

Agenda

Health Overview and Scrutiny Committee

Friday, 15 March 2024, 10.00 am
County Hall, Worcester

All County Councillors are invited to attend and participate

This document can be provided in alternative formats such as Large Print, an audio recording or Braille; it can also be emailed as a Microsoft Word attachment. Please contact Scrutiny on telephone number 01905 844965 or by emailing scrutiny@worcestershire.gov.uk

DISCLOSING INTERESTS

There are now 2 types of interests:
'Disclosable pecuniary interests' and 'other disclosable interests'

WHAT IS A 'DISCLOSABLE PECUNIARY INTEREST' (DPI)?

- Any **employment**, office, trade or vocation carried on for profit or gain
- **Sponsorship** by a 3rd party of your member or election expenses
- Any **contract** for goods, services or works between the Council and you, a firm where you are a partner/director, or company in which you hold shares
- Interests in **land** in Worcestershire (including licence to occupy for a month or longer)
- **Shares** etc (with either a total nominal value above £25,000 or 1% of the total issued share capital) in companies with a place of business or land in Worcestershire.

NB Your DPIs include the interests of your spouse/partner as well as you

WHAT MUST I DO WITH A DPI?

- **Register** it within 28 days and
- **Declare** it where you have a DPI in a matter at a particular meeting
 - you must **not participate** and you **must withdraw**.

NB It is a criminal offence to participate in matters in which you have a DPI

WHAT ABOUT 'OTHER DISCLOSABLE INTERESTS'?

- No need to register them but
- You must **declare** them at a particular meeting where:
You/your family/person or body with whom you are associated have a **pecuniary interest** in or **close connection** with the matter under discussion.

WHAT ABOUT MEMBERSHIP OF ANOTHER AUTHORITY OR PUBLIC BODY?

You will not normally even need to declare this as an interest. The only exception is where the conflict of interest is so significant it is seen as likely to prejudice your judgement of the public interest.

DO I HAVE TO WITHDRAW IF I HAVE A DISCLOSABLE INTEREST WHICH ISN'T A DPI?

Not normally. You must withdraw only if it:

- affects your **pecuniary interests OR**
relates to a **planning or regulatory** matter
- **AND** it is seen as likely to **prejudice your judgement** of the public interest.

DON'T FORGET

- If you have a disclosable interest at a meeting you must **disclose both its existence and nature** – 'as noted/recorded' is insufficient
- **Declarations must relate to specific business** on the agenda
 - General scattergun declarations are not needed and achieve little
- Breaches of most of the **DPI provisions** are now **criminal offences** which may be referred to the police which can on conviction by a court lead to fines up to £5,000 and disqualification up to 5 years
- Formal **dispensation** in respect of interests can be sought in appropriate cases.

Health Overview and Scrutiny Committee Friday, 15 March 2024, 10.00 am, County Hall

Membership

Worcestershire County Council Cllr Brandon Clayton (Chairman), Cllr Salman Akbar, Cllr Lynn Denham, Cllr Adrian Kriss, Cllr Jo Monk, Cllr Chris Rogers, Cllr Kit Taylor and Cllr Tom Wells

District Councils Cllr Paul Harrison, Wyre Forest District Council
Cllr Antony Hartley, Wychavon District Council
Cllr Bakul Kumar, Bromsgrove District Council
Cllr Emma Marshall, Redditch Borough Council
Cllr Richard Udall, Worcester City Council
Cllr Christine Wild, Malvern Hills District Council (Vice Chairman)

Agenda

Item No	Subject	Page No
1	Apologies and Welcome	
2	Declarations of Interest and of any Party Whip	
3	Public Participation Members of the public wishing to take part should notify the Assistant Director for Legal and Governance in writing or by email indicating the nature and content of their proposed participation no later than 9.00am on the working day before the meeting (in this case 14 March 2024). Enquiries can be made through the telephone number/email listed in this agenda and on the website.	
4	Confirmation of the Minutes of the Previous Meeting Previously circulated	
5	Update on Outcomes of Care Quality Commission Inspection of Herefordshire and Worcestershire Health and Care NHS Trust (Including Hill Crest Mental Health Ward) (Indicative timing: 10:05 – 10:55am)	1 - 8
6	Acute Dermatology Services Provision (Indicative timing 10:55 – 11:45am)	9 - 12
7	Refresh of the Scrutiny Work Programme 2024-25	13 - 18

