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HEALTH AND WELLBEING SCRUTINY COMMITTEE

27 March 2019

Dear Councillor

A Meeting of the Health and Wellbeing Scrutiny Committee will be held in **Committee Room 1 - Marmion House on Thursday, 4th April, 2019 at 6.00 pm.** Members of the Committee are requested to attend.

Yours faithfully

Chief Executive

AGENDA

NON CONFIDENTIAL

- 1 Apologies for Absence
- 2 Minutes of the Previous Meeting (Pages 5 12)
- 3 Declarations of Interest

To receive any declarations of Members' interests (personal and/or personal and prejudicial) in any matters which are to be considered at this meeting.

When Members are declaring a personal interest or personal and prejudicial interest in respect of which they have dispensation, they should specify the nature of such interest. Members should leave the room if they have a personal and prejudicial interest in respect of which they do not have a dispensation.

- 4 Update from the Chair
- 5 Safeguarding Children and Adults at Risk of Abuse and Neglect (Pages 13 24)

(Report of the Children's and Families Safeguarding Officer)

- Responses to Reports of the Health & Wellbeing Scrutiny Committee

 (Update on responses to Reports of the Health & Wellbeing Scrutiny Committee)
- 7 Consideration of matters referred to the Health & Wellbeing Scrutiny Committee from Cabinet or Council

(Discussion item)

8 Update on health related matters considered by Staffordshire County Council

(To receive an update from County Councillor J Oates)

9 Healthy Staffordshire Select Committee - District / Borough Digest (Pages 25 - 26)

To receive the Healthy Staffordshire Select Committee Digest for 19 March 2019 Meeting.

10 2018/19 Forward Plan

Please see the link to the Forward Plan:

http://democracy.tamworth.gov.uk/mgListPlanItems.aspx?PlanId=221&RP=120

11 Health & Wellbeing Scrutiny Work Plan - 2019/2020 (Pages 27 - 28)

To consider items for 2019/2020 Health & Wellbeing Scrutiny Work Plan

Access arrangements

If you have any particular access requirements when attending the meeting, please contact Democratic Services on 01827 709267 or e-mail democratic-services@tamworth.gov.uk. We can then endeavour to ensure that any particular requirements you may have are catered for.

Filming of Meetings

The public part of this meeting may be filmed and broadcast. Please refer to the Council's Protocol on Filming, Videoing, Photography and Audio Recording at Council meetings which can be found here for further information.

The Protocol requires that no members of the public are to be deliberately filmed. Where possible, an area in the meeting room will be set aside for videoing, this is normally from the front of the public gallery. This aims to allow filming to be carried out whilst minimising the risk of the public being accidentally filmed.

If a member of the public is particularly concerned about accidental filming, please consider the location of any cameras when selecting a seat.

FAQs

For further information about the Council's Committee arrangements please see the FAQ page here

To Councillors: R Ford, T Jay, R Bilcliff, A Bishop, R Claymore, M Gant, R Kingstone, M Oates, R Rogers, J Faulkner and County Councillor J Oates





MINUTES OF A MEETING OF THE HEALTH AND WELLBEING SCRUTINY COMMITTEE HELD ON 27th FEBRUARY 2019

PRESENT: Councillor R Ford (Chair), Councillors R Bilcliff, R Claymore,

S Goodall, M Oates, B Price, R Rogers and J Faulkner

County Councillor J Oates

The following officers were present: Jo Hutchison (Democratic and Elections Officer)

51 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors T Jay, A Bishop, M Gant and R Kingstone. Councillors S Goodall and B Price attended as substitutes for Councillors T Jay and M Gant.

52 MINUTES OF THE PREVIOUS MEETING

The Minutes of the previous Health and Wellbeing Scrutiny Committee held on the 22nd January 2019 were approved and signed as a correct record.

(Moved by Councillor M Oates and seconded by Councillor R Rogers)

53 DECLARATIONS OF INTEREST

There were no declarations of interest.

