

## Lancashire County Council

### Health Scrutiny Committee

Tuesday, 15 March, 2016 at 10.30 am in Cabinet Room 'C' - The Duke of Lancaster Room, County Hall, Preston.

#### Agenda

##### Part I (Open to Press and Public)

No.	Item
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1.	<b>Apologies</b>
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2.	<b>Disclosure of Pecuniary and Non-Pecuniary Interests</b>
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Members are asked to consider any Pecuniary and Non-Pecuniary Interests they may have to disclose to the meeting in relation to matters under consideration on the Agenda.

3.	<b>Minutes of the Meeting Held on 26 January 2016</b>	(Pages 1 - 6)
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4.	<b>Update on the Transformation of Public Health and Wellbeing Services</b>	(Pages 7 - 8)
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5.	<b>Report of the Health Scrutiny Committee Steering Group</b>	(Pages 9 - 18)
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6.	<b>Work Plan</b>	(Pages 19 - 24)
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7.	<b>Recent and Forthcoming Decisions</b>	(Pages 25 - 26)
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8.	<b>Urgent Business</b>
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An item of urgent business may only be considered under this heading where, by reason of special circumstances to be recorded in the Minutes, the Chair of the meeting is of the opinion that the item should be considered at the meeting as a matter of urgency. Wherever possible, the Chief Executive should be given advance warning of any Member's intention to raise a matter under this heading.

**9. Date of Next Meeting**

The next meeting of the Health Scrutiny Committee will be held on Tuesday 26 April 2016 at 10.30am at County Hall, Preston.

I Young  
Director of Governance,  
Finance and Public Services

County Hall  
Preston

# Agenda Item 3

## Lancashire County Council

### Health Scrutiny Committee

**Minutes of the Meeting held on Tuesday, 26 January, 2016 at 10.30 am in Cabinet Room 'C' - The Duke of Lancaster Room, County Hall, Preston**

#### **Present:**

County Councillor Steven Holgate (Chair)

#### **County Councillors**

M Brindle	Y Motala
Mrs F Craig-Wilson	B Murray
G Dowding	M Otter
N Hennessy	N Penney
M Iqbal	D T Smith
A James	D Stansfield

#### **Co-opted members**

Councillor Barbara Ashworth, (Rossendale Borough Council)  
Councillor Trish Ellis, (Burnley Borough Council)  
Councillor Shirley Green, (Fylde Borough Council)  
Councillor Bridget Hilton, (Ribble Valley Borough Council)  
Councillor Hasina Khan, (Chorley Borough Council)  
Councillor Roy Leeming, (Preston City Council)  
Councillor Kerry Molineux, (Hyndburn Borough Council)  
Councillor E Savage, (West Lancashire Borough Council)  
Councillor M J Titherington, (South Ribble Borough Council)

#### **1. Apologies**

Apologies for absence were presented on behalf of District Councillors A Mahmood (Pendle Borough Council) and C Hartley (Lancaster City Council), and apologies had been received from Councillor J Robinson (Wyre Borough Council).

#### **2. Disclosure of Pecuniary and Non-Pecuniary Interests**

None disclosed.

### **3. Minutes of the Meeting held on 24 November 2015**

The Minutes of the Health Scrutiny Committee meeting held on the 24 November 2015 were presented and agreed.

**Resolved:** That the Minutes of the Health Scrutiny Committee held on the 24 November 2015 be confirmed and signed by the Chair.

### **4. Transforming Care for people with a Learning Disability and/or Autism**

The report was presented by Charlotte Hammond, Head of Service for Safeguarding, Learning Disabilities and Mental Health.

The report provided a summary and history of the Transforming Care agenda for people with a learning disability or autism and an update of progress. It informed members of Lancashire's inclusion in a National "Fast Track" programme, and its subsequent mainstreaming to form a Transforming Care Partnership, a strategically led, pan Lancashire collaboration of 8 Clinical Commissioning Groups (CCGs), 3 local authorities and NHS England specialised commissioners, to plan and implement the transformation needed.