Agenda produced and published by the Assistant Director for Legal and Governance, County Hall, Spetchley Road, Worcester WR5 2NP. To obtain further information or hard copies of this agenda, please contact Emma James/Jo Weston 01905 844965, email: scrutiny@worcestershire.gov.uk

All the above reports and supporting information can be accessed via the [Council's Website](#)

Date of Issue: Wednesday, 6 March 2024

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HEALTH OVERVIEW AND SCRUTINY COMMITTEE

15 MARCH 2024

UPDATE ON OUTCOMES OF CARE QUALITY COMMISSION INSPECTION OF HEREFORDSHIRE AND WORCESTERSHIRE HEALTH AND CARE NHS TRUST (INCLUDING HILL CREST MENTAL HEALTH WARD)







Summary

1. The Health Overview and Scrutiny Committee (HOSC) is to be updated by Herefordshire and Worcestershire Health and Care NHS Trust (the Trust) on actions taken and progress made to address concerns raised by the Care Quality Commission (CQC), highlighted through their Well Led inspection.
2. The update to the HOSC will also include the progress and actions taken following the CQC inspection of a number of core services which were undertaken alongside the Well Led inspection. This includes improvements around the safety and staffing of provision for adults of working age in mental health wards.
3. The most recent updates to the HOSC on Hill Crest Mental Health Ward were on 11 October 2022 and 15 March 2023 and in December 2023 HOSC members also had the opportunity to visit the Hill Crest and the Elgar Unit mental health wards.
4. Senior representatives from the Trust and NHS Herefordshire and Worcestershire Integrated Care Board (HWICB) have been invited to the meeting to respond to any questions the HOSC may have.

Care Quality Commission (CQC) Inspections in 2023

5. As a result of unannounced CQC inspections on 21 and 22 July 2023, the Trust was issued with a notice of possible urgent enforcement action under Section 31 of the Health and Social Care Act 2008. An action plan to address these concerns was completed. Subsequently a further Well Led inspection in February through to June 2023 (including an inspection of Hill Crest) led to no further enforcement actions and the CQC noted improvements within acute inpatient care. The full inspection report was published in January 2024 and the Trust was given an overall rating of 'requires improvement'.
6. From February to May 2023 there were 4 core service inspections:
 - Adult mental health acute inpatient and psychiatric intensive care wards
 - Adult mental health crisis and health-based place of safety suites
 - Adult mental health community teams
 - Physical health neighbourhood teams

7. From 6 to 8 June 2023 the CQC conducted a Well Led inspection, drawing on one to one interviews with board members, subject matter experts, focus groups and stakeholders.
8. As a result of the inspections, a number of changes were made, including moving the Trust's overall rating from good to requires improvement:

Overall trust quality rating	Requires Improvement 
Are services safe?	Requires Improvement 
Are services effective?	Requires Improvement 
Are services caring?	Good 
Are services responsive?	Good 
Are services well-led?	Requires Improvement 

