

Swindon Borough Council

A Guide to Health Scrutiny

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Glossary





1 Introduction

Welcome to Swindon Borough Council's 'Guide to Health Scrutiny'. This Guide supplements the 'Guide to Overview and Scrutiny', which explains how the overview and scrutiny function operates in Swindon.

This Guide has been written to assist councillors, local authority and NHS officers, community and voluntary groups and residents of Swindon understand what health scrutiny is and how it works in Swindon.

2 An Introduction to Overview and Scrutiny

Health scrutiny is one element of the overview and scrutiny function that was introduced in local authorities by the Local Government Act 2000. Overview and scrutiny is about councillors working with Council departments, organisations outside of the Council and local people to improve policies and services.

'Scrutiny' is the process of holding decision makers to account, both within Swindon Borough Council and in other organisations that deliver a service to local people. This includes reviewing the performance of the Council and other public bodies.

'Overview' is the process of reviewing and developing policies and investigating issues of public concern.

Overview and Scrutiny does not deal with individual concerns or complaints about Council services.

The Centre for Public Scrutiny (CfPS) suggests that effective scrutiny should:

- Provide 'critical friend' challenge to executives as well as external authorities and agencies
- Reflect the voice and concerns of the public and its communities
- Take the lead and own the scrutiny process on behalf of the public
- Make an impact on the delivery of public services

3 What is Health Scrutiny?

The Health and Social Care Act 2001 required local authorities with responsibility for social services to make arrangements to review and scrutinise local health matters. This includes services that are delivered by local authorities that impact on the health of local communities.

The Department of Health summarises the role of Health Scrutiny as “...a lever to improve the health of local people, ensuring that their needs are considered as an integral part of the delivery and development of health services”.

Health Scrutiny can achieve this by scrutinising whether:

- Health services reflect the views and aspirations of local communities
- All sections of the local community have equal access to services
- All sections of local communities have an equal chance of successful outcomes from services

Unlike more general overview and scrutiny, a significant proportion of the work of health scrutiny is externally focussed.

4 Health Scrutiny Powers

The Health and Social Care Act 2001 and supporting Regulations provide health overview and scrutiny committees with the following powers:

- Require NHS officers to attend committee meetings
- Require NHS trusts to provide information on the planning and provision of health services in their area
- Must be consulted by health trusts regarding substantial changes or developments to service provision as an official consultee
- Refer contested proposals to the Secretary of State on the grounds of process or merit
- Can initiate reviews of any topic that affects local health and well being
- Can make reports and recommendations to NHS bodies and request a response in writing but NHS bodies are not bound to accept the recommendations
- Consider issues regarding care provided by private and independent sectors on behalf of the NHS through the commissioning body
- May delegate their powers and undertake joint working with committees from adjacent areas



Health overview and scrutiny committees do not have right of access to NHS premises.

The Local Government and Public Involvement in Health Act 2007 enables overview and scrutiny committees to require information from Local Area Agreement (LAA) partners and requires partner organisations to have regard to overview and scrutiny reports when undertaking its responsibilities. These additional powers may assist health overview and scrutiny committees review the contribution of other LAA partners to health related LAA targets.


The Act also enables all councillors to refer matters to overview and scrutiny relating to any function of the authority affecting the councillor's ward or constituents. This includes health scrutiny.

5 Public & Patient Involvement Framework in the NHS

Health Scrutiny is only one part of the framework that aims to involve patients and the public in the NHS. Other organisations include:

- Patient Advice & Liaison Service (PALS) – every NHS Trust is required to have a PALS to guide people through the health service, resolve problems at an early stage and to act as an early warning system to identify gaps in services.
- Local Involvement Networks (LINKs) - LINKs were established in every local authority area with responsibility for social services from 1st April 2008. They comprise of a network of local people and individuals that can contribute towards the development, planning and delivery of health and social care in a local authority area. The LINK is supported by a host organisation that is commissioned by the local authority. LINKs can make reports to health overview and scrutiny committees and NHS organisations, which are obliged to respond. Some members of the LINK will have powers to visit NHS and social care organisations, provided they have completed the necessary training.
- Independent Complaints Advocacy Service (ICAS) - supports patients to make a complaint using the NHS complaints system.