Charlotte Hammond said that the pressure from NHS England to move people quickly from Calderstones into other care settings was a cause of some concern. Calderstones is a facility that provides medium secure, low secure and specialist NHS services to adult men and women with learning disabilities or other developmental disorders who present with extremes of serious challenging or offending behaviour. It was recognised that a new service model needed to be developed, however, a broad range of alternative provision would need to be provided to safely accommodate the 47 Lancashire people currently resident there. Ministry of Justice restrictions would need to be maintained in some cases, and it was most important that people with complex needs were placed in suitable settings which would best support them from the outset and take account of potential risks.

Charlotte explained that funding was also a significant concern given the pressures already facing local authorities. Negotiations were underway regarding the provision of a dowry from the NHS for those people currently resident in Calderstones who would be transferring to the care of the local authority.

Members were invited to make comments and raise questions and a summary of the main points arising from the discussion is set out below:

- Members were most concerned about the funding of care for those people moving out of Calderstones and also funding of 'new' cases - those people with similar needs, not resident in Calderstones, who would require care in the future. It was explained that care packages for those moving out of Calderstones would vary, with some costing as much as £300,000 per year, but some costing much less. The annual cost was estimated to be £6 million; dowry provision from the NHS had not yet been ratified. There

were also issues around changes to housing benefit. It was a very complex funding picture and future commitments were not yet clear.

- The Committee was informed that a letter had been sent to the Secretary of State for Health expressing concern about the financial impact of the transforming care programme on the County Council. In response the Minister had provided some assurance that, as part of a whole system approach, investment would shift between services. What this would look like in practice was as yet unclear.
- The Chair assured members that this Committee would liaise closely with the Health and Wellbeing Board in a joint approach.
- The Chair informed Committee that the Steering Group was to meet with the commissioners of this service on 8 February to talk about the roles of the different organisations involved in the redesigning and commissioning of the community and in-patient services. The Steering Group would, as usual, report back to members; he invited other members of the Committee to attend if they wished.
- There was some discussion about the type and range of support that was to be provided for the people leaving Calderstones. The Committee was assured that safeguarding was a priority and that personalised, cost effective support packages would be developed taking account of many possible risks, including potential for isolation and safety of housemates, carers and the public.
- It was recognised that, for people with autism, change could be difficult to cope with and could often cause distress; members were assured that transition arrangements would be on a personalised basis and that significant recruitment was ongoing to ensure that sufficient staff were in place to provide the necessary support. The County Council was also looking at what support was already available in the community.
- It was acknowledged that supported housing could be a good option for people with relatively low level needs, but Supported People Funding was currently being compromised.
- In response to a question about how the residents of Calderstones felt about moving out, it was acknowledged that whilst some were excited about the prospect others were concerned and that some people liked the reassurance that a hospital setting could provide, especially in the short term. However it was believed that long-term residence in an institution did not lead to the best outcomes and that a learning disability and/or autism should not mean that a person must live in hospital.
- It was confirmed that the people in Calderstones had access to advocacy services, indeed the Care Act 2014 was clear that people must have access to advocacy services to ensure that their voices were heard.
- It was acknowledged that support for carers was an important part of planning risks and it was important to have services in place and to provide that support when carers said they could not cope.
- It was recognised that, owing to ignorance and fear, members of the community might target individuals from this group moving into their area. This was a concern and it was, of course, acknowledged that such attacks could be very distressing. It was expected that support staff would be

present and it would be most important to carefully monitor such possibilities.

**Resolved:** That,

- i. Progress made in developing the Transforming Care agenda in Lancashire be noted;
- ii. The Health Scrutiny Committee would provide future support and challenge that would enable effective engagement;
- iii. Discussions taking place regarding the funding arrangements for this group of people be noted; and
- iv. A further update report be provided to this Committee at its meeting on 14 June 2016.

## **5. Report of the Health Scrutiny Committee Steering Group**

It was reported that on 26 October the Steering Group had met with Sam Nicol who attended to provide an update on Healthier Lancashire and Gill Brown, Chief Executive of Healthwatch Lancashire. A summary of the meeting was at Appendix A to the report now presented.

