

ADULT AND COMMUNITY SERVICES SCRUTINY FORUM AGENDA



17 September 2012

at 1.00 p.m.

in Committee Room B, Civic Centre, Hartlepool.

MEMBERS: ADULT AND COMMUNITY SERVICES SCRUTINY FORUM:

Councillors Beck, A Lilley, Loynes, Richardson, Shields, Sirs and Wilcox.

- 1. APOLOGIES FOR ABSENCE**
- 2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS**
- 3. MINUTES**
 - 3.1 To confirm the minutes of the meeting held on 30 July 2012.
- 4. RESPONSES FROM THE COUNCIL, THE EXECUTIVE OR COMMITTEES OF THE COUNCIL TO FINAL REPORTS OF THIS FORUM**

No items
- 5. CONSIDERATION OF REQUEST FOR SCRUTINY REVIEWS REFERRED VIA SCRUTINY CO-ORDINATING COMMITTEE**

No items

6. CONSIDERATION OF PROGRESS REPORTS / BUDGET AND POLICY FRAMEWORK DOCUMENTS

6.1 Budget / Collaboration Proposals:-

- (a) Covering Report – Scrutiny Support Officer;
- (b) Presentation on Adult Social Care Front Line Services Budget Proposals – *Assistant Director for Adult Social Care*; and
- (c) Presentation on Community Services Budget Proposals – *Assistant Director for Community Services*

7. ITEMS FOR DISCUSSION

7.1 Care Quality Commission:-

- (a) Covering Report – *Scrutiny Support Officer*; and
- (b) Verbal Evidence – *Acting Compliance Manager (Tees Valley) at CQC*

Scrutiny Investigation into JSNA Topic of Older People

7.2 Setting the Scene:-

- (a) Covering Report – *Scrutiny Support Officer*; and
- (b) Presentation – *Assistant Director for Adult Social Care and Head of Services*

Six Monthly Monitoring Report

7.3 Six Monthly Monitoring of Agreed Adult and Community Services Scrutiny Forum's Recommendations – *Scrutiny Support Officer*

8. ISSUES IDENTIFIED FROM FORWARD PLAN

No items

9. ANY OTHER ITEMS WHICH THE CHAIRMAN CONSIDERS ARE URGENT

FOR INFORMATION

(i) Date of Next Meeting: 29 October, 2012, commencing at 1.00 p.m. in Committee Room B at the Civic Centre.

ADULT AND COMMUNITY SERVICES SCRUTINY FORUM

MINUTES

30 July 2012

The meeting commenced at 1.00 pm in the Civic Centre, Hartlepool

Present:

Councillor: Carl Richardson (In the Chair)

Councillors: Paul Beck, Alison Lilley, Brenda Loynes and Linda Shields

In accordance with Council Procedure Rule 4.2 (ii), Councillor Sylvia Tempest was in attendance as substitute for Councillor Kaylee Sirs.

Officers: Jill Harrison, Assistant Director, Adult Social Care
James Walsh, Scrutiny Support Officer
Angela Armstrong, Principal Democratic Services Officer

1. Welcome

The Chair welcomed everyone to the first meeting in the current municipal year of the Adult and Community Services Scrutiny Forum.

2. Apologies for Absence

Apologies for absence were received from Councillors Kaylee Sirs and Angie Wilcox.

3. Declarations of interest by Members

None.

4. Minutes of the meeting held on 19 March 2012

Confirmed.

5. Responses from the Council, the Executive or Committees of the Council to Final Reports of this Forum – Portfolio Holder’s Response to the investigation into Early Intervention and Re-ablement Services *(Joint report of the Assistant Director, Adult Social Care and Portfolio Holder for Adult and Public Health Services)*

The report provided Members of the Adult and Community Services Scrutiny Forum with feedback on the recommendations from the investigation into Early Intervention and Re-ablement Services, which was reported to Cabinet on 30 April 2012. Following consideration of the Final Report, Cabinet approved the recommendations in their entirety. Details of the recommendations and proposed actions to be taken following Cabinet approval were included in the Action Plan attached at Appendix A.

A Member referred to the action to continue to engage with healthcare professionals on their development of an early identification process and the vote of no confidence in the Board of the North Tees and Hartlepool NHS Trust recently taken by Council. The Assistant Director indicated that this action was about engaging with the Clinical commissioning Group and also with operational staff such as discharge nurses and social workers to ensure a joint approach was undertaken to prevent more hospital admissions and identify issues earlier. Members were keen to ensure that the spirit of the vote of no confidence was upheld.

Clarification was sought on the action to develop a business case on the options and resource implications for the recruitment and retention of social care apprentices. The Assistant Director confirmed this action was currently being developed in conjunction with officers in Economic Development so that different funding streams and models could be explored. An update will be provided to the Forum through the six monthly update on actions once the financial implications and possible funding streams had been identified.

Recommended

- (i) The proposed actions detailed within the Action Plan were noted.
- (ii) That updates be provided to future meetings on the progress with the actions contained within the Action Plan.

6. Consideration of request for scrutiny reviews referred via Scrutiny Co-ordinating Committee

None.

7. Consideration of progress reports/budget and policy framework documents

None

8. The Role of the Adult and Community Services Scrutiny Forum *(Scrutiny Support Officer)*

The Scrutiny Support Officer submitted a report for Members' information which set out the role and remit of Scrutiny in general and specifically the Adult and Community Services Scrutiny Forum. Details of the scheduled meetings for 2012/13 were also set out.

Recommended

The report was noted.

9. Adult and Community Services Scrutiny Forum – Work Programme for 2012/13 *(Scrutiny Support Officer)*

The Scrutiny Support Officer reported that at the meeting of the Scrutiny Co-ordinating Committee on 15 June 2012, the Adult and Community Services Scrutiny Forum's Work Programme had been agreed for 2012/13 as follows:-

Forum Investigations

JSNA Work Programme Item

- i) Older People

Budget and Policy Framework Items

- i) Corporate and Departmental Plans 2013/14
- ii) Budget Consultation

Budget/Collaboration Items

- i) Adult Social Care Front Line Services – Reduction in front line services provision, including Direct Care & Support, Employment Support, Occupational Therapy and Social Work teams.
- ii) Community Services – Remove subsidy to Carlton Outdoor Centre and cease biennial maritime festival

Members welcomed the approach to approval of the work programme items via Scrutiny Co-ordinating Committee which allowed Scrutiny Members the opportunity to contribute ideas to other scrutiny forums.

Recommended

That the Adult and Community Services Scrutiny Forum's Work Programme, as approved by Scrutiny Co-ordinating Committee, at its meeting on 15 June 2012, be noted.

10. Scrutiny Investigation into Older People – Scoping Report *(Scrutiny Support Officer)*

The Scrutiny Support Officer presented a scoping report for the Forum's investigation into Older People. The report included background to the choice of topic including the need to identify specific elements of the Joint Strategic Needs Assessment (JSNA) and budget/collaboration programme and the adoption of the Marmot principles as an overarching framework.