9. The findings from the CQC inspection can be found in Appendix 1. The organisation-wide themes are as follows:
 - The Trust must ensure members of the executive leadership team work in a cohesive and collaborative way to address areas of risk or concern to ensure they are sighted on risks that could affect the delivery of strategy and provision of high-quality care. (Regulation 17)
 - The Trust must ensure senior leaders are visible in all services. (Regulation 17)
 - The Trust must ensure that effective systems and processes are in place to manage risks in the Trust ensuring the risks are regularly reviewed and mitigated. (Regulation 17)
 - The Trust must ensure learning from incidents is shared across all services to mitigate against the risk of reoccurrence. (Regulation 17)
 - The Trust must ensure policies are up to date, have been ratified and have Equality Impact Assessments. (Regulation 17)
 - The Trust must ensure that action is taken to address a closed culture in the organisation and embed action to improve equality, diversity and inclusion. (Regulation 17)
 - The Trust must ensure action is taken to respond effectively to concerns raised (Regulation 17)
 - The Trust must ensure estates staff are managed consistently in line with other staff in the Trust. (Regulation 17)
 - The Trust must ensure serious incidents are reported to external agencies in line with national guidance in a timely manner. (Regulation 17)
 - The Trust must ensure that staff receive supervision and appraisal. (Regulation 18)
 - The Trust must ensure that personnel files for senior leaders meet the requirements of fit and proper person guidance. (Regulation 19)

Rating for mental health services

	Safe	Effective	Caring	Responsive	Well-led	Overall
Acute wards for adults of working age and psychiatric intensive care units	Inadequate →← Nov 2023	Requires Improvement ↓ Nov 2023	Requires Improvement ↓ Nov 2023	Requires Improvement ↓ Nov 2023	Requires Improvement ↑ Nov 2023	Requires Improvement ↑ Nov 2023
Specialist community mental health services for children and young people	Good Jan 2020	Good Jan 2020	Outstanding Jan 2020	Good Jan 2020	Outstanding Jan 2020	Outstanding Jan 2020
Community-based mental health services for older people	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020
Wards for older people with mental health problems	Good Jun 2018	Requires improvement Jun 2018	Good Jun 2018	Good Jun 2018	Good Jun 2018	Good Jun 2018
Wards for people with a learning disability or autism	Good Jun 2015	Good Jun 2015	Good Jun 2015	Good Jun 2015	Good Jun 2015	Good Jun 2015
Community mental health services for people with a learning disability or autism	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020
Community-based mental health services of adults of working age	Requires Improvement ↑ Nov 2023	Good ↑ Nov 2023	Good ↑ Nov 2023	Requires Improvement →← Nov 2023	Requires Improvement ↑ Nov 2023	Requires Improvement ↑ Nov 2023
Mental health crisis services and health-based places of safety	Requires Improvement ↓ Nov 2023	Good →← Nov 2023	Good →← Nov 2023	Good →← Nov 2023	Requires Improvement ↓ Nov 2023	Requires Improvement ↓ Nov 2023
Long stay or rehabilitation mental health wards for working age adults	Good Jun 2018	Good Jun 2018	Outstanding Jun 2018	Outstanding Jun 2018	Outstanding Jun 2018	Outstanding Jun 2018
Overall	Requires Improvement	Good	Good	Good	Requires Improvement	Requires Improvement

Rating for community health services

	Safe	Effective	Caring	Responsive	Well-led	Overall
Community end of life care	Requires improvement Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020
Community health services for adults	Requires Improvement ↓ Nov 2023	Requires Improvement ↓ Nov 2023	Good →← Nov 2023	Good →← Nov 2023	Requires Improvement ↓ Nov 2023	Requires Improvement ↓ Nov 2023
Community health inpatient services	Good Jun 2018	Requires improvement Jun 2018	Good Jun 2018	Good Jun 2018	Outstanding Jun 2018	Good Jun 2018
Community health services for children and young people	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020
Community dental services	Good Jan 2020	Good Jan 2020	Outstanding Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020
Overall	Requires Improvement	Requires Improvement	Good	Good	Good	Requires Improvement

Progressing the Improvement Plan to Address CQC Concerns

- Following initial feedback from the CQC, the Trust and HWICB took the decision to appoint an Improvement Director to lead the development and implementation of an Improvement Plan. Based upon the themes in the CQC report and an

extensive staff engagement exercise through September and October 2023 which almost 700 staff contributed to, the Trust has developed and commenced delivery of 2 key plans:

i Overall Trust Improvement plan covering:

- a. Culture and Equality Diversity and Inclusion
- b. Systems, Processes and Structures
- c. Regulatory and Accreditation
- d. Communication and Planning
- e. Risk Management
- f. Corporate & Administrative Services

ii A focused plan covering:

- g. The CQC must do's at both organisational and service level
- h. The CQC should do's at service level (organisational level captured within the overall improvement plan)

11. Over the coming months these programmes of work will deliver:

- Training for all staff, starting with those in a leadership, managerial and supervisory role, covering skills which will help embed the behaviours and culture staff said they wanted. These skills will include restorative practice, the impact of incivility, seeking and acting on feedback, inclusivity and discrimination, bias, micro-aggressions & practical emotional intelligence
- A broad Trust Board development programme covering the key themes identified by the CQC of visible leadership, inclusive decision making, effective challenge and risk management
- Staff are confident that if they speak up something will be done
- Fairness and equity in management, development and how people are treated, giving equal opportunities regardless of race, disability or any other protected characteristic
- Updated Governance structures ensuring integrated approach and operation of meetings at all levels. This scaffolding will enable visibility of decision making, escalations & resolutions, risk management, communication and give the channel where staff and patient / carer concerns are formally received and actions recorded
- Updated risk management systems and processes, aligning to the CQC findings and an independent review by the Good Governance Institute
- A clear view of areas at risk of a closed culture developing, giving the opportunity to put supportive actions in place at an early stage
- Effective incident reporting
- Systems and processes which ensure all staff receive a regular one to one supervision and appraisal as well as having a team meeting they can attend and contribute to.
- All staff are managed by the same policies and approaches, based around a restorative culture
- Updated operational processes which reduce impact on clinical and operational time
- All policies have equality impact assessments in place.

Monitoring the Staff and Patient Experience

12. The Trust has developed a monitoring system, whereby staff views are sought every 2 months. The questions asked align to the national staff survey and focus on how staff experience the working environment. This information will be used to understand progress of the improvement plan at both an organisational and Trust level.
13. Ultimately, improved staff wellbeing and experience will lead to improved care and patient outcomes. The Trust is working with both Healthwatch Worcestershire and Healthwatch Herefordshire to develop patient experience questions which will be asked by Healthwatch and used to assess progress.

Hill Crest Ward

14. Hill Crest is a Mental Health Ward in Redditch for adults of working age. The 18 bedded ward provides a 24-hour service offering intensive input for patients who experience acute mental health difficulties. It provides care to people aged between 18 and 65, some of whom may be detained under the Mental Health Act.
15. The Trust uses its admission beds flexibly and patients from anywhere in Herefordshire and Worcestershire may be admitted to any of the 3 working age adult Acute Wards in the two counties, dependant on bed availability and specific patient need. The other two Acute Mental Health wards in the two counties are Holt Ward, a 16 bedded mixed gender ward in Worcester located on Elgar Unit on the Worcestershire Royal Hospital site and Mortimer Ward a 21 bedded mixed gender ward in Hereford (within the Stonebow Unit – Herefordshire County Hospital). The Trust also has four Older Adult Acute Mental Health wards in operation – two wards at New Haven (Princess of Wales Community Hospital, Bromsgrove) and two at Stonebow Unit, Hereford.
16. The CQC inspected Hill Crest on 14 February 2023 as part of the Trust core inspection and noted the following concerns:
 - Poor patient experience in relation to insufficient staff to allow escorted leave from ward or supervised use of the garden areas
 - High use of temporary staffing and poor quality of care delivered by some temporary staff
 - Lack of proactivity in dealing with sexual safety incidents
 - Poor documentation and possible under reporting of incidents
 - Lack of therapeutic activity for patients.
17. Updates were provided to the HOSC on Hill Crest Mental Health Ward on 11 October 2022 and 15 March 2023 and in December 2023 HOSC members also had the opportunity to visit the Hill Crest (in Redditch) and the Elgar Unit (in Worcester) mental health wards.
18. The Hill Crest Leadership Team have been working through a multi-level Improvement Plan from September 2022. The plan was organised into four themes:
 - Clinical

