



Minutes of a meeting of the Health Overview and Scrutiny Committee held at County Hall, Glenfield on Wednesday, 22 January 2014.

PRESENT

Dr. S. Hill CC (in the Chair)

Dr. T. Eynon CC
Dr. R. K. A. Feltham CC
Mr. S. J. Hampson CC
Mr. W. Liquorish JP CC

Mr. J. Miah CC
Mr. M. T. Mullaney CC
Mr. J. P. O'Shea CC
Mr. A. E. Pearson CC

In attendance.

Mr E F White CC, Cabinet Lead Member for Health

37. Question Time.

The Chief Executive reported that no questions had been received under Standing Order 35.

38. Minutes.

The minutes of the meeting held on 27 November 2013 were taken as read, confirmed and signed.

39. Questions asked by members under Standing Order 7(3) and 7(5).

The Chief Executive reported that no questions had been received under Standing Order 7(3) and 7(5).

40. Urgent Items.

There were no urgent items for consideration.

41. Declarations of interest.

The Chairman invited members who wished to do so to declare any interest in respect of items on the agenda for the meeting.

Dr T Eynon CC declared a personal interest in all items on the agenda as a salaried GP.

42. Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule 16.

There were no declarations of the party whip.

43. Presentation of Petitions under Standing Order 36.

The Chief Executive reported that no petitions had been received under Standing Order 36.

44. Medium Term Financial Strategy 2014/15 - 2017/18

The Committee considered a report of the Director of Public Health and Director of Corporate Resources which provided information on the proposed 2014/15 to 2017/18 Medium Term Financial Strategy (MTFS) as it related to the Public Health Department. A copy of the report marked 'Agenda Item 8' is filed with these minutes.

The Chairman welcomed Mr E F White CC, Cabinet Lead Member for Health, to the meeting for this item.

Arising from discussion the following points were raised:-

Overall Context

- (i) The Committee was pleased to note that funding for the Public Health Department came from a ring-fenced grant from the Department of Health. A two year settlement had been agreed when Public Health had been transferred into the County Council. This settlement represented an increased level of funding compared with previous years.

Service Transformation

- (ii) Efficiency savings for the Department would be identified through the re-procurement and re-design of services. Members suggested that it was important to ensure that the tender process was attractive to a wide range of providers. It was acknowledged that there were corporate guidelines for procurement, however, where possible the Public Health Department would look to develop the market and achieve value for money and innovation through the tender process.
- (iii) When recommissioning services, it was important to ensure stability as well as innovation. This was assessed through questions about the size, experience and financial stability of the organisations submitting tenders. The Corporate Resources Department had supported Public Health in this process.
- (iv) It was essential for Public Health services to be integrated with other parts of the local health and social care economy and help to manage the demands on the system. Locally, this work was being driven by the development of the Better Care Fund and the Joint Health and Wellbeing Strategy, a pooled budget to support integration across health and social care services. The Public Health Department already had a good track record of working with other County Council departments to develop integrated services and would play its part in delivering the Better Care Fund plan.

Efficiency Savings

- (v) Item S39, Expenditure managed by Public Health absorbed into the ring-fenced budget – It was acknowledged that it was misleading to label this item as an efficiency saving when it referred to the transfer of budgets from other County

Council departments. The services which had been absorbed into the Public Health Department were services such as Teenage Pregnancy, previously part of the Children and Young People's Service and Sport and Physical Activity, previously part of the Chief Executive's Department. These services were already part of the Public Health Department so it was now logical for the budget to be transferred.

- (vi) Item S40, Preventative expenditure to be identified and absorbed into the ring-fenced budget – Members supported the intention to embed public health and prevention into services across the County Council. An example where this had already happened was the third Local Transport Plan for Leicestershire. This included a number of public health initiatives such as cycleways and footpaths to promote healthy living. It was felt that every major plan produced by the County Council should be checked to ensure it supported the Council's public health priorities.

Revenue Budget

- (vii) Expenditure on Public Health would be met entirely from income. This had been made possible through the recent increase in funding from the Department of Health by way of ring-fenced grant.
- (viii) The County Council did not receive any income from the sports and physical activity service it commissioned. Any income generated by District Councils as providers of the service stayed within District Council budgets. It was suggested that sport and physical activity could be a topic for consideration at a future meeting of the Health Overview and Scrutiny Committee.
- (ix) Nationally, concerns had been raised that sexual health services commissioned by Local Authorities were fragmented. The Committee was assured that the new service in Leicestershire was integrated. The procurement had included a requirement that the HIV service was linked to the development of the new integrated sexual health service.

RESOLVED:

- (a) That the proposed 2014/15 to 2017/18 Medium Term Financial Strategy as it relates to the Public Health Department be noted;
- (b) That the comments made at this meeting be forwarded to the Scrutiny Commission for consideration at its meeting on 29 January 2014.

45. Quarter 2 Performance Report.

The Committee considered a report of the Chief Executive and Director of Public Health which provided an overview of the performance framework across the health and wellbeing sector in Leicestershire and an overview of current performance. A copy of the report marked 'Agenda Item 9' is filed with these minutes.

The Chairman welcomed Mr E F White CC, the Cabinet Lead Member for Health, to the meeting for this item.

It was suggested that the report should include international comparisons, as well as comparisons against the England average. This was particularly important for areas where the England average did not compare well with performance in other countries.

The following areas were identified for consideration at a future meeting of the Committee:-

- (i) Future plans for the Integrated Access to Psychological Therapies (IAPT) service;
- (ii) Admissions to Hospital from Care Homes;
- (iii) Performance at the University Hospitals of Leicester, in particular:-
 - Use of agency staff;
 - Emergency Department performance;
 - Cancelled Operations;
 - Never Events;
 - Pressure Sores.

RESOLVED:

- (a) That the progress made to date in developing the performance framework alongside reporting arrangements to support the Committee's role be noted;
- (b) That the performance summary, issues identified this quarter and actions planned in response to improve performance be noted;
- (c) That officers be requested to ensure that the issues identified above be addressed in future reports to the Committee.

46. Date of next meeting.

It was noted that the next meeting of the Committee would be held on 12th March 2014 at 2.00pm.

2.00 - 2.45 pm
22 January 2014

CHAIRMAN