The aim of Investigation

To strategically evaluate and contribute towards the development of the 'Older People' topic within Hartlepool Joint Strategic Needs Assessment, whilst reflecting (where possible/appropriate) on the Marmot principle to 'Enabling All Children, Young People and Adults to Maximise their Capabilities and have control over their lives'.

Proposed Terms of Reference

- i) To gather evidence in relation to the following:-
 - (a) What are the key issues?
 - (b) Who is at risk and why?
 - (c) What is the level of need?
 - (d) What services are currently provided?
 - (e) What is the projected level of need / service use?
 - (f) What evidence is there for effective intervention?
 - (g) What do people say?
 - (h) What needs might be unmet?
 - (i) What additional needs assessment is required?
 - (j) What are the recommendations for commissioning?

- (ii) To formulate a view in relation to:-
 - (a) the needs of Hartlepool residents; and
 - (b) the current level and quality of service provision to meet those needs.

- (iii) To make recommendations to inform the development and delivery of the health & wellbeing and commissioning strategies.

Potential Ares of Enquiry/Sources of Evidence

- (a) Member of Parliament for Hartlepool;
- (b) Elected Mayor;
- (c) Cabinet Member with Portfolio Holder for Adult and Public Health Services;
- (d) Director and / or Appropriate Officers of Child and Adult Services Department;
- (e) Director for Public Health;
- (f) Local residents;
- (g) Representatives of minority communities of interest or heritage;
- (h) Ward Councillors; and
- (i) Neighbourhood Forums.

It was suggested that the Forum may also wish to refer to a variety of documentary/internet sources such as:

- (a) Hartlepool JSNA – Available online at <http://www.teesjsna.org.uk/hartlepool>
- (b) The Marmot Review – Available online at <http://www.instituteofhealthequity.org/projects/fair-society-healthy-lives-the-mamot-review>

The proposed timetable for the scrutiny investigation was detailed within the report.

During the discussions that followed it was suggested that respective union representatives should be included within the potential areas of enquiry/sources of evidence.

Recommended

The proposed remit for the investigation, terms of reference were agreed with the inclusion of the respective union representatives to be included within the potential areas of enquiry/sources of evidence.

11. Forward Plan

The report provided Members of the Adult and Community Services Scrutiny Forum to consider whether any item within the Executive's Forward Plan should be considered by this Forum.

Recommended

The Forward Plan was noted.

12. Any Other Items which the Chairman Considers are Urgent

A discussion ensued on the timing of the meetings to encourage public participation. It was proposed that the timing schedule as agreed for the municipal year 2012/13 remain as is, but with the option of scheduling additional meetings at appropriate times as and when necessary. In relation to the investigation into Older People, the Assistant Director indicated that there may be an opportunity to co-ordinate meetings of the Champions of Older Lifestyles and 50+ Forum with the Scrutiny Forum and therefore encourage attendance and participation.

Recommended

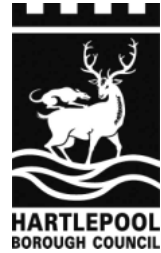
Members' comments were noted.

The meeting concluded at 1.22 pm

CHAIR

ADULT AND COMMUNITY SERVICES SCRUTINY FORUM

17 September 2012



Report of: Scrutiny Support Officer

Subject: BUDGET / COLLABORATION PROPOSALS –
COVERING REPORT

1. PURPOSE OF REPORT

- 1.1 To inform Members that the Assistant Director for Adult Social Care and the Assistant Director for Community Services have been invited to this meeting to provide information in relation to Budget / Collaboration Proposals for 2013/14.

2. BACKGROUND INFORMATION

- 2.1 Members will recall that Members of the Scrutiny Co-ordinating Committee, at their meeting of 15 June 2012, delegated responsibility to the Chairs of the Scrutiny Forums to finalise Work Programmes for their respective Forums, identifying specific elements of the proposed budget / collaboration programme. It was agreed that the Adult and Community Services Scrutiny Forum would focus on the following budget / collaboration items as reported at the Adult and Community Services Scrutiny Forum meeting on 30 July 2012:-

- i) **Adult Social Care Front Line Services** – Reduction in front line service provision, including Direct Care & Support, Employment Support, Occupational Therapy and Social Work teams; and
- ii) **Community Services** – Remove subsidy to Carlton Outdoor Centre and cease biennial maritime festival (only to be considered should timescales & capacity allow).

- 2.2 Consequently the Assistant Director for Adult Social Care and the Assistant Director for Community Services will be in attendance at today's meeting to deliver presentations in relation to the budget area outlined in paragraph 2.1.

- 2.3 Members are asked to note that comments made by the Forum in relation to the budget / collaboration items will form part of a report to be presented to Cabinet on 17 December 2012.

3. RECOMMENDATION

- 3.1 It is recommended that the Members of the Adult and Community Services Scrutiny Forum consider the information provided and seek clarification on any relevant issues where required.

Contact Officer:- James Walsh – Scrutiny Support Officer
Chief Executive's Department – Corporate Strategy
Hartlepool Borough Council
Tel:- 01429 523647
E-mail:- james.walsh@hartlepool.gov.uk

BACKGROUND PAPERS

The following background papers were used in the preparation of this report:-

- (i) Minutes of the Scrutiny Co-ordinating Committee meeting held on 15 June 2012.
- (ii) Minutes of the Adult and Community Services Scrutiny Forum meeting held on 30 July 2012.

ADULT AND COMMUNITY SERVICES SCRUTINY FORUM

17 September 2012



Report of: Scrutiny Support Officer

Subject: CARE QUALITY COMMISSION

1. PURPOSE OF THE REPORT

- 1.1 To advise Members that the Acting Compliance Manager (Tees Valley) from the Care Quality Commission will be in attendance at today's meeting to provide information of the role of the Care Quality Commission in the assessment of Health and Adult Social Care.

2. BACKGROUND INFORMATION

- 2.1 In April 2009 the Healthcare Commission, the Mental Health Act Commission and the Commission for Social Care Inspection were replaced by the Care Quality Commission (CQC). In September 2011 CQC produced the document 'A guide for overview and scrutiny committees for health and social care' (attached as **Appendix A**), highlighting how Overview and Scrutiny Committees can work with CQC.
- 2.2 Subsequently, the Acting Compliance Manager (Tees Valley) has agreed to attend today's meeting, providing information about the role CQC undertake and how the Forum can work with CQC throughout the year.