54 RESPONSES TO REPORTS OF THE HEALTH & WELLBEING SCRUTINY COMMITTEE

The Chair reported that the Forward Plan had been updated to include consideration at the Cabinet meeting on 11 April 2019 of the adoption of the Motor Neurone Disease (MND) Charter, which had been recommended by this Committee to Cabinet on 27th September 2018.

The Chair reported that he would attend Cabinet on 11 April 2019 to support the adoption of the MND Charter and would welcome the attendance of any other members of this Committee at Cabinet to support the same.

55 CONSIDERATION OF MATTERS REFERRED TO THE HEALTH & WELLBEING SCRUTINY COMMITTEE FROM CABINET

There were no matters which had been referred to this Committee.

56 UPDATE FROM THE CHAIR

The Chair reported that he had spoken to the Member of Parliament for Tamworth regarding West Midlands Ambulance Service's decision to remove the Rapid Response Vehicle from Tamworth. The Chair reported that the MP had requested an explanation from the Ambulance Service which he would share with the Chair, and which the Chair would update the Committee on.

57 UPDATE ON HEALTH RELATED MATTERS CONSIDERED BY STAFFORDSHIRE COUNTY COUNCIL

The Chair introduced County Councillor J Oates who would provide an update on matters considered by Healthy Staffordshire Select Committee, and in particular the three items requested by this Committee.

Future of the George Bryan Centre

County Councillor Oates reported that since the previous meeting of this Committee there had been a significant fire at the centre which had led to the need to move 18 residents of the centre, either to alternative residential centres or to alternative arrangements. Staffordshire County Council were maintaining contact with the Midlands Partnership NHS Foundation Trust, however, there was no update which could be provided on future plans.

The Committee sought clarification on any investigation into the fire. County Councillor Oates confirmed that he would seek clarification on what investigation would be undertaken.

Breast Screening in Tamworth

It was reported that the new breast screening facility at the Robert Peel hospital had been installed following work to upgrade the platform.

The Chair thanked the Committee for its work in this area and for members continued pressure to ensure the return of a screening facility, in particular for the support from Councillor R Claymore and County Councillor A Little.

Councillor S Goodall joined the meeting.

Broader Mental Health Care

County Councillor J Oates reported that Healthy Staffordshire Select Committee had considered and recommended to its Cabinet an Approach to Children and Young People's Emotional Wellbeing and Mental Health 2018-2023. This set out the principles which underpin the change which were:

- ensure that this area would be a priority within strategic plans and in our partners' organisational structures;
- have collaborative commissioning arrangements in place making best use of our collective resources
- ensure that all commissioning decisions are informed by robust assessment of need
- participate fully in the developing and implementing the National Minimum Dataset across commissioned provision and the new outcome measures
- be transparent about what is invested in local services and the outcomes delivered
- participate fully in developing and implementing the National Minimum dataset across all levels and ensure that arrangements are fully embedded in all contractual arrangements with regard to services for children and young people with mental health and emotional wellbeing needs
- recognise and act on opportunities to influence local and national policy to the benefit of children and young people and their families.

County Councillor Oates reported that this approach aimed to raise Childrens' and Young People's mental health up the agenda.

In terms of adult mental health, County Councillor Oates reported that Staffordshire County Council delivered against the national policy, however they had launched a MindKind strategy, which aimed to develop within Staffordshire County Council a network of mental health first aiders and also aimed to encourage more openness in discussing mental health and to provide further support and sign-posting to mental health services.

A concern was raised by a Member that given the potential extent of mental health issues highlighted, it was important to ensure that there was an acute mental health facility locally. County Councillor Oates reported that the County aimed to focus on the earlier intervention to pre-empt issues before they developed into more acute issues.

County Councillor Oates reported that one of the drivers behind the strategy was to ensure that mental health assessments were undertaken as part of any decision making process in terms of service provision.

