

**Hampshire County Council  
Health Review Committee  
Briefing for Members: 30 November 2004  
Progress with 2004/05 Work Programme**

**Introduction**

1. This paper sets out progress with the agreed 2004/05 work programme for the Health Review Committee at 31 October 2004.
2. The Committee has continued to build a constructive approach to health scrutiny across Hampshire County Council service providers and with partner organisations. Emphasis in the last 7 months has been on:
  - a. Consolidating working relationships with partners in the NHS, Local Authorities and Patient & Public Involvement Forums
  - b. Taking forward a programme of thematic reviews aimed at improving local service delivery
  - c. Managing referrals and inquiries from partner organisation
  - d. Responding to proposals from the NHS to substantially change or vary health services
3. Action has also been taken to follow up progress with the implementation of recommendations made by the Committee, provide a framework against which the NHS can assess proposals to change services and raise the profile of the Committee with NHS and other partner organisation.
4. The next sections of this report describe this work in more detail.

**Consolidating Working Relationships**

5. The Committee has hosted and contributed to a number of events aimed at raising awareness and understanding of the role of the Committee and its links with arrangements for patient and public involvement in health. This has included
  - a. Hosting an event for NHS Chairmen and Chairmen and lead officers from Health Overview and Scrutiny Committees in Hampshire and the Isle of Wight (4 May)
  - b. Hosting three local area meetings for Patient and Public Involvement Forum (P&PIF) Chairmen, lead members and officers from district councils, NHS Chairmen and Chief Executives. These meetings were held in mid & south west Hampshire (8 September), north Hampshire (29 September), south east Hampshire (11 October). The events were structured to be as participative as possible and invited feedback on
    - i. The main challenges facing health services in the area
    - ii. Issues to be considered by the Committee for review in the coming year

- iii. The working relationships necessary to support the effective delivery of health scrutiny.

This information will be collated to inform the work programme for 2005/06.

6. Over the next two months the Chairman and lead officer will undertake a series of informal visits to all district councils and NHS organisations in Hampshire to invite comment on the way the Committee has discharged its responsibilities in the last year and key issues for scrutiny in the coming year.
7. In May 2004 a dedicated web site for health scrutiny was launched ([www.hants.gov.uk/healthscrutiny](http://www.hants.gov.uk/healthscrutiny)) to make information about the role of the Committee more accessible to local people. The site includes general information about health scrutiny, details of locally specific work undertaken by the Committee and links with other overview and scrutiny committees and health organisations operating in Hampshire and the Isle of Wight. This site will continue to be developed and expanded subject to funding availability.
8. Committee meetings are preceded by briefings from NHS partners to update members on key issues. Topics covered since April 2004 include
  - a. 'Beyond HealthFit'
  - b. Developments in NHS dentistry
9. The Chairman of the Committee has maintained a regular presence at the Strategic Health Authority Board meetings and Portsmouth City Council health Scrutiny Committee.

### **Reviews of Health Services**

10. The Committee has identified the following four key criteria to guide members when selecting topics for review:
  - a. Capacity to influence and improve the service under consideration
  - b. Timeliness and relevance to local health services
  - c. Issues not under consideration elsewhere
  - d. Issues not subject to other scrutiny or performance monitoring activities
11. The review programme for 2004/05 included:
  - a. Access to therapy in schools (lead member Cllr Mrs McNair Scott)
  - b. Access to foot care for people with diabetes (lead member Cllr A Dowden)
  - c. Administration of medication in schools (lead member Cllr R Ellis)
12. Work on the first two reviews is now well advanced and draft reports will be shared with the Committee in November with a view to finalising the reviews in January. Initial investigations into the administration of medicines in schools indicated that

sound systems were in place for managing these arrangements and there was therefore little scope for the Committee to further influence this.

13. The Committee has also asked for progress reports on the implementation of recommendations for action arising from previous reviews of services. The responsible bodies will therefore be invited back to up-date the Committee on progress in November and March 05.