3. RECOMMENDATION

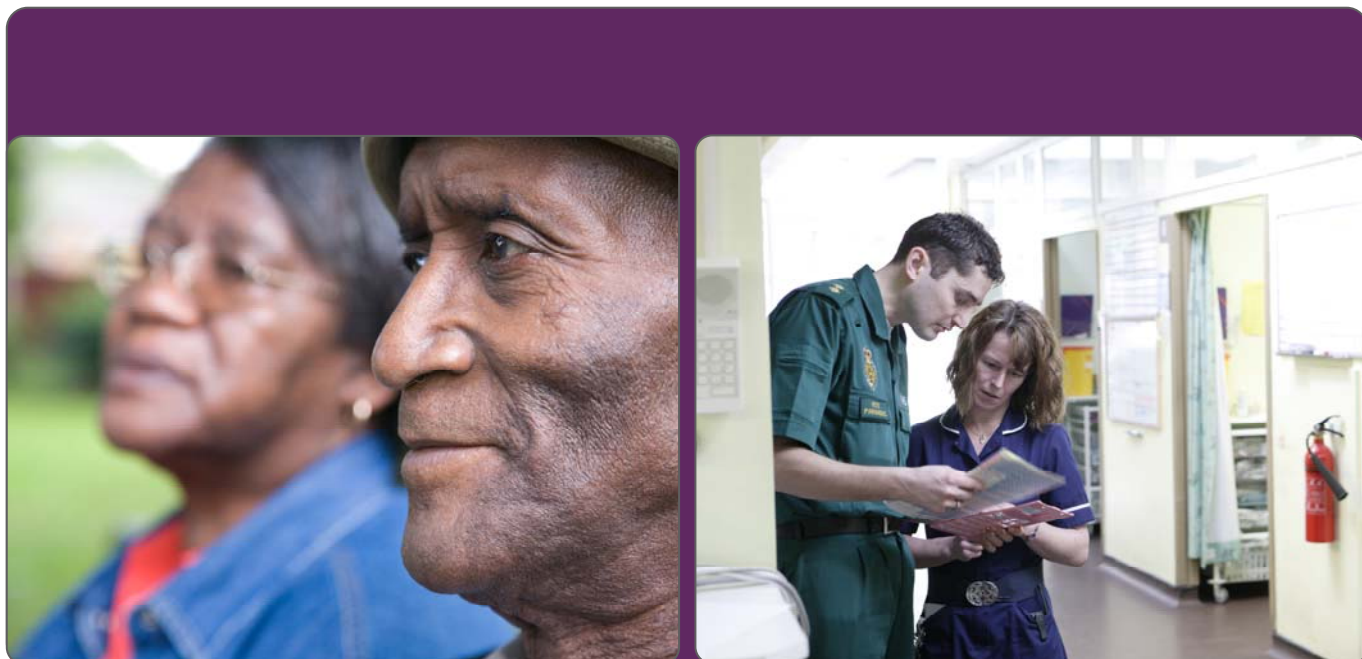
- 3.1 That Members note the content of this report and consider the information provided by the Acting Compliance Manager (Tees Valley), seeking clarification on any relevant issues where required.

Contact Officer:- James Walsh – Scrutiny Support Officer
Chief Executive's Department - Corporate Strategy
Hartlepool Borough Council
Tel: 01429 523647
Email: james.walsh@hartlepool.gov.uk

BACKGROUND PAPERS

The following background paper was used in the preparation of this report:-

- (i) Care Quality Commission (2011) *A guide for overview and scrutiny committees for health and social care*, Available at:
http://archive.cqc.org.uk/_db/_documents/A_guide_for_OSCs.pdf [Accessed 6 September 2012]



A guide for overview and scrutiny committees for health and social care

How your committee can work with the
Care Quality Commission

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1. Introduction

This is a guide for locally elected councillors and local authority officers involved in the scrutiny of health and social care who want to know more about how their scrutiny committee can work with the Care Quality Commission (CQC). We are the independent regulator of health and adult social care services in England. This guide tells you more about CQC and what we do. It explains what your scrutiny committee can expect from us as we work together locally to improve care. It explains what information you can share with us to help us check on services, and how you can use the information we hold to help your scrutiny committee.

The guide has been written by CQC with support from the Centre for Public Scrutiny, and some local authority officers and councillors working together. We would like to thank those involved for their effort and enthusiasm. Examples from their work have been used in the guide.

We will carry on working with all scrutiny committees in England during 2011/2012, building stronger working relationships with more committees and exploring how to work with elected councillors under new scrutiny arrangements that may develop.

We would like to hear from more scrutiny committees and to use more of the information councillors hold about people's views and experiences of their care. We are especially interested to hear about people's experiences of social care services as well as health care. We hope the examples in this guide encourage all scrutiny committees to share information with CQC to help us work together to improve care.

For more information about our work with scrutiny committees, please go to www.cqc.org.uk/localvoices. For information about HealthWatch go to: www.cqc.org.uk/aboutcqc/whatwedo/improvinghealthandsocialcare/healthwatch.cfm

You can also read *A guide for local councillors: Working with the Care Quality Commission* available at www.cqc.org.uk/localvoices

2. About the Care Quality Commission

We are the Care Quality Commission, the independent regulator of healthcare and adult social care services in England. We check whether care services meet essential standards of quality and safety, and we also protect the interests of vulnerable people, including those whose rights are restricted under the Mental Health Act.

Find out more about us at www.cqc.org.uk

Which services do we check?

We check on these types of services:

- Providers of medical treatment to people of all ages, including treatment provided in hospitals, by ambulance services and by mental health services.
- Providers of care homes for people over 18 who need help to maintain their independence and wellbeing. This includes nursing homes. Care homes can provide residential care for the following:
 - People with long- or short-term health conditions
 - Disabled people and people with learning disabilities
 - Older people
 - People with drug or alcohol problems.
- Agencies that provide care, treatment and support to people living in their own homes to help them maintain their independence and wellbeing.
- Providers of services for people whose rights are restricted under the Mental Health Act.
- We started to register and check on dental services (in the community) and independent ambulance services from April 2011. We will register GP out-of-hours services from April 2012. Subject to Parliament, we will now register primary medical services including walk-in centres and GP services from April 2013.

What standards do we check on?

The Health and Social Care Act 2008 requires providers of all regulated care services to meet government standards of quality and safety – the standards the government says anyone should expect whenever or wherever they receive care. These standards cover things like cleanliness, dignity, safety and staffing.

We register providers if they meet the standards, we check whether or not they continue to do so and we take action if standards aren't being met. Our assessments are based on people's experiences of care and the impact it has on their health and wellbeing, as well as on whether or not the right systems and processes are in place.

We put the views, experiences, health and wellbeing of people who use services at the centre of our work.

You can read our guidance about the essential standards and full details of the outcomes we look for at www.cqcguidanceaboutcompliance.org.uk and at www.cqc.org.uk/_db/_documents/Quick_guide_to_the_essential_standards.doc

We have also produced guides for the public explaining what you can expect from your care which can be found at:

www.cqc.org.uk/usingcareservices/essentialstandardsqualityandsafety.cfm

You can expect any of the health or social care services we check on to meet the following essential standards:

You can expect to be involved and told what's happening at every stage of your care

- You will always be involved in discussions about your care and treatment, and your privacy and dignity will be respected by all staff.
- You will be given opportunities, encouragement and support to help you live as independently as possible.
- Before you receive any examination, care treatment or support you will be asked whether or not you agree to it.