6 Health Scrutiny in Swindon Borough Council



Within Swindon Borough Council, the Health Overview and Scrutiny Committee carries out health scrutiny. The Committee is one of five overview and scrutiny committees that operate within the Council.

There are 10 councillors appointed to the Committee. The Committee may co-opt members but may also consider involving interested parties in individual reviews or to act as advisors to the main committee.

The Committee meets a minimum of eight times a year and may also establish task groups to carry out in-depth reviews outside of committee meetings. All Committee meetings are held in public and the agenda and papers are published on the Swindon Borough Council website www.swindon.gov.uk.

The Chair of the Health Scrutiny Committee provides regular reports to the Scrutiny Committee, which oversees the overview and scrutiny function, and to Full Council meetings.

The Committee is supported by the Overview and Scrutiny Unit that carries out research on behalf of the Committee, liaises with NHS organisations, Council officers and community and voluntary sector organisations and co-ordinates reviews.

Please contact the Overview and Scrutiny Unit for more information regarding the operation of overview and scrutiny within Swindon Borough Council or visit www.swindon.gov.uk.



7 Development of a Work Programme

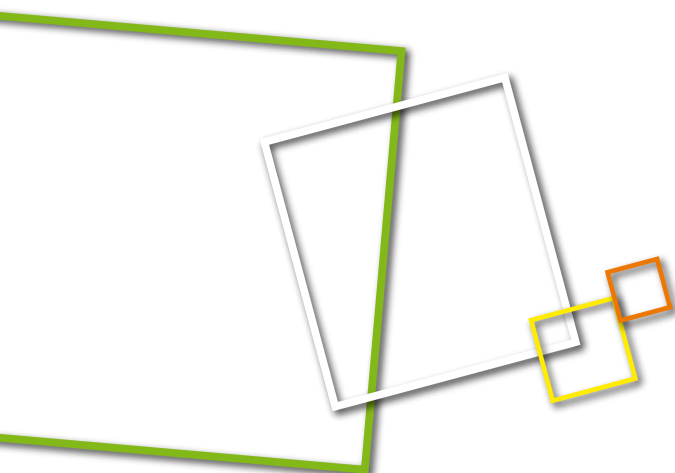
Health Scrutiny Committees are urged to look beyond health care services to consider the wider determinants of health. This includes using local authority powers to make recommendations to other local organisations as well as the NHS.

It also has an important role in supporting the achievement of shared local targets, such as those in Local Area Agreement around health inequalities. The effectiveness of partnership arrangements and the integration of services to ensure joined-up patient pathways can also be considered in work programmes.

Committees are encouraged to develop a work programme in conjunction with local NHS organisations. This ensures that trusts are aware of the information required by the Committee and to develop effective working relationships. An Annual Health Scrutiny Conference is held at the beginning of the municipal year, to which health and social care partners are invited, to develop the Committee's work programme.

The work programme is reviewed at every meeting to ensure that it remains relevant and to prioritise issues for review.

A copy of the current work programme is available from the Scrutiny Unit.





8 Member Champions

Member Champions may be appointed to lead on items within the work programme.

Member Champions work with the Scrutiny Unit to:

- Carry out research
- Discuss key issues with NHS or local authority officers
- Identify information required by the Health Overview and Scrutiny Committee
- Seek evidence from members of the public, patient groups and other relevant organisations
- Present an overview of their findings and recommendations to the Health Overview and Scrutiny Committee

9 Involving Patients and the Public

Where appropriate, the Health Overview and Scrutiny Committee will seek the views of patients and the public to monitor and review health services. This includes consulting and hearing evidence from the following:

- The Swindon Local Involvement Network (LINK) and LINKs in neighbouring local authority areas
- Voluntary and community sector groups
- Patient and carer support groups
- Direct consultation with members of the public

Members of the public can suggest issues to be included on the Health Overview and Scrutiny Committee's work programme or make a comment regarding an existing review by contacting the Scrutiny Unit.

