

Appendix 1

HOSC Work Programme 2011-12: Ideas for Scrutiny

1 Issue: PCT Annual Operating Plan (AOP)

Referred By: PCT

Date: Autumn 2011

Notes: The PCT publishes an annual AOP which sets out its high level commissioning intentions for the forthcoming 12 months. This represents an important opportunity for HOSC members to inform themselves about and interrogate PCT commissioning plans. Given the complexity of PCT AOPs, members may wish to take this item as part of a workshop session or via a sub-group rather than as a standard committee item.

Recommendation: Schedule as a workshop event – the AOP is a complex document and does not lend itself to effective scrutiny via a regular committee meeting.

2 Issue: Brighton & Sussex University Hospitals Trust (BSUH) 3T Development progress report

Referred By: BSUH

Date: Sep 11

Notes: 3T is an initiative which will see a major redevelopment of the Royal Sussex County Hospital (RSCH) site in Eastern Road as a regional specialist care centre, with increased focus on trauma, teaching and tertiary services. Plans for this very significant project have been presented to the HOSC on several occasions, with the committee updated on any significant developments in the initiative.

Recommendation: Schedule as committee item for September 2011

3 Issue: Accessibility of RSCH site following 3T development

Referred By: Cllr Janio

Date: Sep 11

Notes: This suggestion refers to patient/visitor access to the RSCH site. There are long term issues with access to the site, particularly in terms of access by private car/parking/parking charges etc, and fears that these problems may be exacerbated by the 3T development.

Recommendation: Schedule for September 2011 to coincide with 3T update (see item 2 above).

4 Issue: BSUHT Foundation Trust (FT) application

Referred By: BSUH

Date: Autumn 11 and Spring 12

Notes: It is Government policy to encourage/require NHS trusts to apply for FT status as soon as they can. BSUH's FT application is ongoing and the trust has updated the HOSC on its application on several occasions already (HOSC is not a statutory consultee on FT applications, but it is considered good practice to involve stakeholders in this way).

Recommendation: Schedule as committee item after discussion with BSUH

5 Issue: South East Coast Ambulance Trust (SECamb) FT application

Referred By: SECamb

Date: TBC

Notes: see notes for Item 4 above

Recommendation: Schedule as committee item after discussion with SECamb

6 Issue: Sussex Community Trust (SCT) progress on merger/B&H services

Referred By: SCT

Date: TBC

Notes: In 2010 South Downs Health NHS Trust, the Brighton & Hove NHS provider of community care services integrated with West Sussex community care services (formerly managed by NHS West Sussex) to form SCT. The Trust came to HOSC to explain the rationale for the merger, plans to improve services etc. There is an update on these plans scheduled for 2011-12.

There are also policies currently under review (including Short Term Services and Long Term Conditions) which may have a significant impact upon SCT. It may therefore make sense to wait until new policies have been agreed and then discuss with SCT how these plans impact upon its operations.

Recommendation: Schedule as committee report(s) after discussion with SCT

7 Issue: Mental Health Re-Commissioning

Referred by: Sussex Partnership NHS Foundation Trust (SPFT)/NHSBH

Date: TBC

Notes: There has been considerable activity in recent months re: re-configuring/re-commissioning city mental health (MH) services. Initiatives include SPFT's 'Under One Roof' and 'Better By Design' plans, and city commissioner's plans re-design MH access services and reconfigure acute MH beds across the city. This is ongoing work and the HOSC will require regular updates on this, as it will on the recently announced MH accommodation pilot.

Recommendation: Schedule as committee report(s) after discussion with SPFT/NHSBH

8 Issue: Breast Screening

Referred By: legacy item

Date: TBC

Notes: Breast cancer screening for city residents is commissioned by the PCT from BSUH. In recent years there have been problems with local breast screening performance, caused by issues re: recruitment, moving over to a digital imaging service etc. HOSC requested an update on these services in 2010, and then asked for a follow up to see whether recent improvements had in fact been maintained.

Recommendation: Schedule in Autumn 2011 (if screening is now back on course, a letter confirming this may be sufficient; if there are still problems with the service then this will require a formal report to committee).

9 Issue: Health & Social Care Bill: Legislative Progress

Referred By:

Date: TBC

Notes: Members might be usefully updated on recent changes to the Health Bill following the 'pause' for consultation, the NHS Future Forum report on this consultation and the Government's response to the Future Forum.

Recommendation: Update paper for committee in Autumn 2011

10 Issue: Health & Social Care Bill: BHCC Implementation

Referred By:

Date: TBC

Notes: There are three main areas of the Health Bill which will require action by the council: (1) the transfer of public health responsibilities

from the PCT to BHCC; (2) the establishment of a new patient and public involvement organisation, Healthwatch, to replace LINKs; (3) the creation of a local Health and Wellbeing Board (HWB) to co-ordinate the local health economy and agree the Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy. Work is currently ongoing in all these areas.

Recommendation: Include with updates on 9) above.

11 Issue: GP Quality (and access to GP appointments)

Referred By: Cllr Peltzer Dunn

Date: TBC

Notes: Although GPs work to standardised contracts, GP practices are competitive small business with considerable variations in terms of size, buildings etc. Historically, there is a significant variation in terms of general quality of GP practices across the city, as well as large differences in the individual performance areas – including quick access to appointments (but also opening times, patient satisfaction, prescribing etc.) NHS Brighton & Hove is directly responsible for contracting with a quality assuring city GP practices and can share this information with the HOSC

Recommendation: Schedule as committee item after discussion with NHSBH/city GPs

12 Issue: Continuity of Care For People With Mental Health/Substance Misuse Problems Coming Out of Prison

Referred By: Cllr Deane

Date: TBC

Notes: A very high percentage of the prison population have mental health and/or alcohol/substance misuse issues. Left untreated these problems are likely to create difficulties when people are released from custody – e.g. further criminal/anti-social behaviour, worsening MH or physical health problems. However, it is not clear that there is an effective system in place for ensuring that health professionals are made aware of the release of people with severe health problems; there is not necessarily routine sharing of information between prison doctors and GPs etc. There may be particular local issues here, given that B&H has major problems with ASB, chaotic substance misuse etc.