On 16 November the Steering Group had met with Councillor Barbara Ashworth and Pat Couch from Rossendale Borough Council who attended to present their draft task group report on ambulance services. They also met Erin Portsmouth and Dr Kumar from Chorley South Ribble and Greater Preston Clinical Commissioning Groups to discuss workforce planning. A summary of the meeting was at Appendix B to the report now presented.

**Resolved:** That the report be received.

## **6. Work Plan**

Appendix A to the report now presented set out a draft work plan for both the Health Scrutiny Committee and its Steering Group, including current Task Group reviews.

It was reported that a work shop would be arranged for members, to be held in April 2016, to consider topics for the 2016/17 work plan.

**Resolved:** That the work plan be noted.

## **7. Recent and Forthcoming Decisions**

The Committee's attention was drawn to forthcoming decisions and decisions recently made by the Cabinet and individual Cabinet Members in areas relevant to the remit of the committee, in order that this could inform possible future areas of work.

Recent and forthcoming decisions taken by Cabinet Members or the Cabinet can be accessed here:

<http://council.lancashire.gov.uk/mgDelegatedDecisions.aspx?bcr=1>

**Resolved:** That the report be received.

## **8. Urgent Business**

Councillor Roy Leeming of Preston City Council, addressed the Committee at the invitation of the Chair. He reported that Preston City Council had established a task and finish group to investigate infant mortality in its Saint Matthew's ward, which had one of the highest rates of infant mortality in the country.

The Task Group had now established five working groups to focus on:

- The private rented housing sector
- Teenage pregnancy
- Smoking in pregnancy
- Community midwives
- Community development

Councillor Leeming invited members to offer any contribution that they thought might be helpful to the study, either directly to him (cllr.r.leeming@preston.gov.uk) or via Craig Sharpe, Chief Environmental Health Officer at Preston City Council via [info@preston.gov.uk](mailto:info@preston.gov.uk)

**Resolved:** That the request be noted

## **9. Date of Next Meeting**

It was noted that the next meeting of the Committee would be held on Tuesday 15 March 2016 at 10.30am at County Hall, Preston.

I Young  
Director of Governance, Finance  
and Public Services

County Hall  
Preston





## Health Overview and Scrutiny Committee

Meeting to be held on 15 March 2016

Electoral Division affected: All
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## Update on Transformation of Public Health and Wellbeing Services

Contact for further information:

Dr. Sakthi Karunanithi, Director of Public Health and Wellbeing, 01772 537065,  
Sakthi.karunanithi@lancashire.gov.uk

### Executive Summary

An oral report and presentation will be provided to update the Committee on the ongoing transformation of the public health and wellbeing services in Lancashire. It will highlight the key issues with which the service has been dealing.

### Recommendation

The Committee is asked to note and comment on the report.

### Background and Advice

The public health and wellbeing service within Lancashire County Council is undergoing significant transformation. With year on year reductions forecast in the financial resources, including the public health grant, the service continues to maximise the value of its investment through commissioning, partnership working and direct delivery.

The Committee has previously scrutinised the public health function in its meetings held during 2015, including an update on the Health and Wellbeing Board in November 2015.

This report will provide a further update on the public health and wellbeing services.

### Consultations

N/A

### Implications:

This item has the following implications, as indicated:

## **Risk management**

No specific risks are deemed to arise as a result of this report, which is essentially an update on the ongoing transformation of the public health and wellbeing services.

## **Local Government (Access to Information) Act 1985 List of Background Papers**

Paper	Date	Contact/Tel
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N/A

Reason for inclusion in Part II, if appropriate

N/A

## Health Scrutiny Committee

Meeting to be held on 15 March 2016

Electoral Divisions affected: All
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### Report of the Health Scrutiny Committee Steering Group

(Appendices A & B refer)

Contact for further information:

Wendy Broadley, 07825 584684, Democratic Services,

[wendy.broadley@lancashire.gov.uk](mailto:wendy.broadley@lancashire.gov.uk)

#### Executive Summary

On 7 December 2015 the Steering Group met with officers from West Lancashire CCG regarding the procurement of community health services. A summary of the meeting can be found at Appendix A.