10 Information Requested by the Committee

The Committee can request information from an NHS body if it reasonably requires it to discharge its health scrutiny function. If an NHS body refuses to provide information, the request can be referred to the body responsible for performance managing the relevant organisation, such as the Primary Care Trust or Strategic Health Authority. The request for information should be considered and a speedy resolution to the request negotiated.

Committees are encouraged to make clear the nature of the information it requires and how it is relevant to the review so that the NHS body can respond to the request appropriately.

The Scrutiny Unit is responsible for liaising with the relevant organisations to progress any requests for information on behalf of the Committee.

In general, written evidence should:

- introduce the person or organisation providing the evidence
- answer any questions raised by the Committee
- provide a summary of the key facts and issues
- avoid jargon or abbreviations
- be factually accurate and concise
- include any recommendations the author would like the Committee to consider.

More information regarding the provision of written and verbal evidence to overview and scrutiny committees is available from the Scrutiny Unit.

11. Attendance at Committee Meetings

Officers of health trusts may be required to attend Health Scrutiny Committee meetings to answer questions the Committee considers necessary to discharge its functions

Chairs or non-executive directors of NHS Trusts are not required to attend Committee meetings but there may be occasions where they may wish to accept invitations to attend to discuss issues of governance and policy relating to the NHS body.

Committees cannot require dentists, general practitioners, pharmacists or those providing ophthalmic services to attend but can invite them to attend as expert witnesses.

More information about attending committee meetings is available from the Scrutiny Unit.

12 Consultation

Section 7 of the Health and Social Care Act 2001 requires NHS organisations to consult their local Health Overview and Scrutiny Committee on any proposals it may be considering for any substantial development of health services in the area or on any proposal to make any substantial variation in the provision of services.

This is in addition to consultation with the full council or executive in relation to service developments or the duty to consult and involve patients and the public under Section 242 of the NHS Act 2006.



The Department of Health advises NHS bodies to consult with Health Scrutiny Committees at an early stage to agree whether or not the proposal is substantial and to discuss how consultation will be undertaken, agreement about the length of time for consultation and methods to be used.

NHS bodies are not required to consult on:

- Proposals to establish or dissolve an NHS Trust or Primary Care Trust unless it represents a substantial variation
- Proposals to establish a pilot scheme
- Decisions that the NHS body believes must be taken immediately because of a risk to the safety or well being of staff or patients but the NHS body must notify the Committee immediately of the decision taken and why it was not consulted

The Local Government and Public Involvement in Health Act 2007 also requires Primary Care Trusts to publish details of consultation it has carried out, or plans to carry out, the outcomes and the influence on decision making.

Swindon Borough Council is party to a Regional Substantial Variation Agreement. Under the agreement, NHS bodies complete an impact assessment outlining the nature and reasons for the proposed change and summarising the outcome of consultation with stakeholders in seven key areas such the number of patients affected.

A scoring matrix is used to indicate whether a proposal is likely to be considered to be substantial. The Committee uses this information to consider whether the consultation process has been adequate and if it supports the merits of the proposal.

The Committee can refer an issue to the Secretary of State if it determines that the NHS body has failed to carry out satisfactory consultation or if it disagrees with the merits of the proposal.

More information about the operation of the agreement is available from the Scrutiny Unit.

13 Joint Committees



In July 2003, the Secretary of State issued a directive that required Health Overview and Scrutiny Committees within different local authorities to work together and establish a joint committee to consider and respond to proposals to health services that affect more than one local authority area, and that are considered to be 'substantial' by the overview and scrutiny committees for the areas affected by the proposals.

Where a formal joint committee is established, it has the same powers as a local authority health overview and scrutiny committee.