Recommendation: More scoping is required to ascertain what the exact issues are here and how there might be local influence on this matter (offender health is commissioned at a regional/national level as a specialised commissioning contract rather than by individual PCTs)

13 Issue: Maternity (esp. post partum care at RSCH)

Referred By: Cllr Buckley

Date: TBC

Notes: This referral was focused on care for mothers after giving birth at RSCH, particularly in terms of the policy of rapid discharge following straightforward births. However, members may wish to look in more depth at maternity/perinatal services in general (this had been scheduled for 2010-11, but was postponed as the hospital trust was recruiting a new head of midwifery. This could well include discussion about having a local Midwife Led Maternity Unit (MLU) and about effectively supporting women who choose to have a homebirth.

Recommendation: Request report from BSUH/NHSBH on this issue to specifically include discussion of a local MLU. Involve mothers who have recently given birth in these discussions. NB: the committee is not necessarily seeking to criticise maternity care in the city; if there is evidence of really successful local services the HOSC would appreciate the opportunity to help publicise these successes.

14 Issue: Nutrition in Residential Care

Referred By: Cllr Barnett

Date: TBC

Notes: This referral is concerned with food quality and nutrition in nursing and residential homes. This is an issue that has recently been addressed by B&H LINK and members may wish to speak with the LINK and read their report before deciding whether to take action, perhaps in terms of further exploration of key LINK findings.

Recommendation: Talk with LINK before taking further action.

15 Issue: End of Life Care

Referred By: Cllr Wealls

Date: TBC

Notes: This referral particularly concerns dignity in death re: services at RSCH, but might usefully be extended to look at local End of Life services – this is a PCT priority for the coming year, as well as being a national priority area.

Recommendation: workshop event, including PCT, BSUH, local hospices etc

16 Issue: Health Impact of Noise Nuisance

Referred By: Cllr Duncan

Date: TBC

Notes: this referral is particularly concerned with the potential impact of alcohol-related noise nuisance (e.g. late licensing, house parties etc).

This is an interesting idea, but will require planning with Licensing/PH

Recommendation: to be considered alongside item 17 (below)

17 Issue: Alcohol Issues

Referred By: Cllr Duncan/Cllr Powell

Date: TBC

Notes: These referrals relate particularly to problems caused by a culture of excessive drinking and its impact on city A&E services (inc lack of a separate children's entrance to A&E), police capacity, problems caused by 2003 Licensing Act etc. These are very significant issues, but there is already a good deal going on here, including the ongoing Intelligent Commissioning Pilot on alcohol issues, a planned (but currently paused) scrutiny panel on alcohol-related hospital admissions, the recent scrutiny report on children and alcohol etc. Members may therefore want to be careful in defining precisely which issues interest them (e.g. looking specifically at the pressure on A&E and possible steps to alleviate this).

Recommendation: HOSC Chair to talk to Cabinet members with responsibility for public health, crime & disorder and IC pilots to see what potential there is for exploring alcohol-related issues without duplicating the work of other bodies. Chair to write to the Chair of OSC asking her to provide an update on the progress of the Intelligent Commissioning alcohol pilot.

18 Issue: Quality/Annual Patient Survey

Referred By: NHSBH/BSUH

Date: TBC

Notes: The committee is likely to be interested in the quality of local healthcare providers, particularly with regard to providers who are struggling to reach an acceptable standard. The Annual Patient Survey is potentially a useful tool in assessing the quality of local NHS trusts (as patient experience is one of the three key areas via which the NHS measures quality). Members may therefore wish to look at the survey results when they become available (and potentially also staff survey information, CQC reports etc)

Recommendation: workshop looking broadly at issues of quality across the local health economy, including patient satisfaction with services.

20 Issue: Cervical Screening/Screening

Referred By: Cllr Phillips

Date: TBC

Notes: The referral for this item was specifically about the cervical screening programme, but this could be broadened to include different screening initiatives (excepting breast screening which is an ongoing performance issue and should be dealt with separately). This item could look at how successful screening is across the city as a whole; whether there are significant differences in uptake across communities/groups of interest (e.g. relatively deprived communities, BME or LGBT groups etc); and if so, what responses are planned.

Recommendation: Committee report

21 Short Term Services

Referred By: NHSBH/ASC

Date: TBC

Notes: City commissioners are currently reviewing the way that city short term services are configured (short term services are essentially services which bridge the gap between hospital and home – e.g. intermediate care beds, rehabilitative homecare etc). A major aim of this review will be to reduce the number of delayed transfers of care in the city (i.e. delays in discharging patients from hospital), so this item could include focusing on this issue. As a number of short term services are provided by SCT, it may make sense to programme this alongside item 6): SCT services/integration update.

Recommendation: Committee report once Joint Commissioning Board (JCB) has agreed a new short term services strategy

22 Air Quality and Health

Referred By: Cllr Rufus

Date: TBC

Notes: This item seeks to examine the impact poor air quality can have on health, its effects across the city, what contribution it makes to health inequalities in Brighton & Hove, and what steps can be taken to combat it.

Recommendation: Committee report involving Public Health team.