- Staffing
 - Patient and Carer Engagement
 - Environmental
19. The purpose of the plan was to restore safe operations within Hill Crest and make environmental and operating improvements to raise quality of care delivery. The plan was not designed to overcome underlying recruitment issues, or the constraints of the Hill Crest building as a standalone mental health inpatient unit. The Improvement Plan was now substantively complete in November 2023, with no critical outstanding issues.
20. The status of the Hill Crest ward at the time of writing this report was as follows:
- Quality concerns much diminished
 - No new human resources issues
 - 7 complaints, since September 2023 –although none relate to the quality of care delivered in that time period
 - Patient activity programme established
 - Good feedback from staff
 - Positive report from Onside advocacy service
 - Top performing ward on “Quality Audit” –record keeping
 - Patient Flow Quality Improvement programme has good clinical engagement and is showing local results
 - Phased opening to 14 beds with staff/staff side support –no increase in 10 bed footprint. This mitigates (not eliminates) design challenges.
 - Patient selection also mitigates (not eliminates) isolation challenges.
 - Gendered bedroom corridors
 - Staffing levels continue to be a challenge, but mitigated through blocked booked agency arrangements.
21. The Trust’s assessment of the current service at Hill Crest is that it is sustainable at an acceptable level of quality because of the mitigations in place. The ward remains a poor design for acute provision and remains isolated (i.e. Hill Crest is the only “lone” mental health inpatient ward on the Worcestershire Acute Hospital NHS Trust Alexandra Hospital site).
22. During the previous report to the HOSC in October 2023, Members were advised of early consideration of the option to transfer bed provision from Hill Crest to the vacant Athelon Ward at the Elgar Unit on the Worcestershire Royal Hospital site.
23. The standard of accommodation at Hill Crest is below current national standards (no integrated bathrooms for example) and the Athelon Ward is well designed, on campus and available later in the year.
24. The Public engagement has been completed and there were no strong sentiments raised against relocation to the Athelon Ward (Worcester). Parking and travel costs were the only concerns consistently raised.
25. Staff at Hill Crest would prefer to work in the North of the County, so discussions are ongoing to ensure the Trust can provide a sustainable service for the long term and the outcome of discussions will also be part of the Trust Board’s public

meeting in May.

Purpose of the Meeting

26. The HOSC is asked to:

- Consider and comment on the information provided;
- Agree whether any further information or scrutiny is required at this time.

Supporting Information

Appendix 1 – CQC inspection of Herefordshire and Worcestershire Health and Care Trust [Herefordshire and Worcestershire Health and Care NHS Trust - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk)

Contact Points

Matthew Hall, Chief Operating Officer, Herefordshire and Worcestershire Health and Care NHS Trust Tel: 07553 383793 Email: matthew.hall24@nhs.net

Sue Harris, Director of Strategy and Partnerships, Herefordshire and Worcestershire Health and Care NHS Trust Tel: 07540 252693 Email: susan.harris2@nhs.net

Emma James / Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964 / 844965 Email: scrutiny@worcestershire.gov.uk

Background Papers

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance), the following are the background papers relating to the subject matter of this report:

- Agenda and Minutes for HOSC on 11 October and 13 March 2023 - [Weblink to Agendas and Minutes of the Health Overview and Scrutiny Committee](#)

All agendas and minutes are available on the Council's website here.

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HEALTH OVERVIEW AND SCRUTINY COMMITTEE

15 MARCH 2024

ACUTE DERMATOLOGY SERVICES PROVISION

Summary

1. The Health Overview and Scrutiny Committee (HOSC) has requested an overview of Acute Dermatology services, and this will include recruitment challenges and the actions put in place by Worcestershire Acute Hospitals NHS Trust (the Trust) to maintain services and restore the long-term stability of provision.
2. The Managing Director and Chief Operating Officer from Worcestershire Acute Hospitals NHS Trust have been invited to the meeting to respond to any questions the HOSC may have.

