

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

10 MARCH 2022

WORK PROGRAMME

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Summary

This report advises Members of the current work programme for discussion in the light of latest priorities, issues and circumstances, giving Members the opportunity to shape and direct the Committee's activities.

- 1. Budget and policy framework
- 1.1 Under Chapter 4 Rules, Part 4 paragraph 21.1 (xv) General Terms of Reference, each overview and scrutiny committee has the responsibility for setting its own work programme.
- 2. Background
- 2.1 Appendix 1 to this report sets out the Committee's work programme.
- 3. Agenda planning meeting
- 3.1 Members will be aware that Overview and Scrutiny Committees hold agenda planning meetings on a regular basis. An agenda planning meeting was held on 14 February, attended by the Chairman, Vice-Chairman and Opposition Spokesperson.
- 3.2 At the last meeting of the Committee, following a discussion on reported rise in deaths from alcohol and substance abuse, it was agreed that the agenda planning meeting should consider whether there should be a report on the Government's 10 Year Drugs Strategy to see the overall picture and outcomes achieved, including the number of people receiving treatment. The Committee also asked for a briefing note on the funding of drug treatment services in Medway over the last 10 years. At the agenda planning meeting Members recommended that a decision on whether to add the 10 Year

Strategy to the work programme should be taken after receiving the briefing note.

- 3.3 The attached work programme has been updated for 2022/23 to include expected papers such as Council Plan monitoring etc. In terms of the items in the date to be determined section, a number of suggested changes are recommended (as set out in Appendix 1). It is proposed that the next agenda planning meeting discusses the frequency of reports from external organisations and also looks at the balance of items in the work programme between the scrutiny of health services and adult social care.
- 3.4 Members are also recommended to add to the work programme for the August meeting a paper on Medway's Pharmaceutical Needs Assessment for Medway (2022-2025) and to add to the date to be determined section a paper on the Local Government Association Safeguarding Adults Peer Review.
- 3.5 Business Support O&S Committee 25 January 2022
- 3.5.1 There was an informal meeting of Overview and Scrutiny Chairman, Vice Chairman and Opposition Spokespersons on 5 January in relation to reducing the length of Overview and Scrutiny meetings and also Task Groups. The following measures were proposed:
 - Fewer agenda reports, with a maximum of four or five being considered at each meeting.
 - Reports being taken as read; therefore, officers are not required to give introductions at meetings.
 - Reports for Members' information to be circulated on the agenda only for noting without questions or debate.
- 3.4.2 The Business Support O&S Committee:
 - agreed that there should be further discussion between Chairmen, Vice-Chairmen and Opposition Spokespersons on measures for future overview and scrutiny committee meetings;
 - noted the Director of Public Health's advice in relation to undertaking a Task Group on GP appointments and access to services at the present time;
 - agreed the schedule for the remaining Task Groups as: 1. GP appointments and access to services; 2. physical activity; 3. town centres; and 4. support for carers (as a themed meeting);
 - agreed that the Local Plan be considered by each of the overview and scrutiny committees at the appropriate time.

4. GP/Primary Care Task Group

- 4.1 As mentioned above, (paragraph 3.4.2) the topic of the next Task Group has been agreed as GP appointments and access to services, instead of physical activity. This was a decision taken by the Business Support O&S Committee, where the following advice from the Director of Public Health was noted:
 - GP access has been impacted by a range of factors outside the direct control of local NHS commissioners and providers, principally the Pandemic.
 - There is a national review into GP access and the Secretary of State
 has directed all Integrated Care Boards to take action to ensure people
 (where practicable) are able to get face to face appointments.
 - The timing of any review should be such that it can make recommendations that will be able to be actionable in practice. Until the system is operating in a business as usual fashion, any review or task group recommendations would be subject to clinical challenge.
 - There will be a national report (post pandemic review) that will include GP access as part of its remit. It would make sense to allow this formal process (and the other NHS local actions) to take place before undertaking local reviews.
- 4.2 There was a discussion at the agenda planning meeting about this decision where Members concluded that the Business Support O&S Committee should be asked to reconsider its decision and re-instate Physical Activity as the next Task Group followed by GP appointments and access to services, for the following reasons:
 - a) Timing
- 4.2.1 The new Integrated Care Board is expected to be in place from 1 July 2022, which will significantly change the local health landscape. The Health and Care Bill, currently going through Parliament, will place Integrated Care Systems (ICSs) on a statutory footing, empowering them to better join up health and care services, improve population health and reduce health inequalities. Each ICS will be led by an NHS Integrated Care Board (ICB), an organisation with responsibility for NHS functions and budgets. When ICBs are legally established, clinical commissioning groups will be abolished. Therefore, if the GP Task Group were to start work now it would be engaging with and making recommendations to a body which would cease to exist from 1 July. While Members felt this scrutiny review was still essential, they also considered it would have more impact if it started in late summer/early autumn.
 - b) Relevance
- 4.2.2 Members at the agenda planning meeting felt it was more relevant than ever to start the Physical Activity review now given the impact the pandemic has had on levels of physical activity on the population, especially on children where obesity levels have increased markedly.

- c) Resources
- 4.2.3 As reported to the Business Support O&S Committee, the Director of Public Health has previously advised he could not allocate his clinical staff to support this work at this time as they are directly involved in supporting, the vaccination programme, pandemic response and Pharmaceutical Needs Assessment. However, it would be possible to support the Physical Activity Task Group now as support would come from staff not involved in the latter. The CCG have also indicated that, while they would otherwise welcome the idea of the new GP Task Group they would find it very difficult to support it over the next 6-8 weeks due to current pressures in Primary Care.

5. Forward Plan

- 5.1 The latest <u>Forward Plan</u> of forthcoming Cabinet decisions was published on 7 February.
- 5.2 The following items listed on the forward plan relate to the terms of reference of this Committee. The Committee is asked to identify any items it may wish to consider as pre-decision scrutiny (where dates permit).

Cabinet date	Title	Comment
8 March 2022	Council Plan Performance Monitoring Report and Risk Register Review Quarter 3 2021/2022	
	This report will provide details of Quarter 3 performance for 2021/22 against the priorities set out in the Council Plan and will bring forward the latest risk management review.	On the agenda for the March meeting.
8 March 2022	Director of Public Health Annual Report This report will present the Director of Public Health's Annual Report.	On the agenda for the March meeting and was also considered by the Health and Wellbeing Board on 10 February.

- 6. Financial and legal implications
- 6.1 There are no specific financial or legal implications arising from this report.

7. Recommendations

- 7.1 The Committee is requested to:
 - a) approve the proposed work programme, as set out at Appendix 1.
 - b) recommend that the Business Support O&S Committee re-instates Physical Activity as the next Task Group, followed by GP appointments and access to services, for the reasons set out in paragraph 4.

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Appendices

Appendix 1- Work Programme

Background papers

None.