On 18 January 2016 the Steering Group met with officers from the Commissioning Support Unit. A summary of the meeting can be found at Appendix B.

#### Recommendation:

The Health Scrutiny Committee is asked to receive the report of the Steering Group.

#### Background and Advice

The Scrutiny Committee approved the appointment of a Health Scrutiny Steering Group on 11 June 2010 following the restructure of Overview and Scrutiny approved by Full Council on 20 May 2010. The Steering Group is made up of the Chair and Deputy Chair of the Health Scrutiny Committee plus two additional members, one each nominated by the Conservative and Liberal Democrat Groups.

The main purpose of the Steering Group is to manage the workload of the Committee more effectively in the light of the increasing number of changes to health services which are considered to be substantial. The main functions of the Steering Group are listed below:

- To act as the first point of contact between Scrutiny and the Health Service Trusts;
- To make proposals to the main Committee on whether they consider NHS service changes to be 'substantial' thereby instigating further consultation with scrutiny;

- To liaise, on behalf of the Committee, with Health Service Trusts;
- To develop a work programme for the Committee to consider.

It is important to note that the Steering Group is not a formal decision making body and that it will report its activities and any aspect of its work to the full Committee for consideration and agreement.

**Consultations**

N/A.

**Implications:**

This item has the following implications, as indicated:

**Risk management**

This report has no significant risk implications.

**Local Government (Access to Information) Act 1985  
List of Background Papers**

Paper	Date	Contact/Directorate/Tel
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N/A.

Reason for inclusion in Part II, if appropriate

N/A.

**Lancashire County Council**

**Health Scrutiny Committee - Steering Group**

**Minutes of the Meeting held on Monday, 7 December, 2015 at 2.00 pm in Room B18b, County Hall - County Hall, Preston**

**Present:**

County Councillor Steven Holgate (Chair)

**County Councillors**

M Brindle                      Y Motala  
Mrs F Craig-Wilson

**1. Apologies**

Apologies were received from CC Hennessey

**2. Notes of the last meeting**

The notes of the meeting held on 16 November were agreed as correct

**3. Community Health Services in West Lancashire**

- Claire Heneghan, chief nurse
- Jackie Moran, head of quality, contracting and performance
- Karen Tordoff, lead manager service redesign

The above officers from West Lancashire CCG attended to discuss the procurement process for community health services in the area.

CC Holgate welcomed officers and the discussion began with background on the advantages and disadvantages of a CCG making procurement decisions (as opposed to the previous PCTs). The main points raised were:

- The CCG has managed to engage well with the local population as the area is smaller and local groups etc. are easier to reach – have a strong communications approach.
- There is potential for best practice learnt through the procurement process to be shared across the county with other CCGs and Trusts.
- CC Motala asked about the concerns around attracting adequate numbers of staff such as GPs and wanted to know if there was a focused workforce strategy to highlight Lancashire as a premier place to work. Officers responded that they are also looking at upskilling and re-skilling the existing workforce.
- Recently done a survey of West Lancashire GPs to gauge the feeling amongst doctors. One question they were asked was would they consider offering work experience to school leavers.