You can expect care, treatment and support that meets your needs

- Your personal needs will be assessed to make sure you get safe and appropriate care that supports your rights.
- You get the treatment that you and your health or care professional agree will make a difference to your health and wellbeing.
- You will get the food and drink you need to meet your dietary needs.
- If you have more than one care provider, or if you are moved between services, you will get coordinated care.

You can also expect your needs to be met in relation to:

- Your cultural background and the language you speak
- Your sex (gender)
- Your disability
- Your age
- Your sexual orientation (whether you are a lesbian, gay, bisexual or heterosexual person)
- Your religion or belief
- Your gender identity, if you are a transsexual person
- Your needs if you are pregnant or have recently had a baby.

You can expect to be safe

- You will be protected from abuse or the risk of abuse, and staff will respect your human rights.

- You will get the medicines you need, when you need them, and in a safe way.
- You will be cared for in a safe and accessible place.
- You will not be harmed by unsafe or unsuitable equipment.
- You will be cared for in a clean environment where you are protected from infection.

You can expect to be cared for by qualified staff with the right skills to do their jobs properly

- Your health and welfare needs are met by staff who have the knowledge, skills and experience needed.
- There will always be enough members of staff available to keep you safe and meet your needs.
- You will be looked after by staff who are well managed and have the chance to develop and improve their skills.

You can expect your care provider to routinely check the quality of its services

- Your care provider will monitor the quality of its services to make sure you are safe.
- Your personal records, including medical records, will be accurate and kept safe and confidential.
- You, or someone acting on your behalf, can complain and will be listened to. Your complaint will be acted upon properly.

How we carry out our checks

Under new proposals, we will inspect all adult social care, independent healthcare services, and most NHS hospitals at least once a year. (By NHS hospitals we mean all NHS acute hospitals and all NHS ambulance trusts. We inspect at least one type of service in all other trusts). We will inspect dental services at least once every two years. We check on services more frequently where there are concerns that people may be getting poor care. We identify these concerns by sharing information with a wide variety of organisations, by listening to the public, local groups, care staff and whistleblowers, and by monitoring data. We build a profile of each service that is updated whenever new information arrives. This helps our inspectors to decide where there is a risk that people could be experiencing poor care. The information comes from different sources, including:

- People who use services, families and carers
- LINKs (local involvement networks)
- Overview and scrutiny committees for health and/or social care
- Foundation trust councils of governors
- Other voluntary and community groups
- Other regulatory organisations and the NHS Information Centre

- Other organisations such as commissioners of care (like councils) and the health and local government ombudsman
- Staff and other professionals
- CQC inspectors.

Feedback from people who use services is very important to us. We treat it as seriously as we do other forms of information.

When we decide that there is a risk of poor care, we assess whether or not the service is failing to meet one or more of the essential standards. We review the information we hold and we ask the people running the service to prove that it is meeting the standards. We may conduct further visits to the service to observe how care is delivered, talk to the people who use the service and to staff, and to check the provider's records if necessary.

If we judge that services are not meeting essential standards we use our powers to require improvements. We follow up to make sure the improvements are made and we hold services to account if they don't do so. If we judge that people's health, wellbeing and safety are at risk we take swift action to protect them.

Once we have reviewed a service we publish our findings as quickly as possible. Our information can help people choose a service or tell them about standards of care at a local service. We update our website when there are changes to report about checks, improvements or concerns.

What we do if a service doesn't meet the essential standards

If standards aren't being met, we require improvements within a set timescale. The service must then send us an action plan telling us how it will make these improvements.

If the service does not improve, or we have serious concerns about the health and safety of people who use it, we have a range of enforcement powers we can use including fines, warnings, restrictions to the way the service is provided, suspension or cancellation of its licence to operate, and prosecution of those providing the service.

When we propose to use our enforcement powers, the service has 28 days to challenge us before we can make our decision public. However, if we believe there is a serious, immediate threat to people's health and safety, we can act immediately to restrict, suspend or stop the service from being provided and we can make our decision public as soon as we do so.

3. What your scrutiny committee can expect from CQC?

This section sets out how our staff aim to work with all scrutiny committees for health and social care across the country. If the relationship between CQC and your scrutiny committee is still developing, we will gradually introduce the steps set out below.

Regular contact with CQC staff

Your scrutiny committee chair and lead officer (if you have one) can expect to be given a named local CQC contact person and to be informed if this person changes. You will have contact with your local CQC manager or inspector every three months either by phone, email or a meeting. We may have more frequent contact than this if you have shared information with us about local services and we need to discuss this with your committee. When we make contact with your committee, CQC staff can:

- Explain how we check on services and promote the essential standards of quality and safety to your committee.
- Share with your chair, our confidential programme of reviews over the coming six months (without dates), and any current improvement or enforcement actions we are taking that can be made public. **If your chair or committee prefers, we will only share information that is already in the public domain.**
- Find out about your committee's latest work programme and any responses you are making to NHS consultations.
- Hear from your committee about the issues/concerns local people are raising about the health and social care services in the area. These may come from your scrutiny reviews, public meetings, feedback from your members and so on.
- Give you feedback about how we have used any of the information your committee has already shared with us.

How we work with your committee during a review of a service

At the start of a CQC service review we check our records to see whether your committee has recently submitted information to us about the service at any of its locations. We may then contact the committee chair and lead officer (if there is one) by phone or email to let you know about the review and the timescale. We will usually do this where:

- Your committee has raised concerns about the service provider, or
- The service provider is included in your work programme, or
- There are gaps in our knowledge about people's views and experiences of the service provider, that your committee may help us fill.

We will invite your committee to give us any new information about the service. We may encourage you to make contact with neighbouring scrutiny committees if you need to coordinate providing information for CQC.

At each contact/meeting with your committee, we will identify with you any actions you intend to take as a result of our reviews. For example, further evidence-gathering

about particular service providers or requests for information. This will help us coordinate our activities better.

How we work with your committee when we take enforcement action

We will aim to let your scrutiny committee know about an enforcement action we have taken as soon as it is made public. This is when the representations and appeals process that service providers can use is also ended. For example, we will aim to share press releases with you as soon as we can. We understand that this is particularly important where your committee has also been seeking local improvements to services from the provider concerned.

We will be interested to know whether your committee plans to take action as a result of our enforcement action, and will work with you to coordinate this with further CQC activity.

How we give feedback to your committee

We will let you know we have received any information that your committee sends us between our regular contacts or meetings. If your committee sends information to us via the CQC webform, you will receive an automatic acknowledgement (see page 11). At our regular meetings/contact with you, we will aim to:

- Give you verbal feedback about how we have used any information you have shared with us.
- Highlight the findings and outcomes of relevant reviews of providers.
- Make sure your committee has a copy of the relevant compliance reports.

