

**ITEM 13** 

Report of the Strategic Director of Resources

# Adults and Public Health Board Draft Work Programme

## SUMMARY

1.1 Overview and Scrutiny Boards are required to consider and set their annual work programme early in their municipal year. At the last meeting of this Board members were asked to give their suggestions for the Adults and Public Health Board's work programme. Members have given their suggestions and these are listed below.

#### RECOMMENDATION

2.1 To consider and agree a work programme for the Adults and Public Health Scrutiny Board.

## **REASONS FOR RECOMMENDATION**

3.1 Setting a robust work programme will enable the Board to focus on key issues and help improve health and adult social care services for the people of Derby.

## SUPPORTING INFORMATION

- 1.2 At the June meeting of this Board members were asked to give their suggestions for scrutiny for this year's work programme. These have been collated and a draft programme is presented below.
- 4.1 The Council Constitution limits one topic review report to be submitted to the Council Cabinet every six months from Scrutiny Boards. It is therefore possible for each Board to conduct two reviews in each municipal year. Topic reviews are not mandatory, but if the Board wishes to conduct in-depth reviews in the current year, it is suggested that members should aim to have agreed on the review topic at the earliest opportunity.
- 4.2 The work programme is not restrictive, and Board members can identify and introduce items for scrutiny throughout the year. Items for scrutiny will be discussed at premeetings with the Chair and Vice Chair, and will be added to the Scrutiny Board Agenda at the Chair's discretion.

4.3 Items for scrutiny identified by the members of the Adults and Public Health Board are also presented in potential date order in Appendix 2.

# Potential work programme areas and topic reviews

- 1. Transforming social care funding looking at issues around **personal budgets and direct payments**, and looking at how the system works and payments are assessed and accessed.
- 2. **"Barriers and enablers" on developing and delivering Extra Care facilities** in the city, whilst looking at provision across the continuum of care, (both private and public sector). Are levels of provision targeting the correct client groups and vice versa?
- 3. **Revisit Health Inequalities Review Report,** and consider progress against areas recommended for action. Consider whether the recommendations are still valid and what are the Top 5 priorities ? e.g. Obesity
- 4. **Health Inequalities** subsequent meeting with Joint Director of Public Health drew up issues around GP non-registration, demographic data, and targeting services also impacting on A&E numbers v Out of Hours GP services.
- 5. **Independent Complaints and Advocacy Service** for the City *Report circulated and comments submitted to the Cabinet member* to revisit
- 6. **Supporting People** how savings of £6m in the Supporting People budget will impact on vulnerable people on agenda August 2012.
- 7. To look at the **transfer of previous NHS public health** 'functions' to the City Council for 2013, identifying opportunities where working together could add value and strengthen programmes, e.g. sports, community programmes.
  - 8. **Impact of Change in Adult Social Care Fair Access Criteria** from Moderate to Substantial on agenda August 2012.
  - 9. Early discharges from NHS Acute Hospitals and impact on Adult Social Care resources.
  - 10. EM Ambulance Service re-closure of stations and impact

# **OTHER OPTIONS CONSIDERED**

#### 5.1 None.

Background papers:	Mahroof Hussain 01332 643647 e-mail mahroof.hussainn@derby.gov.uk None
List of appendices:	Appendix 1 – Implications Appendix2 – List of topics suggested by members

This report has been approved by the following officers:	
Legal officer	
Financial officer	
Human Resources officer	
Service Director(s)	
Other(s)	Phil O'Brien – Statutory Scrutiny Officer

## **Appendix 1**

# IMPLICATIONS

#### **Financial and Value for Money**

1.1 None arising directly from this report.

#### Legal

2.1 The Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002 gives health scrutiny committees powers to review any matter relating to the planning, provision and operation of health services.

#### Personnel

3.1 None arising directly from this report

#### **Equalities Impact**

4.1 Effective scrutiny benefits all Derby people.

#### Health and Safety

5.1 None arising directly from this report

#### **Environmental Sustainability**

6.1 None arising directly from this report

#### Asset Management

7.1 None arising directly from this report

# **Risk Management**

8.1 None arising directly from this report

# Corporate objectives and priorities for change

9.1 Our aim is to work together so that Derby and it's people will enjoy a thriving sustainable economy, good health and well-being and an active cultural life.

# Potential work programme areas and topic reviews

Date	Item
13 August 2012	<ul> <li>Tier 4 Psychological Therapies Review</li> <li>Derby LINk Annual Report</li> <li>Transition from Derby LINk to HealthWatch - Update</li> <li>Transformation of Housing Related Support Service (Supporting People)</li> <li>Impact of Change in Adult Social Care Fair Access Criteria from Moderate to Substantial</li> <li>DoH Consultation on Scrutiny Health Regulations</li> <li>Briefing on the future of Children's Congenital Heart Services</li> </ul>
1 October 2012	<ul> <li>Transforming social care funding – looking at issues around personal budgets and direct payments, and looking at how the system works and payments are assessed and accessed.</li> <li>Revisit Health Inequalities Review Report, and consider progress against areas recommended for action. Consider whether the recommendations are still valid and what are the Top 5 priorities ? e.g. Obesity</li> </ul>
5 November 2012	<ul> <li>Revenue Budget proposals</li> <li>"Barriers and enablers" on developing and delivering Extra Care facilities in the city, whilst looking at provision across the continuum of care, (both private and public sector). Are levels of provision targeting the correct client groups and vice versa?</li> <li>Report back on any visits to Extra Care facilities</li> </ul>
21 January 2013	<ul> <li>To look at the transfer of previous NHS public health 'functions' to the City Council for 2013, identifying opportunities where working together could add value and strengthen programmes, e.g. sports, community programmes</li> <li>Early discharges from NHS Acute Hospitals and impact on Adult Social Care resources</li> </ul>
15 April 2013	