- Confident that having a successful community health services with suitably qualified staff (nurses) will 'free up' GPs to focus on other things.
- Also looking at the existing assets within the community (many are voluntary organisations). Want them to be engaged in the process and many may be involved in future delivery.
- CC Holgate acknowledged that community and patient involvement in service design is vital to success.
- Well North bid was successful – details to be shared with members.
- In the model of care they have gone down to neighbourhood level – but asking the local population if the 'neighbourhoods' identified fit with their perception of how local communities live, work and move around.
- Within the localised areas there is still a need for specialised services – however the current contract procurement is focused on adults. The other specialisms such as children and mental health will be procured later.
- Local initiatives such as 'Incredible Edible' were discussed as options to be considered in West Lancashire – all aimed at people living well.
- It was agreed that wellbeing needed to be at the forefront of any service design.
- The procurement vision is available on the CCGs website – feedback has been requested and will continue as such until into the New Year.
- Staff (who will be TUPED) will be involved in the selection process. Going out to full tender because was unable to prove that staying with SOHT was offering the best possible service.
- Pleased that the CCG are taking a bottom up approach to procurement design but CC Motala wanted to know how and what they are doing ties into other pieces of work going on in the county such as Healthwatch and Healthier Lancashire. – Gill Brown is part of the working group and is providing robust challenge and bringing ideas and contacts to the process. Less clear re Healthier Lancashire as the majority of patient flow is towards Merseyside and there is a Healthier Liverpool so conflicting priorities – mental health services is an area however that would be joined up.
- CC Brindle asked a question about the 'step down' facility. Intermediate care beds are classed as step down but they are thinking how that provision can be carried out in a person's home. – looking at what numbers do they need to factor in for, and how to respond quickly.
- Concerns around the capacity for SOHT to effectively bid for the service.
- The intention is that the new contract will begin from September 2016
- Out to tender (PQQ) – on Monday, shortlist by 22 January.
- Work with shortlist until August then invite final bids for a decision in September. Looking at a 7-10 year contract.
- CC Motala asked about the partnership potential with Edge Hill – officers responded that they have started the process, working with lecturers to research what is actually required to develop an effective multi-disciplinary team – the learning from this project will feed into how MDTs will be formed in the future.
- All PQQ docs will be produced on Friday – can be provided for SG

Members thanked officers for their time and agreed they would provide an update to Steering Group on 7 March.

#### **4. Rossendale Task Group review**

A response was required from the Steering Group on behalf of the Health Scrutiny Committee to the final report of the NWAS review undertaken by Rossendale scrutiny members.

A copy of the final draft report was provided for information but members were reminded that this report is not yet in the public domain.

It was agreed that:

- Steering Group welcomed the content and recommendations of the report
- The Health Scrutiny Committee will provide support to the Rossendale Task Group in obtaining satisfactory outcomes to its recommendations should it be required.
- The final report will be presented to the March HSC whereby other Districts can feedback if similar issues are apparent in their areas.

#### **5. Windsor Unit**

Members to decide what action, if any, they wish to take about the closure of the Windsor Unit which provides respite services at Clifton Hospital, St Annes.

The following questions have been asked by CC Oades. The CCG have been asked to provide a response:

1. How and why were referrals made to the Windsor Unit and how did clients qualify for respite care for their carers?
2. Could we please have copies of the letters the CCG claim to have sent out to users and a list of those consulted and numbers?
3. What is now being offered to clients in the form of respite care to enable carers to have a much needed break?
4. As more strain will possibly be put on Social Care to help carers who need help and assistance what kind of consultation has been carried out with our social care people? Surely there has been some joined up thinking on this.

It was agreed to await the response from the CCG before determining the next course of action.

#### **6. Work plan**

The latest version of the work plan was noted for information

**7. Date of next meeting**

The date of the next meeting is 18 January. Officers from the Commissioning Support Unit will be attending.

I Young  
Director of Governance, Finance  
and Public Services

County Hall  
Preston



**Lancashire County Council**

**Health Scrutiny Committee - Steering Group**

**Minutes of the Meeting held on Monday, 18 January, 2016 at 2.00 pm in Room B18b, County Hall - County Hall, Preston**

**Present:**

County Councillor Steven Holgate (Chair)

**County Councillors**

M Brindle

Y Motala

**1. Apologies**

Apologies were received from CC Fabian Craig-Wilson

**2. Notes of the last meeting**

The notes of the meeting held on 7 December were agreed as correct

**3. Actions from previous meetings**

Members briefly discussed updates on actions from previous Steering Group and Committee meetings, these included:

- HL event – 10 February
- CSSC
- CfPS Inquiry day – 4 March
- Nursing Shortage Task Group – membership to be requested
- Meetings with Richard Cooke re liaison between HSC and HWB