The Committee discussed the role of schools and academies and their engagement in mental health activities and MACs and how this varied across Tamworth schools. County Councillor Oates reported that he had been briefed on a scheme, Talent Match Staffordshire, which was aimed to reduce the number of 16 years old who did not either remain in education, go into employment or training (NEETS). This scheme would look to support pupils

at the start of secondary school and a Tamworth Council officer was engaged in this activity which it was expected would help support activities in this area.

58 HEALTHY STAFFORDSHIRE SELECT COMMITTEE - DISTRICT / BOROUGH DIGEST

The Committee welcomed and noted the updates on matters of business relevant to this Committee which were considered by Staffordshire County Council's Healthy Staffordshire Select Committees held on 5 December 2018 and 4 February 2019.

59 2018/19 FORWARD PLAN

The Chair reported that the Forward Plan included two items of relevance to this Committee:

- The MND Charter for Cabinet consideration on 11 April 2019;
- The revised dates for Council consideration of the Allocations Policy. The Chair reported that he would liaise with the Portfolio Holder for Housing Services and Neighbourhoods and relevant Officers to consider the timing for a further review of this matter by this Committee.

60 GP PROVISION UPDATE

The Chair invited Councillor M Oates to update the Committee on the outcome of the GP Provision Working Group. Councillor Oates reminded the Committee that the intention was to identify the differences of service between GP surgeries across Tamworth with the hope of achieving the same services across all GP Surgeries in Tamworth, in particular the differences between larger surgeries, and smaller surgeries.

The Chair reported that following discussions, the working group understood further details regarding the commissioning arrangements for GPs and the fact that GPs were self-employed. The GPs could determine whether to work in groups, and the working group understood that funding for additional services, such as blood testing, ECGs and elderly care clinics, was often linked to the size of the surgeries and number of GPs in the surgeries.

The Chair thanked Councillor M Oates and the working group for its work in this area and noted that the working group did not feel there was any further recommendations which would be appropriate to make at this time.

61 NEW MEMBER SUPPORT

The Chair reported that following the recommendations from the Corporate Scrutiny Committee to Cabinet regarding new member support, it felt appropriate that this Committee also consider areas where Members would recommend further areas of training and / or support, such as in terms of Safeguarding and Equality and Diversity.

The Committee considered that it would be appropriate for both Members and officers to be involved in developing a programme of training and support and that Members from all scrutiny committees could be invited to join a working group on this matter. The Committee agreed to include an item on its Work Plan.

62 HEALTH & WELLBEING SCRUTINY COMMITTEE WORK PLAN

The Committee considered the Work Plan and updated it as follows:

Health and Wellbeing Scrutiny Work Plan

Work Plan 2018 - 2019			
DATE SUBJECT			
4 th April	Update on Staffordshire County Council matters (County Councillor J Oates)		
4th April	Safeguarding Update (Councillor Doyle to attend and Officers)		
4 th April	2019/2020 H&W Scrutiny Work Plan		
4 th April	Member training – working group to be formed with scrutiny committee members and officers		
June	ASB Policy (Joint meeting with IS&G Scrutiny Committee)		
Regular updates	Burton and Derby Hospitals Merger Update		
ТВС	Disabled Facilities Grant		
ТВС	Housing Allocations Policy		
ТВС	Staffordshire Talent Match		
TBC	16-25 year olds Wellbeing in Tamworth – identify specific items from research for consideration		
TBC	Invite First Response to attend – (RK)		
TBC	Midwifery Care (RF to put together a proposal form)		
TBC	Loneliness – Joint Working Group with Corporate Scrutiny - Note that SCC considering Isolation.		
TBC	Discharge to Assess		

Upcoming Health and Wellbeing Scrutiny Committee Meetings	
4th April	

Upcoming Relevant Accountability Sessions/County Council Meetings

Healthy Staffordshire Select Committee – 19 March, 5 April

Chair



Health & Wellbeing Scrutiny Committee

4th April 2019

Report of the Children & Families Safeguarding Officer

SAFEGUARDING CHILDREN AND ADULTS AT RISK OF ABUSE AND NEGLECT EXEMPT INFORMATION

None

PURPOSE

The purpose of the report is to provide a biannual safeguarding update to the Health & Wellbeing Scrutiny Committee.