Our approach to sharing information that is not yet public or is confidential

We can tell your chair and lead officer (if you have one) about the programme of reviews of services we expect to carry out over the coming six months. We will not tell you the dates for these reviews or whether we will be visiting a service as part of the review. It is very important that we keep our programme of unannounced visits confidential. The public have told us that this is one of the most important things we do. We expect committee chairs and lead officers to respect this information and not to share it with service providers or other groups who may make it public. **If your chair or committee does not wish CQC to share this information with you, please discuss this with your local CQC contact.**

We are unable to share enforcement action we are taking while a service provider has the chance to appeal against this action. Once the appeal period is over, the enforcement action can be made public and shared with the committee.

CQC will not share confidential personal information with scrutiny committees. Similarly, we would not expect a committee to share information with us that identifies individuals or their families, unless this information comes from the individual themselves, someone has agreed that their information can be shared with CQC or someone has asked a committee to pass the information to CQC.

4. Sharing information with CQC about local services

We hope your scrutiny committee will share information with us about people's views and experiences of local services, and let us know what you are doing to improve care in your area. It will help us if you can:

- Keep in contact with our local CQC staff.
- Share any information with us if you think it helps us check on the essential standards.
- Share information with us about any of the services we check on – adult social care, health services, dentists and so on.
- Let us know if the committee chair or contact officer changes so that we contact the right person.

Your committee can provide information it already holds, such as:

- Formal reports/reviews of local health or social care services.
- Information gathered to inform a review.
- Your committee's workplan.
- Comments gathered at public events about local health or social care services.
- Contact from members of the public.
- Information on local concerns or emerging issues.
- Local surveys and so on.

You may also wish to gather additional information for one of our reviews of a service provider. For example:

- Inviting scrutiny members to contribute information directly to the committee chair to be shared with CQC.
- Holding a meeting or using an existing committee or public meeting to gather information about a service.

How to share your information with CQC

You can share information with CQC in three ways:

1. Through our website, where there is an online feedback form for scrutiny committees, LINKs and other groups at www.cqc.org.uk/localvoices. You can complete the form in your own words and you can also attach your reports to the form. It helps to highlight which sections of the report tell us about the quality or safety of care.
2. Through your local CQC contact. You can share information with them by email, phone or face-to-face when you meet them. It is helpful to copy information that you send through the webform to your local CQC contact so they know this information is available to them straight away.
3. Through our enquiries contact centre at 03000 616161 or enquiries@cqc.org.uk

Top tips about the information you share with CQC

1. If in doubt, share your information with us. We would rather have the chance to read about your concerns and decide what action to take, than not know about them. If you have concerns about the care provided, then it is likely that your information will help us check on services.
2. Try to name the health or adult social care service or services you are describing in all your comments or reports. This is especially important when you are giving us information about several different services.
3. Focus on giving us information that tells us about what you have found out or heard about a service providing care, rather than details of how your committee works.
4. Provide the evidence for your conclusions and comments and any dates whenever possible, and explain what sort of evidence you have (it may be a small number of concerning stories or evidence from a survey or meeting with many more people).
5. Try to match your information to our CQC essential standards of quality and safety. You can relate your information to as many standards as you like.
6. Please let us know whether you are giving us information that is positive or negative about how care is provided. Both positive and negative comments about a service are important in helping us judge whether a service continues to meet our standards.

What we do with your information?

Relevant information from your committee becomes part of our 'quality and risk profile', which we hold for every health and adult social care organisation. The information you share with us will:

- Help us spot problems or concerns in local services that we need to act upon.
- Help in our assessments and reviews of different types of organisations.
- Allow us to look at how well a service provider meets essential standards of quality and safety. This will help us decide if the service provider can continue to register with us and provide its services to local people.
- Help us decide if we need to ask a service provider to make improvements in some areas of its care, to show us that it will meet all these standards in future.

We match your information with our essential standards of quality and safety if we can, and decide whether it is positive or negative. Then we weigh up whether it is clear and whether it is about people's experience of care. For example, does it tell us something that has an impact on a person using the service and does it represent the views of someone using the service (or groups of people using the service)?

We will give your information a score. The higher the score, the more likely it will make a difference to our judgements about the care provided by a service. If your information does not relate to our essential standards we may use it as background information about that service, or we may not be able to use it at all.

Scrutiny committee review reports can be particularly useful in helping us decide which services to review or what to look for when we visit a service.

What to do if you are concerned about someone's safety?

We want people who use care services to be safe, especially if they are in vulnerable circumstances, and may find it difficult to speak for themselves. If you have urgent concerns about the wellbeing of a child or vulnerable adult, your committee should contact your local authority children's or adult social care department. This might be evidence of physical, sexual, psychological abuse, neglect and acts of omission including ignoring medical or physical care needs or discriminatory abuse.

CQC does not deal with these individual cases of safeguarding, but we work closely with local authority safeguarding staff and can use the information in our judgements about services. We can follow up a service where concerns have been raised, and this may lead us to take enforcement action against the service if we find it does not meet essential standards of quality and safety.

If you share information with your local safeguarding team, we hope you will also let your local CQC contact know – in case we also need to act swiftly. Please remember that you can share urgent concerns with us at any time.

5. Where to go for more information

For more information about CQC go to www.cqc.org.uk or ring 03000 616161

To talk to us about our work with scrutiny committees, email:
involvement.edhr@cqc.org.uk

For information about the development of HealthWatch England, please go to our website:
www.cqc.org.uk/aboutcqc/whatwedo/improvinghealthandsocialcare/healthwatch.cfm

You can get involved in HealthWatch England developments by sending an email to enquiries@nunwood.com

You may want to talk to some of the scrutiny committees involved in developing this guide. They are:

- Torbay Health Scrutiny Committee
- Joint Health Overview and Scrutiny Committee Pennine Acute NHS Trust
- Leicestershire County Council Joint Health Scrutiny Committee
- Nottingham City and Nottinghamshire County Joint Health Scrutiny Committee
- Cambridgeshire County Council Health and Adult Social Care Scrutiny Committee
- Isles of Scilly Health Overview and Scrutiny Committee
- Ealing Health Scrutiny Panel

6. Examples of working together

Information from scrutiny committees is already helping CQC check on a range of health and social care services. Scrutiny committee review reports and the findings from these have been particularly useful. In some areas, information from scrutiny committees has helped us focus on which aspects of a service to look at in one of our reviews, and which locations to visit.

In this section, we provide examples of how some scrutiny committees have been working with CQC and how information is being shared between us. Each committee works in a different way but these examples show what can be achieved by working together.

Ealing Health Scrutiny Panel

Ealing Scrutiny Committee has worked with CQC during its review of access and quality of care for Ealing patients after hospital or other clinical treatment. The review has identified the main care pathways and service providers involved in aftercare in Ealing, and examined access to and quality standards of aftercare, and the causes of any poor performance. It has examined the initiatives underway to address any concerns and lessons learnt from services elsewhere.