Background

3. The phrase 'acute dermatology services' covers those dermatology (skin related) services provided by Worcestershire Acute Hospitals NHS Trust (The Trust) at Kidderminster and Worcestershire Royal Hospitals.
4. These services are provided on both an inpatient and outpatient basis according to the patient's clinical condition and cover two main types of condition: Skin cancers and severe inflammatory skin conditions (for example severe cases of psoriasis).
5. During 2022/23 the Trust's dermatology service saw more than 13,000 appointments (a mixture of new and follow-up) for patients with severe inflammatory skin disease and skin cancer.
6. A range of treatments are provided for these conditions through consultant-led or nurse-led services, and these are discussed in more detail below.

Challenges to Provision

7. A series of resignations and retirements by the Trust's substantive dermatology consultants over a period of several years, and the Trust's difficulty in recruiting permanent replacements for those consultants, has had a serious adverse impact on dermatology services.
8. This has led to challenges in maintaining services and longer waiting times for some patients.
9. These issues are being closely monitored and reported through the Trust's quality and safety monitoring processes.

10. The Trust has put in place a number of short-term mitigations to keep services running wherever possible, through partnership working with neighbouring trusts, the use of private sector insourcing providers and appointing its own locum consultant dermatologists.
11. Options to restore the longer-term stability of services which would ensure that provision remains in Worcestershire are also being actively explored, and the Trust Board's current preferred option is for the running of the service to be taken on by the Herefordshire Wye Valley Trust (WVT) as the lead provider. WVT is a member of the Foundation Group and is therefore a partner Trust. A foundation group solution offers opportunities for recruitment and retention, resilience and expertise and can be used to support other fragile services.
12. These discussions continue and at the time of writing the report, WVT were actively recruiting to consultant dermatologist posts to support the 'lead-provider' model of delivery for dermatology, with the service based and managed at WVT providing 'outreach' on-site clinical provision within Worcestershire through Worcestershire Acute Hospitals Trust.
13. A verbal update on progress towards this arrangement will be provided by Trust representatives at the meeting.

Current Interim Arrangements and Monitoring

14. The Trust has a number of interim arrangements in place, in order to provide a more stable service moving forward, and these have been formalised during February.
15. A contract is in place with a private sector insourcing provider, Health Harmonie, to provide services on-site at Kidderminster and Worcestershire Royal Hospitals. A number of other services are also provided by Health Harmonie for the Trust and are included in the list below.
 - a. **Service: MOHS (micrographic surgery for skin cancer)** – specialised surgical treatment for certain types of skin cancer.
 - b. **Service: MOPs (minor operations for skin cancer)**
 - c. **Service: Biologic/Systemic services.** (This refers to specific drug treatment for a range of severe inflammatory skin conditions, including psoriasis and eczema. The drugs involved can only be prescribed by specifically qualified consultant dermatologists.)
 - d. **Service: Phototherapy** (treatment using ultra-violet light for inflammatory skin conditions) – patients are currently being reviewed in the Biologic clinics (see above) and referred to other centres for treatment while plans are worked up to provide a local service led by the Trust's Clinical Nurse Specialists.
 - e. **Service: Non-urgent/non-cancer referrals**
Triaged as part of the community contract with Health Harmonie, who then refer either to a community service or to an acute service.
 - f. **Service: Skin cancer affecting the head and neck.** Service is continuing to be provided by the existing OMFS (Oral Maxillo Facial Service) with additional support for Health Harmonie.

16. Other services (not provided by Health Harmonie) include:
Emergency escalation for inpatients - Provided through a telemedicine service by University Hospitals Birmingham (UHB).

Review of Ways of Working

17. In order to manage all dermatology waiting lists as effectively and safely as possible, waiting list validation is undertaken by the Trust's Nurse Consultant with medical oversight provided by locum Consultant Dermatologist.
18. Follow-up and results clinics are now provided by locum Consultant Dermatologist with Clinical Nurse Specialist support.
19. Waiting times are improving for new and follow up appointments. MOPs are taking longer than the Trust would want but waiting times are improving and continuous improvement is expected to be seen, moving forward.
20. The Trust is reviewing options for digital/remote and AI-supported working to further improve access to services and reduce waiting times.
21. Additional administrative resource is also being made available to support waiting list management, validation and typing of clinical letters.
22. Service provision and progress will continue to be closely monitored by the Trust's senior leadership team and any issues escalated appropriately.