RECOMMENDATIONS

That Members:

Review the report and raise any questions in relation to the content with the Assistant Director – Partnerships in collaboration with the Portfolio Holder for Communities and Public Health, and thereafter endorse.

EXECUTIVE SUMMARY

Tamworth Borough Council has a legal responsibility to safeguard children and adults with care and support needs from abuse and neglect. The safeguarding children and adults at risk of abuse and neglect policy and procedure provides the framework for safeguarding, and demonstrates the Council's commitment to safeguard children and adults at risk.

Safeguarding is integrated into the day-to-day operations of the Council. The Council responds to all safeguarding concerns raised in line with the safeguarding procedure. Reporting of concerns is fundamental in ensuring that children and adults at risk receive the necessary support to safeguard and promote their welfare.

The following information provides an overview of the number of safeguarding referrals received and an update on the safeguarding work that has taken place since the last update provided to the Committee on the 27th November 2018.

Safeguarding Statistics

This year statistics for January to March 2019 saw an increase in the total number of referrals from the previous year, from 10 to 13 in total where the number of concerns were raised through the Council's reporting procedure, 13 safeguarding concerns were in relation to adults and 6 related to children.

Safeguarding Children and Adults at risk of Abuse and Neglect Policy and Procedure

The safeguarding policy has been updated and is now accessible for all staff and visitors on the staff internet and TBC website

Safeguarding Training

A rolling programme of safeguarding training is in place, Level 1 safeguarding training was updated through the on line e-learning package which all staff have to complete and must be refreshed every three years. A number of safeguarding sessions have taken place for Staff and Councilors to attend which will continue to be a rolling programme.

Face to face sessions delivered to TBC staff 20 attended and it was delivered by Children and Families Safeguarding Officer. Face to face sessions delivered to 13 Councilors by the Children and Families Safeguarding Officer at present with further training to go out in April and May

Taxi Driver Training delivered by Children and Families Safeguarding Officer Two taxi driver safeguarding training sessions for refresher training for taxi drivers are in place 1 took place on 31st January of which 20 attended the session. With a further session scheduled to take place 1st April 2019. The licensing team is responsible for booking drivers and passenger assistants on to sessions and the training is delivered by the Children and Families Safeguarding Officer. We have also produced a taxi guidance leaflet that will complement the training but can also refresh on what was highlighted at the training.

Staffordshire Safeguarding Children Board (SSCB) and Staffordshire & Stokeon-Trent Adult Safeguarding Board (SSASPB)

The District Council Safeguarding Subgroup continues to meet quarterly, sharing good practice and delivering against the business plan. Matters raised at Board level that impact on District Councils are discussed within this forum. The Council has supported the work of the SSCB in relation to the board's main priorities for 2018-2021.

- Children who are vulnerable to sexual abuse;
- Children who are experiencing neglect as a result of parental substance misuse, domestic abuse and parental mental ill health (when all 3 exist together this is known as the toxic trio and are viewed as indicators of increased harm to children)

Adult Safeguarding Board (SSASPB)

SSASPB Tier 2 Individual Organisation audit tool

This is the second time that we have completed this audit which assists the SSASPB to meet its Care Act requirements.....

Under the Care Act 2014 the SSASPB has to:

- i) Establish how it will hold partner agencies to account and gain assurance of the effectiveness of its arrangements and also
- ii) Determine its arrangements for peer review and self-audit.

The audit tool is to be completed every other year and the responses forwarded to the Families First performance support resource so that a composite report may be produced for consideration at the June Executive sub-group and the July Board meeting.

The findings of the bi-annual peer review will be forwarded to the Executive subgroup and Board as above.