It has focused on hospital admission and discharge, transfers of care, specialist rehabilitation and end of life care.

Isles of Scilly Health Overview and Scrutiny Board

Isles of Scilly Health Overview and Scrutiny Committee has regular contact, by email and phone, with CQC through the Committee chair and the vice chair. The compliance manager addressed the committee, explaining CQC's role and its relationship with scrutiny committees. This has helped the Committee develop the questions for commissioners, providers, patients and carers as part of its review of stroke aftercare services. It has also made use of the CQC's national review of stroke services. The Committee is sharing the findings with CQC and discussing the implications of their final report. Commissioners and providers are aware of the committee's relationship with CQC.

"The role of health overview and scrutiny committees is evolving and up until recently some members didn't realise the importance of the relationship between CQC and health overview and scrutiny committees. I think we need to further develop our relationship with CQC as the scrutiny function of health overview and scrutiny committees will increase."

(Chair of the Isles of Scilly Health Overview and Scrutiny Committee)

Torbay Health Scrutiny Board

Torbay Health Scrutiny Board has been building its local relationship with CQC and held a workshop with elected members and CQC, which has been very positively received. The Committee communicates with CQC whenever necessary by phone and email and regular meetings are scheduled between CQC and the Scrutiny Committee chair. CQC is also attending Scrutiny Committee meetings as an observer in the public gallery.

The Committee aspires to the four principles set out by the Centre for Public Scrutiny:

“critical friend challenge to decision-makers; enable the voice and concerns of the public and its communities; be ‘independent minded governors’ who lead and own the scrutiny process and drive improvement in public services.”

The Committee has improved its understanding of CQC’s role. CQC has shared information about all the 153 service providers in Torbay and the details of the CQC inspectors responsible for these providers. CQC has also shared its confidential programme of reviews planned over the coming months in Torbay, and a list of the essential standards of quality and safety. The Committee receives email alerts and links to publications of any CQC review reports on local providers. As a result, a councillor has already raised an issue about a service provider to the Committee which is being followed up with the provider and the primary care trust (PCT) initially, and the Committee will then update CQC.

The Committee shares its work programme, the minutes of its meetings and forthcoming agendas with CQC. It has also raised a concern about the procedure for safeguarding at one provider which has been followed up.

In future, the Committee will be considering a more formal agreement or protocol between CQC and the Committee. Formal meetings are also scheduled between the scrutiny committee chair, CQC and the LINK/HealthWatch chair to exchange information and work programmes.

Leicestershire County Council Overview and Scrutiny Committee

The Committee has met with CQC locally and developed a working relationship. A meeting was held between the assistant director of strategy and commissioning and the scrutiny officer to discuss how the relationship with CQC might work locally. It was agreed to organise a briefing for all elected members in the county on CQC and its work. The assistant director, scrutiny officer and CQC’s local compliance manager met and planned the briefing workshop for councillors about CQC. The scrutiny officer is developing a local guide for CQC and overview and scrutiny committees working together.

Cambridgeshire County Council Health and Adult Social Care Scrutiny Committee

The Committee was invited to contribute to a CQC review of an out-of-hours GP service provided in part of the county in 2010. Through dialogue with CQC, the Committee was able to feed its views and concerns into the review, based on its experience of scrutinising local services, on the information it had picked up from the local community and concerns raised by individual councillors. As a result, it was able to use CQC's findings from the review to inform its response to the PCT's consultation on future provision of the out-of-hours services. The Committee found this very helpful.

The Committee has established an ongoing relationship with CQC, including holding a seminar for all councillors, not just those involved in health scrutiny. The seminar was an opportunity to discuss how individual councillors can contribute information to CQC, as well as the scrutiny committee. Fifteen councillors attended and all considered it was very useful in developing a relationship between the council and CQC.

Nottingham City and Nottinghamshire County Joint Health Scrutiny Committee

The Committee has established local contact with CQC and learnt more about CQC's role. It has shared information about its review of dementia care services.

At the end of every Health Scrutiny Committee meeting in Nottingham City, councillors consider the issues that they have discussed and whether there are any issues that should be referred to CQC, which they do using the CQC webform.

“We realised that the public nature of scrutiny means that overview and scrutiny committees can provide useful information to the CQC. The committee decided it is important to have a good relationship with our local CQC contacts and to provide CQC with ongoing information as a result of our scrutiny work.” (Scrutiny officer, Nottingham County Council)

Joint Health Overview and Scrutiny Committee Pennine Acute NHS Trust

The officer for the Joint Health Overview and Scrutiny Committee and the officer for the Joint Scrutiny Committee for the Pennine Acute NHS Trust now meet regularly with their CQC inspector. The Committee submitted its review of hospital nutrition to CQC, which then inspected nutrition within the Pennine Acute NHS Trust, as part of its national inspection. Recent CQC inspections, following a documentary about the Trust have been discussed with the Committee's officer. Future work by the Committee will focus on the patient experience, and will be shared with CQC.

How to contact us

Phone: 03000 616161
Email: enquiries@cqc.org.uk

Registered Office:
Care Quality Commission
Finsbury Tower
103–105 Bunhill Row
London EC1Y 8TG

We have also produced an easy read version of this guide, which can be found at www.cqc.org.uk. Please contact us if you would like a summary of this document in other formats or languages.



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ADULT AND COMMUNITY SERVICES SCRUTINY FORUM

17 September 2012



Report of: Scrutiny Support Officer

Subject: SCRUTINY INVESTIGATION IN THE JSNA TOPIC OF 'OLDER PEOPLE' – SETTING THE SCENE PRESENTATION - COVERING REPORT

1. PURPOSE OF REPORT

1.1 To inform Members that officers of the Child and Adult Services Department have been invited to attend this meeting to provide information in relation to the investigation into the JSNA topic of 'Older People'.

2. BACKGROUND INFORMATION

2.1 Members will recall that at the meeting of this Forum on 30 July 2012, Members agreed the Scope and Terms of Reference for their forthcoming investigation into the JSNA topic of Older People.

2.2 Subsequently, officers from the Child and Adult Services Department have agreed to attend this meeting to outline the following in relation to the JSNA topic of Older People:-

- (i) What the key issues are;
- (ii) What the level of need is; and
- (iii) Who is at risk and why.

2.3 During this evidence gathering session, Members should be mindful of the Marmot principle 'Enabling all Children, Young People and Adults to Maximise their Capabilities and have Control over Their Lives'

3. RECOMMENDATION

- 3.1 It is recommended that the Members of the Adult and Community Services Scrutiny Forum consider the evidence from officers of the Child and Adult Services Department in attendance at this meeting and seek clarification on any relevant issues where required.