**4. Commissioning Support Unit**

Maureen Harrison and Carl Ashworth from the Midlands and Lancashire Commissioning Support Unit attended to speak to members. The topics they covered included:

- CSU and its current role
- Function - how do they fit in to the wider services
- How does it work across Lancashire

Carl provided some background on how they support the CCGs

- Specialised skills that are centralised and accessed by many CCGs
- April 2013 – were 23 CSUs now 6
- Employed by NHSE
- They provide services for 33 CCGs – 6m population
- Bid for opportunity to provide services (up against other NHS orgs and private sector organisations)

- CC Holgate asked how the CSU creates efficiencies (amongst CCGs) – some services that are centralised are clearly better VFM. Ongoing dialogue with the CCGs to see where additional efficiencies can be made.
- Will the CSU become an arm's length organisation from the NHS? – All gone quiet on this front, so not clear what the future will be. If they are required to go down that route they are well placed and prepared to do so.

#### The position in Lancashire

- Provide services to all 6 CCGs
- Gave some examples of the specific areas of work they provide support to – BCF, vascular services, LD, joint health & social care sector strategy. Carl to share information on the Collaborative Commissioning Board re work streams undertaken that report to that Board. Looking at a piece of working regarding care homes, nursing homes and domiciliary care, extra care housing is also included within the scope.
- Touched on how Healthier Lancashire fits in with all other activity.
- CC Motala commented that it's difficult to ensure that the focus on 5 year plans doesn't overshadow the quality of the services currently provided.
- Briefly discussed the issue of how individuals with learning disabilities who require low level support are assisted to live in the community – long term sustainability issue for new types of care models.
- Had a similar discussion on the challenges facing mental health services. – CC Holgate suggested that the CSU use their business intelligence to gather data on the capacity of the whole mental system before an issue becomes a public concern.
- Members welcomed the idea that support services were still being provided within Lancashire by an NHS organisations as opposed to a private sector organisation focused on profit.
- CC Brindle raised a number of topics – cost, care, collaboration, competition, communication etc. – concerns that the whole gambit of issues becomes too 'heavy' and not deliverable because trying to do too much all at the same time.
- Maureen talked about the 'self-care' agenda within LNCCG to educate people on how to maintain good health and manage any long term conditions more effectively – she felt strongly that local communities are eager to learn more and the challenge is to work out how to sustain the resourcing of this type of engagement.
- CC Brindle shared a flyer from a Burnley health group with officers and members - as an example of how local communities can get the word round on all types of different health issues.

Members thanked officers for their time and asked that any updates on county wide issues are provided, particularly in relation to Healthier Lancashire.

## **5. Work plan**

A copy of the latest work plan was attached for information/amendment

## **AOB**

Margaret gave an update on the Victoria Care Home (one she has expressed concerns about) – many issues don't appear to be resolved such as not clear about the role of the previous owner. It will be changing its name and they offered an invitation for her to revisit any time she likes.

## **6. Date of next meeting**

The dates are topics of future Steering Group meetings are:

- 8 February -
  - Mental Health Programme
  - Care for adults with LD (provisional) - ELCCG
- 7 March – WLCCG – Community Health Services procurement
- 18 April - tbc

I Young  
Director of Governance, Finance  
and Public Services

County Hall  
Preston



## Health Scrutiny Committee

Meeting to be held on 15 March 2016

Electoral Divisions affected: All
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## Health Scrutiny Committee Work Plan 2015/16

(Appendix A refers)

Contact for further information:

Wendy Broadley, 07825 584684, Democratic Services,

[wendy.broadley@lancashire.gov.uk](mailto:wendy.broadley@lancashire.gov.uk)

### Executive Summary

The Plan at Appendix A is the work plan for both the Health Scrutiny Committee and its Steering Group, including current Task Group reviews.

The topics included were identified at the work planning workshop that members took part in during April 2015 and also additions and amendments agreed by the Steering Group.

### Recommendation

The Health Scrutiny Committee is asked to note and comment on the report.

### Background and Advice

A statement of the current status of work being undertaken and considered by the Committee is presented to each meeting for information.

### Consultations

N/A.