Explanation of the RAG rating:

The audit tool has 5 themed groups of standards i.e.

- Leadership, management and governance
- Safe recruitment and Persons in Positions of Trust (PiPOT) management
- Policy and Procedure
- Training and workforce development
- Practice n/a to TBC

The person completing the tool will consider each standard and write the evidence that can be produced to support compliance with the standard selecting a RAG rating commensurate with the level of compliance. Where the RAG rating is anything other than Green, details of the improvement plan must be provided in the box on the right (see below). If it is believed that there can never be evidence to support a Green rating the reasons for this assertion must be included in the same box.

Evidence to support that	Nearly meets ideal	Does not meet ideal	Work to be done to achieve ideal service /
the organisation	service / standard, and	service / standard and no	standard
completely meets ideal	clear improvement plan	clear improvement plan	
service / standard			
	Amber	Red	
Green			

Please see appendix A

Multi-Agency Partnership Working

To effectively safeguard children and adults at risk from abuse and neglect appropriate sharing of information is paramount. Multi-agency partnership working arrangements in Tamworth continue to develop and strengthen. The Tamworth Vulnerability Partnership continues to be well supported by key agencies. The Children and Families Safeguarding Officer attends and records the minutes and follows up any actions at the weekly TVP meeting.

Relevant checks when using 3rd parties through Arts and Events

Effective safeguarding policies and procedures in place despite this being included within the contract monitoring requirements in Pentana. All policies are now uploaded to the system for outdoor events with the Children and Families Safeguarding reviewing the safeguarding policies, we are currently in the process of update information to future customers about safeguarding by either asking that they

supply their own safeguarding policy or that they provide a written safeguarding statement and process along with using the TBC safeguarding handbook.

Suicide Procedure/Guidance

Stafford Borough Council has provided how to deal with threats of suicide from members of the public in a guidance and procedure document for colleagues. We have decided that this is something we would like to adopt in Tamworth and will be looking at making the necessary changes so it fits within our teams here.

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OPTIONS CONSIDERED

This report is prepared at the request of the Portfolio Holder for Communities and Public Health, the only option apart from producing the report, would be to not produce a report.

RESOURCE IMPLICATIONS

There are no immediate financial implications arising from this report. The cost of training and materials will be met from existing budgets.

LEGAL/RISK IMPLICATIONS BACKGROUND

The Safeguarding Children and Adults at Risk of Abuse and Neglect Policy has been risk assessed and no significant risks exist. From a legal perspective the authority is meeting its expectations and requirements in relation to vulnerable children and adults at risk.

SUSTAINABILITY OPTIONS

The policy and staff in this important service will continue to operate locally and in conjunction with partners to sustain the levels of support, training and guidance required.

BACKGROUND INFORMATION

Tamworth Borough Council has both a legal and moral duty to protect vulnerable children and adults at risk from harm. The Children Act 1989 and 2004 along with the associated government statutory guidance sets out our legal responsibilities for protecting children. The Care Act 2014 along with associated government statutory guidance recognises and reinforces that organisations make a significant contribution to adult safeguarding.

Where a member of staff has concerns that a child or an adult with care and support needs, is at risk of, or is suffering abuse or neglect they must report these concerns.

REPORT AUTHOR

Children & Families Safeguarding Officer, Jackie Hodgkinson

Appendices

None at this time





TIER2 Individual Organisation Audit tool

Organisation: Tamworth Borough Council

Responsible Lead: Jo Sands

Person Completing Audit: Jackie Hodgkinson

Date: 25/02/2019

Please note that ratings and evidence should be bespoke to the work undertaken in the Staffordshire and Stoke-on-Trent area wherever possible.