### **Health Inquiries and Referrals from Partners**

14. P&PIFs have the right to raise issues of concern to the Committee for further investigation. This work strand has therefore been designed to provide a route through which referrals from the Patients Forms and other partner organisations can be explored and acted on by the Committee without resort to a formal review. Issues of this nature considered by the Committee, and the action taken, are fully reported in the agenda papers and have included the following topics since April 2004.
  - a. Diagnostic & Treatment Centres
  - b. NHS Direct (x2 visits in May 2004)
  - c. Arrangements for patient and public involvement in health
  - d. Progress with Lymington PFI bid
  - e. Differential Tariffs paid by PCTs
  - f. Redevelopment of Queen Alexandra Hospital and services in south east Hampshire
  - g. Out of Hours Provision
  - h. Changes to PCT management arrangements ('Refocusing Leadership)
  - i. Foundation Hospitals
15. Where appropriate briefing papers and any associated correspondence is included in the agenda papers (these are available on the web site).

### **Proposals to vary or develop health services**

16. The NHS has a statutory duty to consult the Committee on any proposals to substantially vary or develop health services provide to local people. Any changes planned therefore need to be discussed with the Committee at an early stage in order to determine if the proposal is substantial any how any formal consultation required will be undertaken.
17. In determining if a proposal is substantial the Committee considers the impact of the change on those using, or who may use the service in question, including carers. The acceptability of the change to patients and any implications for other service providers are specifically considered.
18. More detailed information of the way in which the Committee will determine if a proposal is substantial is included in the 2003/04 Annual Report. This will be

reviewed in the second part of 2004/05 to ensure that changes to legislation (such as the Race (Amendment) Act 2000) and public health requirements are included. This will form the basis of an additional piece of work with other Health Scrutiny Committees in Hampshire and the Isle of Wight and NHS partners to agree a framework for assessing if a proposal represents a substantial change.

19. All proposals for changing NHS care considered and responded to by the Committee, with any interim reports, are included in the agendas papers and are available on the website.
20. Responses to consultation in the since April 2004 have included:
  - a. Re-provision of rehabilitation services at 'the Mount' Hospital, Bishopstoke
  - b. 'HealthFit' Strategic Framework
  - c. Mental Health Service Provision in North East Hampshire and Surrey (Joint response with Surrey Health Scrutiny Committee)
  - d. Foundation Hospitals
21. In addition the Committee has formally scrutinised the decision of Winchester and Eastleigh NHS Trust to close inpatient services at the Mount Hospital on the grounds of patient safety.

### **Joint Committees**

22. Regular Joint meetings are held with the Chairmen and lead officers for Portsmouth City Council, Isle of Wight Council and Southampton City Council. These provide the opportunity for sharing information and agreeing how to respond to joint issues of concern. The Chairman of this Committee is currently Cllr R Ellis.
23. Additionally the Chairmen and lead officers for all Health Overview and Scrutiny Committees in the southeast region meet on a regular basis. Links have also been established with Health Overview and Scrutiny Committees operating in north Thames. This provides the opportunity for collective action in relation to issues of concern.

### **Looking Ahead**

24. The Committee has commented extensively on the key challenges facing the health economy in Hampshire. The financial deficit facing the local NHS and the effect of nationally determined policies each have the potential to have a significant impact on health service provision to local people. Specific areas of concern identified by the Committee include
  - a. Changes in out of hour's arrangements in primary care and integration with other unscheduled/emergency services. Further information has been requested about the way in which these services are being rolled out across Hampshire. It is hoped this will give a factual basis for understanding consistency in provision and service quality. It is not currently clear if full use has been made of existing services, such as those provided by Hampshire Ambulance. This is likely to be a key issue for local people in the coming months.

- b. The configuration of health services in southeast Hampshire and the delays in agreeing financial close on the private finance initiative contract. Current projections suggest that this work will not be completed until summer 2008.
- c. The implications of 'Beyond HealthFit' and the consequences for local people as hospital services are reconfigured around different clinical specialties.
- d. Implementation of the new public health 'White paper'

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