Two or more local authorities may also choose to establish a joint committee to discharge health scrutiny functions for a specific review or for ongoing scrutiny planning and review in relation to an issue that impacts on populations within more than one local authority. The establishment of a joint committee does not prevent an individual health overview and scrutiny committee from scrutinising the issue independently.



14 Great Western Ambulance Joint Health Overview and Scrutiny Committee

Swindon Borough Council is a member of the Great Western Ambulance Joint Health Overview and Scrutiny Committee that has been established to scrutinise the performance of the Great Western Ambulance NHS Trust. Five other local authorities within the Great Western Ambulance NHS Trust region are also members of the Joint Committee. Each local authority has three nominated members on the Joint Committee.

The Committee has the same powers as an individual Health Overview and Scrutiny committee.

Meetings are held in public and the venue for meetings is rotated between the participating local authorities. The Committee meets a minimum of four times a year and copies of the agendas, reports and minutes are available from www.swindon.gov.uk.

For more information about the Joint Committee, please contact the Scrutiny Unit.

15 Acting on A Scrutiny Report

The Committee, not the Council, makes reports and there is no requirement for the Council or Executive to endorse reports but it is good practice that they are made aware of recommendations and key implications.

Health Scrutiny Committees cannot make decisions but can make recommendations that NHS bodies and other local organisations have a duty to consider.

Copies of reports produced by the Health Scrutiny Unit are available from www.swindon.gov.uk or the Scrutiny Unit.

Committees may also wish to review progress after a reasonable time has passed, whether or not a recommendation has been accepted or implemented.

Feedback from community and voluntary groups and public and patient groups can also prove useful in evaluating the effectiveness of a scrutiny review.

16 Further Information

For further information regarding Health Scrutiny in Swindon please contact the Scrutiny Unit:

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More information about health scrutiny can be found at:

Centre for Public Scrutiny Website

www.cfps.gov.uk

Department of Health Website

www.doh.gov.uk

IdEA Website

www.idea.gov.uk

NHS Centre for Involvement

www.nhscentreforinvolvement.nhs.uk



Appendix 1

Frequently Used Terms

Below is a selection of frequently used health scrutiny terms. A more detailed list is available from the Scrutiny Unit.

A

A & E - Accident and Emergency

Usually referred to in its abbreviated form this covers the range of services immediately available in the specialist department of a hospital for patients requiring urgent treatment.

AH - Acute Hospitals

The hospitals people go to for major surgery, the treatment of very serious conditions, for intensive care and so on. The Great Western Hospital, Swindon is an acute hospital.

Annual Healthcheck

Annual assessment of the performance of NHS providers in England that is carried out by the Healthcare Commission.

AWP - Avon & Wiltshire Mental Health Partnership Trust

AWP provides specialist mental health services to people across Avon and Wiltshire.

C

CAMHS - Child and Adolescent Mental Health Services

Promotes the mental health and psychological well being of children and young people and provides multidisciplinary mental health services

CfPS – Centre for Public Scrutiny

National organisation created to promote the effectiveness and value of public scrutiny.

CG - Clinical Governance

An initiative to ensure and improve clinical standards at local level through the NHS. It covers areas such as education and training managing risk and maintaining clinical standards.

Choose and Book

A central government initiative to enable patients to book hospital appointments at a place and time that is convenient for them.

CHC - Community Health Care

A range of treatments provided in the community such as health visiting and district nursing.

Commissioning

The term used to describe the process of planning, funding, procuring and monitoring healthcare services.



CP - Care Pathway

This term describes all the processes of diagnosis, treatment and care that a patient goes through, on a step-by-step basis from first contact.

D

DAT / DAAT - Drug Action Team / Drug Alcohol Action Team

A partnership between health authorities, local authorities, the police, and probation and prison services. DAT works to increase the safety of communities from drug-related crime, reduce the health risks related to drug misuse and reduce the availability of drugs to young people.

Delayed discharge

Where a patient who is fit for discharge remains in an acute hospital bed because other more suitable care cannot be provided.