Page Category and Ideal Service/standard	Evidence to support that the organisation completely meets ideal service/standard	Nearly meets ideal service/standard, clear improvement plan	not meet ideal servi ce/st anda rd and no clear impr ove ment plan	Work to be done to achieve ideal service/standar d; or explanation why the agency is unable to complete the standard
1 Leadership, Management and Governance				
1.1 The organisation has a nominated Executive lead for Adult Safeguarding	The Assistant Director – Partnerships is the nominated leafor adult safeguarding within the organisation. The council also has two nominated director level deputy leads for adul safeguarding. Along with the Children and Families safeguarding officer.			
1.2 There is an operational/professional lead for adult safeguarding identified within the organisation that can provide support to staff.	The council has a nominated operational lead — Children & Families Safeguarding Officer — who provides support for staff in relation to adult safeguarding.			

1.3 This is explicitly contained within their role profile or job description	The nominated executive lead and the operational lead have their safeguarding role explicitly detailed within their job role and job description.		
1.4 The organisation has a safeguarding policy to which staff have access	The safeguarding policy is available to all staff.		
1.5 There is recognised and active leadership to safeguard adults in the organisation	This is detailed within the annual governance statement.		
1.6 Safeguarding adults is written into strategic plans within the organisation	Safeguarding and supporting the vulnerable within the loca community is a priority for the council and is written into strategic plans.		
1.7 The organisation demonstrates commitment to the delivery of the strategic priorities of the SSASPB	The council are committed to delivering relevant SSASPB priorities, actions are detailed within the District Subgroup Business Plan		
1.8 The organisation contributes to the SSASPB Annual Report	The council will share appropriate case studies with the SSASPB for inclusion within the annual report		
1.9 The organisation provides appropriate representation both in position in organisation and attendance frequency at those SSASPB meetings it needs to attend	The Partnerships manager at East Staffs attends appropriate SSASPB meetings, and feeds back as appropriate to the districts.		
1.10 Commissioners of services have appropriate arrangements In place to ensure oversight of safeguarding governance arrangements with organisations they commission service from	Safeguarding requirements are included in appropriate commissioned services		
1.11 The organisation can demonstrate that it has a quality auditing system that checks policy compliance and the learning informs practice, performance and policies.	Internal audit regularly monitor compliance, all audit recommendations are recorded and actioned		

2 Safe Recruitment and PiPOT Management

2.1 Robust recruitment and employment practices are adopted which include taking up references and, where applicable ,DBS checks - including when changing roles within the organisation	Safer recruitment procedures are in place and detailed within the safeguarding policy. Two references are taken where possible and where applicable DBS checks carried o		
2.2 There is a clear standard of conduct setting clear standards for relationships between people in positions of trust and service users/adults at risk.	Information on safe working practices are detailed within the safeguarding policy		
2.3 There are mechanisms for service users/adults at risk or their representative to make a complaint about the conduct of a member of staff	The council have a complaints procedure in place		
2.4 There is a whistle-blowing policy to enable staff to raise concerns outside their own chain of line management	The council have a whistleblowing policy in place		

2.5 There is a clear allegations management process through which abuse and neglect by staff is investigated thoroughly	This process is detailed within the safeguarding policy		
2.6. There is a process for reviewing any concern made about any of the organisation's services.	The organisation has internal mechanism to review concern		
2.7 There is evidence to indicate that lessons are learned from Person in Position of Trust(PiPOT) investigations and improvements made to policy and operational practice	There are a limited number PiPOT roles within the council		
3 Policy and Procedure			
3.1 There is an easily accessible policy/procedure which states the importance of taking ownership and responding to allegations of adult abuse or neglect.	Policy is accessible to all staff with a summary booklet available for staff		
3.2 The above policy acknowledges and signposts to the Board's policies and procedures.	The links to SSASPB policy and procedures is included. The policy has been endorsed by the SSASPB		
3.3 The policy has a review schedule which is monitored.	The policy is reviewed yearly		
3.4 The individual organisation policy/procedures clearly outlines	Roles and responsibilities are detailed in the policy		

3.6 Ne organisation has a multi-agency Information sharing Policy/procedure or uses the SSASPB one.

3.7 The organisation makes the Board's Escalation Policy accessible to those staff who need to use it.

3.5 ult safeguarding is cross-referenced in other relevant policies.