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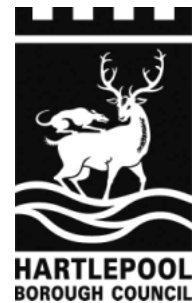
BACKGROUND PAPERS

The following background papers were used in the preparation of this report:-

- (i) Report of the Scrutiny Support Officer entitled 'Scrutiny Investigation into Older People – Scoping Report' Presented to the Adult and Community Services Scrutiny Forum on 30 July 2012.
- (ii) Minutes of the Adult and Community Services Scrutiny Forum held on 30 July 2012.

**ADULT AND COMMUNITY SERVICES
SCRUTINY FORUM**

17 September 2012



Report of: Scrutiny Support Officer

Subject: SIX MONTHLY MONITORING OF AGREED ADULT AND COMMUNITY SERVICES SCRUTINY FORUM'S RECOMMENDATIONS

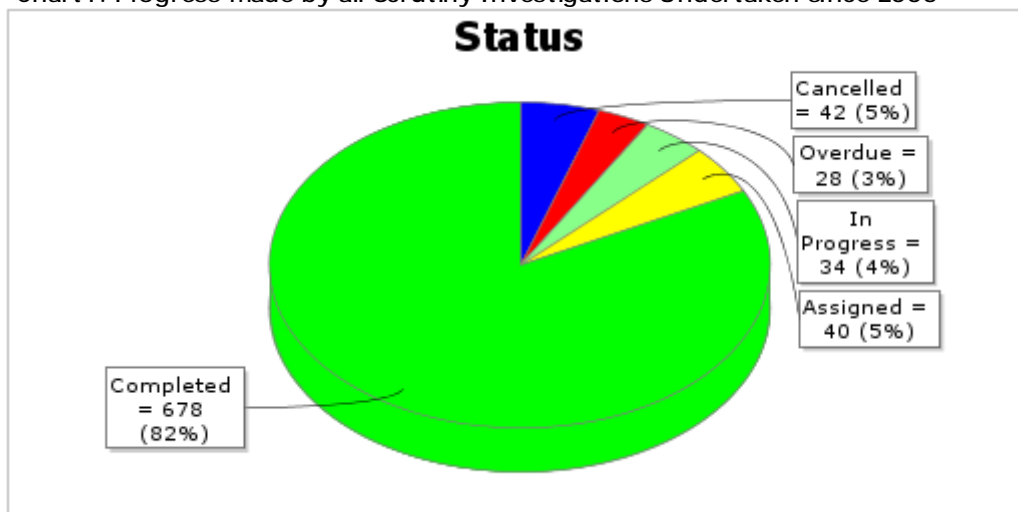
1. PURPOSE OF REPORT

1.1 To provide Members with the six monthly progress made on the delivery of the agreed scrutiny recommendations of this Forum.

2. BACKGROUND INFORMATION

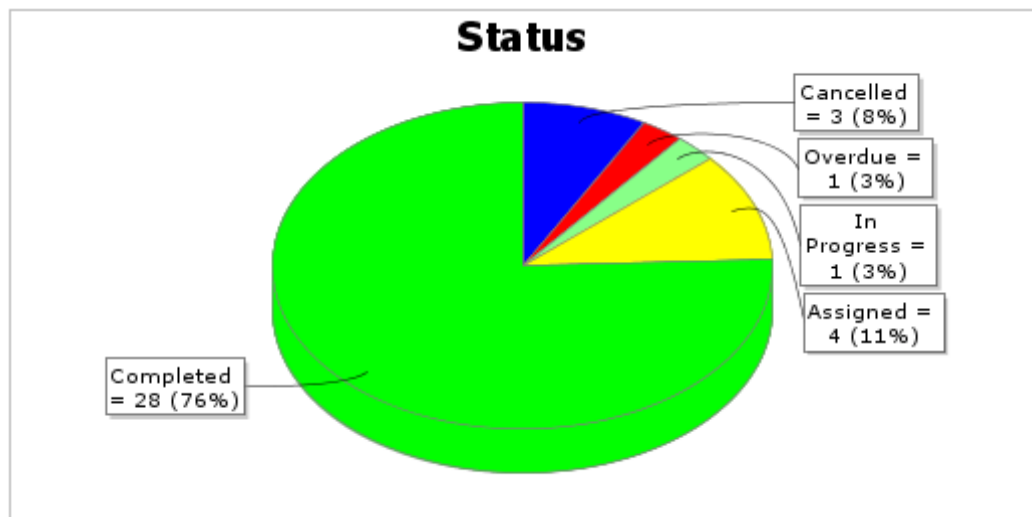
2.1 In accordance with the agreed procedure, this report provides for Members details of progress made against each of the investigations undertaken by the Forum. **Chart1** below is the overall progress made by all scrutiny forums since 2005 and **Chart2** (overleaf) provides a detailed explanation of progress made against each scrutiny recommendation agreed by this Forum since the last six monthly monitoring report presented in February 2012.

Chart1: Progress made by all Scrutiny Investigations Undertaken since 2005



Adult & Community Services Scrutiny Forum - All

Generated on: 04 September 2012





Year 2008/09

Investigation Access to Recreation Facilities for Vulnerable / Older People

Recommendation	Action	Assigned To	Original Due Date	Due Date	Note	Progress	
SCR-ACS/6g That the Council considers the value of partnership working in any future plans for the building of a new leisure facility within Hartlepool.	SCR-ACS/6g Discussions have already been held with potential key partners regarding the redevelopment of the physical infrastructure of the MHLC site. As detailed in recent Cabinet reports, It is intended to engage with consultants with the necessary expertise to take	John Mennear	01-Aug-2009	01-Apr-2013	31-Aug-2012 Economic evaluation of HUFC completed in May and preferred developer appointed to progress site potential. meetings held with Councillors in June and public meetings held in June/July to outline potential options for the re-development of the site. Plans in development and much relies on the anticipated investment value that	10% In Progress	

Recommendation	Action	Assigned To	Original Due Date	Due Date	Note	Progress	
	the plan to the next level, primarily around the procurement and management of such a development.				can be achieved to make any advances in site progress. partners fully engaged. 30-Jan-2012 An economic evaluation is currently being undertaken by economic devt with the HUFC to determine the value of the football club to the town, this will assist in helping to drive forward potential change and development for the ill House site. The original timescales are now significantly extended.		