DOH - Department of Health

E

Elective care

Care given at a planned/prearranged time rather than in response to an emergency.

G

GP - General Practitioner

GUM - Genito-Urinary Medicine

Healthcare services dealing with sexually transmitted infections and other sexual problems

GWA – Great Western Ambulance NHS Trust

Provides accident and emergency and patient transport services to people in Avon, Gloucestershire and Wiltshire.

GWH - Great Western Hospital

H

Health community

Includes all health organisations and staff within an identified area such as PCTs, primary care practitioners, NHS trusts, local authorities/councils and voluntary sector organisations.



Healthcare Commission

Independent health watchdog for England.

HOSCs – Health Overview and Scrutiny Committees

Overview and scrutiny committees established by local authorities with social services responsibilities to discharge powers outlined in the Local Authority (Overview and Scrutiny Health Scrutiny Functions) Regulations 2002.

I

IC - Intermediate Care

Care that patients can be given after coming out of an acute hospital. It is often given to patients who are unable to return home immediately and require some form of rehabilitation. The Swindon Intermediate Care Centre (SwiCC), which is operated by Swindon Primary Care Trust, is an example of an IC service.

J

JCB - Joint Commissioning Board

A committee within Swindon Borough Council, involving health partners, that considers issues relating to the delivery of mental health services and learning disabilities in Swindon, including commissioning.

Joint Health Overview and Scrutiny Committees

A committee established by a number of HOSCs to scrutinise an issue that impacts on populations of more than one local authority. May be informal to address an issue identified by all of the HOSCs involved or formally established in response to consultation on proposals for substantial variations or developments to services by an NHS body.

L

LAA – Local Area Agreement

Sets out priorities for a local area agreed by central government, a local authority and local strategic partnership and other key partners at a local level.

LINK – Local Involvement Network

Part of the public and patient involvement framework for the NHS which enables local people to have a voice in the planning, design and delivery of local health and social care services



NHS - National Health Service

NHS Direct

A 24 hour, nurse-led telephone help-line providing confidential health care advice and information.

NICE - National Institute for Health & Clinical Excellence

A national body set up by the Department of Health to oversee standards of clinical practice throughout the country and to pass judgement on the cost-effectiveness and value for money of new drugs.

OT - Occupational Therapy

Mental or physical activity to assist recovery from disease or injury.

PALS - Patient Advice and Liaison Service

The NHS Plan aims to ensure that all NHS services put patients at the heart of everything they do. Patient Advice and Liaison Services are set up in every NHS Trust to support the on-going development of patient focused care.

Primary care

The first port of call for many people when they develop a health problem is their local doctor, also known as general practitioner (GP). Many other health professionals work as part of this frontline team nurses, health visitors, dentists, opticians, pharmacists and a range of specialist therapists.

PCT - Primary Care Trust

An independent NHS Trust that commissions a range of health and social care services. It also provides community based services.

PEC - Professional Executive Committee

Every primary care trust has a PEC comprised of GPs, nurses, social workers, pharmacists, dentists, opticians, amongst others. PECs provide a professional viewpoint on the strategy and operations of the Trust.

PPI - Patient & Public Involvement

Initiatives to make sure that the public is involved in decision making about health and health services.

SBC - Swindon Borough Council**SC - Secondary Care**

Also known as acute care, this refers to specialist medical care or surgery provided in a hospital setting either as an in-patient or out-patient service. Patients seen in hospitals are generally under the care of a consultant, not a GP.

SHA - Strategic Health Authority

Strategic Health Authorities determine strategy and performance manage Primary Care Trusts and Trusts in their area.

