

Health Scrutiny Committee

Subject:	HEALTH & SOCIAL CARE UPDATE
Report By:	Chris Bull, Chief Executive

PURPOSE OF THE REPORT:

To update the Health Scrutiny Committee on key strategic and operational issues for health and social care in Herefordshire

HEALTH & SOCIAL CARE UPDATE REPORT

KEY ISSUES

1. Involvement of Patient Perspectives in Service Development & Planning

Various pieces of work are ongoing locally to ensure that the perspectives of patients are included in service development and planning, including the establishment in January of a single Customer Insight Unit across the council and NHS Herefordshire.

NHS Herefordshire Board now starts each formal board session with a discussion with patients, carers and other community members. At the last meeting of the board, the board had the privilege of listening to Alison Davies, a carer in Hereford, who talked about her and her family's experience of stroke care. Lessons learnt from this experience have informed ongoing care pathway redesign work and the board resolved to schedule a feedback session on a regular basis to ensure that agreed actions from patient feedback are being embedded in frontline practice.

2. Integration of Health & Social Care Providers in Herefordshire

Since the last update to the committee the Transition Board, has produced a report, the recommendations of which are now being considered by NHS Herefordshire, HHT Board and Herefordshire Council Main proposals from the report are focussed on changes in care pathways which will result in improved quality and coherence of care and improved sustainability of health and social care services in the county. More services will be commissioned within the community setting, in essence, 'doing the right thing at the right time, in the right place', reducing the need for acute treatment and providing care closer to people's homes. This means that family doctors, hospital doctors, social care workers, carers, nurses and patients will work together in a more integrated way to deliver care and treatment. The partners are also exploring appropriate organisational structures to best support the deliver of these changes in care pathways..

3. World Class Commissioning Panel Assessment

Members of the NHS Herefordshire Board attended the World Class Commissioning Year 2 Assessment Panel on 21st April. Verbal feedback from the assessment panel indicates that the

Board understand its business and is poised to deliver transformational change locally. The panel was impressed by the partnership work locally and particularly the fact that the Leader of the Council and Lead Clinicians attended the panel with the Board. The panel encouraged the PCT to continue to work to capture patient experience measures and use this to monitor service improvement efforts and quality of services locally. The decision by the Board to open formal sessions with a discussion about patient experience is therefore well placed to achieve this.

4. Operational Plan 2010-2011

Arrangements for the operational delivery of the World Class Commissioning Strategy are now in place. The delivery of outcomes is based 6 multi-disciplinary programme workstreams made up of professionals from the frontline, managers and corporate directors working together.

The six workstreams are: Staying Healthy, Maximising Independence, Planned Care, Unscheduled Care, Women & Children and Mental Health & Learning Disability. An essential element of this working arrangement is co-leadership of the workstreams by frontline health and social care staff. This is to ensure alignment between strategy and frontline operations.

Therefore, integrated care pathways recommended by Transition Board and the NHS Herefordshire 2010/11 Operational Plan submitted to the Strategic Health Authority have been realigned and allocated to the workstreams.

The six workstreams report directly to a Programme Board chaired by the Chief Executive. The workstreams will work with providers, service users, and other stakeholders in order to ensure that strategic intent are delivered at the service frontline.

Each of the workstreams will be responsible for and collectively strive to achieve all the key performance indicators for health and social care. The performance reporting system "Performance Plus" will be utilised to generate timely performance reports based on appropriate Key Performance Indicators by programme area.

5. Public Health Annual Report 2009/10

The Director of Public Health report is in the final stages of production and has been discussed by NHS Board. The Board noted the Public Health Annual Report and that its recommendations would be taken into account when setting priorities. The report will be considered by Cabinet at its meeting on 17th June and the full report will also be available at the Health & Wellbeing Conference on 10th June 2010.

While the committee will consider the report in full as an agenda item as part of its work on population health; the key messages from the report can be summarised as follows:

- Doing more about a specific list of simple, affordable, and effective interventions;
- Tackling a list of potential opportunities to gain efficiency and reduce waste;
- Exploring and identifying how to reward healthy behaviours; and
- Developing and testing a consistent methodology for resource allocation across Herefordshire Public Services.

6. Mental Health Care Procurement

Work continues apace regarding bringing new providers into Herefordshire to support further development of good quality mental health services locally. The procurement process is progressing, with the contract scheduled to be let in September.

7. Other Independent Commission Reports

a) NHS HEREFORDSHIRE STAFF SURVEY

The PCT Staff Survey for 2009 has been published by the Care Quality Commission (CQC). The survey reported findings against the 4 staff pledges and highlights areas for improvement as well as good practice.

There were 4 main areas where the Trust continues to perform well as highlighted in the CQC report: high job interest, low work-related injury, good incident reporting, and low experience of discrimination. There was significant improvement in the percentage of staff having equality and diversity training.

The 4 lowest ranking findings were around fairness and effectiveness of incident reporting procedures, percentage of staff appraised in the last 12 months, percentage of staff with PDPs, and perception of effective action from employer towards violence and harassment. In particular, the results for the administrative and clerical group showed lower job satisfaction and percentage of staff appraised. Conversely there were positive perceptions from the Allied Health Professionals group. The Joint Management Team has agreed corporate actions in response to this and the associated Herefordshire Council employee opinion survey and is working with staff groups to progress those actions..

b) ADULT SOCIAL CARE CQC RATING 2009/10

In November 2009, Adult Social Care was rated as 'Performing Well' by CQC. The rating is against the 7 key social care and health outcomes, supplemented by outcomes required for high quality Leadership and Commissioning. A self assessment on the full year 09/10 has been submitted in May 2010, which has declared performance to be a stronger 'Performing Well' rating overall, including upgrading performance on Adult safeguarding from adequate to performing well. The CQC judgement is expected in the autumn but will be significantly influenced by the Inspection of Safeguarding and Older People services scheduled for August 2010.

8. MUSCULOSKELETAL CLINIC CLOSURE

On the 1st April 2010 The Provider Arm of NHS Herefordshire took action that led to the closure of a clinic in mid-session. It is extremely rare for clinics to be closed while patients are being seen and therefore an investigation was initiated by the Director of Quality and Clinical Leadership into the process that was followed to close the clinic and the rationale for the actions taken that led to the closure. The investigation is on-going. It is anticipated that this will be completed by the end of June following an Independent Review of the service. Initial findings are being reported to the Board to provide assurance on the management of the

clinical and reputational risks identified. In the interim, the clinic has now re-opened and all services are operational apart from a specific element of treatment still being investigated.

9. Performance Report 2009-2010

Key highlights are:

Finance: The month 12 position had been presented to the Performance & Quality Committee, and subject to audit it was reported that the PCT had met all its key statutory targets; and

The Annual Health Check: The performance thresholds are still being finalised from the DoH, but on the assumption that ratings were as previously published the Trust could expect to be assessed as adequate for quality and good or excellent for finance. Publication of the assessment is expected in July 10.

For specific performance indicators; there are areas where performance is below target, as outlined in the performance report appended to this report for information of the committee. Specific and targeted interventions are in place to tackle these.

RECOMMENDATION:

- 1. Committee Members are asked to discuss and note the issues highlighted in the briefing.**