### Implications:

This item has the following implications, as indicated:

### Risk management

This report has no significant risk implications.

**Local Government (Access to Information) Act 1985**  
**List of Background Papers**

Paper	Date	Contact/Directorate/Tel
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N/A.

Reason for inclusion in Part II, if appropriate

N/A.

### Health Scrutiny Committee – 2015/2016 Work Plan

Updated – 15 March 2016

Health Scrutiny Committee	
Date	Topic
2 June	<ul style="list-style-type: none"> <li>North West Ambulance Service</li> </ul>
15 July	<ul style="list-style-type: none"> <li>Prevention – to focus on falls, care homes 'no lift' policies and the role of CQC regarding those policies. What LCC and partners can do to address the issues</li> </ul>
1 September	<ul style="list-style-type: none"> <li>Joint Working – fragmented commissioning amongst partners. To use mental health commissioning as the example. To include how partners share information and intelligence.</li> </ul>
13 October	<ul style="list-style-type: none"> <li>Access to Services – using services for deaf people as an example and a comparison between rural and urban areas</li> </ul>
24 November	<ul style="list-style-type: none"> <li>Health &amp; Wellbeing Board update</li> <li>Healthwatch update</li> </ul>
26 January	<ul style="list-style-type: none"> <li>Transforming care for adults with learning disabilities</li> </ul>

15 March	<ul style="list-style-type: none"> <li>• Director of Public Health – update on the latest developments relevant to Public Health</li> </ul>
26 April	<ul style="list-style-type: none"> <li>• Better Care Fund</li> <li>• Update on year's topics</li> </ul>

	<b>Steering Group</b>	<b>Progress</b>
CQC/Monitor inspections – ongoing review	<ul style="list-style-type: none"> <li>• A review of the inspection process undertaken by CQC and Monitor in relation to Acute Trusts</li> </ul>	22.6.15 – met with CQC Inspection Manager to determine the process/management of an actual inspection
Non-Executive Directors – ongoing review	<ul style="list-style-type: none"> <li>• An investigation into the role, responsibilities and effectiveness on Non-Executive Directors on Acute Trust Boards</li> </ul>	<ul style="list-style-type: none"> <li>• 22.6.15 – agreed dates to attend individual Trust Board meetings</li> <li>• ELHT Board attended by CC Brindle</li> <li>• Meeting to be arranged with TDA officers – 5 October</li> <li>• SOHT Board attended by CC Holgate – 7 October</li> <li>• LTHT Board attended by CC Holgate – 11 November</li> </ul>
End of year HSC report	<ul style="list-style-type: none"> <li>• An annual report highlighting the work and outcomes of the Committee</li> </ul>	
Healthwatch – joint working	<ul style="list-style-type: none"> <li>• Consideration of how the Committee and Healthwatch can work in partnership to achieve shared outcomes</li> </ul>	Healthwatch Chief Executive invited to SG 26 October. Follow up with attendance at Committee - 24 November



Additional topics	<ul style="list-style-type: none"> <li>Inclusion and Disability Service – at the request of the Budget Scrutiny Working Group</li> </ul>	tba
	Occupational Therapy - capacity and collaborative working	Meeting to be arranged with OT service managers for both adults and children's services
	<ul style="list-style-type: none"> <li>Commissioning of Health Visitors from October 2015</li> </ul>	Meeting to be arranged with Mike Leaf
	<ul style="list-style-type: none"> <li>Maintaining oversight of Healthier Lancashire</li> </ul>	Met with Sam Nicol 26 October. BSB 2 December.
	<ul style="list-style-type: none"> <li>Lancashire Teaching Hospitals Trust <ul style="list-style-type: none"> <li>Your Hospital, Your Health – review of clinical strategies and hospital estate</li> <li>Financial situation following investigation by Monitor</li> </ul> </li> </ul>	Attended SG on 13 July. BSB delivered 17 November
	<ul style="list-style-type: none"> <li>Southport &amp; Ormskirk Hospital Trust – action plan following CQC inspection</li> </ul>	Attended SG on 3 August. CC Hennessey and Cllr Liz Savage also in attendance.
	<ul style="list-style-type: none"> <li>CAMHS review for Health &amp; Wellbeing Board</li> </ul>	Officers to be invited to a SG meeting in the Autumn to provide an update - tba
	<ul style="list-style-type: none"> <li>Falls Prevention – role of care homes</li> </ul>	Meeting with Paul Simic, Chief Executive of the Lancashire Care Association arranged for 5 October
	<ul style="list-style-type: none"> <li>GP recruitment/vacancies</li> </ul>	CSR/GP CCG undertaking a 'Workforce for the Future' project. Meeting to discuss to be arranged for 16 November.
<ul style="list-style-type: none"> <li>SOHT – retendering of Community Services</li> </ul>	<ul style="list-style-type: none"> <li>Officers from WLCCG to be invited to</li> </ul>	