Year 2011/12
Investigation Early Intervention and Re-ablement Services

Recommendation	Action	Assigned To	Original Due Date	Due Date	Note	Progress	
SCR-ACS/9a/i That the Council implements a co-ordinated approach and in doing so: - (i) works with partner organisations and the voluntary and the community sector to deliver and promote early intervention and re-ablement services	SCR-ACS/9a/i Council Officers, through a number of forums are promoting early intervention and re-ablement services. The promotion of welfare notices and their link to low level services will be rolled out to key agencies (including Police, Fire, Health and third sector providers) and the public	Phil Hornsby	31-Jul-2012	31-Jul-2012	19-Jul-2012 The promotion of welfare notices has taken place to all key agencies but no public launch has taken place. This is now scheduled for autumn 2012.	 Overdue	
SCR-ACS/9a/ii That the Council implements a co-ordinated approach and in doing so: - (ii) identifies as a key priority the importance of prevention across all Council services	SCR-ACS/9a/ii Health and Wellbeing Board to receive updates on the implementation of the action plan from the Housing, Care and Support Strategy that includes prevention as a key priority	Dave Stubbs	31-Oct-2012	31-Oct-2012		 Assigned	

Recommendation	Action	Assigned To	Original Due Date	Due Date	Note	Progress	
SCR-ACS/9b/i That the Council works closely with healthcare professionals to prevent future hospital admissions by: - (i) developing an early identification process for people who are at risk of major health problems	SCR-ACS/9b/i Continue to engage with healthcare professionals on their development of an early identification process	John Lovatt	31-Mar-2013	31-Mar-2013		0%	Assigned
SCR-ACS/9b/iii That the Council works closely with healthcare professionals to prevent future hospital admissions by: - (iii) ensuring the transition from hospital is effectively managed by improving communication across all discharge services	SCR-ACS/9b/iii Undertake a review of the discharge from hospital process and implement recommendations - Health to lead	John Lovatt	31-Mar-2013	31-Mar-2013		0%	Assigned
SCR-ACS/9c That the Council explores the potential to offer further apprenticeships in social care in the challenging financial climate, and explores how incentives could be used to retain trainees once qualified	SCR-ACS/9c Development of a business case on the options and resource implications for the recruitment and retention of social care apprentices	John Lovatt	31-Oct-2012	31-Oct-2012		0%	Assigned

Year 2010/11
Investigation Adult Safeguarding

Recommendation	Action	Assigned To	Original Due Date	Due Date	Note	Progress	
SCR-ACS/8a/i That a dialogue regarding budget and service cuts is maintained between members of the HSVAB to ensure that: - (i) cuts to services are not taken in isolation, without consideration for the impact on partner agencies	SCR-ACS/8a/i The HSVAB will continue to meet regularly and members will be encouraged to share information about changes within their own organisations that may impact on other partners. Any cuts or changes to Teeswide services would be discussed at the Tees Safeguarding Vulnerable Adults Board (TSVAB).	John Lovatt	31-Mar-2012	31-Mar-2012	26-Mar-2012 HSVAB will continue to meet regularly and provide all members with a forum to discuss service cuts and budgetary issues that may impact on service provision. There is currently work ongoing across Tees to identify budgets for safeguarding training and to identify whether there are opportunities for further joint working and efficiencies and issues raised through the Teeswide Vulnerable Adults Board in 2011 have resulted in an increase in resources within the police vulnerability team which is an extremely positive outcome.	100% Completed	
					04-Jan-2012 HSVAB will continue to provide all members with a forum to discuss service cuts and budgetary issues that may impact on service provision. There is currently work ongoing across Tees, co-ordinated by TSVAB, to identify budgets for safeguarding training and to identify whether there are opportunities for further joint working and efficiencies.		
SCR-ACS/8a/ii That a dialogue regarding budget and service cuts is maintained between members of the HSVAB to ensure that: - (ii) scarce resources are managed as effectively and efficiently as possible between agencies.	SCR-ACS/8a/ii Teeswide and local sub groups will continue to ensure that there is a shared approach to the use of resources for training, workforce development, public engagement etc.	John Lovatt	31-Mar-2012	31-Mar-2012	26-Mar-2012 Work on training, workforce development and public engagement will continue to be undertaken across the Tees area wherever possible to maximise use of resources and reduce duplication. Teeswide policies and procedures have recently been updated and approved and examples of good practice developed in Local Authority areas (such as the information sharing protocol with the Fire Brigade, which was	100% Completed	

Recommendation	Action	Assigned To	Original Due Date	Due Date	Note	Progress	
					developed in Hartlepool) continue to be rolled out to other areas. There is a Development day for the Teeswide Safeguarding Vulnerable Adults Board planned for 29 March which will review achievements in 2011/12 and set priorities for 2012/13, with a focus on adding value and using a shared approach where appropriate.		
					04-Jan-2012 There is Teeswide work underway to identify current spend on safeguarding training and workforce development and to identify whether closer joint working could deliver efficiencies in the future. There are also plans for a Teeswide communication strategy which will include public engagement and awareness raising, as it is recognised that there is added value in addressing these issues across partners.		
SCR-ACS/8c That the potential to recommence visits to care homes by Elected Members of the Adult and Community Services Scrutiny Forum is included in the contract negotiations to be undertaken with providers.	SCR-ACS/8c The ability for Elected Members to visit care homes will be included within the revised care home contract.	Phil Hornsby	31-Dec-2011	31-Dec-2011	23-Apr-2012 Delay to the introduction of the new contract due to ongoing negotiations with care home providers. Revised date likely to be October 2012 (Phil Hornsby). 16-Jan-2012 New contract to be implemented from April 2012 with a clause that specifically entitles members to visit care homes.	 Completed	
SCR-ACS/8g That safeguarding workshops are delivered to groups within Hartlepool (with particular reference to the deaf community) and a review is	SCR-ACS/8g There is a comprehensive programme of training and development opportunities in place in relation to Adult Safeguarding. This will be reviewed following the Peer Review and additional	John Lovatt	30-Sep-2011	30-Sep-2011	30-Jan-2012 This issue will be raised with members of the deaf community at a meeting in February and funding has been identified to provide safeguarding awareness training, linked to the implementation of priorities within	 Completed	

Recommendation	Action	Assigned To	Original Due Date	Due Date	Note	Progress
undertaken of the accessibility of safeguarding services.	workshops will be considered if gaps are identified (including for the deaf community).				the Hartlepool Hearing Loss Strategy. 12-Oct-2011 Training and workforce development issues are considered on a Teeswide basis to maximise use of resources. This issue will be raised with the Teeswide group for consideration. There will also be work done locally to promote the adult safeguarding agenda and it is hoped that this will increase awareness across a range of groups. Consideration will be given to how the deaf community are included within this work.	

Year 2011/12
Investigation Early Intervention and Re-ablement Services

Recommendation	Action	Assigned To	Original Due Date	Due Date	Note	Progress
SCR-ACS/9b/ii That the Council works closely with healthcare professionals to prevent future hospital admissions by: - (ii) regularly monitoring patients and exploring the patients individual needs in depth	SCR-ACS/9b/ii Health and social care professionals to continue to jointly assess/monitor where there are health and social care needs identified	Jill Harrison	30-Apr-2012	30-Apr-2012		100% Completed

3. RECOMMENDATIONS

- 3.1 That Members note progress against the Adult and Community Services Scrutiny Forum's agreed recommendations, since the 2005/06 Municipal Year, and explore further where appropriate.

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BACKGROUND PAPERS

No background papers were used in the preparation of this report.