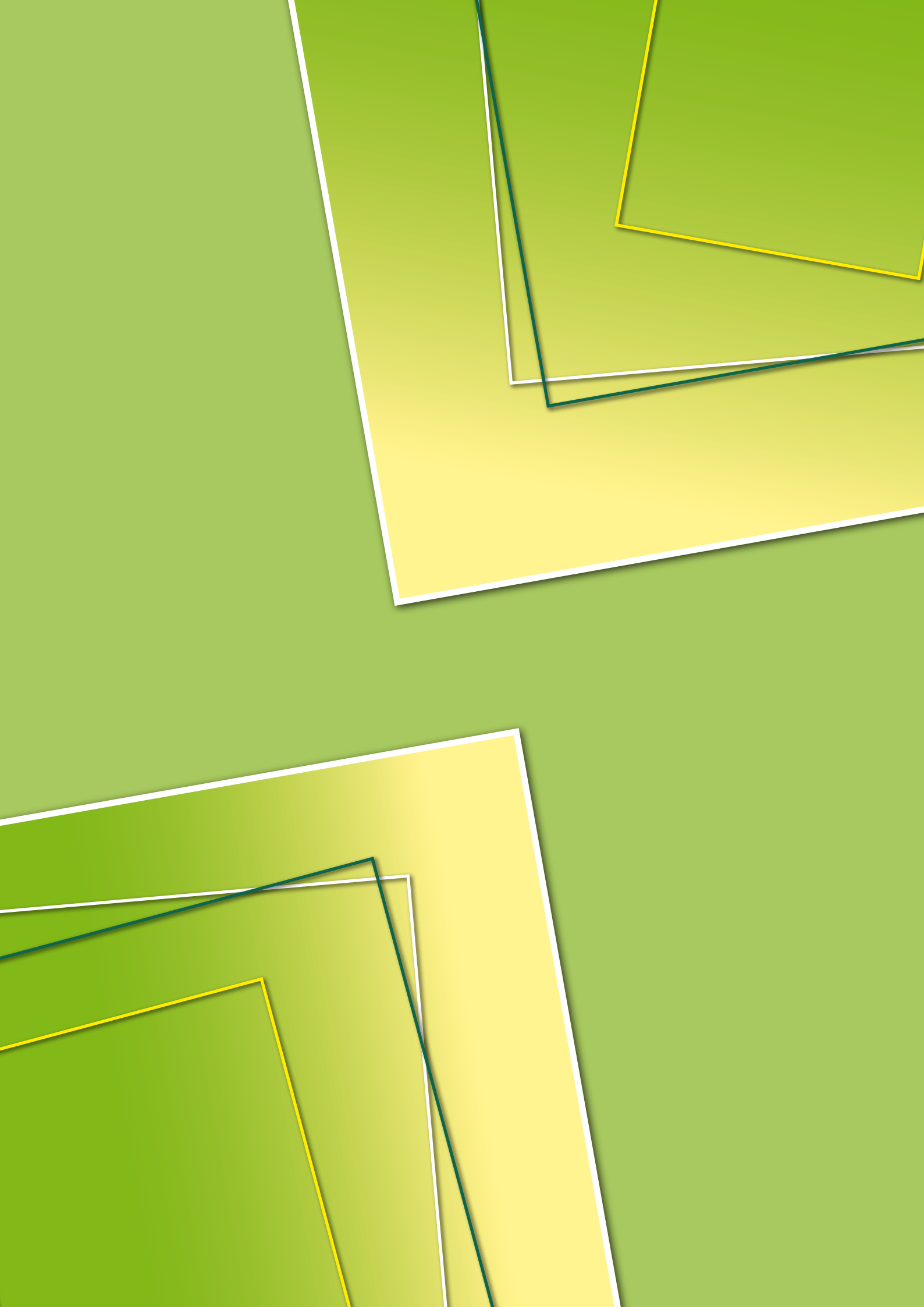
Specialised Services

Services provided in a small number of specialist centres to catchment populations of more than a million people e.g. bone marrow and kidney transplants.

SCGs – Specialised Commissioning Groups

Formal joint committees of Primary Care Trusts that are responsible for the collaborative commissioning of specialised services in a Strategic Health Authority area.





This information is available on the internet at www.swindon.gov.uk. It can be produced in a range of languages and formats (such as large print, Braille or other accessible formats) by contacting the Customer Services Department.

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