		<p>meet with Steering Group. (7 December)</p> <ul style="list-style-type: none"> <li>• Progress meeting arranged for 7 March to update SG</li> </ul>
	<ul style="list-style-type: none"> <li>• Commissioning Support Unit</li> </ul>	<p>Meeting with Lynda and Maureen Harrison from CSU to discuss delivery of support in Lancashire – 18 January</p>
	<ul style="list-style-type: none"> <li>• Rossendale Task Group report on NWAS</li> </ul>	<p>Cllr Barbara Ashworth at Pat Couch to present final report 16 November</p>
	<ul style="list-style-type: none"> <li>• Mental Health services</li> </ul>	<p>Julie Dockerty and Jon Blackburn attended SG on 8 Feb</p>
	<ul style="list-style-type: none"> <li>• Adults with Learning Disabilities</li> </ul>	<p>Following on from Committee on 26 Jan SG met with Maria Howard (ELCCG) on 8 Feb to discuss commissioning of community based services for adults with learning disabilities</p>

### Task Groups:

- Shortage of Nurses – request presented to Scrutiny Committee 13 November. Approved.

## Health Scrutiny Committee

Meeting to be held on 15 March 2016

Electoral Division affected: None
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## Recent and Forthcoming Decisions

Contact for further information:

Wendy Broadley, Democratic Services, 07825 584684

[wendy.broadley@lancashire.gov.uk](mailto:wendy.broadley@lancashire.gov.uk)

### Executive Summary

To advise the committee about recent and forthcoming decisions relevant to the work of the committee.

### Recommendation

Members are asked to review the recent or forthcoming decisions and agree whether any should be the subject of further consideration by scrutiny.

## Background and Advice

It is considered useful for scrutiny to receive information about forthcoming decisions and decisions recently made by the Cabinet and individual Cabinet Members in areas relevant to the remit of the committee, in order that this can inform possible future areas of work.

Recent and forthcoming decisions taken by Cabinet Members or the Cabinet can be accessed here:

<http://council.lancashire.gov.uk/mgDelegatedDecisions.aspx?bcr=1>

The County Council is required to publish details of a Key Decision at least 28 clear days before the decision is due to be taken. Forthcoming Key Decisions can be identified by setting the 'Date range' field on the above link.

For information, a key decision is an executive decision which is likely:

(a) to result in the council incurring expenditure which is, or the making of savings which are significant having regard to the council's budget for the service or function which the decision relates; or

(b) to be significant in terms of its effects on communities living or working in an area comprising two or more wards or electoral divisions in the area of the council.

For the purposes of paragraph (a), the threshold for "significant" is £1.4million.

The onus is on individual Members to look at Cabinet and Cabinet Member decisions using the link provided above and obtain further information from the officer(s) shown for any decisions which may be of interest to them. The Member may then raise for consideration by the Committee any relevant, proposed decision that he/she wishes the Committee to review.

**Consultations**

N/A

**Implications:**

This item has the following implications, as indicated:

**Risk management**

There are no significant risk management or other implications

**Local Government (Access to Information) Act 1985**

**List of Background Papers**

Paper	Date	Contact/Directorate/Tel
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N/A

Reason for inclusion in Part II, if appropriate

N/A