3.8 The organisation has a Mental Capacity Act/DoLS Policy

3.9 This policy is easily accessible to anyone who needs to refer to it

3.10 The MCA documentation is available to staff who need to use it 3.11 The organisation audits the use of the MCA by its staff

Safeguarding is cross referenced in other relevant policies e.g. One Staffordshire Protocol, GDPR, corporate ASB policy and through MARAC

The organisation has signed up to the One Stafford information sharing protocol

Designated officer is aware of the escalation policy

Reference to MCA legislation is included within the safeguarding policy as additional reading the organisation does not have a standalone MCA policy

N/A Status remains unchanged

N/A Status remains unchanged N/A Status remains unchanged

4 Training and Workforce Development

4.1 The organisation has a training plan which ensures that staff and
volunteers at all levels have appropriate knowledge of safeguarding and
competencies in relation to their role.

The organisation has a safeguarding training plan and staff a trained in relation to their role and level of contact with adults at risk

4.2 There is a mechanism by which to report the number of staff trained to the SSASPB by quarter or (at a minimum) at the end of the financial year.	This is something that could be requested if asked by the SSASPB. We also have in-house records of staff who have been trained.	
4.3 Adult safeguarding awareness training is made mandatory to those required to receive it, this is clearly stated within the organisation.	Safeguarding training is mandatory for those required to receive it and this is clearly stated in the safeguarding policy	
4.4 MCA awareness training is available to those staff needing it (as identified in the organisations training plan).		Identification of staff requiring MCA training needs to be undertaken by managers and access to appropriate cours available. Staff would be sign posted to receive this training a it is not delivered inhouse
4.5 Staff have access to supervision for safeguarding concerns.	Designated officers are available for staff to discuss safeguarding concerns	
4.6 aff within the organisation who carry out safeguarding enquiries have appropriate training and competencies.	N/A Status remains unchanged	
5 Practice		
5.1 The organisation can demonstrate that it promotes a person centred approach to adult safeguarding.	N/A Status Changed	Incorporation of making safeguarding personal into safeguarding policy and training
5.2 The organisation can demonstrate that it includes service users/victims of abuse and neglect in decision making where appropriate.	N/A Status Changed	Where appropriate staff encouraged to include services users or victims of abuse views and wishes so this can

		support with decision making
5.3 The organisation can demonstrate that it invites service users to participate in reviews about their care and support where appropriate, and are kept updated.	N/A Status Unchanged	
5.4 Can the organisation demonstrate that it appropriately uses advocacy as part of any safeguarding enquiries or calls for the services from an appropriate adult (Police)	N/A Status Unchanged	
5.5 Can the organisation demonstrate that the service user is central to the safeguarding plan and involved in the review process?	N/A Status Unchanged	
5.6 The organisation has clear protocols for managing service user's disengagement from support	N/A Status Unchanged	
5.7 The organisation seeks feedback from service users/ adults at risk	N/A Status Unchanged	

Agenda Item 9

Healthy Staffordshire Select Committee – 19 March 2019 District/Borough Digest

Under the Health Scrutiny Code of Joint Working with District and Borough Councils, Authorities have undertaken to keep relevant Partners informed of their consideration of health matters having regard to the general working principle of co-operation and the need to ensure a co-ordinated Staffordshire approach. Therefore, the following is a summary of the business transacted at the meeting of the Healthy Staffordshire Select Committee held on 19 March 2019 - link to Agenda and reports pack:

