEGY

**Report By: Director of Social Care and Strategic Housing** 

## Wards Affected

County-wide

### Purpose

1. To provide details of an event to support the development of a new Involvement Strategy across Health & Social Care, and consider Committee representation at the event.

## **Financial Implications**

2. No resource implications have been identified in relation to this item.

### Background

- 3. The Herefordshire Primary Care Trust in partnership with the Council's Social Care and Strategic Housing Directorate has arranged a public involvement event at the Three Counties Hotel on 6th May. The purpose of the event is to obtain the views of local people on how they want to help plan local health and social care services.
- 4. A copy of the draft agenda for the event is attached at Appendix 1 for information.

## RECOMMENDATION

THAT the Committee consider the attendance of Members at an event to be held on 6<sup>th</sup> May 2004, at the Three Counties Hotel, to support the development of a new Involvement Strategy across Health & Social Care in Herefordshire.

#### **BACKGROUND PAPERS**

None identified

# Involvement Event

## Developing a Herefordshire Involvement Strategy

## AGENDA.

At registration each Delegate will receive a delegate pack, which will include, a copy of 'The principles underpinning involvement', 'The ladder of participation' and information about current local involvement work. In addition their will be a range of displays about previous work and a number of opportunities for people to make comments about the day and/or about public, patient, service user and carer involvement work.

10.00 Arrival and Registration.

- 10.15 Welcome and Chairperson's Introduction
- 10.25 First Key Speaker- Harry Cayton
- 11.00 Euan to introduce the topics for workshops
- 11.15 Open-workshops session 1
  - 1. Where are we now? Baseline
  - 2. Who should we involve?
  - 3. How should we involve people?
  - 4. When should we involve people?
  - 5. What should we involve people in?
  - 6. How do we know we have involved people?
  - 7. Music Pool how should we involve you?
  - 8. Art Pool help us get people involved?
  - 9. An Independent User Involvement Forum?

- 12.00 Feedback open-workshop 1 conclusions and key-point roundup
- 12.30 Lunch
- **1.15** Open workshop session 2
  - 1. Where are we now? Baseline
  - 2. Who should we involve?
  - 3. How should we involve people?
  - 4. When should we involve people?
  - 5. What should we involve people in?
  - 6. How do we know we have involved people?
  - 7. Music Pool how should we involve you?
  - 8. Art Pool help us get people involved?
- 2.00 Feedback open-workshop 2
- 2.30 Coffee/Tea/Comfort
- 2.45 Plenary session /conclusions Chair
- 3.30 Harry Cayton roundup
- **3.45** Finish.

6<sup>TH</sup> APRIL 2004

## WEST MIDLANDS REGIONAL OVERVIEW AND SCRUTINY SURVEY

**Report By: Director of Social Care and Strategic Housing** 

## Wards Affected

County-wide

### Purpose

1. To provide the Committee with an update on the results of a survey undertaken by the West Midlands Local Government Association (WMLGA) on the regional health scrutiny development priorities.

## **Financial Implications**

2. No resource implications have been identified in relation to this item.

### Background

- 3. During 2003 the WMLGA undertook a survey to establish the regional development priorities for health scrutiny committees within the West Midlands.
- 4. The priorities identified for the development of the scrutiny function included workshops and seminars to consider:
  - best practice in addressing health inequalities
  - guidance on joint committees
  - delegation to District Councils
  - the criteria for consultation by NHS
  - the interpretation of 'substantial variation'
  - the role for scrutiny in 'foundation hospitals'
  - 'jargon busting'.
  - the implications of the new GP contracts
  - communication with PALS and Patients' Fora

## RECOMMENDATION

THAT the Committee note the regional health scrutiny development priorities identified as a result of the survey undertaken by the West Midlands Local Government Association.

#### **BACKGROUND PAPERS**

None identified

Further information on the subject of this report is available from Sue Fiennes, Director of Social Care and Strategic Housing on (01432) 260048