Legal, Financial, and HR Implications

23. The challenge of managing a service in the face of a severe shortage of senior clinicians has undoubtedly placed a significant strain on remaining members of the Trust's dermatology team.
24. Additional wellbeing support has been offered to the nursing and administrative teams in recognition of the additional work they have taken on.

Purpose of the Meeting

25. The HOSC is asked to:
- Consider the challenges facing the provision of acute dermatology service in Worcestershire, the immediate actions being taken by the Trust and the longer term plan for the future of those services.
 - determine whether any further information or scrutiny on a particular topic is required.

Contact Points

Specific Contact Points for this report

Richard Haynes, Director of Communications and Engagement, Worcestershire Acute Hospitals NHS Trust, Email: richard.haynes9@nhs.net

Emma James / Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964 / 844965
Email: scrutiny@worcestershire.gov.uk

Background Papers

In the opinion of the proper officer (in this case the Assistant Director Legal and Governance) there are no background papers relating to the subject matter of this report.

All agendas and minutes are available on the Council's website here.

HEALTH OVERVIEW AND SCRUTINY COMMITTEE

15 MARCH 2024

REFRESH OF THE SCRUTINY WORK PROGRAMME

2024/25

Summary

1. The Health Overview and Scrutiny Committee (HOSC) the Panel) is being asked to consider suggestions for its 2024/25 Work Programme prior to it being submitted to Council for approval.

Background

2. Worcestershire County Council has a rolling annual Work Programme for Overview and Scrutiny. The HOSC routinely reviews its work programme at each meeting to consider which issues should be investigated as a priority.
3. In addition, on an annual basis, the rolling annual Work Programme for Overview and Scrutiny is approved by Council.

Scrutiny Work Programme 2024/25

4. The Scrutiny Work Programme for 2024/25 is now being refreshed. Panel Members and other stakeholders have been invited to suggest topics for future scrutiny.
5. The suggestions are detailed on the draft Work Programme (attached at Appendix 1).
6. Members are asked to consider the draft Work Programme and agree its priorities for 2024/25. Issues should be prioritised by using the scrutiny feasibility criteria agreed by Overview and Scrutiny Performance Board (OSPB).
7. The OSPB will receive feedback on the HOSC's and Scrutiny Panels' discussions and agree the final Scrutiny Work Programme at its 25 April meeting. Council will be asked to agree the Work Programme at its meeting on 16 May.

Feasibility Criteria

8. The criteria (listed below) will help to determine the scrutiny programme. A topic does not need to meet all of these criteria to be scrutinised, but they are intended as a guide for prioritisation.
 - Is the issue a priority area for the Council?
 - Is it a key issue for local people?
 - Will it be practicable to implement the outcomes of the scrutiny?

- Are improvements for local people likely?
- Does it examine a poor performing service?
- Will it result in improvements to the way the Council operates?
- Is it related to new Government guidance or legislation?

Remit of the Health Overview and Scrutiny Committee

9. The Health Overview and Scrutiny Committee is responsible for scrutiny of:

- Local NHS bodies and health services (including public health and children's health).

Dates of Future 2024 Meetings

- 16 April at 10am
- 13 June at 10am
- 8 July at 2pm
- 9 September at 2pm
- 11 October at 10am
- 12 November at 10am

Purpose of the Meeting

10. The HOSC is asked to consider and prioritise the draft 2024/25 Work Programme and consider whether it would wish to make any amendments. The Committee will wish to retain the flexibility to take into account any urgent issues which may arise.