http://moderngov.staffordshire.gov.uk/ieListDocuments.aspx?Cld=871&Mld=8819

Agenda Item		ict(s)/Borou	ıgh(s)
Proposal for the Provision of an integrated stroke service at University Hospitals of Derby and Burton	All	Districts	and
The Select Committee considered the proposal to integrate the stroke pathway at the University Hospitals of Burton	Boro	ughs	
and Derby.			
The proposal was for the hyper-acute stroke medicine (first 72 hours) to be delivered via a centralised service in			
Derby, and a single referral point for Transient Ischemic Attack (TIA). Patients would be stepped back to Burton for			
acute care, rehabilitation and discharge closer to home.			
The case for change was explained in the report and was in line with national direction and best practice.			
Members asked questions particularly on travel times and capacity at Derby.			
Be Committee suggested a consultation period of 8 weeks concentrating particularly on transport times.			
0			
N	All	Districts	and
Cancer Services and the STP Cancer Transformation Plan 2019/20	Boro	ughs	
At a previous meeting of the Committee Members asked for information on the STP Cancer transformation plan and			
how this will improve the cancer services. The Cancer and End of Life service programme came to an end in 2017			
when no bidder was able to meet the minimum criteria set by the programme. Following this the CCGs agreed an			
ambitious plan to improve cancer services and this is now part of the STP planned care work stream.			
The report outlined the key priorities and summarised current performance and ways to improve.			
Members asked questions on recruitment of specialist staff, early diagnosis, performance on targets and pathway. The Committee asked for more detailed information on performance at a local level.			
Progress update on Palliative and End of Life Care	All	Districts	and
The Staffordshire and Stoke on Trent End of Life procurement of services ceased in June 2017. Following this a		ughs	anu
Programme Board was established to take forward the Palliative and End of Life priorities. National guidance was	Boio	ugris	
used to develop the work stream alongside the West Midlands Clinical Senate blueprint.			
The main areas of work undertaken were:			
Palliative Care registers			
1 amative date registers			
Electronic Palliative Care Co-ordination systems			

Admission avoidance	
Care homes	
Children and young people	
Voluntary sector engagement	
During the debate, the Committee gained information on the procurement plans to co-ordinate information systems and the how the Integrated Care Teams would work together to improve experience of patients The information was noted.	
 Excluded and Restricted Procedures (Including Hearing Aids) The CCGs need to priorities resources and align commissioned services across the six Staffordshire and Stoke on Trent CCGs. These services included: Assisted conception 	All Districts and Boroughs
→ Hearing aids for noncomplex hearing loss	
ໝັ້ • Male and Female sterilisation	
 N ● Breast Augmentation and reconstruction 	
Removal of excess skin following significant weight loss.	
The CCG proposed a formal consultation for these areas which would start in August 2019 for 12 week period. The Committee felt that it would have useful for the report to contain information on which areas received what services so that they could establish the extent of the inequality. The Select Committee felt that hearing aids should not be on the list as they were an integral to keeping people healthy.	

The next meeting will be held on Monday 10 June 2019.

Health and Wellbeing Scrutiny Work Plan

Work Plan 2018 - 2019	
DATE	SUBJECT
4 th April	Update on Staffordshire County Council matters (Staffordshire CC – County Councillor J Oates)
4th April	Safeguarding Update (Councillor Doyle to attend and Officers)
4 th April	2019/2020 H&W Scrutiny Work Plan
June	ASB Policy (Joint meeting with IS&G Scrutiny Committee)
Regular updates	Burton and Derby Hospitals Merger Update
ТВС	Disabled Facilities Grant
ТВС	Housing Allocations Policy
TBC	Staffordshire Talent Match
TBC	16-25 year olds Wellbeing in Tamworth – identify specific items from research for consideration
ТВС	Invite First Response to attend – (RK)
TBC	Midwifery Care (RF to put together a proposal form)
ТВС	Loneliness – Joint Working Group with Corporate Scrutiny. Note that SCC considering Isolation.
TBC	Discharge to Assess

Upcoming Health and Wellbeing Scrutiny Committee Meetings

Upcoming Relevant Accountability Sessions/County Council Meetings

Healthy Staffordshire Select Committee – 5 April