Supporting Information

Appendix 1 – Health Overview and Scrutiny Committee Draft Work Programme 2024/25

Contact Points

Emma James / Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964 / 844965
Email: scrutiny@worcestershire.gov.uk

Background Papers

In the opinion of the Proper Officer (in this case the Assistant Director for Legal and Governance), the following are the background papers relating to the subject matter of this report:

[Agenda and minutes for Overview and Scrutiny Performance Board on 28 April 2023](#)

[Agenda and Minutes for Council on 18 May 2023](#)

All Agendas and Minutes are available on the Council's website [weblink to Agendas and Minutes](#)

DRAFT SCRUTINY WORK PROGRAMME 2024/25

Health Overview and Scrutiny Committee

Date of Meeting	Issue for Scrutiny	Date of Last Report	Notes / Follow-up Action
15 March 2024	Herefordshire and Worcestershire Health and Care Trust CQC Inspection (including Hill Crest)	11 October and 13 March 2023 (Hill Crest CQC Inspection)	Requested at 11 October 2023 HOSC HOSC members also had the opportunity to visit the Hill Crest Ward and Elgar Unit in December 2023
	Dermatology		Agenda planning November 2023
	Work Programme Refresh	13 March 2023	
16 April 2024	Routine Immunisation - Using Measles as a case study to demonstrate the importance of routine immunisation	8 July 2022	Suggested at 19 July 2021 Meeting
	Cancer Pathway - including awareness raising, screening, waiting lists and diagnosis to start of treatment	12 January 2022	Agenda planning 23 February 2024
13 June 2024	Adult Mental Health Inpatient Services Redesign - TBC		Suggested by Herefordshire and Worcestershire Health and Care NHS Trust on 17 April 2023. HOSC also had opportunity to visit the Hill Crest Ward and Elgar Unit in December 2023
12 November 2024	Annual Review of Public Health (including the Public Health Ring Fenced Grant)	13 November 2023	To include Health and Wellbeing Strategy
Possible Future Items			
	Frailty and Progress with Implementation of the New Strategy		Outcome of 7 December 2023 meeting
	Maternity* and Newborn Services (First 100 days) – including maternity services, health visitors, screening, parental support, family hubs	*HOSC scrutinised progress of Maternity Services following the CQC inspection	Agenda planning 23 February 2024

		September 2021 – May 2023	
	Implementation of the Pharmacy First Programme		
	Diabetes Pathway - including awareness raising, screening and diagnosis to start of treatment		Agenda planning 23 February 2024
Ongoing	Update on Workforce Pressures	10 May 2023, 10 June 2022	Requested at 10 May 2023 meeting
Ongoing	Update on Improving Patient Flow*	7 December, 15 June & 10 February 2023, 9 May, 8 July, 17 October, 1 December 2022	
TBC	Community Paediatric Services		Suggested at Agenda Planning 23 August 2022
TBC	Haematology		Suggested at 10 May 2023 Meeting
TBC	Neurology		Suggested at 10 May 2023 Meeting
TBC	Stroke Services – update	17 October 2022	
TBC	Update on Dental Services Access	9 March 2022	Requested at 9 March 2022 meeting
TBC	End of Life Care	10 June 2022	Requested at 10 June 2022 meeting
TBC	Glaucoma Services		Suggested at 17 October 2022 meeting
TBC	NHS Health Checks Programme		Requested at 13 January 2023 meeting
TBC	Podiatry services		Requested at 10 February 2023 meeting
TBC	Long Term plan for WAHT Theatres		Requested at 13 March 2023 meeting
TBC	Dementia	9 May 2022	Requested at 7 December 2023 meeting
Standing Items			
When required	Substantial NHS Service Changes requiring consultation with HOSC		
TBC	NHS Quality Accounts Quality and Performance		
Annual	Annual Review of Public Health (including the Public Health Ring Fenced Grant)	13 November 2023	To include Public Health Ring Fenced Grant and Update on Health and Wellbeing Strategy
TBC	Performance Indicators		

TBC	Update from West Midlands Ambulance Service	27 June 2019 7 December 2023	
March	Review of the Work Programme	13 March 2023	

*Scrutiny of patient flow is a continuation of the Scrutiny Task Group in November 2021

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